



capitalregionwater.com
888-510-0606

Air Conditioning - Refrigeration Request

Account Name:
Account Address:
Mailing Address: (If Different from Account Address):
Property Owner:
Property Agent:
Property Tenant:
Contact Person: Phone:
Email Address:
Type of Account: Residential Commercial Industrial Other (Specify):

Property Number: Building Permit Number:
New Construction: Building Addition:
Unit Manufacturer:
Unit I.D. and Model Number:
Maximum Rated Capacity (BTU/Hour or Tons/Day):
Horsepower: Water Recycle: Yes No

By signing this Request, the Requester agrees to abide by the Rules and Regulations of Capital Region Water, in particular the provisions governing the terms, conditions, fees and charges relating to air conditioning and other refrigeration.

Signature of Requester Date

Four (4) sets of detailed plans must accompany this Request for review by the following City agencies: Water, Codes, Engineering, and Fire Department. Failure to do so will result in the rejection of the Request.

A Fee of \$25.00 payable to "Capital Region Water" must accompany this Request.

To submit in person or by mail: Capital Region Water Customer Service Center 100 Pine Drive Harrisburg, PA 17103

To pay by credit card: Call 888-510-0606 to speak with a Customer Service Representative and submit this Request via email to info@capitalregionwater.com.

Capital Region Water Use Only

Inspection Date: Inspector:
Deducting System: Yes No
Meter Information:
Isolation Valves: Yes No
Check Valve Information: