



capitalregionwater.com
888-510-0606

Fire Hydrant Inspection Request

Type of Hydrant Required: [] Fire [] Yard Type
Intended Usage: [] Public [] Private

Requester Address: (Private or Municipal)

Contact Person: Phone:

Email Address:

Intended Hydrant Location:

Property Owner:

Account Address:

Detailed plans must accompany this Request. Such plans must be in accordance with the requirements and specifications of Capital Region Water as set forth in the Rules and Regulations of Capital Region Water. Failure to provide such plans will result in the rejection of the Request.

Signature of Requester

Date

A Fee of \$50.00 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

Installation Date:

Hydrant Make: Hydrant Number:

Main Size:

Static Pressure: CRW would require Flow Test prior to performing this. CRW does not perform Flow Tests on private lines. This would fall under the Flow Test Request

Residual Pressure:

Flow:

Valve Installed: [] Yes [] No

Correct Color: [] Yes [] No

Plans Accurate: [] Yes [] No