



capitalregionwater.com
888-510-0606

Sanitary Sewer Service Request

Requester Name: \_\_\_\_\_

Account Address: \_\_\_\_\_

Mailing Address (If Different from Requester Address): \_\_\_\_\_

Property Owner: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Plumbing Permit No.: \_\_\_\_\_ Street/Sidewalk Cut Permit No.: \_\_\_\_\_

Type of Account: [ ] Residential [ ] Commercial
[ ] Industrial [ ] Other (Specify): \_\_\_\_\_

Lateral Line Size: \_\_\_\_\_ inches

Equivalent Dwelling Units: \_\_\_\_\_

Estimated Maximum Daily Discharge: \_\_\_\_\_ gallons per day

Date Service Required: \_\_\_\_\_

New Construction: [ ] Yes [ ] No Ownership Transfer: [ ] Yes [ ] No

\_\_\_\_\_  
Signature of Requester Date

Request for installation of a new sanitary sewer service must be submitted at least 30 days before service is required and must be accompanied by two sets of detailed plans for review by Capital Region Water.

Note: Request is not approved until signed by Capital Region Water.

A Fee of \$100.00 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

Fee Calculation: \$2,820/EDU x \_\_\_\_\_ EDUs = \_\_\_\_\_ Date Fee Paid: \_\_\_\_\_

Inspection Date: \_\_\_\_\_ Inspector: \_\_\_\_\_

Main Size: \_\_\_\_\_ Tap Size: \_\_\_\_\_

Type (Material) of Service: \_\_\_\_\_

Location of Service: \_\_\_\_\_

CRW Approval: \_\_\_\_\_

Signature Title Date

WW:MC