



capitalregionwater.com  
888-510-0606

## Hot Water/Steam Heat Verification Affidavit

I certify that the property located at \_\_\_\_\_ is heated using a hot water/steam heating system. The termination of water at this location would result in the immediate loss of heat and I, therefore, request that the Capital Region Water winter moratorium on water termination in properties utilizing hot water/steam for heating be applied to this property. I also certify that I will continue to make timely payments of any water, wastewater, and stormwater charges due to Capital Region Water. If financially unable to do so, I will immediately contact Capital Region Water to arrange a payment plan and/or apply for credit assistance under the Customer Assistance Program.

Requester Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Requester Address: \_\_\_\_\_

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

Residential Property Type (Select One):  Owner Occupied  Rental/Tenant Occupied

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

Contact Person (If Different from Requester Name): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return form to the address below. Upon receipt of the affidavit, you will be contacted by Customer Service staff to set up a Service Appointment for the Hot Water/Steam Heat verification.

**Capital Region Water – Customer Service Center**  
3003 North Front Street  
Harrisburg, PA 17110

After your request is reviewed, written notice will be provided explaining your steam heat eligibility status. Please allow 30 days for a response.

### Capital Region Water Use Only

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

CRW Approval: \_\_\_\_\_  
Signature Title Date