



Fire Protection Service Request

Requester Name:
Requester Address:
Mailing Address: (If Different from Requester Address):
Property Owner:
Property Tenant:
Contact Person: Phone:
Email Address:
Type of Account: Residential, Commercial, Industrial, Other (Specify):
Property Number: Building Permit No.:
Service Line Size: Est. Max Daily Consumption:
Date Service Required:
New Construction: Yes No Ownership Transfer: 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 and conditions of the furnishing of private fire protection service. In addition, the Requester agrees to submit a new Request for approval prior to making any changes, alterations, additions or deletions to the fire protection system covered by this Request.

Signature of Requester Date

Request must be submitted at least two (2) months prior to the requested installation date. Detailed plans must accompany this Request for review by Capital Region Water. Failure to do so will result in the rejection of the Request.

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

A Fee of \$138.00 payable to "Capital Region Water" must accompany this Request.

Submit form, detailed plans, and payment in-person or by mail to:

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

Capital Region Water Use Only

Inspection Date: Inspector:
Main Size: Meter Size: Meter Number:
Tap Size: Meter Make: Meter Reading:
Type (Material) of Service:
Location of Service:
Curb Box to Grade: Yes No
Curb Box Accessible: Yes No
Valve on Curb Side of Meter: Yes No
Backflow Preventer Installed: Yes No Type:
CRW Approval: Signature Title Date