

South Central Connecticut Regional Water Authority

NEW SERVICE REQUEST LETTER APPLICATION

APPLICATION DATE: _____

PROJECT / SITE INFORMATION

Project Name: _____

Location / Address: _____

Proposed Use: ☐ Commercial / Industrial Building Size (s.f.): _____

☐ Residential Building Size (s.f.): _____

Site Elevations: High: _____ ft. Low: _____ ft.

Datum Elevation (USGS): _____

Length / Size (Dia.) of Proposed Service: _____

Site Plan Attached: ☐ (Must show Elevation Contours)

DEMAND INFORMATION (To be determined by the applicant's project plumbing consultant)

<u>Commercial / Industrial Use</u>	<u>Residential Use</u>
<u>Comm./ Industrial Demand</u> Average Day _____ gal/day Maximum Day _____ gal/day Irrigation System Demand _____ gal/day <u>Fire Demand</u> Hydrant _____ gal/min. Building Sprinklers: Yes ☐ No ☐ Required Sprinkler Flow: _____ gal/min. Residual Pressure: _____ psi	<u>Domestic Demand</u> No. Units _____ No. Bedrooms/Unit _____ Total No. Bedrooms _____ Total Average Day Demand _____ gal/day Total Maximum Day Demand _____ gal/day (Total Ave. Day Demand x 2) Irrigation System Demand _____ gal/day <u>Fire Demand</u> Hydrant _____ gal/min. Building Sprinklers: Yes ☐ No ☐ Required Sprinkler Flow: _____ gal/min. Residual Pressure: _____ psi

CONTACT INFORMATION

Applicant (or Agent) Name: _____

Address: _____

Tel. No.: _____

Email: _____

SIGNATURE: _____ PRINT NAME & TITLE: _____

Instructions: Applications to be completed and e-mailed or mailed to:

Contracts & New Services
South Central Connecticut Regional Water Authority
90 Sargent Drive | New Haven, CT 06511

Email: jwilson@rwater.com

Fax. No.: 203-624-1147