

Borough of Edgewood

2 Race Street, Edgewood, PA 15218 Ph: 412-242-4824 Fax:412-242-4027

Application/Certification of Dye Test Compliance

(Sanitary Sewer Certificate)
Required for Sale of Property or Change of Rental Occupant

Fee: \$40.00		Date:		
Payable to Borough of Ed	dgewood			_
5	Street	City	State	Zip
Applicant's Name:				
Property Owner(s):				
Address: _				
\$	Street	City	State	Zip
Phone:				
Name of Person Perform	ing the Test (Print):			
Allegheny	County Health Departmen	t Number:		
Phone:				
or structure in accordan	ave inspected and perform ace with the procedures a or surface water is illegally	as established by th	e Borough of Edg	gewood, in order to
☐ I certify that there a	are no storm or surface water	r drains connected to t	he municipal sanitar	y sewer of the
Borough of Edgewood.				
☐ I certify that all stor	rm or surface water drains fo	und to be connected to	the municipal sanit	ary sewer system of
the Borough of Edgewood a	and were corrected.			
Signature of Certifying Pers	on:			
This is to Certif	y that this Dye Test has beer	n filed with the Boroug	h of Edgewood and	has been
	APPROVED	DENIED		
Borough Seal			Date:	