

BOROUGH OF LIBERTY
2921 Liberty Way
McKeesport, PA 15133

FACILITY AND STRUCTURE DYE TESTING
APPLICATION FOR CERTIFICATE OF COMPLIANCE

Applicant: _____
Owner: _____
Address: _____
Purchaser: _____

This is to certify that I, _____ have inspected and performed the required dye testing of the above addressed facility(s)/structure(s) in accordance with the procedures as established and required by the Borough of Liberty in order to determine if any storm or surface water is illegally connected into the Municipal Sanitary Sewer System of the Borough of Liberty.

() I certify that there are no storm or surface water drains connected to the municipal sanitary sewer system.

() I certify that one or more storm or surface water connections are connected to the municipal sanitary sewer system.

Signature

Allegheny Co. Health Permit Number Date

Printed Name

Company Name

Indicate specific location(s) of ALL illegal drain(s)/connection(s) below:

To be completed by the Borough of Liberty

This is to certify that _____ was inspected on _____ and all illegal violations as identified have been satisfactorily removed from the Borough of Liberty Municipal Sanitary Sewer System.

Authorized Municipal Representative

Date