

Borough of Liberty
2921 Liberty Way
McKeesport, PA 15133
412-678-3286
412-678-2622 - Fax

APPLICATION FEE - \$ 50.00

REQUIRED PROCEDURES FOR DYE TESTING STRUCTURES

The following procedures shall be followed when performing a Dye Test of any Structure or Facility within the Borough of Liberty as prescribed by Ordinance # 2009-03, adopted FEB. 18, 2009:

1. The qualified person or firm shall perform all required observations and testing and shall maintain a written record, including color photographs, of ALL pertinent data.

Qualified personnel for the required dye testing shall be defined as a Registered Master Plumber with a current Health Permit issued by the Allegheny County Health Department-Plumbing Division.

2. Perform a visual evaluation of all connections, both internally and externally, to determine obvious areas either directly discharging into the ground surface or otherwise conclusively not connected into the municipal sanitary sewer system.

All other connections from roof connectors, downspouts, driveway drains, area drains, and any other such facilities shall be tested and verified by means of dye test procedures.

3. ALL facilities described in #2 above, shall be individually dye tested and completely verified for point discharge either to the ground surface roadway and/or curb line, adjacent storm sewer, connected to the combination sanitary/storm sewer or illegally connected into the municipal sanitary sewer.

ALL required written and photographic verification shall be provided and submitted to the Borough of Liberty upon specific request, and otherwise maintained on file with the property owner for future reference.

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

Borough of Liberty

Allégheny County, Pennsylvania
2921 Liberty Way McKeesport, PA 15133
Phone: 412-678-3286 Fax: 412-678-2622

Application for a Zoning Certificate

Fee: \$30.00

Buyer, Owner, or New Occupant: _____

Property Address: _____

Current Use of Property: _____

Proposed Use of Property/Addition: _____

Contact Information

Applicant: _____

Applicant's Address: _____

Applicant's Telephone Number: _____ Alternate number: _____

Official Use Only

Zoning: _____ Dye Test Passed: _____

Proposed Use:

Conforming _____ Continuation of Non-Conforming _____
Conditional Use _____ Not Permitted _____

Approved: _____ Date: _____
Engineer

Denied: _____ Date: _____
Engineer

Other comments: _____

