Township of O'Hara 325 Fox Chapel Road Pittsburgh, PA 15238

(412) 782-1400 FAX (412) 782-4530

Application and Report of Inspection for Sanitary Sewer Certification

Owner/Applicant: Complete for propo	erty to be tested	Mai	l Certificate to (if different than C	Owner):						
Current Owner Test Address City, State, Zip Lot/Block #			NameAddressCity, St, ZipPhone No							
						FEES MUST BE PAID PRIOR TO SO COMMERCIAL FEES: <2,000 s.f. =				; >50,000 s.f. = \$400
						For Township use only				
						Date of Test(s)/	Tin	ne of Test (start	ing 7:30 a.m. to 9:00 a.m. or begin a	at 12:00 p.m.)
	Satisfactory	Violation	Remedial Action	Remediation Satisfactory						
Downspouts and roof leaders			_	<u> </u>						
Area drains receiving storm or surface water (driveway drains, apparent illegal french drain connections, etc.)										
Fresh air vent (must be of such a height and location as to prevent entry of storm or surface water)										
House Lateral										
Camera Used	Yes	No	OR Manhole No. Observed							
	Twp. of O'Hara Test Witness		Twp. of O'Hara Remedial Wor	rk Witness						
PER Township Code Chapter 358 And connection, including the wye at the public defect noted by the Township during inspection to the continuation of the inspection property has been sold or transferred.	ic sewer line. Any se ection will require the frequired. If sags or l	paration, break, ne replacement of bellies in the sev	root infiltration, crack, breech, break of the entire sewer drainage line from wer drainage line prohibit adequate in	k in tap, failed wye, or other such the structure to the connection a aspection, the line must be flushe						
1 1 0	NTACT TOWNSH	IIP AT 412-784	4-1784, EXT 206 TO SCHEDULE	INSPECTION						
Plumbing <i>Testing</i> Firm	Name of Plumber									
AddressPhone No		Reg	istration No.							
I hereby certify that this property has been 1299.			inflow to the sanitary sewer under the	he terms of Ordinance No.						
Name:		Name:								
Name:Signature of Plumber		Prin	ted							
Plumbing <i>Repair</i> Firm			ne of Plumber							
AddressPhone No		Reg	istration No							
I hereby certify that corrections have beeknown to exist.			icable codes and regulations and no	violations or malfunctions are						
Name:		Name: _								

Printed

Signature of Plumber

