

The

Borough of Swissvale

7560 ROSLYN STREET
SWISSVALE, PENNSYLVANIA 15218
Phone: 412-271-7101
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Date of Application

**BOROUGH OF SWISSVALE
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 Swissvale, in order to determine if any Storm of Surface Water is illegally connected into the Municipal Sanitary Sewer System of the Borough of Swissvale.

I certify that there is no Storm or Surface Water Drains connected to the Municipal Sanitary Sewer System of the Borough of Swissvale.

I certify that one or more Storm of Surface Water Connections are connected to the Municipal Sanitary Sewer System of the Borough of Swissvale.

Signature Allegheny County Date
Health Permit (H.P.)

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

To be completed by the Borough of Swissvale

This is to certify that _____ was inspected on _____ and **ALL Illegal Violations** as identified have been satisfactorily removed from the Borough of Swissvale Municipal Sanitary Sewer System.

Authorized Municipal Representative

This Certificate of Compliance is only good 60 days from Inspection Date.

Number# _____