



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: \$25.00

Date: _____

Payable to Borough of Edgewood

Property Address: _____
Street City State Zip

Applicant's Name: _____

Property Owner(s): _____

Address: _____
Street City State Zip

Phone: _____

Name of Person Performing the Test (Print): _____

Allegheny County Health Department Number: _____

Phone: _____

This is to Certify that I have inspected and performed the required dye testing of the above addressed facility or structure in accordance with the procedures as established by the Borough of Edgewood, in order to determine if any storm or surface water is illegally connected to the municipal sanitary sewer system of the Borough of Edgewood.

☐ I certify that there are no storm or surface water drains connected to the municipal sanitary sewer of the Borough of Edgewood.

☐ I certify that all storm or surface water drains found to be connected to the municipal sanitary sewer system of the Borough of Edgewood and were corrected.

Signature of Certifying Person: _____

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This is to Certify that this Dye Test has been filed with the Borough of Edgewood and has been

APPROVED ☐

DENIED ☐

Borough Seal

Date: _____