BOROUGH OF SCOTTDALE 10 MOUNT PLEASANT ROAD SCOTTDALE PA 15683

APPLICATION FOR SANITARY SEWAGE PERMIT

Name	Phone No		
Address			
Property Location_			
Use of Property:	Residential	Commercial	Industrial
Flow Estimate: (Ot	her than a single dwel	ling)GPD*	
*Note: If flows disc family type dwelling	charged are 500 GPD g, a planning module m	or more, or property to be coust be submitted with the ap	onstructed is other than a single oplication.
completed the seving is issued, then the	wer connection withing e permit shall becom	n two (2) years from the da	ssued. If permittee has not ate on which the sewer permit applicant shall be entitled to a
	A fee	of \$ is paid.	
Date		Applicant	
		Office Use Only	
Permit No			
Date		Approved By	

NOTE: If a moratorium is placed on Scottdale or East Huntingdon Township sewer taps by the Pennsylvania Department of Enviornmental Protection prior to connection to the sanitary sewer (for wastewater only), the connection to the sanitary sewer system shall not be permitted.

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SANITARY SEWER TAP IN PERMIT

Applicant's Name				
Address				
Permission is hereby given to make a tap in the Borough Sanitary Sewer at:				
in accordance with the application bearing the same r the rules and regulations of the Borough of Scottdale.	number as this permit and in accordance with			
ROOF WATER, SURFACE WATER OR ANY STORM WATER IS PROHIBITED IN SANITARY SEWERS. APPLICANT MUST NOTIFY THE BOROUGH WHEN SEWER HAS BEEN TAPPED AND BEFORE IT IS COVERED SO THAT AN INSPECTION CAN BE MADE.				
	Borough Engineer			
NOT TO BE ISSUED UNTIL THE PERMIT FEE OF \$	HAS BEEN PAID.			
Check No				
	Date			
	Permit No			
TAP INSPECTED AND APPROVED				
Date	Ву			

NOTE: THE ENTIRE INSTALLATION MUST BE INSPECTED AND APPROVED BY THE BOROUGH REPRESENTATIVE PRIOR TO BEING BACKFILLED. LOT PLAN Name of Property Owner _____ Street Address _____ Lot No.____ MH MH SEWER MAIN Depth Excavation at House Wall House Excavation at Tap REAR Size of House Connection Material House Connection 1 Length of House Connection Line Grade of House DWELLING Connection Property Drains Basement Drains-1st Floor Only Date Installed I do hereby certify that the Sanitary FRONT Sewer Connection described herein was made in accordance with the Rules and Regulations of the Borough of Scottdale and that no roof, foundation, surface, or underground drainage is connected to the house sanitary sewer. SEWER MAIN MH Owner ____ Registered Plumber Reg. No. Address ____ Date ____ Approved By Borough Inspector Date ____