

BOROUGH OF FOREST HILLS

Receipt of Application _____
Date

APPLICATION FOR DYE TEST CERTIFICATE OF COMPLIANCE

Address: _____

Owner: _____

Purchaser: _____

This is to certify that I, _____ have inspected and dye tested all roof
(please print name)
drain pipes and area drains located on the above property to determine if any storm or surface
water is illegally connected to the Borough's Sanitary Sewer System.

I find that no storm or surface water drains are connected to the sanitary sewer.

Signature

Allegheny County
Health Permit No.

Date

I find that there is storm or surface water connected to the sanitary sewer.

Signature

Allegheny County
Health Permit No.

Date

Indicate location of illegal drain/drains.

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To be completed by Borough:

This is to certify that _____ was inspected on _____ and
all illegal drains have been removed from the sanitary sewer.

Forest Hills Borough