

Application Fee \$25

INSPECTIONS FOR SANITARY SEWER CERTIFICATION
GIVE TO PLUMBER, PLUMBER RETURNS FORM TO BOROUGH



BOROUGH OF AVALON

640 California Avenue

Avalon, PA 15202

Phone: 412-761-5820

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To be completed by applicant/plumber

Current Owner: _____

Plumbing Testing Firm: _____

Address: _____

Name of Plumber: _____

Address of Plumber _____

Phone: _____

Plumber Phone: _____

Type of Test: smoke _____ dye _____

HP Registration _____

	Satisfactory	Violation
Downspouts and Roof Leaders	_____	_____
Area drains receiving storm or surface water (driveway drains, apparent illegal French drains and connections, etc.)	_____	_____
Fresh air vent (must be of such a height and location as to prevent entry of storm or surface water.	_____	_____
House lateral	_____	_____
Manhole # observed	_____	_____

Explain below the location and circumstances of any violation:

All corrections must be observed by the Borough Inspector prior to covering.

I hereby certify that this property has been tested for storm water infiltration and inflow to the sanitary sewer under the terms of Ordinance #1246 and no violations or malfunctions are known to exist.

Name _____ Signature: _____ Date _____
(Print) (Plumber)

Approved: _____ Rejected _____ Borough Inspector: _____ Date _____

***Rainwater from a driveway to a grate at the bottom of the driveway does not have to have a sump pump. The Borough is waiving that small amount of water to the sewers.

NOTE: WATER CANNOT DRAIN AGAINST YOUR STRUCTURE OR DRAIN ONTO NEIGHBOR'S PROPERTY, BUT CAN DRAIN INTO THE STREET.