

**Borough Of Irwin**  
*Office of Code Enforcement and Building Inspection*  
424 Main Street  
Irwin, PA 15642

Phone: (724) 864-3105

Fax: (724) 864-3108

**Application For Certification Of Compliance**

**Facility And Structure Sewer Lateral Testing**

Address to be tested: \_\_\_\_\_

Applicant or Agent: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Prospective Buyer: \_\_\_\_\_ Phone: \_\_\_\_\_

Based on a thorough inspection of all buildings and structures on the property located at \_\_\_\_\_  
\_\_\_\_\_ conducted on \_\_\_\_\_, there are no illicit sewer system connections as  
defined by Irwin Borough Ordinance Chapter 18, Section 108 "Basement Seepage or Ground Water not to  
Discharge to Sewer System" and Section 109 "Downspouts, Roof Drainage, Surface or Area Drainage not to  
Discharge to Sewer System".

This is to certify that I, \_\_\_\_\_ have inspected and performed the  
required sewer lateral testing of the above address in accordance with the procedures established and required  
by the Borough of Irwin, in order to determine if any storm water, ground water, basement seepage or surface  
water is illegally connected to the Municipal Sanitary Sewer System.

**Sewer System:**

- I certify that there are no storm water, ground water, basement seepage or surface water drains  
connected to the Municipal Sanitary Sewer System.
- I certify that one or more storm water, ground water, basement seepage or surface water drains  
are connected to the Municipal Sanitary Sewer System.

\_\_\_\_\_  
Registered Plumber PRINT NAME Signature I.D. # Date

Plumber's contact number and company name \_\_\_\_\_

Indicate specific location(s) of ALL illegal drain(s) or connection(s) below or on a separate form attached:

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This is to certify that \_\_\_\_\_ was inspected on \_\_\_\_\_ All DYE  
testing and occupancy Inspection requirements have been satisfactorily completed.

\_\_\_\_\_  
James E. Halfhill  
Building Code Official / Code Enforcement Officer