

*Burgettstown-Smith Township Joint Sewerage Authority
377 Joffre Bulger Rd. Burgettstown, Pa 15021.
P.O. Box 389, Burgettstown, Pa. 15021
(724) 947-9609 Fax 724-947-9614
Office Hours Mon. 8am-4pm Tues. Closed Wed.-Fri. 8am-4pm
Closed the first business day of the month*

APPLICATION FOR DYE TEST AND CERTIFICATION

1. Please provide all information requested. Please type or print clearly.
2. Fee of \$100.00 must accompany application. A no-lien letter is an additional \$35.00. Make check payable to BSTJSA.
3. Should the property fail the first inspection, each additional inspection shall be billed \$35.00.
4. Upon passing the inspection, a Document of Certification shall be issued by Authority Personnel, valid for ninety (90) days from the date of issuance.

DATE OF APPLICATION _____
ESTIMATED CLOSING DATE _____
PROPERTY ADDRESS _____
PARCEL NUMBER _____

CURRENT OWNER _____
OWNER'S ADDRESS IF IT IS DIFFERENT FROM PROPERTY
ADDRESS _____
TELEPHONE NUMBER _____

Please provide the following information about the owner's representative (realtor, attorney, etc.)
This should be a contact person or agency that can provide access to the property for inspection.

CONTACT NAME _____
TELEPHONE NUMBER _____

If violations are indicated on the test and inspection report, they must be corrected before
Document of Certification will be issued.

PURCHASER'S NAME _____
TELEPHONE NUMBER _____

The purchaser must contact the Authority as soon as the closing on the property is complete.

OFFICE USE ONLY
DATE PAYMENT RECEIVED _____
AMOUNT _____ CASH OR CHECK # _____