

BOROUGH OF CARNEGIE

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APPLICATION FOR DYE TEST CERTIFICATION

TEST TO BE PERFORMED BY A PLUMBER OF YOUR CHOICE REGISTERED AND LICENSED BY THE ALLEGHENY COUNTY HEALTH DEPARTMENT

(PRINT)

PROPERTY ADDRESS _____

PROPERTY OWNER _____ PHONE # _____

OWNER'S ADDRESS) _____
(if different from above)

NOTE: STORMWATER CANNOT BE DISCHARGED IN A MANNER THAT WOULD AFFECT ADJACENT PROPERTIES, CREATE A PUBLIC NUISANCE, AND/OR ENTER THE SANITARY SEWER SYSTEM.

TEST RESULTS:

_____ VIOLATION (1) - *the discharge of basement seepage or ground water*

_____ VIOLATION (2) - *the connection of downspouts, roof drainage*

_____ VIOLATION (3) - *driveway drainage or surface area way drainage*

_____ UNABLE TO TEST - *clogged system due to weather conditions*

_____ PASSED

TEST CONDUCTED BY _____ HP # _____

SIGNATURE _____ (PRINT) DATE _____

COMPANY _____ PHONE _____

COMPANY ADDRESS _____

-----OFFICIAL USE ONLY-----

I HAVE REVIEWED THE DYE TEST RESULTS FOR COMPLIANCE WITH ORDINANCE # 2129.

THE APPLICATION IS HEREBY [] DENIED [] TEMPORARY [] APPROVED

BUILDING OFFICIAL _____ DATE _____ CERTIFICATION # _____

