

PLEASE RETURN TO: RICHLAND TWP
4019 Dickey Rd
Gibsonia, PA 15044
FAX: 724-443-8860
EMAIL: sowens@richland.pa.us

**RICHLAND TOWNSHIP
APPLICATION FOR CERTIFICATION OF STORMWATER DRAINAGE COMPLIANCE
(DYE TEST)**

OWNER'S NAME: _____

MAILING ADDRESS: _____

PHONE NUMBER(S): _____

ADDRESS OF PROPERTY TO BE CERTIFIED:

SEWER ACCOUNT

LOT AND BLOCK

**TESTING FIRM
(MUST BE A REGISTERED LICENSED PLUMBER)**

NAME: _____

ADDRESS: _____

PHONE NUMBER (S): _____

REGISTRATION # (HP#) _____

APPLICANT'S SIGNATURE

DATE

**IF VIOLATIONS ARE INDICATED ON THE CERTIFIED INSPECTION REPORT, THEY MUST BE CORRECTED BEFORE SEWER CERTIFICATE IS ISSUED.