



EAST VINCENT TOWNSHIP

BUILDING SEWER INSPECTION PERMIT

APPLICATION

262 Ridge Road Spring City, PA 19475
(P) 610-933-4424 (F) 610-933-1142

Please fill out the following information in its entirety:

Instructions:

- ⇒ **ALL** sections of the application must be filled out in its entirety or will be returned as incomplete.
- ⇒ If the Applicant is not the property owner, **the property owner's signature is required.**
- ⇒ No permit will be released unless all contractors are registered in the Township.
- ⇒ The property owner must provide the Township with **at least thirty (30) days' notice** prior to the intended closing date for the sale of the property to complete the inspection and televising.

Instructions for Contractor:

- ⇒ Once the permit has been issued, it is the responsibility of the contractor to clean the building sewer line prior to contacting the Township Building/Plumbing inspector to witness the televising of the line.
- ⇒ **The Township Building/Plumbing Inspector must witness the televising of the line. NO EXCEPTIONS.**
- ⇒ A copy of the televising must be provided to the Township upon completion and prior to a Certificate of Compliance being issued.
- ⇒ Certificates of Compliance for televising are valid for five (5) years from the date of issuance.
- ⇒ Prohibited connection inspections must be performed every time a property in the Public Sewer District goes for resale. **NO EXCEPTIONS.**

Permit Information:

*Name of contractor: _____ *Phone number #: _____ *Cell Phone #: _____

*Contractor's address (street, city, zip code): _____ *Township Registration #: _____ *E-mail Address: _____

*Name of property owner: _____ *Phone #: _____ *E-mail Address: _____

*Address of property owner (if different from the location of work): _____

*Location of work (street, city, zip code): _____

Name of subdivision: _____ Lot number: _____ Zoning district: _____ *UPI Number: _____

Important Note: The property owner or property owner's authorized representative **must be present for the inspection** so that the Township Inspector can gain access to the property. If the representative is different from the property owner listed above, please list their contact information below. **Please note that if the Inspector is scheduled to visit your property and the property owner or their representative fails to be present at the site a failed inspection fee will be charged:**

*Authorized Representative's Name:

*Phone number:

*Cell Phone Number:

*Relationship to Property Owner

Total Permit Fee: _____

I declare, under the penalties of perjury, that this application (including any accompanying plans and specifications) has been examined by me, and to the best of my knowledge, is a true, correct, and complete application. I have reviewed and agree to comply with the East Vincent Township Code. This application will be reviewed against the East Vincent Township Code and Township policies ONLY; additional approvals may be required (e.g. approval from Homeowners Associations, etc.) The acceptance of this permit requires me as the applicant, property owner or both to follow the inspection schedule on the permit as well as the obligation to have a final inspection and close out the permit properly.

*Signature of property owner:

*Date:

*Signature of applicant:

*Date:

For Official Use Only:

Date received: _____

Date complete: _____

Inspector's Initials: _____

Approved by:

Date approved: