

**“CITY OF ST. MARYS”**  
**(814) 781-1718, EXT. 239**  
**CERTIFICATE OF COMPLIANCE APPLICATION**  
**ON-LOT SEWAGE INSPECTION**

NAME \_\_\_\_\_ APPLICATION NO. \_\_\_\_\_

ADDRESS (CURRENT) \_\_\_\_\_

PROPERTY OWNER \_\_\_\_\_ PHONE NO. \_\_\_\_\_

ADDRESS (SITE) \_\_\_\_\_ LOT NO. \_\_\_\_\_

SIGNATURE \_\_\_\_\_

CERTIFICATE OF COMPLIANCE FOR ON LOT SEWAGE MUST BE APPROVED BEFORE THE CLOSING WILL TAKE PLACE. A FEE OF \$50.00 FOR RESIDENTIAL/COMMERCIAL/INDUSTRIAL USES MUST BE PAID FOR IN ADVANCE.

DATE \_\_\_\_\_ CHECK NO. \_\_\_\_\_ CASH \_\_\_\_\_

*SEPTIC TANK MUST BE PUMPED FOR INSPECTION. COPY OF SEPTIC PUMPER'S RECEIPT IS REQUIRED.*

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PROPERTY USE: RESIDENTIAL \_\_\_\_\_ OTHER \_\_\_\_\_

INSPECTION DATE \_\_\_\_\_ INSPECTOR'S INITIALS \_\_\_\_\_ APPROVED DENIED

TEST METHODS USED: VISUAL INSPECTION \_\_\_\_\_ DYE TEST \_\_\_\_\_

COMMENTS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SECOND INSPECTION DATE \_\_\_\_\_ INSPECTORS INITIALS \_\_\_\_\_ APPROVED DENIED

COMMENTS \_\_\_\_\_

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INSPECTOR'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

UPON SIGNATURE OF INSPECTOR/AUTHORITY REPRESENTATIVE, THIS APPLICATION SHALL CONSTITUTE THE "CERTIFICATE OF COMPLIANCE FOR ONLOT SEWAGE".