

TOWNSHIP OF DARBY
LICENSE & INSPECTIONS DEPARTMENT
21 BARTRAM AVENUE, GLENOLDEN, PA 19036
PHONE (610) 586-1514 FAX (610) 586-0779
www.darbytwp.org

SEWER LATERAL INSPECTION

Date of Sewer lateral/Dye Test Inspection: _____ (Return Report to Township of Darby L&I)

Plumbing Company: _____

Address: _____ City/State: _____ Zip: _____

Phone: _____ Cell: _____ Email: _____

Pa License #: _____

Property Owner: _____

Address: _____ City/State: _____ Zip: _____

Phone: _____ Cell: _____ Email: _____

- Dye Test** (\$100.00 TWP Fee): _____ Payment Type: Check# _____ Money Order# _____
- Property Owner or Realtor responsible for the plumbing charge

SEWER LATERAL REPORT TO BE COMPLETED BY CERTIFIED TECHNICAN PERFORMING THE INSPECTION

- Follow-up required for correcting and/or re-inspection: _____

Licensed Plumber signature: _____ Date: _____

Township Witness signature: _____ Date: _____