# BOROUGH OF TRAFFORD
# RESIDENTIAL SEWER LATERAL
# INSPECTION APPLICATION

$250.00 inspection fee made payable to: *Borough of Trafford*
(Note: inspection to be performed only by the Trafford Borough Public Works Department)

Date: _____

Address to be inspected: _____

Name of Applicant: _____ Phone: _____

Property Owner: _____Phone: _____

Prospective Buyer: _____Phone: _____

**Public Works personnel must have access to the residence in order to perform this inspection but will not enter the building without the owner or owner's agent present. The scheduling process may take up to two weeks so please plan accordingly.**

Contact Person: _____ Phone: _____

Sewer lateral inspections are required at time of sale, or refinance. (This requirement shall be waived for refinances that occur within (3) years of the most recent sewer line inspection).
(two subsequent failed inspections will result in an additional fee of $100.00 per visit).

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**OFFICIAL USE ONLY**

This is to certify that _____ was inspected on _____ by
(address of inspection) (date)
the Trafford Borough Public Works Department. The results of the inspection are indicated below:

[ ] No infiltration of visible deficiencies in the Sanitary Sewer Lateral was observed during this inspection. The sewer lateral PASSED inspection; no additional work is required at this time.

[ ] Deficiencies have been observed in the sanitary sewer lateral; therefore, the sewer later FAILED inspection. Additional work and reinspection is required. Specific details of the violation(s) and corrective methods will be provided on a separate form.

The sewer lateral inspection requirements have been satisfactorily completed.

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**Trafford Borough Public Works Department**

**Borough of Trafford: P.O. Box 196 | 414 Brinton Avenue | Trafford, PA 15085**
**Phone: (412) 372-7652 | Fax: (412) 372-7654**

Revised 10-04-24