



## UPPER SAUCON TOWNSHIP MUNICIPAL AUTHORITY SEWER LATERAL CHECKLIST

The following information is needed before a sewer lateral inspection is completed.

- ☐ \_\_\_\_\_ Date of Last Inspection (does not need inspection if 2 years or newer)
- ☐ Is the property being transferred by home sale?
- ☐ Is the property being changed by use, causing increased sewer flow?
- ☐ Is the building, property, or plumbing being modified to increase sewer flow?
- ☐ Is the sewer lateral being repaired or replaced?
- ☐ Is replacement required by an Upper Saucon Township designee?

A checkmark designates a sewer lateral inspection is required, please input information below. Fees may apply for new lateral inspection.

### HOME CONNECTED (OR WILL BE) TO UPPER SAUCON SEWER

Address	
Homeowner/Seller name	
Phone Number	
Email Address	
Parcel Number	
Clean out	<input type="checkbox"/> YES <input type="checkbox"/> No <input type="checkbox"/> Unknown (One must be installed within 5 feet of exterior).

### INSPECTION CONTRACTOR INFORMATION

Name	
Phone	
Email	
Business Address	
Able to video inspect line all the way to sewer main and issue a USB Memory stick	<input type="checkbox"/> YES <input type="checkbox"/> No (The USB Memory will remain property of Upper Saucon Municipal Authority).

## UPPER SAUCON

Date of Inspection	
Upper Saucon Employee	
Clean out	<input type="checkbox"/> YES <input type="checkbox"/> No
Sewer Lateral Replacement	<input type="checkbox"/> YES <input type="checkbox"/> No
Building Permit Needed	<input type="checkbox"/> YES <input type="checkbox"/> No
Permit #	
Date of Permit	

## REALTOR INFORMATION

Name / Company	
Phone number	
Email	
Closing Company	
Contact Name	
Date of Closing	
Email	
Comments	
Buyer Name	
Buyer Phone	
Buyer Email	

## ADDITIONAL INFORMATION

Include anything not listed above that you want potential customers to know	
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Please contact Upper Saucon Township Water and Sewer Department with any questions.  
(610) 694-8680. 4774 Saucon Creek Road, Center Valley, PA 18034