

BOROUGH OF EAST WASHINGTON
Est. 1892

15 Thayer Street
Washington, PA 15301
724-222-2929
724-206-0541

APPLICATION FOR DYE TEST

1. Please provide all information requested.
2. Fee of \$225.00 must accompany application. Make check payable to East Washington Borough.
3. Should the property fail the first inspection, each additional inspection shall be billed at \$225.00.
4. Upon passing the inspection, a Document of Certification shall be issued by the Borough Representative, valid for (1) year from date of issuance.

Please provide the following information on the PROPERTY TO BE SOLD:

PROPERTY ADDRESS: _____

PARCEL ID#: 290 - ____ - ____ - ____ - ____ - ____

PROPERTY OWNER: _____

OWNER'S ADDRESS: _____
(If different from property address) _____

PROPERTY OWNER TELEPHONE #: _____

Please provide the following information about the OWNER'S REPRESENTATIVE (i.e. realtor, attorney, etc.)
This should be a contact person or agency that can provide access to the property for inspection.

CONTACT'S NAME: _____ TELEPHONE #: _____

COMPANY: _____

CLOSING DATE: ____ / ____ / ____ BUYER: _____

for Office use only: Date Payment Received ____ / ____ / ____ amount _____ Check # _____

Faxed request to WEWJA: ____ / ____ / ____

Results received from WEWJA: ____ / ____ / ____

Certification issued & mailed ____ / ____ / ____