

WHITAKER BOROUGH  
124 GRANT AVENUE  
WHITAKER, PA 15120  
412.462.8940

EMAIL: [admin@whitaker.gov](mailto:admin@whitaker.gov)

#### CLOSING INFORMATION

1. No Lien Letter - Request no lien letter in writing to the Borough of Whitaker. Include the seller, buyer, address, lot & block number, and closing date, if known. The fee is \$50 payable to Whitaker Borough. The letter will be released with a sewage statement once the attached information form, dye test, sewer lateral review, occupancy inspection, and fees are received.
2. Dye Test & Sewer Lateral Video – Private lateral time of sale and dye testing directions and application form are attached. The application form and video recording must be provided to Glenn Engineering, 14920 Route 30, North Huntingdon, PA 15642 or [bobz@glennengr.com](mailto:bobz@glennengr.com). The fee of \$300 is payable to Whitaker Borough and can be mailed or dropped off at the Borough Building lockbox.
3. Occupancy Inspection - Request an occupancy inspection in writing to the Borough of Whitaker. Include the seller, buyer, address, lot & block number, and closing date, if known. The fee is \$75 payable to Whitaker Borough. The inspection can be scheduled directly with Ed Crates, Building Inspector, at 412.287.7161, after review and approval of the sewer lateral inspection.
4. Contact – Please appoint one responsible person to be the contact person with the Borough Secretary.
5. Borough Real Estate – Contact Patricia Pasquantonio, Tax Collector, for current borough and school district real estate taxes. She can be reached at 412.464.1199 or 285 Washington Avenue, Whitaker, PA 15120.
6. Delinquent Borough Real Estate, Delinquent Sewage (prior to 10/2012) & Delinquent Refuse – Contact Jordan Tax Service at 724.731.2316. Delinquent Sewage (after 10/2012) will be provided with the no lien letter.
7. Delinquent School Real Estate – Contact Legal Tax Service at 412.464.9555.
8. Utilities:
  - Water – PA Water Company
  - Gas – Peoples Gas Company
  - Electric – Duquesne Light
9. Unpaid Claims – Borough claims for grading, paving, curbing, sewers, sidewalks, etc. appear on the records in the Prothonotary's Office of Allegheny County.

**BOROUGH OF WHITAKER**  
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Website: [whitaker.gov](http://whitaker.gov)

Before a no-lien letter is issued, the following **MUST** be completed and returned to Whitaker Borough.

**Section 1. GENERAL INFO**

ADDRESS of property to be SOLD	
CLOSING DATE	

**Section 2. SELLER INFO**

Name	
Forwarding address (Upon completion of sale)	

**Section 3. BUYER INFO**

Name	
Address (if different from ADDRESS of property to be SOLD in Section 1 above)	
Phone Number	

Upon completion of this sale, the buyer is going to: (check one)

<input type="checkbox"/> Live at this property?	<input type="checkbox"/>	<input type="checkbox"/> Rent this property to someone else	<input type="checkbox"/>
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After sale, the number of persons that will be living at this residence that are 18 years of age and over	
After sale, the number of persons that will be living at this residence that are under 18 years of age	

**Section 4. RENTER INFO (if applicable)**

Renter's Name	
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**Section 5. WAGE TAX INFO (Complete for persons who are 18 years of age and over and will be living at this residence.)**

	PERSON #1	PERSON #2	PERSON #3
Name			
Employer			
Employer Address			

**BOROUGH OF WHITAKER**  
**PRIVATE LATERAL TIME OF SALE ORDINANCE 1 OF 2017**  
**MINIMUM REQUIREMENTS FOR SUBMITTAL OF**  
**PRIVATE LATERAL VIDEO INSPECTIONS**

Videos submitted for evaluation and review with the Private Lateral Time of Sale Inspection Application Form to comply with the Private Lateral Time of Sale Ordinance shall meet or exceed the following guidelines and requirements:

- The Application Form shall be completed in its entirety and submitted with the Video Recording, which shall meet the guidelines.
- The appropriate Application Fees shall be paid to the Borough of Whitaker, in advance of any review; and shall be verified by the appropriate Municipal Official.
- The Video Recording shall be performed by a Registered Master Plumber, registered with the Allegheny County Health Department Plumbing Division and shall include the Signature and Health Permit (HP #) on the Application Form. The Video Recording may also be performed by a Certified NASSCO (National Association of Sewer Service Companies) Operator and shall include their NASSCO License Number on the Application Form.
- The Application Form and Video Recording shall be submitted in their entirety to the Engineer prior to ANY review being conducted.
- The Video Recording shall be provided on a non-returnable Flash Drive, DVD, or YouTube Video that is easily accessible by the Engineer/Reviewer.
- The Video Recording shall utilize both video and audio, and shall clearly identify the address of the property by showing an address sign or other such verification, and shall include footage from zero feet at the clean-out/fresh air vent on the outside of the building and shall continue without interruption to the point of connection at the main municipal connection. Each deficiency shall be recorded utilizing both video and audio format. The entire evaluation shall be performed, rated, and reported in full accordance with NASSCO Standards.
- **Should the Application Form and Video Recording not contain ALL required information, the evaluation will be considered incomplete and the review will be considered incomplete, the review will NOT proceed, and the Applicant will be so notified.** Should an evaluation require more than two reviews, an additional fee will be assessed.
- **Note that the Engineer's review shall NOT commence until ALL required components have been received. The Applicant is advised that there will be a minimum of not less than three (3) business days for the initial review either Pass or Fail, and a maximum of not more than ten (10) business days for the said initial review.** Should the lateral fail, it will require a follow-up evaluation including submittal of a new Video Recording and Application Form to the Engineer, whereupon the foregoing review schedule will re-start.
- Realtor and property owners shall be fully aware of the foregoing schedule, and will schedule closings accordingly and shall be aware that there will be **No Exceptions** to this requirement.
- Note that Temporary Certificates shall ONLY be considered in the event that inclement weather conditions restrict or otherwise delay replacement or rehabilitation of a defective lateral.

**BOROUGH OF WHITAKER  
APPLICATION AND CERTIFICATE OF COMPLIANCE**

☐ DYE TESTING OF BUILDING FACILITIES      ☐ PRIVATE LATERAL TIME OF SALE

Buyer(s) Name: \_\_\_\_\_  
Seller(s) Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Lot & Block Number: \_\_\_\_\_

Date of Application: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
☐ Residential    ☐ Commercial

**DYE TESTING OF BUILDING FACILITIES**

This is to certify that I, \_\_\_\_\_ (printed name), a Registered Master Plumber, have inspected and performed the required Dye Testing of all roof drain pipes and area drains located on the above addressed Building Facility(s) and property in order to determine if any storm or surface water is illegally connected into the municipal sanitary sewer system in accordance with Ordinance 2 of 2004, as amended:

- ☐ I certify that there are no storm or surface water drains (area drains) or extraneous illegal waters connected to the municipal sanitary sewer system.
- ☐ I certify one or more storm or surface water drains (area drains) were illegally connected to the municipal sanitary sewer system.
- ☐ I certify that ALL illegal connections have been removed from the municipal sewer system.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Allegheny County Health Permit No.*

\_\_\_\_\_  
*Date*

☐ Approved      ☐ Failed

\_\_\_\_\_  
*Authorized Municipal Representative Signature*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

**TIME OF SALE LATERAL TESTING**

This is to certify that I, \_\_\_\_\_ (printed name), a Registered Master Plumber, have inspected and performed the required time of sale lateral testing in accordance with NASSCO requirements and all other conditions of Ordinance 1 of 2017 required on all laterals located on the above addressed property to determine if any repairs are required and supplied the results of same to the Borough of Whitaker:

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Allegheny County Health Permit No.*

\_\_\_\_\_  
*Date*

- ☐ The submitted lateral inspections and tests have been reviewed by the NASSCO certified representative of the Borough of Whitaker and have been determined to have ☐ PASSED or ☐ FAILED the requirements.

\_\_\_\_\_  
*Authorized Municipal Representative Signature*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*