

SPRING GARDEN TOWNSHIP

ADMINISTRATION • 340 TRI HILL ROAD, SUITE A
YORK, PA 17403-5709
PHONE NUMBER: 717.848.2858

SEWER CERTIFICATION REQUEST

Per §250-33.D, <u>Spring Garden Township will provide the sanitary sewer outstanding amounts and certify what is due/owed</u> for the real estate transaction. **Fee \$20.00.** The fee is required at the time of request and is payable to Spring Garden Township; allow up to 3 business days to process the request after payment is received. Email the completed form to <u>general@sgtwp.org</u>.

Organization:				
Phone #:				
Email:				
Property Information	:			
Property address:				
UPI # (Tax Map/Parc	el #):			
Current owner:				
Buyer(s) name:				
Buyer(s) mailing add	ress after settlement:			
	Phone #:			
	Email:			
		Phone	& email are nec	essary for processing future sewer bill
Property Manageme	unt Co. to be billed?	□ Yes	□ No	
If yes, please provide add		□ res	□ NO	
	iress and telephone #.			
, , , , ,				
Select One: Intended Use of Prop	Actual Sale erty: Investment Pect to annual Rental Regis	, ,	Rental Prop	☐ Sales Agreement erty ☐ Owner-Occupied erden Township
Select One: Intended Use of Prop *Rental properties subje	erty: Investment P	Property tration Progra	Rental Prop m of Spring Ga	erty
Select One: Intended Use of Prop *Rental properties subject Date of Settlement: The sewer amounts due settlement could affect	erty: Investment Pect to annual Rental Regis Notify Spring Garden	Township if the	Rental Prop m of Spring Ga	erty
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Note: Spring Garden Township's returned check fee is \$30 per occurrence.