

SPRING GARDEN TOWNSHIP

ADMINISTRATION • 340 TRI HILL ROAD, SUITE A YORK, PA 17403-3806 PHONE NUMBER: 717.848.2858

Sewer Certification & Property Transfer Request

Per §250-33.D, Spring Garden Township will provide the sanitary sewer outstanding amounts and certify what is due/owed for the real estate transaction.

ALL the information requested is required for the processing of future sewer bills & permits.

Please allow up to 5 business days from receipt of payment to process the request. Failure to provide the information requested and the fee payment of \$35.00 can result in a delay in processing your request. Certifications will only be completed after payment has been received. Checks should be made payable to Spring Garden Township1¹. Completed forms can be mailed to the address above or emailed to sewer@sgtwp.org – copies of checks are not accepted as receipt of payment. The sewer amounts due and payable are calculated based on the settlement date provided. Any changes to the date of settlement could affect the amounts due and a renotification to the Township is required to ensure the current amounts are included in the final settlement proceedings. *This amount does not include any lien that may be on the property. A lien search should be completed by the settlement company prior to settlement.* Sewer payments are payable to: The York Water Company. Mail to 130 East Market Street, York, PA 17401

Requestor's Information: (As the re	equestor I acknowledge that I	have read and understand the above information)
Organization:	Requesto	r's Name:
Phone #:	Email:	
Property Information:		
Property address:		
UPI # (Tax Map/Parcel #) (if there	is no postal address):	
Current Owner:		
Current Use:	pied 🗌 Investment 🗀 F	Retail 🗆 Rental 🗀 Multi-Use
If Rental or Multi Use – Number o	of Units:	
Date of Settlement:		
Please notify Spring Garden Township if this date changes.		
Type Of Sale: \square Actual Sale \square Refinance \square Sales Agreement* \square Research \square Sheriff's Sale *A copy of the executed agreement must be provided to the Township to transfer the Sewer Billing into the name of the non-deeded owner of the property.		
A copy of the executed agreement must be provided to the rownship to transfer the sewer bining into the name of the non-deeded owner of the property.		
Intended Use of Property: ☐ Owner-Occupied ☐ Flip and Sell (Investment) ☐ Rental Property*		
*Rental Properties are subject to the annual Ren	ntal Registration Program of Spring Ga	arden Township per §165 and all Zoning Ordinances.
Deed Information: (this should be the	same as the name provided to the	ie Recorder of Deeds)
Buyer(s) name:	<u>'</u>	•
Address:		
Puvor(s) Information: (this information about the		
Buyer(s) name:	louid be for the deed owner in the eve	ent the Township must contact them about their property)
Buyer(s) mailing address:		
Buyer(s) Phone #:	Buyer(s) E	
Buyer(s) Phone #:	Buyer(s) E	
- at least one phone number and one email address ar		
Property Management Information: (must be within 20 miles of the To	wnship – only to be completed for Rentals)
Property Management Co. to be b	oilled? 🗌 Yes 🗌 No 🛮 Co	ontact Name:
Company Name:		
Address:		
Phone #:	F-Mail:	

Sewer Certification Property Transfer Request FEB2025

¹ Note: Spring Garden Township's returned check fee is \$30 per occurrence.