

Property Address: _____ Inspection #: _____

**MIDDLETOWN TOWNSHIP DELAWARE COUNTY
SEWER AUTHORITY**

27 N. PENNELL ROAD
MEDIA, PA 19063

(610) 566-3087
FAX (610) 566-0879

Lateral Inspection and Testing Application for Homeowners

Please complete & return to Middletown Township Sewer Authority
along with a check for **\$200 payable to MTSA.**

Check #: _____ Application Date: _____ Settlement Date: _____

Owner (s) Name: _____
(First) (Last)

Address: _____

Phone Number: _____ Email address: _____

Realtor's Name: _____
(First) (Last)

Phone Number: _____

Realtor's Company Name: _____

Realtor's Company Address: _____

Realtor's Email address: _____

Scheduled Date by MTSA Lateral Inspector: _____

Buyer's Name(s): _____

Buyer's email Address: _____

Condensate Line _____ Sump Pump: _____
(where does it discharge?) (where does it discharge?)