BEDFORD COUNTY TOWNSHIP & BOROUGH SANITARY CORPORATION

145 CLARK BUILDING ROAD, ~ SUITE #4 ~ BEDFORD, PA 15522 ~ USA Phone 814-623-6498

DEAN H. SHULLER ~ SEWAGE ENFORCEMENT OFFICER #03153 ~ CHIEF OF OPERATIONS

COMPLAINT FORM

Instr	ructions - Please complete this form and return to the above mentioned Address.
Date_	
ACTIC	INFORMATION REQUESTED ON THIS FORM MUST BE PROVIDED, OTHERWISE, NO ON CAN BE INITIATED BY THE SEWAGE ENFORCEMENT OFFICER.
	Name of individual or firm (Violator against whom sewage complaint is lodged):
2.	Mailing address of Violator:
	Type of problem (describe conditions and location on property and involvement of streams, right of ways, springs, roads, neighboring properties - add additional sheets, sketches, and photographs, if necessary).
4.	Location of violation in
(T	ownship or Borough),County.
	Directions (please provide directions to the existing violation site using road numbers, landmarks, etc.)

6. Does violator own the property on which the violation exists?
YES NO
7. Does violator rent the property on which violation exists?
YESNO
If answer to #7 is yes, please complete the following:
Name of property owner:
Mailing address:
8. Your Name (Complainant):
9. Complainant address:
10. Complainant Telephone
FALSE SWEARING STATEMENT, I verify that the statements made in this complaint are true and correct to the best of my knowledge, information and belief. I understand that false statements are made subject to the penalties of 18 PA.C.S.A. §§ 4904 relating to unsworn falsification to authorities.
SIGNATURE OF COMPLAINANT

If you should have any questions concerning the completion of this form, call (814)623-6498, or write: Bedford Sanitary Corp., 145 Clark Bldg. Road, Ste. 4, Bedford, PA 15522