



ROSTRAVER TOWNSHIP SEWAGE AUTHORITY

1744 Rostraver Road, Rostraver Township, PA 15012 (724) 930-7667, FAX (724) 930-9401
TTY/TDD (800) 654-5984 or (800)-654-5988 (voice only)
(An Equal Opportunity Employer and Provider)

Requirements for the Issuance of No-Lien Letter

- Requests for lien letters must be received at least seven (7) days in advance of closing. The cost is \$25.00. To avoid delays in receiving your no-lien letter, we request that you use this form. NOTE, a request for a No-Lien letter less than seven days prior to closing, a \$100.00 surcharge may be added.
- Please see the Authority’s regulations and Instruction regarding Time of Sale found on the website www.rostraversewage.com or by contacting the Authority Offices. Sale of a property, a No-Lien letter will be issued only after dye testing & lateral inspection have been completed and any repairs finalized.
- Refinancing does not require dye testing or lateral inspection to be completed.
- A forwarding address for the SELLER must be provided.
- *RTSA does not guarantee nor warranty the sewer lateral inspected into the homr or to the curb beyond the date of the inspection.*

Please follow instructions above and the checklist requirements below. THANK YOU!

- *Request No-Lien Letter seven (7) days prior to closing*
- *Read instructions for Time of Sale Regulations found on the Authority website or in the RTSA Offices accompanied with the No Lien Letter Document Packet, including dye test/lateral inspection documents and fees associated with this test. (not required for refinancing)*
- *Submit dye-test/lateral inspection application and appropriate fees*
- *Provide sellers forward address (not required for refinancing)*

..... APPLICATION FOR A NO-LIEN LETTER

Please read and review the above procedures to ensure a timely response to your no-lien letter request. Type or print information below and return completed application to Authority Office by mail or fax.

DATE OF APPLICATION _____

Current Property Owner _____

Property Address _____

Street City State Zip Code

Parcel ID _____

Sellers Forwarding Address _____

Street City State Zip Code

Purchaser’s Name _____

Agency, Realtor or Person requesting No-Lien Letter _____

Contract Phone # _____

Date of Closing _____