

TOWN OF SCHUYLER

Enforcement Officer

JAMES LANGE

(315) 735-4021

REQUEST FOR SANITATION INSPECTION

_____ requests the sanitary facilities installed at
owner

_____ be inspected by the Town
number and road

**Sanitation Officer. I hereby certify the above installation is in
accordance with the Sanitation Section of the Zoning Ordinance.**

Signed _____
owner

mailing address

FOR USE OF SANITATION OFFICER

Approved _____

Disapproved _____

Sanitation Officer

**NOTE: All ditches must be left open and tanks, distribution boxes, ect., are to be in
sight for inspection. Complete this form in duplicate and submit to the Town Clerk.**