

Joseph A. Rizk, Supervisor
Cynthia Bryan, Clerk
Pam Faris, Treasurer
Office -----810-686-7580
FAX -----810-686-0820
Bldg. Dept.--810-686-7676
FAX -----810-686-8856



Trustees

Nancy Belill
Sue Thomas
Jeremy Clontz
Kerry Paulson

Sewer Discharge Inspection Extension Form

Address to be Purchased: _____

Seller Name (print): _____

Purchaser Name (print): _____

Seller Phone: _____ Purchaser Phone: _____

Date of Sale: _____ Closing Agent (Print): _____

Title Company Name & Phone (print): _____

By signing below, I agree to have the Vienna Township Sewer Discharge Inspection done as soon as possible after closing. I understand there is a fee of \$50 for the inspection and any violations will be fixed within 10 days after the inspection. I understand that I can still close on the property listed above, but that if said inspection is not completed and any violations fixed, occupancy on the property may be revoked. A signed copy of this form shall be provided to the Township upon closing.

Seller Signature: _____ Date: _____

Seller Signature: _____ Date: _____

Purchaser Signature: _____ Date: _____

Purchaser Signature: _____ Date: _____

Closing Agent Signature: _____ Date: _____

3400 West Vienna Road | Clio, MI 48420 | www.viennatwp.com

Office Hours: M, Tu, Th - 8:00 AM – 5:00 PM, Wed – 8:00 AM – 6:00 PM, Closed Friday