

62323

3/4/22 9:00 - could not inspect
3/9/2022 9:00 AM via schedule

Anne Hentges

From: noreply@civicplus.com
Sent: Monday, February 28, 2022 3:55 PM
To: Anne Hentges; Alicia Johnson; Anna Carlson
Subject: Online Form Submittal: Point of Sale Sanitary Sewer Service Inspection Application

Point of Sale Sanitary Sewer Service Inspection Application

Inflow & Infiltration (I/I) Compliance Inspection

Before any property is offered for sale/transfer an Inflow and Infiltration (I/I) Inspection must be completed. The inspection will look for any improper connections or significant defects in the sanitary sewer service pipe. If necessary a toilet may need to be removed for the inspection. City of Orono Public Works can remove, with no liability to them, city or the inspection can be rescheduled after the homeowner or plumber (hired and paid for by homeowner) removes it. For properties that pass inspection, the City issues a Certificate of I/I Compliance which is valid for 10 years. Properties that don't pass inspection are issued a correction notice delineating the problems. Repairs should be completed within 90 days of the first inspection. If repairs cannot be completed prior to the transfer of a property, proof of an escrow equaling 110% of the estimated cost of repairs shall be provided to the city. If repairs are not completed a monthly surcharge will be applied to the utility bill until the property is in compliance. See City website or call (952) 249-4600 for more information.

Property Information

Property Address 2987 Casco Point Road
PID: Field not completed.
City Orono
State MN
Zip Code 55391

Owner Information

Name Casco Point LLC
Email Address jadams@compass.com
Is the mailing address Yes
different than the property
address?

Address	315 E Lake Street, Suite 101
City	Wayzata
State	MN
Zip Code	55391
Phone Number	612.720.4827
Other	Rachel - 612.849.2634
Fees	Residential Inspection \$250
Private Inspection Option	<u>Contractor Information Sheet</u>
Electronic Signature Agreement	I agree.
Electronic Payment Agreement	I agree
Electronic Signature	John F. Adams
Date	2/28/2022 4:00 PM
First Name	John
Last Name	Adams

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