

## City Of Orono Point of Sale Sanitary Sewer Service I&I Compliance Inspection Form

Date Called in	,
Date Scheduled	8:00 Am.

Property Address:	2525 Dunwoody Ave
PID:	2011723220018

Troperty Address.							
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Name:	David	l Stennes			,		·
Mailing Address: (if different from	CERTIFIED  EXPIRES: 4/28/2032						
Property)				EX	PIRES: 7/4	<u>812</u> 032	
Phone:	612-840-2796 Email: davidstennes@gmail.com						
		Inspector	Informatio	on	Allega altra puede per estado de la composição de la comp		******
Name:		Brian / Branch	M.		I		
Company/ Organization		Myof Orono	License	number:			
Phone:			Email:				
			_ <del></del>		I		
		Insp	ection				
System	Stand					Pass	Fail
Roof Drains	Oof Drains  Roof drains and leaders Roof drains should not be connected to the sanitary sewer but should discharge to the ground outside of a building. If the roof drains are connected to the sanitary sewer, disconnect them, plug any open						
	conne	ctions to the sanitary sewer usi	ng a non-sh	rink permanent mate		\ \ \	
D 1 ()		et the roof drains onto the grou					
Foundation		ation drains are underground p I the base of a building and int				1,7	
Drains		ed outside of the building. Four				V	
		sanitary sewer.					
Sump Pumps		pumps are designed to captu				\ \ /	
	basements or crawl spaces and pump it away from the house. The basic sump system includes drain tile, a sump pit, a sump pump, a float or switch, and a						
	drain I	ine. Sump pumps should not b	e connected	to the sanitary sewe	er.		
Sewer Service		ry Sewer Inflow & Infiltration				/	
Line	Sewer Lines. All sanitary sewer lines serving Property, from the house to the main line, shall be in a safe and functional condition and shall be free from all leaks, failures including but not limited to partially collapsed sections or tree						
	root intrusion. The sanitary sewer lines shall meet the City Code standards and specifications. (Details on back of this sheet)						
Notes:	specifi	ications. (Details on back of ti	ns sneet)				
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T . (1)					1 70 /	1117	14-

Inspectors Signature:	meller Ill	m	Date: 4	128 122	
Owners signature:			Date:		
	City	Review	· · · · · · · · · · · · · · · · · · ·		
Compliant		☐ Corrective Action Required			
Certificate of Compliance E	xpires - 98 - 9039	Corrective Action Due by:			
Date:	Signature:				
1.92.99	Name: Cot	+ obstaldner			

Weather Conditions:	
Approximate Depth of Service	
Type and Size of Service	4" Cast
Overall Condition of Service Pipe	

Please note all connections, fittings, points of concern on service line including infiltration, tree root, cracks, misaligned joints, etc.		
·	This report must include a digital copy of the televising.	
Feet	Comment	
Example: 0 1-10	Start for 4" cleanout in NE corner of Basement Misaligned joint –Infiltration	
ο,	Basement Laundry room 4" deanout	
28'	hits hard T can't go further	
Notes:		