

Task 11087"

Date Called in 12/12/2022
Date Scheduled 12/14/22
1:00 PM

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

Property Address: PID:		3733 Livingston Ave Court 1711723340074					
Name:	Dovid	d Schalow	Owner Information	n			
Mailing Address:	David	a octiaiow				RTIFIED	
(if different from Property)	EXPIRES: 12/14/203						
Phone:	952-	715-1426	Email:	dschalow12@	gmail.cor	n	
		In	spector Informati	on.			
Name:			specior informati	on			
Company/ Organization			License	number:			
Phone:			Email:				
System	Stand	lard	Inspection			Pass	Fa
Roof Drains			of drains should not	be connected to the sa	anitary	2 400	+
Toor Brains	sewer but should discharge to the ground outside of a building. If the roof					١,,	
	drains are connected to the sanitary sewer, disconnect them, plug any open					<u> </u>	
	connections to the sanitary sewer using a non-shrink permanent material, and redirect the roof drains onto the ground outside the building.						
Foundation				ollect storm water from	m		
Drains	around the base of a building and into a sump basket, where it is then						
Diams		ed outside of the build sanitary sewer.	ling. Foundation drai	ins should not be con	nected	X	
Sump Pumps			to capture surface	or ground water tha	at enters		
	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 line. Sump pumps should not be connected to the sanitary sewer.						
							
Sewer Service				liance Inspection San			
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 in	trusion. The sanitary	sewer lines shall me	et the City Code stan-	dards and	' \	
	specifi	cations. (Details on	back of this sheet)				
Notes:							
		Allaral					
		H119x0d					
Toilet Removed	o Yes	No No					
For Inspection:							
Increation Ciarata	[78 / R r	. 0.0		Dataus	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	16
				Date:	0,10	-00)	
Owners Signature:				***************************************	Date:		m.
			City Daviany				
Dr. Compliant			City Review	Corrective Action	Required		ugatherii ill
Compliant	nlines	o Evnisor 10 /11/		· · · · · · · · · · · · · · · · · · ·			
Certificate of Com	ipiianc		1/.11	ve Action Due by:			,
Date:		Signature:		thoen			
12/14/2022		Name: Ke	llie Hoen				

Service Line Inspection Details

Weather Conditions:		
Approximate Depth of Service		
Type and Size of Service	MI SCHO BUC	
Overall Condition of Service Pipe	Sant	
*	7,400	3

	•						
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	Start for 4" cleanout in NE corner of Basement						
1-10	Misaligned joint —Infiltration						
0							
7							
	A)) 905d						
1)							
(50)1	main til pv<						
451	main til pv<						
0							
Notes:							
<u> </u>							