



Date Called in	
Date Scheduled	

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

Property Address:	1340 Fox Street
PID:	0211723310056

Owner Information			
Name:	JESSE L CHAPPELL		
Mailing Address: (if different from Property)			
Phone:		Email:	

Inspector Information			
Name:			
Company/ Organization		License number:	
Phone:		Email:	

Inspection			
System	Standard	Pass	Fail
Roof 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 connections to the sanitary sewer using a non-shrink permanent material, and redirect the roof drains onto the ground outside the building.	X	
Foundation Drains	Foundation drains are underground pipes that collect storm water from around the base of a building and into a sump basket, where it is then pumped outside of the building. Foundation drains should not be connected to the sanitary sewer.	X	
Sump Pumps	Sump pumps are designed to capture surface or ground water that 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.	X	
Sewer Service Line	Sanitary Sewer Inflow & Infiltration (I/I) Compliance Inspection Sanitary 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)	X	
Notes:	Property was connected to City Sewer and inspected on 7/23/2015. Compliancy for this property is valid for 10 years from this date		
Toilet Removed For Inspection:	o Yes o No		

Inspectors Signature:		Date:
Owners Signature:		Date:

City Review	
<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Corrective Action Required
Certificate of Compliance Expires: 07/23/2025	Corrective Action Due by:
Date: 08/06/2024	Signature: <i>Kellie Hoen</i>
	Name: Kellie Hoen