

CODE REQUIREMENTS ARE FOR YOUR PERSONAL HEALTH AND SAFETY!

**CITY OF ORONO  
INSPECTION NOTICE**

**PERMIT NO.** SNP22-000037

**CALL IN**  
**SCHEDULED**  
**COMPLETED**

**DATE**  
9/11/22  
9/12/22

**TIME**  
9:30 AM

**ADDRESS** 1040 Loma Linda

**OWNER** \_\_\_\_\_ **TELEPHONE NO.** \_\_\_\_\_

**CONTRACTOR** Highview Plumbing - Kyle 612 916 1685

**DESCRIPTION** Sewer Connection

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> FOOTING               | <input type="checkbox"/> DEMO - FINAL          | <input type="checkbox"/> SEPTIC FINAL          |
| <input type="checkbox"/> POURED WALL           | <input type="checkbox"/> PLUMBING RI           | <input type="checkbox"/> EXCAV/GRADING/FILLING |
| <input type="checkbox"/> FOUNDATION DRAIN TILE | <input type="checkbox"/> PLUMBING FINAL        | <input type="checkbox"/> TREE REMOVAL          |
| <input type="checkbox"/> LATHE                 | <input type="checkbox"/> MECHANICAL RI         | <input type="checkbox"/> SITE INSPECTION       |
| <input type="checkbox"/> FRAMING               | <input type="checkbox"/> MECHANICAL FINAL      | <input type="checkbox"/> RATED WALLS           |
| <input type="checkbox"/> INSULATION            | <input type="checkbox"/> WOOD BURNER/FIREPLACE | <input type="checkbox"/> COMPLAINT             |
| <input type="checkbox"/> FINAL                 | <input type="checkbox"/> WATER HOOK-UP         | <input type="checkbox"/> FOLLOW-UP             |
| <input type="checkbox"/> AS BUILT - SURVEY     | <input type="checkbox"/> SEWER HOOK-UP         | <input type="checkbox"/> FOUNDATION/REMOVAL    |
| <input type="checkbox"/> DEMO - SITE           | <input type="checkbox"/> SEPTIC INSTALL        |  |

**OWNER/CONTRACTOR TO MEET YOU:** YES NO

**COMMENTS:** 40' OR LONGER Liner - 20' OR 6" 11

to 22' OR 4" Liner into PVC Sewer Service

☒ **WORK SATISFACTORY: PROCEED**

- ☐ CORRECT WORK & PROCEED  
☐ CORRECT WORK, CALL FOR REINSPECTION BEFORE COVERING

☐ CORRECT UNSAFE CONDITION WITHIN \_\_\_\_\_ HOURS. INSPECTOR WILL RETURN

☐ STOP ORDER POSTED. CALL INSPECTOR

☐ INSPECTION REQUIRED. CALL TO ARRANGE ACCESS.

☒ **PROJECT COMPLETE**

☐ **ISSUE CERTIFICATE OF OCCUPANCY**

\_\_\_\_\_ **TEMPORARY**

\_\_\_\_\_ **PERMANENT**

☐ **PHOTO TAKEN**

☐ **CITATION ISSUED**

**Call for the next inspection 24 hours in advance. (952) 249-4600**

**Owner/Contractor on site:** Highview Plumbing

**Inspector:** Scott