Task # 96142



Date Called in Date Scheduled

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

Property Address:	3585 Crystal Place
PID:	1711723430145

PID:		1711723430145					
	1		formation				
Name:	Evel	yn Lange					
Mailing Address: (if different from							
Property)	0.50	240,4071	I	<u> </u>			
Phone:	952-2	240-4951	Email: evelynlange480	@gmail.co	om		
		Inspector I	nformation				
Name:							
Company/ Organization		Hero Home Services	License number:				
Phone:		612-439-7285	Email:				
			ection		T		
System	Stand		1 11 (1 (1)	•.	Pass	Fail	
Roof Drains		frains and leaders Roof drains s but should discharge to the group					
		are connected to the sanitary se					
		ctions to the sanitary sewer using		erial, and			
F1-4'		et the roof drains onto the groun					
Foundation		ation drains are underground pi I the base of a building and into					
Drains		ed outside of the building. Foun					
	to the	sanitary sewer.					
Sump Pumps		pumps are designed to capture					
		ents or crawl spaces and pump					
		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	Sanita	Sanitary Sewer Inflow & Infiltration (I/I) Compliance Inspection Sanitary					
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	root intrusion. The sanitary sewer lines shall meet the City Code standards and					
	specifi	specifications. (Details on back of this sheet)					
Notes:							
	Video recorded by Hero Home Services on 5/02/25 and provided to the City of Orono in July						
	2025by the current resident. After review of the video it appears there are root intrusions at 4.5' from the main that will need to be repaired Jimmy Nelson, Sewer & Water Supervisor						
	110111 ti	to main that will need to be repe	area. Simily reison, sewer e	e water sup	, C 1 V 1501		
Toilet Removed	o Yes	s o No					
For Inspection:							
F							
Inspectors Signature: Date:							
Owners Signature: Date:							
·							
City Review							
☐ Compliant ☐ Corrective Action Required							
Certificate of Con	nplianc	e Expires:	Corrective Action Due by	: 10/09/2	2025		

City Review						
☐ Compliant						
Certificate of Compliance Expires:		Corrective Action Due by: 10/09/2025				
Date: 7/00/2025	Signature:	PRANT	NOT Sonieja			
7/09/2025	Name:	Heath	ner Smieja			