## RONO

Date Called in
Date Scheduled 7/11/25

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

Poi	at of S	ale Sanitary Sewer Servic	e l&l Co	empliance Insp	ection	ı Korn	n		
Property Address:		3541 Livingston Avenue		<del></del>					
PID:		1711723430046							
		1		· · · · · - <del>- · · · · ·</del>	-				
		Owner In	formation				· · · · · · · · · · · · · · · · · · ·		
Name:	Emil	y Beard				<del>-,,</del>		•	
Mailing Address: (if different from Property)		<del></del>					<del></del>		
Phone:	763-9	343-9706	Email:	eahayden18@	gmai	l.com		<del></del>	
1 HOHG.	1703-0	7700	Lillati.	1					
		Inspector I	nformatio				<del>,</del>		
Name:		Jimmy Nelson	шогшано	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			····		
Company/ Organiz	zotion	City of Orono	License	number:	$\top$				
Company/ Organia	cauon	Highview Plumbing	License	numoer.					
Phone:		952-249-4686   612-916-1685	Email:		+-				
1 110110.			334746434						
		Inspe	ection					<del></del>	
System	Stanc		.001011				Pass	Fail	
Roof Drains		rains and leaders Roof drains sl	hould not b	e connected to the	sanita	rv	2 44,043	A 4414	
Roof Diams		but should discharge to the grou						]	
	drains	are connected to the sanitary se	wer, discor	inect them, plug ar	ny ope	П			
		tions to the sanitary sewer usin			terial.	and	X	}	
Foundation		t the roof drains onto the groun ation drains are underground pi						╂	
,		the base of a building and into					,	1	
Drains	pumpe	d outside of the building. Foundating sewer.				ed -	V		
Sump Pumps	basemo system	pumps are designed to capturents or crawl spaces and pump includes drain tile, a sump pit ne. Sump pumps should not be	it away froi , a sump pi	m the house. The b ump, a float or sw	oasic si itch, a	цтр	Ĵ		
Sewer Service Line	Sanitar Sewer main li leaks, i root in	y Sewer Inflow & Infiltration ( Lines. All sanitary sewer lines and, shall be in a safe and functional failures including but not limited trusion. The sanitary sewer lined cations. (Details on back of this	I/I) Compli serving Pro onal condit d to partiall s shall mee	iance Inspection Si perty, from the ho ion and shall be fr ly collapsed sectio	anitary use to ee fron ns or t	the n all ree	✓.		
Notes:	UNA	BASI OF STACE	+ 1	•	j-e-c us E				
Toilet Removed For Inspection:	o Yes	○ No	<del></del>		·	٠.	<del></del>	<u>.,.</u>	
T					T	lotai		<u>.</u>	
Inspectors Signatu		04 - 5 - 7 - 0				Date:	14.121	<del>,</del>	
Owners Signature:	Eun	ly Belew			<del> </del> -	raie:	1/11/29	2	
		- At 1				<del></del>		<del></del>	
<del>\</del>		City R			-				
M Compliant	<del></del>			Corrective Action		uired		r	
Certificate of Com	pliance		C'orrective	e Action Due by	<u>/:</u>			<del></del>	
Date: 7/16/5	2025	Signature:	gentry	Smy					
1/10/0	(000	Name: He	ather	Smily					

## Service Line Inspection Details

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

	ote 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
0	4" OUTSIDE C.O. ON EAST SIDE OF HOUSE
7:	6" CLAY MASH
76	MASI
V V	
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Notes:	UNASLE TO GET AROund TEE AT THE BASE OF STACK LO. IN HOUSE