## TASK 64319

| Date Called in | 5/2/2022 |
|----------------|----------|
| Date Scheduled |          |

## City Of Orono

| Property Address                                    | :                                    | Disconnected at 2480 Carman Street 8/25/2022   |   |   |                                   |      |                                       |
|---|--------------------------------------|--|---|---|-----------------------------------|------|---------------------------------------|
| PID:  |                                      |  |   |   |                                   |      |                                       |
|   |                                      |  |   |   |                                   |      |                                       |
| -   | T=                                   |  | Owner Information   |   |                                   |      |                                       |
| Name:   |                                      | and Amanda Larsor  | 1   |   | CERTIFIE                          | ED . | · · · · · · · · · · · · · · · · · · · |
| Mailing Address:<br>(if different from<br>Property) |                                      | EXPIRES: <u>8/25/2</u> 032   |   |   |                                   |      |                                       |
| Phone:  | 612.6                                | 2.672.3649 Email: blarson@MesserliKramer.com   |   |   |                                   |      |                                       |
|   |                                      | T  |   |   |                                   |      |                                       |
| Name:   |                                      | 1  | nspector Information  |   |                                   |      |                                       |
| Company/ Organ                                      | ization                              |  | License nur   | nber:   |                                   |      |                                       |
| Phone:  |                                      |  | Email:  |   |                                   |      |                                       |
|   |                                      |  |   |   |                                   |      |                                       |
|   |                                      |  | Inspection  |   |                                   |      |                                       |
| System  | Stand                                |  | oof drains should not be co   | . 1   |                                   | Pass | Fail                                  |
| Roof Drains   | sewer<br>drains<br>connec<br>redirec | but should discharge<br>are connected to the<br>ctions to the sanitary<br>at the roof drains ont | e to the ground outside of a<br>sanitary sewer, disconnec<br>sewer using a non-shrink<br>to the ground outside the bu   | building. If the roo<br>them, plug any op<br>permanent material<br>iilding.               | of<br>en                          | X    |                                       |
| Foundation<br>Drains                                | around<br>pumpe<br>to the            | I the base of a buildied outside of the builds<br>sanitary sewer.                                | erground pipes that collect<br>ng and into a sump basket,<br>ding. Foundation drains sh   | where it is then ould not be connec   |                                   | Х    |                                       |
| Sump Pumps  | baseme<br>system                     | ents or crawl spaces includes drain tile,  | d to capture surface or g<br>and pump it away from th<br>a sump pit, a sump pump<br>ould not be connected to the  | e house. The basic a float or switch,   | sump                              | Х    |                                       |
| Sewer Service<br>Line                               | Sewer<br>main 1<br>leaks,<br>root in | Lines. All sanitary sine, shall be in a safe failures including but trusion. The sanitary        | nfiltration (I/I) Compliance<br>sewer lines serving Properts<br>and functional condition<br>at not limited to partially copy<br>sewer lines shall meet the<br>back of this sheet) | y, from the house t<br>and shall be free fro<br>ollapsed sections or<br>City Code standar | o the<br>om all<br>tree<br>ds and | X    |                                       |
| Notes:  | Ent                                  | ire new servi  | ice put in and ir   | Spected 8/2   | 5/202                             | 2    |                                       |
|   | 4" <1                                | UHHO PVC Sev   | ice put in and in   | racer wire a  | and a                             | node |                                       |
|   | 100 8                                | + of pipe<br>-Scott  |   |   |                                   |      |                                       |
| Toilet Removed                                      | o Yes                                | s o No   |   |   |                                   |      |                                       |
| For Inspection:                                     |                                      |  |   |   |                                   |      |                                       |
|   | -                                    |  |   |   |                                   |      |                                       |
| Ingrantan Cia-+                                     | 71401                                |  |   |   | Date:                             |      |                                       |
| Inspectors Signat<br>Owners Signature               |                                      |  |   |   | Date:                             |      |                                       |
| owners oignature                                    | ₽.                                   |  |   |   | Date.                             |      |                                       |

|                          | City                 | Review                       |
|--------------------------|----------------------|------------------------------|
| ✓ Compliant              |                      | ☐ Corrective Action Required |
| Certificate of Complianc | e Expires: 8/25/2032 | Corrective Action Due by:    |
| Date:                    | Signature: Kul       | le Hour                      |
| 8/25/22                  | Name: Kellie Ho      | ren                          |

## Service Line Inspection Details

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

| Please note all connections, fittings, points of concern on service line including infiltration, tree root, cracks, misaligned joints, etc. |   |  |  |
|---|---|--|--|
| Feet  | This report must include a digital copy of the televising.  Comment |  |  |
| Example:  | Comment   |  |  |
| 0   | Start for 4" cleanout in NE corner of Basement                      |  |  |
| 1-10  | Misaligned joint –Infiltration                                      |  |  |
| 0   |   |  |  |
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| Notes:  |   |  |  |
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