

CITY OF ORONO

INSPECTION NOTICE

PERMIT NO. SNP24-000032

ADDRESS 3600 CASCO AVENUE

OWNER \_\_\_\_\_

TELEPHONE NO. 703-486-3031

CONTRACTOR North Pine Aggregate - Andrew

DESCRIPTION

Water Connect (10:00AM) Sewer Connect (3:00PM)

- |  |   |  |
|--|---|--|
| <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 checked="" type="checkbox"/> WATER HOOK-UP | <input type="checkbox"/> FOLLOW-UP             |
| <input type="checkbox"/> AS BUILT - SURVEY     | <input checked="" 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: 1" (CTS) copper tube size 1/2  
water service with tracer wire + Anode  
6/5/24

SWR 4" SCH. 40 5' AIR PASSED  
WITH TRACER WIRE /  
ANODE

MOUNT TRACER BOXES ON HOUSE AFTER  
NO SEWER installed SIDING

- |   |   |
|---|---|
| <input type="checkbox"/> WORK SATISFACTORY: PROCEED   | <input checked="" type="checkbox"/> PROJECT COMPLETE    |
| <input type="checkbox"/> CORRECT WORK & PROCEED   | <input type="checkbox"/> ISSUE CERTIFICATE OF OCCUPANCY |
| <input type="checkbox"/> CORRECT WORK, CALL FOR REINSPECTION BEFORE COVERING                | _____ TEMPORARY   |
| <input type="checkbox"/> CORRECT UNSAFE CONDITION WITHIN _____ HOURS. INSPECTOR WILL RETURN | _____ PERMANENT   |
| <input type="checkbox"/> STOP ORDER POSTED. CALL INSPECTOR                                  | <input checked="" type="checkbox"/> PHOTO TAKEN         |
| <input checked="" type="checkbox"/> INSPECTION REQUIRED. CALL TO ARRANGE ACCESS.            | <input type="checkbox"/> CITATION ISSUED                |

TRACER WIRE FINAL

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

Owner/Contractor on site: JACKSON

Inspector: SCOTT / D.J.

White Copy/Inspector's File

Canary Copy/Site Notice