

CODE REQUIREMENTS ARE FOR YOUR PERSONAL HEALTH AND SAFETY!

CITY OF ORONO
INSPECTION NOTICE
PERMIT NO. SWP23-000010

CALLLED IN
SCHEDULED
COMPLETED

DATE
2/10/23
2/28/23

TIME
1:00 PM

ADDRESS 2418 Blossom Circle North

OWNER _____ TELEPHONE NO. _____

CONTRACTOR GroundTech Dawn 651 353 2381

DESCRIPTION Sewer & Water Connect

- | | | |
|--|---|--|
| <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: SWR TASK # 72685

WTR 11 11 72689

SWR 4" SCH. 40

5# AIR PASSED

WTR 1.5 HDPE

AIR PASSED NEW STANDPIPE INSTALLED

TRACER WIRE INSTALLED ON BOTH

- | | |
|---|---|
| <input checked="" type="checkbox"/> WORK SATISFACTORY: PROCEED | <input 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 | <u>_____</u> TEMPORARY |
| <input type="checkbox"/> CORRECT UNSAFE CONDITION WITHIN _____ HOURS. INSPECTOR WILL RETURN | <u>_____</u> PERMANENT |
| <input type="checkbox"/> STOP ORDER POSTED. CALL INSPECTOR | <input checked="" type="checkbox"/> PHOTO TAKEN |
| <input type="checkbox"/> INSPECTION REQUIRED. CALL TO ARRANGE ACCESS. | <input type="checkbox"/> CITATION ISSUED |

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

Owner/Contractor on site: G.T. BRIAN / TYLER

Inspector: DJS

White Copy/Inspector's File

Canary Copy/Site Notice

NEED TRACED WIRE FINISHED AFTER CONSTRUCTION