## City of Kasson Sump Pump and Lateral Inspection Report

## Α. **Initial Inspection**

- 1. Owner and Address:
  - a. Owner Name(s):
    - b. Address:
    - c. Occupants Name (If different):
    - d. Owner Address (s): (If different)
- 2. Date of Initial Inspection:
- 3. Date of construction and Building Type? Building built in year \_\_\_\_\_ (ex. 1959)

Note residential, apt., commercial, industrial:

- 4. History of backups or flooding? Note date, source, and actions taken: \_\_\_\_\_
- 5. Does building have:
  - a. Yes No Exterior grading sloping towards the building?
  - b. Yes No Roof drains that go into the ground?
  - c. Yes No Basement?
  - d. Yes No Seepage collection (beaver) system?
  - e. Yes No Sump pit?
  - f. Yes No Lateral Inspection Conducted?
- 6. If building has a **roof drain** that goes into the ground, which of the following apply?
  - a. It is properly constructed to discharge to open air or storm system.
  - b. It is improperly constructed to discharge into the sanitary sewer system.
  - c. Discharge location not determined.
- 7. If there is a seepage collection (beaver) system, which of the following apply?
  - a. It is properly constructed to discharge into a sump pit
  - b. It is improperly constructed to discharge into the sanitary sewer system.
  - c. Discharge location not determined.
- 8. If there is a sump pit, which of the following apply?
  - a. Pump is properly plumbed to discharge outside the basement through rigid piping.
  - b. Pump is improperly plumbed to discharge into the sanitary sewer system.
  - c. Pump has the capability of discharging into the sanitary sewer system (ex. flex hose).
  - d. There is a pit with no pump. Plumbing is checked as (a) (b) or (c) if present.
  - e. Discharge location not determined.
- 9. If lateral inspection is conducted, which of the following apply?
  - a. 🗌 No Suspect Foundation Drain Found
  - b. Suspect Foundation Drain Found
  - c. Suspect Foundation Drain not determined. (Note Why in Comments)
- 10. If lateral inspection is conducted, fill in information below.
  - a. General Information
    - i. Pipe Diameter (inches)
    - ii. Pipe Material (VCP, PVC, DIP, RCP, CMP, CIP, Obg, other) \_\_\_\_\_
    - iii. CCTV Start Location (i.e. Sewer main, Toilet, Sewer stack, etc)
    - iv. CCTV Start Distance from Foundation Wall (i.e. Along the alignment of the pipe, how far is the foundation from point of insertion? ft)
  - b. Observations (Note footage (ft) of each instance) \_\_\_\_\_
    - i. Roots
    - ii. Mineral/Unknown Deposits
    - iii. Chipped/Cracked Pipes \_\_\_\_\_
    - iv. Offset Joints
    - v. Sags/Deflections
    - vi. Suspect Foundation Drains \_\_\_\_\_

	Property Address
	Page 2 of Updated 9/2 Panouts, inactive sump pit, suspect foundation drain etc):
12. Photos taken of Interior Sumps and Collection	on System, and Building Exterior?   Yes  No
13. Lateral Inspection Video Submitted on USB-	drive (required for lateral inspection)?  Yes  No
reinspection) or foundation (initial inspection) beginning of the video. Footage needs to be	on into the sanitary sewer to 20-feet past the repair (if ). Address only needs to be displayed at the displayed on the screen at all times. Failure to a clear video for City review will void the inspection.
	olation Notice was given to the Occupant or Owner te):
PASS FAIL	City Follow-Up
DIAGRAM: roof drains into ground, exterior drains, i discharges, beaver systems, sanitary grinder pumps, for <b>B. Subsequent Inspection – Date</b> 1. Inspection conducted by 2. Does the building now comply with the app □Yes □No	bolicable Ordinance for the City of Kasson?
The inspection is not considered completed ti will review the submitted documentation to ve by the contractor/plumber may differ from the	erify requirements are met. Results provided
I hereby verify that the building stated above has been inspected for the above-described sump pump, lateral (if applicable) and the information set forth above is true and correct to the best of my knowledge.	I hereby verify that the building stated above has been inspected for the above-described sump pump, lateral (if applicable) and the information set forth above is true and correct to the best of my knowledge.
Occupant/Owner	Inspector Licensed Plumbers: sign with license #.
Date	Date