



## City of Janesville

101 N. Mott Street • P.O. Box O • Janesville, MN 56048

Phone: (507) 234-5110 • Fax: (507) 234-5236

[www.janesvillemn.gov](http://www.janesvillemn.gov)

Public Works Director: [josephz@janesvillemn.gov](mailto:josephz@janesvillemn.gov)

### SOURCE OF SANITARY SEWER DISCHARGE INSPECTION FORM

*This Certification Form shall be completed by the Seller prior to the transfer of ownership. The City of Janesville will do the initial inspection, if deemed necessary a further inspection by a licensed plumber will need to be completed as well.*

*Please fill this form out and provide it to City Hall to schedule the inspection. If an inspection was done less than 5 years ago and was found to be in compliance a new inspection is not required, but you will need to provide proof of inspection (Certificate of Compliance) if not on file at City Hall.*

#### **CODE SECTION**

**Chapter 51: Sanitary Sewer: Section §51.039 Ground Water Connections Prohibited**, of the City Code of the City of Janesville, Minnesota is amended to read as follows:

#### **GROUND WATER CONNECTIONS PROHIBITED**

- (A) No person(s) shall make connection of roof downspouts, foundation drains, areaway drains, sump pump drains, drain tile, or other sources of surface runoff or ground water to a building sewer or indirectly to the wastewater disposal system. (2002 Code § 51.34) (Ord. 225, passed 3-24-1992) Penalty, see § 10.990) (Ord. 2023-G, passed 03-27-23)
- (B) Any person desiring to transfer ownership of property within the City by deed, contract for deed, or in any other manner shall, prior to making the transfer of ownership, have an inspection conducted of the property to determine if the property is in violation of this chapter by having a connection of roof downspouts, foundation drains, areaway drains, sump pump drains, drain tile, or other sources of surface runoff or ground water to a building sewer or building drain which in turn is connection directly or indirectly to a public sanitary sewer. Any person desiring to transfer ownership shall have an inspection conducted by use of dye, smoke, or camera, or other method acceptable to the City, in the City's sole discretion, to establish that the property is not in violation of this Chapter. (Ord. 2023-G, passed 03-27-23)

**PROPERTY ADDRESS**

Address: \_\_\_\_\_

Parcel Identification Number: \_\_\_\_\_

**OWNER INFORMATION**

Owner Name: \_\_\_\_\_

Owner Address: (if different than property) : \_\_\_\_\_

Owner Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Owner Occupied: Yes \_\_\_\_ No \_\_\_\_

**QUALIFIED PERSON INFORMATION (IF NEEDED)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: : \_\_\_\_\_

License No.: \_\_\_\_\_

**Copy of inspection attached**

**SYSTEM**

**1. Roof drains and leaders** *Roof drains* should not be connected to the sanitary sewer but should discharge to the ground outside of a building. If the roof drains are connected to the sanitary sewer, disconnect them, plug any open connections to the sanitary sewer using a non-shrink permanent material, and redirect the roof drains onto the ground outside the building.

\_\_\_\_\_ Pass \_\_\_\_\_ Fail Notes \_\_\_\_\_ Method \_\_\_ Visual \_\_\_\_\_

**2. Sump pumps** are designed to capture surface or ground water that enters basements or crawl spaces and pump it away from the house. The basic sump system includes drain tile, a sump pump pit, a sump pump, a float or switch, and a drain line. Sump pumps should not be connected to the sanitary sewer.

\_\_\_\_\_ Pass \_\_\_\_\_ Fail Notes \_\_\_\_\_ Method \_\_\_\_\_

**COMPLIANCE INSPECTION CERTIFICATION**

*The undersigned hereby acknowledges the requirements in the City Code of Ordinance Chapter 51. All deficiencies discovered during the inspection shall be disclosed prior to closing and shall be corrected within six (6) months from closing. The seller or buyer shall provide proof to the City once the deficiencies are completed. The undersigned hereby certifies that the above information is true and correct to the best of their knowledge.*

Qualified Person's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Public Works Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(once inspection is completed)

