

Point of Sale (POS)
Inflow and Infiltration Compliance Inspection Report
(Sanitary Sewer Service Inspection Form)



Date of Inspection: _____

Seller/Realtor Information:

Owner Name(s): _____
 Owner Address: _____
 Realtor Name: _____
 Phone Number: _____
 Email Address: _____

Plumber/Inspector Information

Name: _____
 Company Name: _____
 Phone Number: _____
 Email Address: _____
 License Number: _____
 Video ID: _____
 Distance from cleanout to inside exterior wall (feet): _____

DISTANCE (FT)

CITY USE ONLY

PIPE CONDITION

0.0

start

☐ GOOD

cleanout to inside of basement wall

☐ FAIR

☐ POOR

CONNECTION @ MAIN

☐ GOOD

☐ FAIR

☐ POOR

ACTION

☐ PASS

☐ FAIL, REPAIR & RESUBMIT

*** Repair requirements**

Reviewed By: _____

Review Date: _____

- 1) Complete shaded areas below and submit to City of Austin for review.
- 2) The video needs to be clear, viewable and in good quality to complete a proper inspection.
A video that has the a blurry or obstructed lense or is underwater will not be accepted.
- 3) The video needs to be recorded in both the out and in direction.
- 4) The video needs to include the correct date stamped on the video screen.