

WASTEWATER COLLECTION SYSTEM INFORMATION REQUEST FORM

Please complete this form for each separate sewage collection system:

Wastewater System Owner: _____

Wastewater System Name: _____

Wastewater Treatment Plant VPDES Permit Number (If applicable): _____

Contact Name/Phone number/email: _____/_____/_____

Approximate Number of Sewer Service Connections: ___ Residential ___ Industrial ___ Commercial
 ___ Other Municipal Systems

How many sewer system overflows (SSO) has your system experienced in the past 12 months? _____

How many of these overflows are due to excessive infiltration / inflow? _____

How many of these overflows are due to line blockages or root intrusions? _____

Other permit violations in the past 2 years: _____

Approximate Sewer System Age: Oldest Area _____ Newest Area _____

What is the predominant maintenance issue experienced by your system? _____

What percentage of your collection system consists of terra cotta or concrete lines? _____

What percentage of your collection system consists of masonry brick manholes? _____

Do any of the areas of your system experience problems with capacity due to inadequately sized lines?

_____, if so, which areas? _____

What are the most significant system needs (line rehabilitation, pump station rehabilitation, manhole rehabilitation, infiltration/inflow remediation, increased system capacity, all the above, etc.)?

Is wastewater from any other municipal system collected and transported by this system? _____

If yes, please list below:

System	Average daily discharge (gpm) (past 12 months)

Is the system currently under a consent order with the DEQ because of permit violations? _____

If so, please briefly describe the issues and attach a copy of the Consent Order. _____

Does any part of the system currently have a moratorium on additional connections? _____

If so, which area(s) and why? _____

Does your wastewater system discharge to any other system(s)? _____

If yes, please list below:

System	Average daily discharge (gpd) (past 12 months)

Does your wastewater system discharge directly to a treatment plant(s)? _____

If yes, please list below:

Treatment Plant	Average daily discharge (gpm) (past 12 months)

Please list the sewer pump stations within your collections system along with the requested information:

Pump Station	Pump Capacity (GPM)	Average daily discharge (GPD) (past 12 months)	Year Installed	Year of last major upgrade

Does the system have an existing Sewer Use Ordinance? _____

If so, does the ordinance address private side issues such as connections with roof gutters and sump pumps, lateral lines, etc.? _____

Please list any areas adjacent to the system that have requested sewer service.

For the time period January 2021 – December 2021 (12 consecutive months), please provide the following customer billing volumes:

- Total Number of Gallons Billed to Residential Customers _____
- Total Number of Gallons Billed to Non-Residential Customers _____

Please provide the following additional information:

- 1) Latest sewer system mapping, preferably in GIS format. If possible, please provide size and material type for each main line and force main.
- 2) Twelve months of flow data for each point of discharge from the system. [Use the attached form]
- 3) List of all reported sewer system overflows over the past 2 years with location.
- 4) List of all permit violations over the past 2 years.
- 5) If available, the Capital Improvements Plan (CIP) for the wastewater system.
- 6) If a CIP does not exist, please provide a detailed list of system needs.
- 7) Digital copies of any PER or SSES report completed regarding the existing system or proposed system extensions in the past 5 years.
- 8) Digital copies of any Asset Management Plan completed within the past 5 years.
Copy of current Sewer Rate Structure and date of last rate increase.
- 9) Existing sewer debt load and maturity date of outstanding loans.

SEWAGE COLLECTION SYSTEM

FLOW DATA REQUEST FORM

PLEASE COMPLETE THE TABLE BELOW FOR EACH SEWAGE COLLECTION SYSTEM

COLLECTION SYSTEM NAME _____

TOTAL NUMBER OF SEWER CUSTOMERS SERVED BY SYSTEM _____

MONTH	Total Gallons of Sewage Collected & Treated	Total Gallons of Sewer Usage Billed
January 2021	_____	_____
February	_____	_____
March	_____	_____
April	_____	_____
May	_____	_____
June	_____	_____
July	_____	_____
August	_____	_____
September	_____	_____
October	_____	_____
November	_____	_____
December	_____	_____