City of Petaluma CA

Sanitary Sewer Overflow and Backup Response Plan

Effective Date:
Revised Date:
Approved by: TJ Wood
Signature:
Date:

Prepared by David Patzer, DKF Solutions Group
707.373.9709 losscontrol@sbcglobal.net
Copyright © 2004-2008
### Sanitary Sewer Backup Packet BP

<table>
<thead>
<tr>
<th>Form</th>
<th>Form Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instructions and Chain of Custody</td>
<td>envelope label</td>
</tr>
<tr>
<td>Responding to a Sanitary Sewer Backup</td>
<td>BP-1</td>
</tr>
<tr>
<td>First Responder Form/Livability Assessment</td>
<td>-2</td>
</tr>
<tr>
<td>Hotel Selection Form (3-copy NCR)</td>
<td>-3</td>
</tr>
<tr>
<td>Customer Release—To Not Relocate (3-copy NCR)</td>
<td>-4</td>
</tr>
<tr>
<td>Building History Form</td>
<td>-5</td>
</tr>
<tr>
<td>Sewer Overflow Report</td>
<td>-6</td>
</tr>
<tr>
<td>Claims Submittal Checklist</td>
<td>-7</td>
</tr>
<tr>
<td>Customer Service Packet</td>
<td></td>
</tr>
<tr>
<td>Instructions</td>
<td>envelope</td>
</tr>
<tr>
<td>Customer Information</td>
<td>CS-1</td>
</tr>
<tr>
<td>Sewer Spill Reference Guide</td>
<td>pamphlet</td>
</tr>
<tr>
<td>Regulatory Notifications Packet</td>
<td></td>
</tr>
<tr>
<td>Instructions</td>
<td>envelope</td>
</tr>
<tr>
<td>Guide to Reporting to Regulatory Authorities</td>
<td>RN-1</td>
</tr>
<tr>
<td>Reporting website screen shots</td>
<td>-2</td>
</tr>
<tr>
<td>Fax Reporting Form: to Water Board</td>
<td>-3</td>
</tr>
<tr>
<td>Fax Reporting Form: to Local Health Agency</td>
<td>-4</td>
</tr>
<tr>
<td>Door Hanger</td>
<td>n/a</td>
</tr>
<tr>
<td>Sewer Spill Reference Guide</td>
<td>pamphlet</td>
</tr>
</tbody>
</table>

**Packet Assembly Instructions:**

In order to properly gather and distribute all the necessary information at the scene of a sewer backup, it is recommended the Sanitary Sewer Backup Packets be created and placed in all field vehicles that may be used to respond to a sewer backup. The following instructions will guide you through the assembly of the Packet.

1. Determine how many packets you wish to assemble.
2. Obtain the same number of 10"x12" Tyvek (*water & tear resistant*) envelopes, and twice as many 6" x 9" envelopes.
3. Print the Customer Service instructions on the front of half of the 6" x 9" envelopes. Then place one copy of each of the Customer Service Envelope forms listed above in each envelope.
4. Print the Regulatory Notifications instructions on the front of half of the 6" x 9" envelopes. Then place one copy of each of the Regulatory Notifications Envelope forms listed above in each envelope.
5. Place the two small envelope packets and all other forms listed above into the Tyvek envelope.
6. Insert a door hanger and a Sewer Spill Reference Guide pamphlet into the Tyvek envelope.
7. Insert a new disposable camera into the Tyvek envelope.
8. Tape or otherwise secure to the front of each envelope a copy of the Packet instructions ("Read This First").
9. Place two staples through the top of the envelope.
10. Place at least one complete Packet in each field vehicle that may be used to respond to a sewer backup.

For pre-assembled packets contact DKF Solutions Group at 707.373.9709 or losscontrol@sbcglobal.net

© DKF Solutions Group 2004-2008 All rights reserved.
In the event of a **Sewer Backup** into a home/business

**READ THIS FIRST**

☐ Notify City Risk Claims Administrator ASAP: 707.778.4360

☐ If the backup is into a business: Immediately contact the Utilities Supervisor

☐ For any media requests: Contact the Managing Engineer (Wastewater) at 707.843.1326

---

**Instructions**

**Collections Crew**

1st: Open this envelope.

2nd: Follow the instructions on the card: “Responding to a Sanitary Sewer Backup.”

3rd: If customer is home, give them the Customer Service Packet and have them **initial** this envelope below:
   Customer acknowledgement of receipt of Customer Service Packet: __________

   If customer is not home, complete the Door Hanger and hang it on the customer’s door.

5th: Complete the Chain of Custody record (right) and forward this packet to the Streets Superintendent

---

**Utilities Supervisor**

1st: Open this envelope. Review forms.

2nd: Complete the Claims Submittal Checklist (enclosed)

3rd: Forward the Regulatory Notifications Packet to the person authorized to make required notifications (enter name and title of that individual to the right).

4th: Copy all items on the Claims Submittal Checklist for internal archiving purposes and forward the originals to the Risk Claims Administrator

---

**Risk Claims Administrator**

Refer to Claims Handling Procedure Summary

---

**Chain of Custody**

Print Name: __________________________

Initial: __________________________

Date: __________________________

Time: __________________________

---

Print Name: __________________________

Initial: __________________________

Date: __________________________

Time: __________________________

Regulatory Notif Packet given to:

Name: __________________________

Title: __________________________

---

City of Petaluma CA
Sanitary Sewer Overflow and Backup Response Plan

© DKF Solutions Group 2004-2008 All rights reserved.
Responding to a Sanitary Sewer Backup

**BP-1 Side A**

**Start Here**

**YES** Does the backup appear to be due to a failure in the City-owned/maintained sewer line?

**NO**

**Go to Field Guide – Mainline Clearing SOP**

**If customer is not home:**
- Complete Door Hanger and leave on customer's door

**If customer is home:**
1. Explain to customer that the blockage is in their lateral and that the City does not have legal authority to maintain or perform work on privately-owned laterals.
2. Recommend to customer they hire a contractor to clear their line.

**Has any sewage spilled outside?**

**YES**

Go to SSO Packet procedures. Complete and then return here.

**NO**

Go to Side B

**Has any sewage spilled outside into public areas?**

**YES**

1. Go to SSO Packet and complete procedures.
2. Document the service call according to City procedures and follow routing instructions as indicated on the front of the Sewer Backup Packet envelope.

**NO**

Document the service call according to City procedures and follow routing instructions as indicated on the front of the Sewer Backup Packet envelope.

© DKF Solutions Group 2004-2008 All rights reserved.
Fill out this form as completely as possible.
Ask customer if you may enter the home. If so, take photos of damaged and undamaged areas.

**TIME STAFF ARRIVED ON-SITE:**

DID CUSTOMER CALL CLEANING CONTRACTOR? □ Yes □ No

**IF YES,**

NAME OF CONTRACTOR:

CONTRACTOR TELEPHONE:

WHEN CALLED:

---

### SECTION A

<table>
<thead>
<tr>
<th>Date:</th>
<th>Time:</th>
<th>Employee Name:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Resident:</th>
<th>Property Managers:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Street Address:</th>
<th>Street Address:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City, State and Zip:</th>
<th>City, State and Zip:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Phone:</th>
<th>Phone:</th>
</tr>
</thead>
</table>

Is nearest upstream manhole visibly higher than the drain that overflowed? □ Yes □ No

**# OF PEOPLE LIVING AT RESIDENCE:**

Approximate Age of Home:  

# of Bathrooms:  

# of Rooms Affected:  

Approximate Amount of Spill (gallons):  

Approximate Time Sewage Has Been Sitting (hrs/days):  

How was Spill Volume Calculated?:

Numbers of Pictures Taken

<table>
<thead>
<tr>
<th>Digital or Film?</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Yes □ No □ Unknown</td>
</tr>
</tbody>
</table>

Does property have curbside cleanout? □ Yes □ No □ Unknown

Does the Customer have a backwater Prevention Device (BPD)? □ Yes □ No □ Unknown

If yes, was the BPD operational at the time of the overflow? □ Yes □ No □ Unknown

Have there ever been any previous spills at this location? □ Yes □ No □ Unknown

Has the resident had any plumbing work done recently? □ Yes □ No

If YES, please describe:

---

**GO TO SIDE B**

© DKF Solutions Group 2004-2008 All rights reserved.
SECTION B: LIVABILITY ASSESSMENT

Is there sufficient non-contaminated living space for residents to stay during cleaning?

Is it after 8pm or will the cleaning and disinfection be completed after 10pm?

NO

NO

Ask resident to vacate premises while area is cleaned & disinfected.

YES

YES

Is there a functioning and non-contaminated bathroom?

Any residents that:
- Are pregnant?
- Have severe allergies/asthma?
- Have respiratory problems?
- Have a compromised immune system?

YES

Is the area a childcare or extended care facility?

NO

YES

Is the food preparation area contaminated?

NO

STOP: Resident can stay in premises

1. Recommend to resident they stay at a hotel while the area is cleaned & disinfected
2. Review Hotel Selection Form with resident
3. Explain City will pay for first night of hotel lodging & that either the General Manager or the Risk Claims Administrator will discuss additional night's stay/food & other necessities with them directly.
4. Follow the instructions on the Hotel Authorization form

SECTION C: SANITARY SEWER LINE BLOCKAGE LOCATION

PLEASE CHECK THE BOX THAT DESCRIBES YOUR OBSERVATIONS

<table>
<thead>
<tr>
<th>Customer Cleanout Was:</th>
<th>Structure was:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Non-Existent</td>
</tr>
<tr>
<td>Non-Existent</td>
<td></td>
</tr>
<tr>
<td>Full</td>
<td></td>
</tr>
<tr>
<td>Empty</td>
<td></td>
</tr>
</tbody>
</table>

Recommended Follow-Up Action(s):

Place an X where the blockage occurred
Circle the areas where sewage overflowed/backsed

SECTION D: CLEANING CONTRACTOR

Company Name: 
Phone: 
Arrival Time: 
Comments:

Did sewage go under buildings? □ Yes □ No □ Unsure

Place completed form in Sewer Backup Envelope and follow routing instructions.

© DKF Solutions Group 2004-2008 All rights reserved.
INSTRUCTIONS TO EMPLOYEE:
1. Review this form with the customer and instruct them to read and select, in order of preference, which of the hotels below they wish to stay at.
2. During business hours contact the Risk Claims Administrator, or after hours contact the Utilities Manager, who will contact the selected hotel and use the City credit card to authorize one (1) night's lodging.
3. Explain to customer that additional nights and other incidentals will be addressed by the Risk Claims Administrator.
4. Instruct the customer that this emergency authorization is for LODGING ONLY - NO FOOD, MINIBAR, MOVIE, PHONE or Other Charges.
5. Have the customer sign the Acknowledgement section of this form.
6. Complete the voucher information and sign. Please note that an unsigned voucher will not be honored at the hotels.
7. Give the bottom copy of this form to the customer.

INSTRUCTIONS TO RESIDENT: City of Petaluma CA recommends that you temporarily relocate to one of the hotels listed below for your safety and convenience while your residence is being cleaned. Please note that this emergency authorization is granted under the following conditions:

1. The voucher authorizes payment of one (1) night's stay at one of the hotels listed below.
2. The voucher is good for room and tax ONLY. Phone, food, mini-bar and other incidental charges will be your responsibility.
3. Additional nights/other allowances/incidentals may be discussed by contacting City of Petaluma CA's Risk Claims Administrator at 707.776.3696 (office) or 707.975.3387 (cell).
4. Please bring a photo ID with you so that hotel staff can verify the voucher's authenticity.

CUSTOMER ACKNOWLEDGEMENT:
If we have read and understood the terms and conditions governing this offer of temporary relocation and agree to abide by them as described above.

Customer Name (please print): ____________________________
Customer Address: ____________________________________
Phone # where customer may be reached: ____________________________
Customer Signature: ____________________________ Date: __________

Good for one (1) night's stay on (date): ___________ Other guest names: ____________________________

Field Supervisor's Name: ____________________________ Phone Number: __________

<table>
<thead>
<tr>
<th>Hotel 1</th>
<th>Hotel 2</th>
<th>Hotel 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Petaluma Best Western</td>
<td>Days Inn</td>
<td>Quality Inn</td>
</tr>
<tr>
<td>Address: 200 S Mcdowell Blvd Petaluma CA</td>
<td>Address: 8141 Redwood Blvd Novato CA</td>
<td>Address: 5100 Montero Way Petaluma CA</td>
</tr>
<tr>
<td>Phone: (707) 763-0994</td>
<td>Phone: (415) 897-7111</td>
<td>Phone: (707) 664-1155</td>
</tr>
</tbody>
</table>

Hotel Staff: Please direct any questions regarding this voucher to ____________________________

Distribution: Top Copy to: City records  Middle Copy to: Risk Claims Administrator  Bottom Copy to Customer
© DKF Solutions Group 2004-2008 All rights reserved.
On ______________, a backup into structure occurred at ____________________________
(date) (address)

Property Owner: _____________________________________________________________

Resident: ________________________________________________________________

Due to a backup into the structure, the above listed property has sewage to be cleaned up/mitigated, which may also include remediation of part of the structure. It is recommended by City of Petaluma CA that the residents of the above listed property relocate until the cleanup/mitigation and any required remediation is completed City of Petaluma CA staff provided the information to the resident: “Your Responsibilities as a Private Owner.”

Resident(s) determined that they did not want to relocate and will remain in the structure.

PROPERTY OWNER/RESIDENT RELEASE OF LIABILITY AND ASSUMPTION OF RISK

I have decided that I do not want to relocate from the address listed above during any cleanup/mitigation and/or remediation. I have received all the materials listed above from City of Petaluma CA. I understand that there are inherent risks with exposure to sewage and the associated cleanup/mitigation and/or remediation process due to the potential for coming into contact with sewage through breathing, swallowing, or cuts and abrasions in the skin that may cause pathogens. Risks may range from (1) minor temporary discomfort and illness, (2) more serious illness that may require medical treatment, (3) very serious illness that could result in life threatening conditions and including death. I know, understand, and appreciate these and other risks inherent in being exposed to sewage. I knowingly assume all such risks which may result from my own actions, inactions, or negligence of others, and the condition of the structure during the cleanup/mitigation and/or remediation process.

I, for myself, my heirs, personal representative or assigns, hereby release, discharge and hold harmless City of Petaluma CA, its respective Boards, officers, employees, agents and contractors from any and all claims, actions, causes of action, demands, rights, damages, costs, loss of service, expenses, legal expenses, including subrogation or liens or damage caused by or related to my remaining in the structure while cleanup/mitigation and/or remediation is performed as a result of the backup.

Resident Signature __________________________________________________________

Date ____________________________

City of Petaluma CA Witness

Comments: ___________________________________________________________________

Distribution Instructions – Top Copy to City records; Middle Copy to Risk Claims Administrator; Bottom Copy to Customer

© DKF Solutions Group 2004-2008 All rights reserved.
<table>
<thead>
<tr>
<th><strong>TO BE COMPLETED BY:</strong> Utilities Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PERSON COMPLETING THIS FORM:</strong></td>
</tr>
<tr>
<td><strong>RESIDENT NAME:</strong></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>DATE OF OVERFLOW:</strong></td>
</tr>
<tr>
<td><strong>WERE RESIDENTS RELOCATED TO A HOTEL?</strong></td>
</tr>
<tr>
<td><strong>IS RESIDENT THE OWNER?</strong></td>
</tr>
<tr>
<td><strong>If &quot;NO&quot;, provide following for property owner:</strong></td>
</tr>
<tr>
<td><strong>STREET ADDRESS:</strong></td>
</tr>
<tr>
<td><strong>CITY, STATE AND ZIP:</strong></td>
</tr>
<tr>
<td><strong>PHONE:</strong></td>
</tr>
<tr>
<td><strong>NAME OF CLEANING CONTRACTOR:</strong></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>WAS PROPERTY FINISHED FLOOR ELEVATION DETERMINED?</strong></td>
</tr>
<tr>
<td><strong>IS FINISHED FLOOR 12&quot; OR MORE BELOW NEAREST UPSTREAM MANHOLE?</strong></td>
</tr>
<tr>
<td><strong>WAS A BPD INSTALLED ON PROPERTY?</strong></td>
</tr>
<tr>
<td><strong>WAS BPD FUNCTIONING?</strong></td>
</tr>
<tr>
<td><strong>WAS LATERAL TV'd?</strong></td>
</tr>
<tr>
<td><strong>include copy of Lateral TV report (BP-10)</strong></td>
</tr>
<tr>
<td><strong>IS THIS PROPERTY REQUIRED TO HAVE A BPD INSTALLED BY ORDINANCE?</strong></td>
</tr>
<tr>
<td><strong>REPAIRED (date &amp; describe repairs):</strong></td>
</tr>
<tr>
<td><strong>SUSPECTED CAUSE OF OVERFLOW:</strong></td>
</tr>
</tbody>
</table>

Place completed form in Sewer Backup Envelope and follow routing instructions.

© DKF Solutions Group 2004-2008 All rights reserved.
City of Petaluma CA
SSO/Backup Response Plan

Sanitary Sewer Backup Packet
Sanitary Sewer Overflow Report
BP-6
Side A

This Report is (check one): ☐ Preliminary ☐ Final ☐ Revised Final

A. SPILL LOCATION

Spill Location Name:

GPS Latitude Coordinates:

Street Name and Number:

Nearest Cross Street

City:

Zip Code:

County:

Spill Location Description:

B. SPILL DESCRIPTION

Spill Appearance Point: ☐ Building/Structure ☐ Force Main ☐ Gravity Sewer ☐ Other Sewer System Structure ☐ Pump Station

Manhole- Structure ID#: ☐ Other (specify):

Did the spill reach a drainage channel and/or surface water? ☐ Yes ☐ No

If the spill reached a storm sewer, was it fully captured and returned to the Sanitary Sewer? ☐ Yes ☐ No

Was this spill from a private service lateral? ☐ Yes ☐ No

If YES, name of responsible party:

Final Spill Destination: ☐ Beach ☐ Building structure ☐ Other paved surface ☐ Storm drain: ☐ Street/curb& gutter

☐ Surface water ☐ Unpaved surface ☐ Other (specify):

Estimated spill volume (in gallons):

Method calculated:

Est. volume of SSO recovered (gal):

Were photos taken? ☐ No ☐ Yes – how many?

Estimated volume of spill reaching surface water, drainage channel, or not recovered from a storm drain (gal):

C. SPILL OCCURRING TIME

SSO Reported to:

SSO Reported by:

Phone:

Estimated spill start date and time:

Date and time spill reported to sewer crew:

Date and time sewer crew arrived:

Estimated spill end date and time:

Weather conditions prior 72 hours: ☐ Sunny Weather ☐ Cloudy Weather ☐ Measurable Rain ☐ Rain for Several Days

D. CAUSE OF SPILL

SSO cause (check all that apply):

☐ Debris/Blockage ☐ Flow exceeded capacity ☐ Grease ☐ Operator error ☐ Roots

☐ Pipe problem/failure ☐ Pump station failure ☐ Rainfall exceeded design ☐ Vandalism ☐ Inflow/infiltration

☐ Animal carcass ☐ Electrical power failure ☐ Bypass ☐ Debris from laterals ☐ Construction Debris

☐ Other (specify):

If SSO is caused by a private service lateral, please specify: This is the ☐ Owner ☐ Tenant ☐ Manager

Property contact:

Contact telephone:

If SSO is caused by wet weather, choose size of storm: ☐ 1-yr ☐ 2-yr ☐ 5-yr ☐ 10-yr ☐ 50-yr ☐ 100-yr ☐ >100-yr ☐ Unknown

Diameter (in inches) of pipe at point of blockage/spill cause (if applicable):

Sewer pipe material at point of blockage/spill cause (if applicable):

Description of terrain surrounding point of blockage/spill cause: ☐ Flat ☐ Mixed ☐ Steep

E. SPILL RESPONSE

Spill response activities (check all that apply):

☐ Cleaned up ☐ Contained all/portion of spill ☐ TV inspection ☐ Restored flow

☑ Returned all/portion of spill to sanitary sewer ☐ Other (specify):

Spill response completed (date & time):

Name of impacted waters (if applicable):

Visual inspection result of impacted waters (if applicable):

Any fish killed? ☐ Yes ☐ No

Any ongoing investigation? ☐ Yes ☐ No

Name of impacted beach (if applicable):

Were health warnings posted? ☐ Yes ☐ No

Health warning/beach closure posting/details:

Were samples of impacted waters collected? ☐ Yes ☐ No

If YES, select the analyses: ☐ DO ☐ Ammonia ☐ Bacti ☐ Other

Recommended corrective actions:

☐ Add sewer to PM Program ☐ Adjust PM schedule ☐ Adjust PM method

☑ Rehab sewer ☐ Replace sewer ☐ Enforcement action against FOG source ☐ Other (specify):

F. NOTIFICATION DETAILS

OES contacted date and time (if applicable):

OES Control Number (if applicable): Spoke to:

GO TO SIDE B

© DKF Solutions Group 2004-2008 All rights reserved.
REGULATORY NOTIFICATIONS START HERE

YES

Is the Estimated Volume > 1,000 gallons?

NO

YES

Were receiving water samples collected or is there evidence of a fish kill?

NO

YES

Did human contact occur, or did the spill impact an area where the public gathers?

NO

YES

Was the SSO discharged to a storm drain, arroyo or drainage channel?

NO

Forward this completed form and all other documentation and pictures to the Utilities Supervisor

Immediately contact one of the following and request they make notifications as indicated in the Regulatory Notifications Packet

<table>
<thead>
<tr>
<th>PERSON</th>
<th>CELL PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utilities Manager</td>
<td>707.481.6067</td>
</tr>
<tr>
<td>Managing Engineer (Wastewater)</td>
<td>707.843.1326</td>
</tr>
<tr>
<td>Director of Water Resources and Conservation</td>
<td>707.217.9698</td>
</tr>
<tr>
<td>Standby Operator is authorized to make 2 hour notifications if none of the above are available</td>
<td></td>
</tr>
</tbody>
</table>

RECOMMENDED FOLLOW-UP ACTIONS TO PREVENT FUTURE OCCURRENCES

CURRENT PM FREQUENCY: |

DATE OF LAST PM: |

RECOMMENDED ACTIONS:  □ TV □ REPAIR LINE SEGMENT □ OTHER (describe): □ RE-RUN □ CHANGE CLEANING SCHEDULE □ REPLACE LINE SEGMENT

NOTES:

Place completed form in Sewer Backup Envelope and follow routing instructions.

© DKF Solutions Group 2004-2008 All rights reserved.
Utilities Supervisor

1. Complete the following information:
   
   Title:
   
   Name:
   
   Phone:
   
   Today's Date:
   
2. Complete the Building History Form

3. Copy the items listed below and retain for internal archiving purposes.

4. Place the originals back in the Backup Response Envelope and forward envelope with original forms to Risk Claims Administrator:
   
   Form BP-2: First Responder Form/Livability Assessment
   Form BP-3: Hotel Selection Form
   Form BP-4: Customer Release – To Not Relocate
   Form BP-5: Building History Form
   Form BP-6: Sanitary Sewer Overflow Report
   Form BP-7: Claims Submittal Checklist (this form)
   
   All photos taken (hardcopy or electronic)
   
   Any other information you feel is important in this claim

Utilities Manager or Other Reporting Authority

Go to Regulatory Notifications Packet and make all appropriate notifications (i.e. State Water Resources Board)

Risk Claims Administrator

1. Verify claims packet is complete.

2. Notify:

   Risk Claims Administrator
   11 English Street
   Petaluma CA 94952
   Telephone: 707.778.4360
   Fax: 707.778.4554
Customer Service Packet

Contents:

Form
Customer Information Letter..........................CS-1
Sewer Spill Reference Guide ............................pamphlet

Instructions:
1. Review the Customer Information letter to determine actions that need to be taken immediately including:
   a. Turn off the HVAC system if necessary.
   b. Block floor vents to prevent sewage from entering if necessary.

This packet provided by:

Name: ___________________________
Title: ___________________________
Telephone: _______________________ 

If you have any questions contact:
Risk Claims Administrator at 707.776.3696 (office)
  or 707.975.3387 (cell)

Print on 6" x 9" envelope

© DKF Solutions Group 2004-2008 All rights reserved.
Dear Property Owner:

We recognize that sewer back flow incidents can be stressful. The City of Petaluma has prepared this brief set of instructions to help you minimize the impact of the loss by responding promptly to the situation.

The City of Petaluma is not responsible for clean up charges or damages caused by blockages in the property owner's sewer line or caused by code violations. At this time, the City is investigating the cause of the loss and does not assume liability for damages. However, if our investigation determines the City is responsible for this incident, the costs you incur for reasonable and necessary clean up will be included in the settlement of your claim. Regardless of whether you or the City is responsible for the loss, it is up to you to arrange for the repair of your property and to present a claim for consideration.

You or the property owner should immediately contact a firm for clean-up of the affected areas. If you do not know of a company to call for service, the following 24-hour emergency restoration companies are available to respond:

- TMB: (707) 252-5480
- Restoration Elements: (800) 739-2031
- Britannia Cal Pacific: (650) 742-6490

- ServiceMaster Disaster Restoration: (800) 439-8833
- Four-Star Cleaning and Restoration: (800) 255-3333
- Ideal Drying: (800) 379-6881

*This list is provided as a resource only. The City does not require or endorse the use of any of these firms. This list is not to be construed as exclusive, comprehensive or limiting in any way. Qualified contractors can be found in the Yellow Pages under "Water Damage Restoration" or "Fire & Water Damage Restoration". However, be sure you hire a firm with experience in sewer backups and enough resources to get the job done quickly.

If you need to temporarily relocate while your home is being cleaned, please discuss the necessary arrangements with the responding crew. The Risk Claims Administrator has the responsibility for processing any claims for damages that are submitted. If you wish to discuss this matter, or submit a claim for damages, please contact the Risk Claims Administrator at 707.776.3696 (office) or 707.975.3387 (cell).

What you need to do now:

The City of Petaluma CA has prepared this brief set of instructions to help you minimize the impact of the loss by responding promptly to the situation.

- Do not attempt to clean the area yourself, let the cleaning and restoration company handle this.
- Keep people and pets away from the affected area(s).
- Turn off heating/air conditioning systems.
- Do not remove items from the area – the cleaning and restoration company will handle this.
- If you had recent plumbing work, contact your plumber or contractor and inform them of this incident.
- If you intend to file a claim, do so as soon as practical – The California Government Code, Sections 900 - 960, requires the filing of a written claim and outlines specific time lines and notice procedures that must be used in order to have a claim considered.

© DKF Solutions Group 2004-2008 All rights reserved.
How a Sewer System Works

A property owner’s sewer pipes are called service laterals and are connected to larger local main and regional trunk lines.

Service laterals run from the connection at the home to the connection with the public sewer. These laterals are the responsibility of the property owner and must be maintained by the property owner.

Who is Responsible for Sewer Repairs and Maintenance?

City of Petaluma CA is responsible for:
- Operating and maintaining local sewer lines
- Protecting City property & streets, the local storm drain system, sewage collection system and other public areas.
- Collecting, treating and disposing of wastewater.

You as the property owner are responsible for maintaining and repairing your service laterals (sewer pipes). Service laterals run from the connection at the home to the connection with the public sewer.

If you have a sewage spill from your private sewer line, contact:

City of Petaluma CA
707.778.4546 (Business Hours)
707.778.4546 (After Hours)
Message provides instructions on how to contact On-Call Operator

Sonoma County Environmental Health Department
707.565.5555
California Health and Safety Code, Sections 5410-5416 requires:
- No person shall discharge raw or treated sewage or other waste in a manner that results in contamination, pollution, or a nuisance.
- Any person who causes or permits a sewage discharge to any state waters:
  - Must immediately notify the local health agency of the discharge.
  - Shall reimburse the local health agency for services that protect the public's health and safety.
  - Who fails to provide the required notice to the local health agency is guilty of a misdemeanor and shall be punished by a fine (between $500–$1,000) and/or imprisonment for less than one year.

San Francisco Regional Water Quality Control Board
510.622.2300
Requires the prevention, mitigation, response to, and reporting of sewage spills.

California Office of Emergency Services
800.852.7550
California Water Code, Article 4, Chapter 4, Sections 13268-13271 & California Code of Regulations, Title 23, Division 3, Chapter 9.2, Article 2, Sections 2250-2260 require:
- Any person who causes or permits sewage in excess of 1,000 gallons to be discharged to state waters shall immediately notify the Office of Emergency Services.
- Any person who fails to provide the notice required by this section is guilty of a misdemeanor and shall be punished by a fine (less than $20,000) and/or imprisonment for not more than one year.

Copyright © 2004-2008
David Petzer, DKF Solutions Group
All Rights Reserved
Instructions to First Responder:

1. Hand this packet to the person responsible for and authorized to make regulatory notifications.

2. Enter name and title of that individual on the front of the Sewer Backup or Sewer Overflow Response Envelope.

Instructions for Reporting Authority:

1. Open this packet

2. Refer to the Guide to Reporting to Regulatory Authorities for instructions.

Contents:

<table>
<thead>
<tr>
<th>Form</th>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guide To Reporting To Regulatory Authorities</td>
<td>RN-1</td>
</tr>
<tr>
<td>CIWQS Website Screenshot</td>
<td>-2</td>
</tr>
<tr>
<td>Fax Reporting Form: to Water Board</td>
<td>-3</td>
</tr>
<tr>
<td>Fax Reporting Form: to Local Health Agency</td>
<td>-4</td>
</tr>
</tbody>
</table>

Print on 6"x9" envelope
<table>
<thead>
<tr>
<th>IF THE BACKUP or SSO: (regardless of source)</th>
<th>OES</th>
<th>SFRWQCB</th>
<th>SWRCB</th>
<th>Sonoma County Environmental Health Department</th>
<th>Fish &amp; Game</th>
</tr>
</thead>
<tbody>
<tr>
<td>≥ 1,000 gal</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Imminently &amp; substantially endangered human health</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Killed Fish</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Results in a discharge into a drainage channel or a surface water</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Was discharged to a storm drain &amp; not fully recovered, regardless of volume</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Reached Receiving Waters</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Required Sampling of Receiving Waters</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Required Posting of Public Warning Signs</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Was caused by problems with a private service lateral</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>All SSOs &amp; Backups</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

**Persons authorized to perform regulatory reporting:**
- Utilities Manager
- Managing Engineer (Wastewater)
- Director of Water Resources and Conservation
- Standby Employee is authorized to make 2-hour notifications if none of the above are available

**Legally Responsible Official (LRO) authorized to electronically sign SWRCB online SSO reports:**
Name: Director of Water Resources and Conservation
Telephone: 707.778.4487
Cell Phone: 707.217.9696

- Red = Immediate Reporting Required WITHIN 2 HOURS AND Within 24 hours submit certification to the Regional Water Quality Control Board that OES and the County Health Department have been notified of the discharge.
- Yellow = Immediate Reporting Required
- Orange = Reporting Required Within 24 Hours
- Blue = Optional Reporting Within 30 Days
- Green = Reporting Required Within 30 Days after the end of the month in which the SSO occurs

© DKF Solutions Group 2004-2008 All rights reserved.
San Francisco Regional Water Quality Control Board
SSO Two (2) Hour Notification/24-Hour Certification.
This does not replace the requirement days of the spill
to report CIWQS-SSO eReporting Program within 3 days of the spill.
OES Telephone Number: 1-800-852-7550

Important: * = Required Field

1. OES Control number* _____________________________

2. Method of 2hr/24hr Report to Regional Board. Check all that apply.
   _ Fax (510-622-2460) _ Voice Mail (510-622-5633) _ Staff Contacted: _____________________________ (Staff name)

3. Date Reported: * ___ / ___ / _______ (mm/dd/yy)

4. Time Reported: * _____ : ______ (hh:mm)

5. Reported By: * __________________________________________ Phone Number: * (______) _______ - ______

6. Reporting Sewer Agency: * ________________________________

7. Responsible Sewer Agency: * ______________________________

8. Overflow Street Location/Comments - please indicate the spill cause, sources, and final spill destination entered:* (e.g., drainage channel/surface water entered) ______________________________________________________
   ______________________________________________________

   City: * ___________________________ ZIP Code: * ______________________ County: * ______________________

SSO Description if information is not available, please input 00:00 for time and 00 for gallons

9. Overflow Start Estimate:
   Date:* ___ / ___ / _______ (mm/dd/yy)
   Time:* _____ : ______ (hh:mm)

10. Overflow End: Date:* ___ / ___ / _______ (mm/dd/yy)
    Date:* ___ / ___ / _______ (mm/dd/yy)
    Time:* _____ : ______ (hh:mm)

11. Estimated Overflow Flow Rate: * _____________________________ (gallons per minute)

12. Estimated Total Overflow Volume: * _____________________________ (gallons)

13. Overflow Volume Recovered: * _____________________________ (gallons)

14. Person Completed:* ________________________________ Date: ___ / ___ / _______ (mm/dd/yy)
    Official Title: * ________________________________ Phone Number * ________________________________
    Email:* ______________________________________

15. When Did You Notify Your Local Health Department?:
   * Date: ___ / ___ / _______ (mm/dd/yy)
   * Time: _______ : ______ (hh:mm)
**NOTICE OF SANITARY SEWER OVERFLOW**

In accordance with California Health and Safety Code Section 5410 et. seq.

<table>
<thead>
<tr>
<th>Date:</th>
<th>Time spill was noticed:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location:</td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td></td>
</tr>
</tbody>
</table>

Estimated Volume: ______ gallons

Actions:

- [ ] Cleanup
- [ ] Containment
- [ ] Repair needed: Est. Date of __________

Notifications:

- [ ] Notified Regional Water Quality Control Board
- [ ] Notified Office of Emergency Services
<table>
<thead>
<tr>
<th>Service/Vendor</th>
<th>Call:</th>
<th>At:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equipment Rental</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Backhoe/Excavation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pump Repair</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Environmental/HazMat</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Function</td>
<td>Contact</td>
<td>Telephone</td>
</tr>
<tr>
<td>----------</td>
<td>---------</td>
<td>-----------</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Use the chart below to identify reporting requirements. See Side B for reporting procedures and contact information.

<table>
<thead>
<tr>
<th>IF THE BACKUP or SSO: (regardless of source)</th>
<th>OES</th>
<th>SFRWQCB</th>
<th>SWRCB</th>
<th>Sonoma County Environmental Health Department</th>
<th>Fish &amp; Game</th>
</tr>
</thead>
<tbody>
<tr>
<td>≥ 1,000 gal</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Imminently &amp; substantially endangered human health</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Killed Fish</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Results in a discharge into a drainage channel or a surface water</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Was discharged to a storm drain &amp; not fully recovered, regardless of volume</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Reached Receiving Waters</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Required Sampling of Receiving Waters</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Required Posting of Public Warning Signs</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Was caused by problems with a private service lateral</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>All SSOs &amp; Backups</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

Persons authorized to perform regulatory reporting:
- Utilities Manager
- Managing Engineer (Wastewater)
- Director of Water Resources and Conservation
- Standby Employee is authorized to make 2-hour notifications if none of the above are available

Legally Responsible Official (LRO) authorized to electronically sign SWRCB online SSO reports:
Name: Director of Water Resources and Conservation
Telephone: 707.778.4487
Cell Phone: 707.217.9698

≡ Immediate Reporting Required WITHIN 2 HOURS AND Within 24 hours submit certification to the Regional Water Quality Control Board that OES and the County Health Department have been notified of the discharge.
≡ Immediate Reporting Required
≡ Reporting Required Within 24 Hours
≡ Optional Reporting Within 30 Days
≡ Reporting Required Within 30 Days after the end of the month in which the SSO occurs
<table>
<thead>
<tr>
<th>Regulatory Agency</th>
<th>Contact Information</th>
<th>Report if the Backup or Overflow meets any of the following conditions</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governor's Office of Emergency Services</td>
<td>Telephone: 800-852-7550</td>
<td>• Results in a discharge into a drainage channel or a surface water</td>
<td>Immediate Reporting Required (within 2 hours)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• 1,000 gallons, and/or</td>
<td>Immediate Reporting Required</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Imminently &amp; substantially endangered human health, and/or</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Killed Fish</td>
<td></td>
</tr>
<tr>
<td>Regional Water Quality Control Board: SFRWQCB</td>
<td>Website: <a href="https://www.r2esrm.net/so/login2.asp">https://www.r2esrm.net/so/login2.asp</a></td>
<td>• Results in a discharge into a drainage channel or a surface water</td>
<td>Immediate Reporting Required (within 2 hours)</td>
</tr>
<tr>
<td></td>
<td>Main Telephone: 510.622.2300</td>
<td>• 1,000 gallons, and/or</td>
<td>Immediate Reporting Required</td>
</tr>
<tr>
<td></td>
<td>Main Fax: 510.622.2460</td>
<td>• Imminently &amp; substantially endangered human health, and/or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>City Contact: Tom Yin</td>
<td>• Killed Fish</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Telephone: 510.622.2418</td>
<td>• Reached Receiving Waters, and/or</td>
<td>Reporting Required Within 24 Hours</td>
</tr>
<tr>
<td></td>
<td>Fax: 510.622.2418</td>
<td>• Required Sampling of Receiving Waters, and/or</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Required Posting of Public Warning Signs</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Was caused by problems with a private service lateral</td>
<td>Optional Reporting Within 30 Days</td>
</tr>
<tr>
<td>State Water Resources Control Board</td>
<td>Website: <a href="http://www.swrcb.ca.gov/kiwqs">http://www.swrcb.ca.gov/kiwqs</a> (see RN-2 for screen shot)</td>
<td>• 1,000 gallons, and/or</td>
<td>Immediate Reporting Required</td>
</tr>
<tr>
<td></td>
<td>Note: All electronic reports must be certified by the Legally Responsible Official: Chief Plant Operator</td>
<td>• Imminently &amp; substantially endangered human health, and/or</td>
<td>If you leave any requested information blank, then you must return within 15 days and complete</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Killed Fish</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Discharged to a storm drain &amp; not fully recovered (regardless of volume), and/or</td>
<td>Reporting Required Within 30 Days after the end of the month in which the SSO occurs</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Reached Receiving Waters, and/or</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Required Sampling of Receiving Waters</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• All SSOs &amp; Backups</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Was caused by problems with a private service lateral</td>
<td>Optional Reporting Within 30 Days</td>
</tr>
<tr>
<td>County Health Department</td>
<td>Telephone: 707.565.6565</td>
<td>• Results in a discharge into a drainage channel or a surface water</td>
<td>Immediate Reporting Required (within 2 hours)</td>
</tr>
<tr>
<td>Sonoma County Environmental Health Department</td>
<td>Fax: 707.565.6525</td>
<td>• 1,000 gallons, and/or</td>
<td>Immediate Reporting Required</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Imminently &amp; substantially endangered human health, and/or</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Killed Fish</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Discharged to a storm drain &amp; not fully recovered (regardless of volume), and/or</td>
<td>Reporting Required Within 24 Hours</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Reached Receiving Waters, and/or</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Required Sampling of Receiving Waters, and/or</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Required Posting of Public Warning Signs</td>
<td></td>
</tr>
<tr>
<td>CA Dept. of Fish &amp; Game Spill Prevention &amp; Response</td>
<td>24-Hour Dispatch: (916) 445-0380</td>
<td>• Killed Fish, and/or</td>
<td>Immediate Reporting Required</td>
</tr>
<tr>
<td></td>
<td>Press “2” to report a pollution incident</td>
<td>• Reached Receiving Waters, and/or</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Required Sampling of Receiving Waters</td>
<td></td>
</tr>
</tbody>
</table>
San Francisco Regional Water Quality Control Board
SSO Two (2) Hour Notification/24-Hour Certification.
This does not replace the requirement days of the spill
to report CIWQS-SSO eReporting Program within 3 days of the spill.
OES Telephone Number: 1-800-852-7550

Important: * = Required Field

1. OES Control number* ____________________________

2. Method of 2hr/24hr Report to Regional Board. Check all that apply.
   _ Fax (510-622-2460)   _ Voice Mail (510-622-5633)   _ Staff Contacted: ____________________________ (Staff name)

3. Date Reported: * ______/____/______ (mm/dd/yyyy)

4. Time Reported: * ______:______ (hh:mm)

5. Reported By: * ____________________________ Phone Number: * (______)______-________

6. Reporting Sewer Agency: * ____________________________

7. Responsible Sewer Agency: * ____________________________

8. Overflow Street Location/Comments -please indicate the spill cause, sources, and final spill destination
   entered:* (e.g., drainage channel/surface water entered) ____________________________

   City: * ____________________________ ZIP Code: * ____________________________ County: * ____________________________

SSO Description  if information is not available, please input 00:00 for time and 00 for gallons

9. Overflow Start Estimate: Date:* ______/____/______ (mm/dd/yyyy)
   Time:* ______:______ (hh:mm)

10. Overflow End: Date:* ______/____/______ (mm/dd/yyyy)
    Time:* ______:______ (hh:mm)

11. Estimated Overflow Flow Rate: * ____________________________ (gallons per minute)

12. Estimated Total Overflow Volume:* ____________________________ (gallons)

13. Overflow Volume Recovered:* ____________________________ (gallons)

14. Person Completed:* ____________________________ Date: ______/____/______ (mm/dd/yyyy)
    Official Title: * ____________________________ Phone Number * ____________________________
    Email:* ____________________________

15. When Did You Notify Your Local Health Department?:  * Date: ______/____/______ (mm/dd/yyyy)
    * Time: ______:______ (hh:mm)

© DKF Solutions Group 2004-2008 All rights reserved.
NOTICE OF SANITARY SEWER OVERFLOW
In accordance with California Health and Safety Code Section 5410 et. seq.

Date: ________________ Time spill was noticed: ________________

Location: ______________________________________________________

City: ___________________________________________________________

Estimated Volume: ________________ gallons

Actions:
☐ Cleanup
☐ Containment
☐ Repair needed: Est. Date of ______________________

Notifications:
☐ Notified Regional Water Quality Control Board
☐ Notified Office of Emergency Services
**City of Petaluma CA**  
SSO/Backup Response Plan  

<table>
<thead>
<tr>
<th>Regulatory Notifications Packet</th>
</tr>
</thead>
</table>

**Instructions to First Responder:**

1. Hand this packet to the person responsible for and authorized to make regulatory notifications.

2. Enter name and title of that individual on the front of the Sewer Backup or Sewer Overflow Response Envelope.

**Instructions for Reporting Authority:**

1. Open this packet

2. Refer to the Guide to Reporting to Regulatory Authorities for instructions.

**Contents:**

<table>
<thead>
<tr>
<th>Form</th>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guide To Reporting To Regulatory Authorities</td>
<td>RN-1</td>
</tr>
<tr>
<td>CIWQS Website Screenshot</td>
<td>-2</td>
</tr>
<tr>
<td>Fax Reporting Form: to Water Board</td>
<td>-3</td>
</tr>
<tr>
<td>Fax Reporting Form: to Local Health Agency</td>
<td>-4</td>
</tr>
</tbody>
</table>

Print on 6"x9" envelope

© DKF Solutions Group 2004-2008 All rights reserved.
City of Petaluma, CA

Sanitary Sewer Overflow and Backup Response Plan

Field Guide

Prepared by David Patzer, DKF Solutions Group
707.373.9709 losscontrol@sbcglobal.net
Copyright © 2004-2008
What do you need?                          Then go to...

Customer Relations Practices................................. FG-1
How to Use a Hydroflusher to Clear a Line Blockage ................. -2
Containment Procedures ......................................... -3

Flow Volume Estimation Procedures
   Contained Volume............................................ FG-4.1
   Contained in Roadway Gutter ............................. -4.2
   Duration and Flow Rate ................................... -4.3

Bypass Pump Selection Tables
   0-25 Feet Total Lift.......................................... FG-5.1
   25-50 Feet Total Lift........................................ -5.2

Determining Flow Volume
   Flow from a Manhole......................................... FG-6.1
   Table 1: Manhole Cover in Place.......................... -6.2
   Table 1 Formula/Drawing.................................. -6.3
   Table 2: Manhole Cover Removed......................... -6.4
   Table 2 Formula/Drawing.................................. -6.5
   Table 3: Out of Manhole Pick Hole....................... -6.6
   Table 3 Formula/Drawing.................................. -6.7
CUSTOMER RELATIONS
It is important for employees to communicate effectively with customers, especially in sewage backup situations. How we communicate - on the phone, in writing, or in person - is how we are perceived. Good communication with the homeowner results in greater confidence in our ability to address the problem satisfactorily, less chance of having the homeowner prolong the claims process, and less chance of him/her exaggerating the damage done to their property.

As a representative of your agency, you will occasionally have to deal with an irate homeowner. A sewer backup is a stressful event and even a reasonable homeowner can become irate should he/she perceive us as being indifferent, uncaring, unresponsive, or incompetent.

Although sometimes difficult, effective management of a sewage backup situation is critical. If it is not managed well, the situation can end up in a costly prolonged process with the homeowner. We want the homeowner to feel assured that we are responsive and the homeowner's best interest is a top priority.

A Few Communication Tips

1. Give the homeowner ample time to explain the situation or to vent. Show interest in what the homeowner has to say, no matter how many times you have heard it before, or how well you understand the problem.

2. As soon as possible, let the customer know that you will determine if the source of the sewer backup is in the sewer main and, if it is, will have it corrected as quickly as you can.

3. Acknowledge the homeowner's concerns. For example, if the homeowner seems angry or worried about property damage, say something like, "I understand you're concerned about the possible damage to your property, but a professional cleanup crew can restore the area, and if it is determined that the agency is at fault, the property owner has the right to file a claim for any reasonable repairs or losses resulting from this incident."

4. Express understanding and empathy for any inconveniences caused by the incident, but do not admit fault.

5. As much as possible, keep the homeowner informed on what is being done and will be done to correct the problem.

6. Keep focused on getting the job done in a very professional manner. Focus on the problem without unnecessary small talk with the homeowner.

7. Don't find fault or lay blame on anyone.
FOLLOW ALL REQUIRED SAFETY PROCEDURES!
- Ensure all employees are equipped and use all appropriate Personal Protective Equipment (PPE)
- Ensure all necessary traffic controls are in place
- Ensure all safety program requirements are observed (i.e. Confined Space, Manhole Hazards, Respiratory Protection, etc)

Check up & downstream manholes to identify the location of the blockage

**STEP 1 – SETUP**
- Position vehicle/sewer-cleaning equipment at downstream manhole from blockage. On steep lines where the downstream manholes are less than 5 feet deep, necessary precautions to prevent secondary overflows at downstream manholes must be taken. Form a containment barricade near the downstream manhole with use of sandbags, etc.
- Position the water jet over the 1st empty manhole below the blockage
- Attach a leader hose (a hose of a different color) to the regular hose – this serves as a benchmark for insertion & retrieval (NOTE: A leader hose helps prevent the hose from exiting the pipe prematurely & causing injury!)
- Select a PENETRATING nozzle with a small angle (i.e. 15-degrees) for blockages
- Install a nozzle extension between the end of the hose & the nozzle to prevent the nozzle and hose from turning up a service lateral
  - IF USING A ROLLER GUIDE: Lower it into the manhole & lock it into place
  - IF USING A TIGER TAIL: Insert the jet hose through it & tie the device in place to stabilize it
- Lower the hose, nozzle extension & nozzle into the manhole & into the pipe invert
  - IF USING A ROLLER GUIDE: Insert the hose as far as possible into the pipe before using the lower roller guide & engaging the water pressure – 3-feet is minimum!

**STEP 2 – HYDROFLUSHING**
- Run the line with just enough pressure to reach the blockage. When you reach the blockage, the hose should stop.
- Adjust the water pressure to the level appropriate for this type of blockage, pipe and situation. NOTE: In sewer lines where property owner toilets have bubbled or overflowed due to high pressure back flushing, a lower pressure must be used to prevent additional backups
- If the hose does not advance, pull back on it and then let go. Repeat the steps until the hose breaks through the blockage.
- If the hose breaks through and the line is still plugged, run the hose until you hit another plug, then repeat the steps again.
- Clear the blockage by working from the lower end to the higher end of the flow
  NOTE: Always jet the line a few feet at a time, returning the debris to the manhole - remove debris so further blockages are not created downstream
- Once you hear or see the rush of the water, turn off the pressure until the water level drops in the line. Once the flow is back to normal, run the hose up to the next manhole to insure that the line is free of all blockages, then pull the hose back. Check the upstream manholes to make sure the line is running.
- Always rewind the jet hose with the water pressure on to avoid flattening the hose.
  NOTE: Always turn off the water pressure once you see the leader hose – failure to do so may result in serious injury!
The overflow must be contained. Containment becomes more difficult if the overflow reaches the storm drain system or drainage way since the overflow can rapidly contaminate receiving waters such as creeks, streams, rivers, and other water bodies. During dry weather, the storm drain system can be used to store the overflow if it can be plugged downstream of the overflow or if the downstream storm drain pump station can be deactivated.

**Options for containing overflow**

| Overflow onto ground | • Rubber mats at catch basin or inlet  
|                      | • Sand bags in gutter  
|                      | • Dig earthen trench  
| Overflow in building | • Evacuate affected people if necessary  
|                      | • Use sand bags/plastic sheeting if necessary  
|                      | • Avoid electrical shock - have power turned off  
| Overflow into storm drain/drainage way | • Trace overflow in storm drainage system to downstream end point  
|                                        | • Plug all affected storm system outlets and coordinate with appropriate personnel for strategy to contain spill  
|                                        | • Turn off storm water pump station  

**Required equipment for containing overflow**

| Overflow onto ground and in buildings | • Rubber mats  
|                                       | • Sand bags  
|                                       | • Plastic sheets  
|                                       | • Bypass pumps and pipe/hose  
| Overflow into storm drain/drainage way | • Plugs  
|                                         | • Bypass pump  
| Overflow at pump station | • Emergency generator  
|                           | • Bypass pump  

Refer to Regulatory Notifications Packet to begin preliminary notifications.
Flow Volume Estimation Procedures: Contained Volume

The volume of some small spills can be estimated using this method if the overflow is contained in one area and if it is not raining. In addition, the shape, dimensions, and depth of the spilled wastewater are needed. The shape and dimensions are used to calculate the area of the spills and the depth is used to calculate the volume.

Step 1 Sketch the shape of the contained sewage

Step 2 Measure or pace off the dimensions.

Step 3 Measure the depth in several locations. Calculate an average depth for the entire area by adding all measured depths together and dividing by the number of measurements taken.

Step 4 Convert the dimensions, including depth to feet.

Step 5 Calculate the area using the following formulas:
   Rectangle \hspace{1em} \text{Area} = \text{length} \times \text{width}
   Circle \hspace{1em} \text{Area} = \text{diameter} \times \text{diameter} \times 0.785
   Triangle \hspace{1em} \text{Area} = \text{base} \times \text{height} \times 0.5

Step 6 Multiply the area times the depth

Step 7 Multiply the volume by 7.48 to convert the area to gallons

**EXAMPLE:**

\[ \begin{array}{c}
\text{←100 Feet →} \\
\uparrow \\
100 \text{ Feet} \\
\downarrow \\
\text{Deep} \\
0.5 \text{ Feet}
\end{array} \]  
Volume = 100' \times 100' \times 0.5' \times 7.48  
Volume = 37,400 gallons

**EXAMPLE:**

\[ \begin{array}{c}
\text{←100 Feet →} \\
\uparrow \\
100 \text{ Feet} \\
\downarrow \\
\text{Deep} \\
0.5 \text{ Feet}
\end{array} \]  
Volume = 100' \times 100' \times 0.5' \times 0.785 \times 7.48  
Volume = 37,400 gallons
In this method, separate estimates are made for the overflow duration and flow rate.

**Flow Rate:** There are four methods to estimate the overflow rate:

1. **SSO Flow Estimation Form:** Pictures presented in this procedure manual show sewage flowing from a maintenance hole at different rates. The observations of staff members are used to select the appropriate value from the pictures.

2. **Tabulated Values:** Table 1, Table 2 and Table 3 contain tabulated values for different maintenance hole overflows.

3. **Open Channel Flow:** Overflows often run into nearby ditched, channels, gutters, etc. Flow can be quantified by measuring the cross-sectional area and velocity of the overflow. First measure the depth of flow and the dimensions of the channel. Then measure the velocity by dropping a floating object into the flow and measuring the time it takes to travel a set distance. The resulting velocity will be in the units of feet per second. Several measurements should be taken and the average flow rate should be used in volume estimates. Calculate the flow into the channel using the following formula:

   \[
   \text{Flow (gal/min)} = \text{Velocity (ft/sec) x Area (ft}^2\) x 449
   \]

4. **Pump Stations:** Sewer pump stations often have flow or pump run time data available through the SCADA system. Pump curves may need to be obtained to determine pump discharge rates.

**Overflow Duration:** The start and end times of the overflow can be estimated by staff or public bystanders who saw the overflow begin and/or end. Flow meters and information from the SCADA system can be useful in estimating overflow duration.

**Volume Calculation:** The overflow volume can be estimated with the following equation:

   \[
   \text{Volume (gal)} = \text{Flow Rate (gal/min) x Duration (min)}
   \]
### Assumptions

1. All losses are ignored except for frictional losses.
2. Velocity heads are zero because of low speeds.
   a. 3" pump DV-80 @ 2800 rpm
   b. 4" pump DV-100 @ 2200 rpm
   c. 6" pump DV-150 @ 2200 rpm
   d. 8" pump DV-200 @ 1900 rpm
4. Hose diameter is same as pump size.
5. Fire hose roughness coefficient C~120
6. Inlet and outlet pressures are at atmospheric pressure.
7. Average flowrates for pipe diameters are calculated using average slopes.

#### Bypass Pump Selection Table

<table>
<thead>
<tr>
<th>Pipe Size (in)</th>
<th>Avg Flowrate (gpm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>270</td>
</tr>
<tr>
<td>6</td>
<td>314</td>
</tr>
<tr>
<td>8</td>
<td>486</td>
</tr>
<tr>
<td>10</td>
<td>764</td>
</tr>
<tr>
<td>12</td>
<td>1687</td>
</tr>
<tr>
<td>15</td>
<td>2153</td>
</tr>
<tr>
<td>18</td>
<td>4444</td>
</tr>
</tbody>
</table>

#### Bypass Pump Selection Table

- 0-25 feet total lift

#### Hose Length (ft)

<table>
<thead>
<tr>
<th>50</th>
<th>100</th>
<th>150</th>
<th>200</th>
<th>250</th>
<th>300</th>
<th>350</th>
<th>400</th>
<th>450</th>
<th>500</th>
<th>550</th>
<th>600</th>
<th>650</th>
<th>700</th>
<th>750</th>
<th>800</th>
<th>850</th>
<th>900</th>
<th>950</th>
<th>1000</th>
</tr>
</thead>
</table>
Reference Sheet for Estimating Sewer Flow Rate From Overflowing Sewer Maintenance Holes

15 gpm
25 gpm
40 gpm

110 gpm
150 gpm
200 gpm

225 gpm
250 gpm
275 gpm
The formula used to develop Table 1 measures the maximum height of the water coming out of the maintenance hole above the rim. The formula was taken from hydraulics and its application by A.H. Gibson (Constable & Co. Limited).

Example Overflow Estimation:

The maintenance hole cover is unseated and slightly elevated on a 24" casting. The maximum height of the discharge above the rim is 5 ¼ inches. According to Table 1, these conditions would yield an SSO of 185 gallons per minute.

FLOW OUT OF MH WITH COVER IN PLACE

This sanitary sewer overflow drawing was developed by Debbie Myers, Principal Engineering Technician, for Ed Euyen, Civil Engineer, P.E. No. 33955, California, of County Sanitation District 1.
The maintenance hole cover is off and the flow coming out of a 36" frame maintenance hole at one-inch (1") height will be approximately 660 gallons per minute.

FLOW OUT OF MH WITH COVER REMOVED (TABLE 2)

This sanitary sewer overflow drawing was developed by Debbie Myers, Principal Engineering Technician, for Ed Euyen, Civil Engineer, P.E. No. 33955, California, of County Sanitation District 1.
The formula used to develop Table 3 is $Q = CcVA$, where $Q$ is equal to the quantity of the flow in gallons per minute, $Cc$ is equal to the coefficient of contraction (.63), $V$ is equal to the velocity of the overflow, and $A$ is equal to the area of the pick hole.\(^2\) If all units are in feet, the quantity will be calculated in cubic feet per second, which when multiplied by 448.8 will give the answer in gallons per minute. (One cubic foot per second is equal to 448.8 gallons per minute, hence this conversion method).

Example Overflow Estimation:

The maintenance hole cover is in place and the height of water coming out of the pick hole seven-eighths of an inch in diameter (7/8") is 3 inches (3"). This will produce an SSO flow of approximately 4.7 gallons per minute.

FLOW OUT OF VENT OR PICK HOLE (TABLE 3)

This sanitary sewer overflow drawing was developed by Debbie Myers, Principal Engineering Technician, for Ed Euyen, Civil Engineer, P.E. No. 33955, California, of County Sanitation District 1.
<table>
<thead>
<tr>
<th>Service/Vendor</th>
<th>Call:</th>
<th>At:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equipment Rental</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Backhoe/Excavation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pump Repair</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Environmental/HazMat</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
READ THIS FIRST

In the event of a Sanitary Sewer Overflow

☐ Check here if a FOG investigation is necessary

Instructions

Collections Crew

1st: Open this envelope.

2nd: Follow the instructions on the card: “Responding to a Sanitary Sewer Overflow”

3rd: Reference the Field Binder as necessary

4th: Complete the Chain of Custody record (right) and forward this packet to the Utilities Supervisor

Utilities Supervisor

1st: Open this envelope. Review forms.

2nd: Forward the Regulatory Notifications Packet to the person authorized to make required notifications (enter name and title of that individual to the right).

3rd: File the documentation for this SSO according to City policy.

Chain of Custody

Print Name: ____________________

Initial: ____________________

Date: ____________________

Time: ____________________

Utilities Supervisor

Print Name: ____________________

Initial: ____________________

Date: ____________________

Time: ____________________

Regulatory Notifications Packet given to:
Name: ____________________

Title: ____________________

For any media requests, contact the Managing Engineer (Wastewater) at 707.843.1326
How a Sewer System Works

A property owner's sewer pipes are called service laterals and are connected to larger local main and regional trunk lines.

Service laterals run from the connection at the home to the connection with the public sewer. These laterals are the responsibility of the property owner and must be maintained by the property owner.

Who is Responsible for Sewer Repairs and Maintenance?

City of Petaluma CA is responsible for:
- Operating and maintaining local sewer lines
- Protecting City property & streets, the local storm drain system, sewage collection system and other public areas.
- Collecting, treating and disposing of wastewater.

You as the property owner are responsible for maintaining and repairing your service laterals (sewer pipes). Service laterals run from the connection at the home to the connection with the public sewer.

If you have a sewage spill from your private sewer line, contact:

City of Petaluma CA
707.778.4548 (Business Hours)
707.778.4546 (After Hours)
Message provides instructions on how to contact On-Call Operator

Sonoma County Environmental Health
Department
707.565.6565
California Health and Safety Code, Sections 5410-5416 requires:
- No person shall discharge raw or treated sewage or other waste in a manner that results in contamination, pollution, or a nuisance.
- Any person who causes or permits a sewage discharge to any state waters:
  - Must immediately notify the local health agency of the discharge.
  - Shall reimburse the local health agency for services that protect the public's health and safety.
  - Who fails to provide the required notice to the local health agency is guilty of a misdemeanor and shall be punished by a fine (between $500-$1,000) and/or imprisonment for less than one year.

San Francisco Regional
Water Quality Control Board
510.622.2300
Requires the prevention, mitigation, response to, and reporting of sewage spills.

California Office of Emergency Services
800.852.7550
California Water Code, Article 4, Chapter 4, Sections 13268-13271 & California Code of Regulations, Title 23, Division 3, Chapter 9.2, Article 2, Sections 2250-2260 require:
- Any person who causes or permits sewage in excess of 1,000 gallons to be discharged to state waters shall immediately notify the Office of Emergency Services.
- Any person who fails to provide the notice required by this section is guilty of a misdemeanor and shall be punished by a fine (less than $20,000) and/or imprisonment for not more than one year.

Sewer Spill Reference Guide

Your Responsibilities as a Private Property Owner

Provided to you by:

City of Petaluma CA
Department of Water Resources and Conservation
202 N. McDowell Blvd.
Petaluma CA 94954
707.778.4546

Copyright © 2004-2005
David Patzer, DKF Solutions Group
All Rights Reserved
Why do sewage spills happen?

Sewage spills occur when the wastewater in underground pipes overflows through a manhole, cleanout, or broken pipe. Most spills are relatively small and can be stopped and cleaned up quickly, but left unattended they can cause health hazards, damage to homes and businesses, and threaten the environment, local waterways, and beaches.

CAUTION!

When trying to locate a sewer problem, never open manholes or other City sewer structures. Only City personnel are allowed open & inspect these structures.

Common causes of sewage spills:

- Grease build-up
- Tree roots
- Broken/cracked pipes
- Missing or broken cleanout caps
- Undersized sewers
- Groundwater/rainwater entering the sewer system through pipe defects and illegal connections

Prevent most sewage backups with a Backwater Overflow Device

This type of device can help prevent sewage backups into homes and businesses. If you don't already have a Backwater Overflow Device, contact a professional plumber or contractor to install one as soon as possible.

Protect the environment!

If you let sewage from your property discharge to a gutter or storm drain, you may be subject to penalties and/or out-of-pocket costs for clean-up and enforcement efforts. A property owner may be charged for costs incurred by agencies responding to spills from private properties.

What to look for:

Sewage spills can be a very noticeable gushing of water from a manhole or a slow water leak that may take time to be noticed. Don't dismiss unaccounted-for wet areas. Look for:

- Drain backups inside the building.
- Wet ground and/or water leaking around manhole lids onto your street.
- Leaking water from cleanouts or outside drains
- Unusual odorous wet areas: sidewalks, external walls, ground/landscape around a building.

The following are indicators of a possible obstruction in your sewer line:

- Water comes up in floor drains, showers or toilets.
- Toilets, showers or floor drains below ground level drain very slowly.

What to do if there is a spill:

Immediately notify the City. Our crews locate the blockage and determine if it is in the public sewer; if it is the crew removes the blockage.

If the backup is in your private internal plumbing or in the service laterals, you are required to immediately:

- Control and minimize the spill by shutting off or not using the water
- Keep sewage out of the storm drain system using sandbags, dirt and/or plastic sheeting
- Call a plumbing professional to clear blockages and make repairs as needed. Look in the yellow pages under "Plumbing Drain & Sewer Cleaning" or "Sewer Contractors."
- Always notify your sewer/public works of sewage spills that impact public areas. In addition, if it exceeds 1,000 gallons notify the Governor's Office of Emergency Services. See numbers listed on this pamphlet.

Spill cleanup inside the home:

For large clean ups, you should immediately contact a professional cleaning firm to clean up impacted areas. You can locate local firms by looking in the Yellow Pages under "Water Damage" or "Fire Damage." If you hire a contractor, it is recommended to get estimates from more than one company. Sometimes, homeowner's insurance will pay for the necessary cleaning due to sewer backups. Not all policies have this coverage, so check with your agent.

If you decide to clean up a small spill inside your home, protect yourself from contamination by observing the following safety measures. Those persons whose resistance to infection is compromised should not attempt this type of clean up.

Other Tips:

- Keep children and pets out of the affected area until cleanup has been completed.
- Turn off heating/air conditioning systems
- Wear rubber boots, rubber gloves, and goggles during cleanup of the affected area.
- Discard items that cannot be washed and disinfected (such as: mattresses, rugs, cosmetics, baby toys, etc.)
- Remove and discard drywall and insulation that has been contaminated with sewage or flood waters.
- Thoroughly clean all hard surfaces (such as flooring, concrete, molding, wood and metal furniture, countertops, appliances, sinks and other plumbing fixtures) with hot water and laundry or dish detergent.
- Help the drying process with fans, air conditioning units, and dehumidifiers.
- After completing cleanup, wash your hands with soap and water. Use water that has been boiled for 1 minute (allow the water to cool before washing your hands.) OR use water that has been disinfected (solution of 1/8 teaspoon of household bleach per 1 gallon of water). Let it stand for 30 min. If water is cloudy, use ⅛ teaspoon of household bleach per 1 gallon of water.
- Wash clothes worn during cleanup in hot water and detergent (wash apart from uncontaminated clothes).
- Wash clothes contaminated with sewage in hot water and detergent. Consider using a laundromat until your onsite wastewater system has been professionally inspected and serviced.
- See immediate attention if you become injured or ill.

Spill cleanup outside the home:

- Keep children and pets out of the affected area until cleanup has been completed.
- Wear rubber boots, rubber gloves, and goggles during cleanup of affected area.
- Clean up sewage solids (fecal material) and place in properly functioning toilet or double bag and place in garbage container.
- On hard surfaces areas such as asphalt or concrete, it is safe to use a 2% bleach solutions, or ⅛ cup of bleach to 5 gallons of water, but don't allow it to reach a storm drain as the bleach can harm the environment.
- After cleanup, wash hands with soap and water. Use water that has been boiled for 1 minute (allow to cool before washing your hands) OR use water that has been disinfected (solution of 1/8 teaspoon of household bleach per 1 gallon of water). Let it stand for 30 min. If water is cloudy, use ⅛ teaspoon of household bleach per 1 gallon of water.
- Wash clothes worn during cleanup in hot water and detergent (wash apart from uncontaminated clothes).
- Wash clothes contaminated with sewage in hot water and detergent. Consider using a laundromat until your onsite wastewater system has been professionally inspected and serviced.
- See immediate attention if you become injured or ill.
City of Petaluma

On (date) ______________________, at (location)______________________________

we responded to a reported blockage of the sanitary sewer service to your property.

We discovered a blockage in:

☐ The sanitary sewer main and cleared the line.

☐ Your sanitary sewer lateral, which is your responsibility to maintain. We found the City's main to be flowing normally.

If you require assistance to clear your lateral you can look in the Yellow Pages of your telephone book under “Sewer Contractors” or “Plumbing Drains & Sewer Cleaning”. If you plan to hire a contractor we recommend getting estimates from more than one company.

City of Petaluma CA representative notes:

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

City of Petaluma CA Representative:

____________________________________________________________________

For questions or comments, please call
City of Petaluma, CA 707.778.4546

For Sewer Emergencies
at Night and on Weekends, please call
707.778.4546
(Follow instructions on how to contact On-Call Operator)
DANGER

RAW SEWAGE • AVOID CONTACT

PELIGRO

AGUA CONTAMINADA • EVITE TODO CONTACTO

For more information —— Para mas informacion

City of Petaluma
(707) 778-4546
Responding to a Sanitary Sewer Overflow

**Private Property SSO**
1. Photograph & document all evidence that this SSO is from private property.
2. Provide the customer with the pamphlet – “Sewer Spill Reference Guide”
3. Complete Customer Service door hangar
4. If tenant or property owner is unable to unwilling to address the cause of the overflow, immediately contact your supervisor and discuss whether or not the County Department of Environmental Health or Regional Water Quality Control Board should be notified.
5. Go to Side B

**Clear Blockage/Stoppage**
1. Use cleaning equipment appropriate to situation to hydroflush, rodder, or hand rod to clear blockage. Make certain to either have the vacor setup at downstream manhole or use a foot/strap at the manhole outlet to catch any debris released. If using the rodder, first set-up dry manhole & run upstream to blockage. Once blockage is broken, pull out rods & cleaning tools. Lefting rods in the line could restrict flow. Once flow is normal, run line to next manhole.

**Hydroflushing SOP** - See Field Guide
1. Photograph staff activities while clearing the blockage, as appropriate
2. Go to Side B

**Media and Public Relations Guidelines:**
Exercise caution in contacts with the public or media when you respond to a spill. Any information you provide or statements you make may become pertinent in the event of possible court action, it is important to:
- Avoid giving out the wrong information,
- Avoid making accusations against customers, businesses or other public agencies, and
- Avoid speculating about the situation you are responding to
- Avoid providing incorrect facts about a company or other agency.

Be courteous and attempt to provide accurate information to questions within the limits above. In some cases, it may be appropriate to say that we do not have any information, or to delay answering a question and then to say when an answer might be available.

In most cases, refer media requests to the media coordinator indicated on the front of the Sewer Overflow Packet envelope.
SSO Packet
Field Procedures
OP-1
Side B

Start here from Side A

Has the SSO reached or is it likely to reach receiving waters or is there evidence of a fishkill?

NO

Immediately call to have receiving waters collected. Refer to the front of the Sewer Overflow Packet envelope for contact information.

Assign staff to post "WARNING: RAW SEWAGE" signs or other means of warning along the shoreline of impacted receiving waters as appropriate, or as directed by the County Environmental Health Department.

Is it feasible/practical to contain/recover any of the SSO from the receiving waters?

NO

YES

If unable to contain/recover the SSO with City resources, contact Supervisor to request outside assistance, as appropriate.

More text...

STORM DRAIN CLEANING SOP

1. Seal or berm the storm drain immediately downstream of point the SSO reached
2. Photograph impacted storm drain catch basins before cleaning
3. Vacuum any visible sewage – Record the volume of sewage recovered
4. Flush impacted sections of storm drain with 3X amount of SSO, if possible – Record volume of flush water
5. Ensure all visible signs of sewage have been removed
6. Return flush water to sanitary sewer – Record volume of flush water recovered
7. Photograph all storm drain catch basins after cleaning is completed

AREA CLEANUP

1. Assign staff to begin cleanup
   NOTE: If SSO was caused by a failure in a private service line, clean up impacted public areas & document staff time, equipment used & expenses incurred
2. Remove all signs of gross pollution (toilet paper, solids, grease, etc.)
3. Flush area w/metered water – U-less raining (3X amount of SSO, if possible)
   a. Setup berm/other means to contain all chlorinated flush water so it can be returned to sewer
   b. Don't use disinfectants if they may enter storm drain system and not be fully recovered or if they may enter a water body
4. Photograph the area when cleanup operations are complete

ESTIMATE SPILL VOLUME

Estimate SSO volume using one of the methods listed in the Field Guide.

NOTE: Remember – the spill was probably occurring for a period of time before it was reported – take that into account when estimating SSO volume. Be sure to document all assumptions made when estimating volume.

DOCUMENTATION AND REPORTING


Place in Sewer Overflow Packet envelope and follow paperwork routing instructions indicated on the front of the envelope:

1. All completed forms
2. Digital or disposable camera
3. ALL notes/documentation made
**City of Petaluma CA**
**SSO/Backup Response Plan**

**SSO Packet**
**Sanitary Sewer Overflow Report**

**OP-2**
**Side A**

---

**A. SPILL LOCATION**

<table>
<thead>
<tr>
<th>Spill Location Name:</th>
<th>GPS Latitude Coordinates:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Name and Number:</td>
<td>Street Direction (e.g., N, S, W, NE, SW, etc.):</td>
</tr>
<tr>
<td>Nearest Cross Street</td>
<td>City: Zip Code:</td>
</tr>
<tr>
<td>County:</td>
<td>Spill Location Description:</td>
</tr>
</tbody>
</table>

---

**B. SPILL DESCRIPTION**

| Spill Appearance Point: | □ Building/Structure □ Force Main □ Gravity Sewer □ Other Sewer System Structure □ Pump Station |
| Manhole-Structure ID#: | □ Other (specify): |
| Did the spill reach a drainage channel and/or surface water? | □ Yes □ No |
| If the spill reached a storm sewer, was it fully captured and returned to the Sanitary Sewer? | □ Yes □ No |
| Was this spill from a private service lateral? | □ Yes □ No |
| If YES, name of responsible party: | |
| Final Spill Destination: | □ Beach □ Building structure □ Other paved surface □ Storm drain □ Street/curb & gutter |
| □ Surface water □ Unpaved surface □ Other (specify): |
| Estimated spill volume (in gallons): Method calculated: |
| Est. volume of SSO recovered (gal): Were photos taken? | □ No □ Yes – how many? |
| Estimated volume of spill reaching surface water, drainage channel, or not recovered from a storm drain (gal): |

---

**C. SPILL OCCURRING TIME**

| SSO Reported to: | SSO Reported by: |
| Phone: | |
| Date and time spill reported to sewer crew: | Date and time sewer crew arrived: |
| Estimated spill end date and time: | |
| Weather conditions prior 72 hours: | □ Sunny Weather □ Cloudy Weather □ Measurable Rain □ Rain for Several Days |

---

**D. CAUSE OF SPILL**

| SSO cause (check all that apply): | □ Debris/Blockage □ Flow exceeded capacity □ Grease □ Operator error □ Roots |
| □ Pipe problem/failure □ Pump station failure □ Rainfall exceeded design □ Vandalsim □ Inflow/infiltration |
| □ Animal carcass □ Electrical power failure □ Bypass □ Debris from laterals □ Construction Debris |
| If SSO is caused by a private service lateral, please specify: This is the | □ Owner □ tenant □ manager |
| Property contact: | Contact telephone: |
| If SSO is caused by wet weather, choose size of storm: | □ 1-yr □ 2-yr □ 5-yr □ 10-yr □ 50-yr □ 100-yr □ >100-yr □ Unknown |
| Diameter (in inches) of pipe at point of blockage/spill cause (if applicable): | |
| Sewer pipe material at point of blockage/spill cause (if applicable): | |
| Description of terrain surrounding point of blockage/spill cause: | □ Flat □ Mixed □ Steep |

---

**E. SPILL RESPONSE**

| Spill response activities (check all that apply): | □ Cleaned up □ Contained all/portion of spill □ TV inspection □ Restored flow |
| Returned all/portion of spill to sanitary sewer □ Other (specify): | |
| Spill response completed (date & time): | Name of impacted waters (if applicable): |
| Visual inspection result of impacted waters (if applicable): | |
| Any fish killed? □ Yes □ No Any ongoing investigation? □ Yes □ No | |
| Name of Impacted beach (if applicable): | Were health warnings posted? □ Yes □ No |
| Health warning/beach closure posting/details: | |
| Were samples of impacted waters collected? □ Yes □ No | |
| If YES, select the analyses: □ DO □ Ammonia □ Bactl □ Other |
| Recommended corrective actions: □ Add sewer to PM Program □ Adjust PM schedule □ Adjust PM method | |
| □ Rehab sewer □ Replace sewer □ Enforcement action against FOG source □ Other (specify): |

---

**F. NOTIFICATION DETAILS**

| OES contacted date and time (if applicable): | Spoke to: |
| OES Control Number (if applicable): | |

---

*© DKF Solutions Group 2004-2008 All rights reserved.*
REGULATORY NOTIFICATIONS START HERE

YES

Is the Estimated Volume > 1,000 gallons?

NO

YES

Were receiving water samples collected or is there evidence of a fish kill?

NO

YES

Did human contact occur, or did the spill impact an area where the public gathers?

NO

YES

Was the SSO discharged to a storm drain, arroyo or drainage channel?

NO

Forward this completed form and all other documentation and pictures to the Utilities Supervisor

Immediately contact one of the following and request they make notifications as indicated in the Regulatory Notifications Packet

<table>
<thead>
<tr>
<th>PERSON</th>
<th>CELL PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utilities Manager</td>
<td>707.481.6067</td>
</tr>
<tr>
<td>Managing Engineer (Wastewater)</td>
<td>707.843.1326</td>
</tr>
<tr>
<td>Director of Water Resources and Conservation</td>
<td>707.217.9698</td>
</tr>
</tbody>
</table>

Standby Operator is authorized to make 2 hour notifications if none of the above are available

RECOMMENDED FOLLOW-UP ACTIONS TO PREVENT FUTURE OCCURRENCES

CURRENT PM FREQUENCY: [ ] TV [ ] REPAIR LINE SEGMENT [ ] OTHER (describe):

DATE OF LAST PM: [ ] RE-RUN [ ] CHANGE CLEANING SCHEDULE [ ] REPLACE LINE SEGMENT

NOTES:

Place completed form in Sewer Overflow Envelope and follow routing instructions.

© DKF Solutions Group 2004-2008 All rights reserved.
Instructions to First Responder:

1. Hand this packet to the person responsible for and authorized to make regulatory notifications.
2. Enter name and title of that individual on the front of the Sewer Backup or Sewer Overflow Response Envelope.

Instructions for Reporting Authority:

1. Open this packet
2. Refer to the Guide to Reporting to Regulatory Authorities for instructions.

Contents:

<table>
<thead>
<tr>
<th>Form</th>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guide To Reporting To Regulatory Authorities</td>
<td>RN-1</td>
</tr>
<tr>
<td>CIWQS Website Screenshot</td>
<td>-2</td>
</tr>
<tr>
<td>Fax Reporting Form: to Water Board</td>
<td>-3</td>
</tr>
<tr>
<td>Fax Reporting Form: to Local Health Agency</td>
<td>-4</td>
</tr>
</tbody>
</table>

Print on 6"x9" envelope

© DKF Solutions Group 2004-2008 All rights reserved.
### Regulatory Notifications Packet
Guide To Reporting To Regulatory Authorities

Use the chart below to identify reporting requirements. See Side B for reporting procedures and contact information.

<table>
<thead>
<tr>
<th>IF THE BACKUP or SSO: (regardless of source)</th>
<th>OES</th>
<th>SFRWQCB</th>
<th>SWRCB</th>
<th>Sonoma County Environmental Health Department</th>
<th>Fish &amp; Game</th>
</tr>
</thead>
<tbody>
<tr>
<td>≥ 1,000 gal</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Imminently &amp; substantially endangered human health</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Killed Fish</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Results in a discharge into a drainage channel or a surface water</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Was discharged to a storm drain &amp; not fully recovered, regardless of volume</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reached Receiving Waters</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Required Sampling of Receiving Waters</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Required Posting of Public Warning Signs</td>
<td></td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Was caused by problems with a private service lateral</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All SSOs &amp; Backups</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

**Persons authorized to perform regulatory reporting:**

- Utilities Manager
- Managing Engineer (Wastewater)
- Director of Water Resources and Conservation
- Standby Employee is authorized to make 2-hour notifications if none of the above are available

**Legally Responsible Official (LRO) authorized to electronically sign SWRCB online SSO reports:**

Name: Director of Water Resources and Conservation
Telephone: 707.778.4487
Cell Phone: 707.217.9698

---

**Immediacy Levels:**

- **Immediate Reporting Required WITHIN 2 HOURS AND**
  - Within 24 hours submit certification to the Regional Water Quality Control Board that OES and the County Health Department have been notified of the discharge.

- **Immediate Reporting Required**

- **Reporting Required Within 24 Hours**

- **Optional Reporting Within 30 Days**

- **Reporting Required Within 30 Days after the end of the month in which the SSO occurs**
ELEMENT 7 APPENDIX

1. Food Service Grease Trap Inspection Form
2. Keep Grease from Floor Mats Out of the Drain Information Sheet
3. "Fat Free Sewer" Brochure (when available)