



PRIVATE SEWER LATERAL INSPECTION FORM

Company Name: _____ Address: _____ Phone: _____

Customer Name: _____ Inspector's Name: _____ Phone: _____

Sewer Usage: Residential Commercial Condo Pipe Size: _____ Pipe Material: _____

CCTV Date: _____ Time: _____ Camera Direction: With Flow Against Flow Total Length: _____

- Cleanout is accessible outside of building.
- There is a sewer ejector pump at this property.
- Private sewer lateral crosses neighboring private property.
- Private sewer lateral connects to city sewer in public right of way.
- There is more than one structure at this address served by the private sewer lateral.
- Verified property does not require a back water valve.
- Verified property has properly working back water valve.
- Property needs a backwater valve.
- Verified no outside drains connected to city sewer system.

Method used to verify no outside drains connected sewer system: _____

FOR CITY USE ONLY

Received Date: _____ APN #: _____ Basin #: _____

- Compliance.
- Repairs to sewer lateral at: _____ are required to correct a: _____
- The upper / lower sewer lateral needs to be replaced or rehabilitated.

Reviewed By: _____ Date: _____

OBSERVATION CODES

B	BROKEN	I	INFILTRATION	R	ROOTS: 25% 50% 75%
C	CRACK	O	OFFSET	CP	CHANGE IN PIPE
F	FRACTURE	S	SAG	OR	OUT OF ROUND

LATERAL INSPECTION LOG

DISTANCE	OBSERVATION CODE		REMARKS

BRIEF SUMMARY OF WORK PERFORMED

I certify that the information video recording I have provided with this form are true and correct.

Inspector's signature:_____ Date:_____

The information submitted here with complies with all requirements set fourth by the City of Santa Barbarar municipal code 14.46 inclusive . I declare under penalty of purjury that all information submitted here applies to the listed address only.

Plumber's signature:_____ Date:_____ License # _____

DRAWING

*SHOW FOOTAGE DISTANCE FROM C.O. TO CITY SEWER MAIN