

PRIVATE PROPERTY PROGRAM QUESTIONNAIRE

The Water Environment Federation® (WEF®), through its Collection System Committee (CSC), is interested in documenting information pertaining to successfully operating programs for work performed on the privately-owned portion of the wastewater lateral line; e.g., building service connection. We are collecting policy descriptions, enabling resolutions or ordinances, funding details, public education/information materials, standard design or construction details, etc., for programs that have proven to be successful. By participating in this questionnaire, you are agreeing that your information may be added to the Private Property Virtual Library (PPVL), an on-line database on WEF®'s website (www.wef.org/PrivateProperty). The PPVL is intended to be a resource for other wastewater utilities seeking information or advice about private property programs.

While we are interested in "planned" programs, we want to first concentrate on programs demonstrated to be effectively implemented. Planned programs will be included in the PPVL after the program has been implemented and actual experience with the program is available. Program descriptions of private lateral programs that were previously implemented, but considered "failed" or only "partially successful," will be included as a "lessons learned" component of the PPVL if the reasons for the problems with the program are identified.

When starting the PPVL program, the initial questionnaire was designed to be an "interview-type" questionnaire. This second version of the PPVL Questionnaire has been revised and re-formatted to serve as a "mail-out" questionnaire. Upon completion of the questionnaire by participating utilities, a CSC representative may, if needed, conduct a follow-up telephone interview to confirm or clarify the information provided.

1. General Information

Date: 06/07/10
 Utility Name: Village of Campbellsport
 Street Address: 105 Columbus Parc Court
 Mailing Address: PO Box 709
 City: Campbellsport State: WI Zip Code: 53010
 Agency Website Address: http://campbellsport.govoffice.com/index.asp?Type=B_BASIC&SEC={C9F1D834-AACF-435E-A6FF-0C5C392D6F1D} EPA Region: 5
 Contact Name: Diane Lemke Title: Clerk Treasurer
 Telephone: 920-533-8321 E-mail: dlemke@villageofcampbellsport.com

Utility Characteristics:

1,999 Number of customers (i.e. approximate population served)
750 Number of taps (i.e. approximate number of connection points)
12 Total miles of public sanitary sewers (separated and combined sewers)
12 Miles of public combined sewers (sanitary only, not including storm sewers) *Estimate % of system that is combined if total miles is unavailable or unknown*

Are basements (thus potential sump pump connections) typical in your area? Yes No

Utility type: Government Special purpose district Private utility Other: _____

2. Lateral Definition

Private Lateral Definition: (Check definition that best applies.)

Building to ROW/Easement Line Only
Please note if/how utility treats laterals in easements differently than laterals in ROWs: _____

Building to Tap on Sewer Main Line

Other (specify details): _____
Please note if/how utility treats residential building laterals differently than commercial building laterals – this may affect responses to subsequent questions: _____

Cleanouts: (Check all that apply.)

Required	Usually Exists	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	At building
<input type="checkbox"/>	<input type="checkbox"/>	At ROW

<input type="checkbox"/>	<input type="checkbox"/>	At easement
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When completing public sewer rehabilitation, does your utility include rehabilitation for the following elements? (Check all that apply. If "Yes", define ownership – "Public" or "Private".)

- Lateral tie-in to public (i.e. the sewer connection) Yes No Public Private
 Lower lateral (i.e. connection to the ROW) Yes No Public Private
 Upper lateral (i.e. ROW to the house) Yes No Public Private

3. Private Property Program Description

Check all that apply and describe the program as appropriate. (Note it is not necessary to complete each item under this section. For example, most utilities have some type of "New Connection Permitting" and "New Connection Enforcement Mechanisms". Only include those programs in this questionnaire if your utility has a particular successful program that other utilities may want to emulate.)

Private Lateral Maintenance (e.g. cleaning, root control, etc.)

Implementation Information:

- a. Implementation Date: _____
- b. Why implemented? (e.g. consent order/decreed, reduce CSOs/SSOs, obtain capacity to alleviate sewer moratorium, more cost-effective than "old" program, etc.) _____
- c. Ongoing program? Yes No
If no, what is the end date? _____ Why did the program end? _____
- d. What Legal Authority was required to implement the Lateral Program? (Check all that apply. If possible, attach an electronic copy for the PPVL. Scan hard copy if necessary.)
 Resolution Ordinance State Enabling Legislation Other (please specify): _____

Program Funding Information:

- a. Who pays? (Check all that apply. "Other" could include grants, loans, low and moderate income programs, block development grants, etc.) Utility Property Owner Other (please specify): _____
- b. Funding description: _____
- c. Describe any special program to assist customers who may have difficulty paying the required fees.

Eligible Customers: Low income Senior citizens Other (please specify): _____

Program Construction Information:

- a. Who does the work? (Check all that apply.) Utility Internal Forces Utility Selects and Pays Contractor Property Owner Property Owner but only from Utility List Other (please specify): _____
- b. Construction description: _____
- c. Are standard details/specifications used? Yes No If yes, describe/list details: _____

Additional Program Description: _____

Lateral Repair (e.g. point repairs, etc.)

Implementation Information:

- a. Implementation Date: _____
- b. Why implemented? (e.g. consent order/decreed, reduce CSOs/SSOs, obtain capacity to alleviate sewer moratorium, more cost-effective than "old" program, etc.) _____
- c. Ongoing program? Yes No
If no, what is the end date? _____ Why did the program end? _____
- d. What Legal Authority was required to implement the Lateral Program? (Check all that apply. If possible, attach an electronic copy for the PPVL. Scan hard copy if necessary.)
 Resolution Ordinance State Enabling Legislation Other (please specify): _____

Program Funding Information:

- a. Who pays? (Check all that apply. "Other" could include grants, loans, low and moderate income programs, block development grants, etc.) Utility Property Owner Other (please specify): _____
- b. Funding description: _____
- c. Describe any special program to assist customers who may have difficulty paying the required fees.

Eligible Customers: Low income Senior citizens Other (please specify): _____

Program Construction Information:

- a. Who does the work? (Check all that apply.) Utility Internal Forces Utility Selects and Pays Contractor Property Owner Property Owner but only from Utility List Other (please specify): _____
- b. Construction description: _____
- c. Are standard details/specifications used? Yes No If yes, describe/list details: _____

Additional Program Description: _____

Lateral Replacement

Implementation Information:

- a. Implementation Date: 12/2003
- b. Why implemented? (e.g. consent order/decreed, reduce CSOs/SSOs, obtain capacity to alleviate sewer moratorium, more cost-effective than "old" program, etc.) The program was first implemented to give cost assistance to customers, who, by village ordinance are responsible for maintenance and replacement of the sewer laterals. This was to be done by reimbursing the property owners for construction costs. Further, the necessity for such a program became clear, as many laterals were known to be very old and high infiltration rates were being seen. Also, some lateral damage was potentially caused by watermain breaks that had recently occurred and it seemed unreasonable that full financial responsibility should fall upon the individual property owners. By implementing this program, community members were given a way to get assistance in paying for these repairs and these replacements will ultimately save the municipality in costs associated with high infiltration and inflow.
- c. Ongoing program? Yes No
If no, what is the end date? _____ Why did the program end? _____
- d. What Legal Authority was required to implement the Lateral Program? (Check all that apply. If possible, attach an electronic copy for the PPVL. Scan hard copy if necessary.)
 Resolution Ordinance State Enabling Legislation Other (please specify): _____

Program Funding Information:

- a. Who pays? (Check all that apply. "Other" could include grants, loans, low and moderate income programs, block development grants, etc.) Utility Property Owner Other (please specify): _____
- b. Funding description: In order to finance the Sewer Lateral Replacement Fund, customers are charged \$5.00 quarterly within their water bill. The property owner initially hires and pays a contractor to replace the entire lateral. The property owner can then apply to receive reimbursement from the Sewer Lateral Replacement Fund. Customers seeking reimbursement must submit receipts for all related costs to the replacement of the lateral.
- c. Describe any special program to assist customers who may have difficulty paying the required fees. NA
Eligible Customers: Low income Senior citizens Other (please specify): _____

Program Construction Information:

- a. Who does the work? (Check all that apply.) Utility Internal Forces Utility Selects and Pays Contractor Property Owner Property Owner but only from Utility List Other (please specify): Work is completed by a contractor which is selected by the property owner.
- b. Construction description: Construction includes replacement of the entire lateral and, as mentioned above, is completed by an independent contractor as selected by the property owner.
- c. Are standard details/specifications used? Yes No If yes, describe/list details: In order to qualify for the program, the entire lateral must be replaced and ultimate reimbursement is contingent on the scope of work based on a schedule which can be found in the application form.

Additional Program Description: The fund covers only replacement of entire lateral unless approved by either the Director of Public Works or the Superintendent of the wastewater treatment plant. All requests for reimbursement for lateral replacement must be approved by the Villiage Board of Trustees. Funds to be released to property owners for reimbursement are limited by a schedule depending on the scope of work (see application form).

- I/I Control (Specify type: e.g. cleanout caps, sump pump disconnect, downspout/yard drain disconnect, backflow preventer installation, etc. If basements are typical in the area, where are building owners directed to connect the foundation or tile drain lines that have to be disconnected?)

Implementation Information:

- a. Implementation Date: _____

- b. Why implemented? (e.g. consent order/decreed, reduce CSOs/SSOs, obtain capacity to alleviate sewer moratorium, more cost-effective than "old" program, etc.) _____
- c. Ongoing program? Yes No
If no, what is the end date? _____ Why did the program end? _____
- d. What Legal Authority was required to implement the Lateral Program? (Check all that apply. If possible, attach an electronic copy for the PPVL. Scan hard copy if necessary.)
 Resolution Ordinance State Enabling Legislation Other (please specify): _____

Program Funding Information:

- a. Who pays? (Check all that apply. "Other" could include grants, loans, low and moderate income programs, block development grants, etc.) Utility Property Owner Other (please specify): _____
- b. Funding description: _____
- c. Describe any special program to assist customers who may have difficulty paying the required fees.

Eligible Customers: Low income Senior citizens Other (please specify): _____

Program Construction Information:

- a. Who does the work? (Check all that apply.) Utility Internal Forces Utility Selects and Pays Contractor Property Owner Property Owner but only from Utility List Other (please specify): _____
- b. Construction description: _____
- c. Are standard details/specifications used? Yes No If yes, describe/list details: _____

Additional Program Description: _____

- Lateral Reconnects (Specify conditions: e.g. when utility relocates main, etc. Specify special situations: e.g. sewer under building(s) requiring building plumbing changes or extensive lateral relocation.)

Implementation Information:

- a. Implementation Date: _____
- b. Why implemented? (e.g. consent order/decreed, reduce CSOs/SSOs, obtain capacity to alleviate sewer moratorium, more cost-effective than "old" program, etc.) _____
- c. Ongoing program? Yes No
If no, what is the end date? _____ Why did the program end? _____
- d. What Legal Authority was required to implement the Lateral Program? (Check all that apply. If possible, attach an electronic copy for the PPVL. Scan hard copy if necessary.)
 Resolution Ordinance State Enabling Legislation Other (please specify): _____

Program Funding Information:

- a. Who pays? (Check all that apply. "Other" could include grants, loans, low and moderate income programs, block development grants, etc.) Utility Property Owner Other (please specify): _____
- b. Funding description: _____
- c. Describe any special program to assist customers who may have difficulty paying the required fees.

Eligible Customers: Low income Senior citizens Other (please specify): _____

Program Construction Information:

- a. Who does the work? (Check all that apply.) Utility Internal Forces Utility Selects and Pays Contractor Property Owner Property Owner but only from Utility List Other (please specify): _____
- b. Construction description: _____
- c. Are standard details/specifications used? Yes No If yes, describe/list details: _____

Additional Program Description: _____

- Lateral Inspections (Specify conditions: e.g. point of sale, special utility project, etc.)

Implementation Information:

- a. Implementation Date: _____
- b. Why implemented? (e.g. consent order/decreed, reduce CSOs/SSOs, obtain capacity to alleviate sewer moratorium, more cost-effective than "old" program, etc.) _____
- c. Ongoing program? Yes No
If no, what is the end date? _____ Why did the program end? _____

- d. What Legal Authority was required to implement the Lateral Program? (Check all that apply. If possible, attach an electronic copy for the PPVL. Scan hard copy if necessary.)

Resolution Ordinance State Enabling Legislation Other (please specify): _____

Program Funding Information:

- a. Who pays? (Check all that apply. "Other" could include grants, loans, low and moderate income programs, block development grants, etc.) Utility Property Owner Other (please specify): _____
- b. Funding description: _____
- c. Describe any special program to assist customers who may have difficulty paying the required fees.

Eligible Customers: Low income Senior citizens Other (please specify): _____

Program Construction Information:

- a. Who does the work? (Check all that apply.) Utility Internal Forces Utility Selects and Pays Contractor Property Owner Property Owner but only from Utility List Other (please specify): _____
- b. Construction description: _____
- c. Are standard details/specifications used? Yes No If yes, describe/list details: _____

Additional Program Description: _____

- New Connection Permitting (e.g. special coordination with Building Codes, etc. Be sure to specify the type and amount of fees imposed.)

Implementation Information:

- a. Implementation Date: _____
- b. Why implemented? (e.g. consent order/decreed, reduce CSOs/SSOs, obtain capacity to alleviate sewer moratorium, more cost-effective than "old" program, etc.) _____
- c. Ongoing program? Yes No
If no, what is the end date? _____ Why did the program end? _____
- d. What Legal Authority was required to implement the Lateral Program? (Check all that apply. If possible, attach an electronic copy for the PPVL. Scan hard copy if necessary.)
 Resolution Ordinance State Enabling Legislation Other (please specify): _____

Program Funding Information:

- a. Who pays? (Check all that apply. "Other" could include grants, loans, low and moderate income programs, block development grants, etc.) Utility Property Owner Other (please specify): _____
- b. Funding description: _____
- c. Describe any special program to assist customers who may have difficulty paying the required fees.

Eligible Customers: Low income Senior citizens Other (please specify): _____

Program Construction Information:

- a. Who does the work? (Check all that apply.) Utility Internal Forces Utility Selects and Pays Contractor Property Owner Property Owner but only from Utility List Other (please specify): _____
- b. Construction description: _____
- c. Are standard details/specifications used? Yes No If yes, describe/list details: _____

Additional Program Description: _____

- New Connection Enforcement Mechanisms:

Implementation Information:

- a. Implementation Date: _____
- b. Why implemented? (e.g. consent order/decreed, reduce CSOs/SSOs, obtain capacity to alleviate sewer moratorium, more cost-effective than "old" program, etc.) _____
- c. Ongoing program? Yes No
If no, what is the end date? _____ Why did the program end? _____
- d. What Legal Authority was required to implement the Lateral Program? (Check all that apply. If possible, attach an electronic copy for the PPVL. Scan hard copy if necessary.)
 Resolution Ordinance State Enabling Legislation Other (please specify): _____

Program Funding Information:

- a. Who pays? (Check all that apply. "Other" could include grants, loans, low and moderate income programs, block development grants, etc.) Utility Property Owner Other (please specify): _____
- b. Funding description: _____
- c. Describe any special program to assist customers who may have difficulty paying the required fees.

Eligible Customers: Low income Senior citizens Other (please specify): _____

Program Construction Information:

- a. Who does the work? (Check all that apply.) Utility Internal Forces Utility Selects and Pays Contractor Property Owner Property Owner but only from Utility List Other (please specify): _____
- b. Construction description: _____
- c. Are standard details/specifications used? Yes No If yes, describe/list details: _____

Additional Program Description: _____

4. Public Education/Information Program

How is your Lateral Program publicized? (Check all that apply. If possible, attach electronic copies for the PPVL.)

- Door hangers Bill stuffers Meetings Brochures
- Customer Specific (e.g. provide property owner with CCTV still shot of lateral interior, field mark/locate [flag or cone] program, provide picture of field location in case flag or cone is removed, etc.)
- Other (please specify): Website and Village Newsletter

Additional description(s) of material(s): _____

5. Lessons Learned

What would you do differently? The Village is currently very happy with the program and at this point would do nothing differently.

6. Performance Indicators

What performance measures are/were used? (e.g. plant flow reduction, CSO/SSO reduction, basement backup reduction, service call reduction, sewer moratorium lifted, etc.) While the program isn't measured based on any of the performance indicators listed above, the level of satisfaction from community members with the program is high.

Describe results of Lateral Program on these performance measures: As mentioned above, customer satisfaction is high and flows to plant have been somewhat reduced as well.

7. General Questions for Possible Future PPVL Inclusion

If your utility is responsible for complying with NPDES MS4 requirements, is there an associated private property effort underway? (Please check one.) Yes No Planned

Do you have private pump stations connected to your systems? (Check all that apply.)

- Private pump stations (e.g. apartment complexes, industries, etc.) Yes No
- Residential connections (e.g. grinder pumps, low pressure systems, etc.) Yes No

Do you install backflow preventers after a sanitary sewer overflow (SSO) or "basement backup" occurs? (Check all that apply.)

- Required by our insurance company Yes No
- Only if requested by the customer Yes No
- Routinely installed as a utility "best management practice" Yes No
- Do not install any backflow preventer Yes No

How do you control I/I at the connection point between the public system and private system? Please describe: Leak detection practices have been implemented by the utility. If tests results are indicative of high infiltration from a specific lateral, the property owner will be notified and required to replace the lateral. The customer will also be informed of the reimbursement program.

8. Follow-Up Electronic Submittal

After completing this questionnaire, please email the completed Word file to Laurie Chase, PPVL Project Chair, at lchase2@columbus.rr.us.

Please be sure to attach electronic files (PDF versions preferred but not required) for any materials that other utilities could use as an example or a starting point to implement their own program.