

**PRIVATE PROPERTY PROGRAM QUESTIONNAIRE**  
**Revised March 24, 2008**

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](http://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 City of Fairfield**

Utility Name & Address:	<u>Wastewater Division</u> Utility Name	<u>4799 Groh Lane</u> Street Address
	<u>5350 Pleasant Avenue</u> Mailing Address	<u>Fairfield, OH 45014</u> City, State and Zip Code
Contact Name & Details:	<u>David E. Crouch</u> Contact Name	<u>(513) 896-8153</u> Telephone Number
	<u>dcrouch@fairfield-city.org</u> Contact Email Address	<u>www.fairfield-city.org</u> Agency Website Address

Utility Characteristics: 42,000 Number of Customers (i.e., approximate population served)

13,000 Number of Taps (i.e., approximate number of connection points)

173 Total Miles of Public Sanitary Sewers (separated sewers and combined sewers)

-0- 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  
 (Check one)

Utility Type?  Government \_\_\_ Special purpose district \_\_\_ Private utility \_\_\_ Other  
 (Check one)

**2. Lateral Definition**

Private Lateral Definition:  Building to ROW/Easement Line Only  
 (Check definition that applies.)

\_\_\_\_\_  
 (Note if (& how) utility treats laterals in easements differently than laterals in ROWs)

\_\_\_\_\_  
 Building To Tap on Sewer Main Line

Other (Specify details) Low pressure forcemain to public main.

\_\_\_\_\_  
 (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

<u>  X  </u>	<u>  X  </u>	At building <b>(Inside and every 100')</b>
<u>      </u>	<u>      </u>	At ROW
<u>      </u>	<u>      </u>	At easement

When completing public sewer rehabilitation, does your utility include rehabilitation for the following elements?  
 (Check all that apply. If "Yes," define ownership.)

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

**3. Private Property Program Description**

Type of Private Property Program (check all that apply and describe program – try to be brief in program description, but add separate sheets/lines as needed). If your utility operates more than one private lateral program, it may be preferable to complete a separate questionnaire form (or Word file) for the remaining questions for each of those private lateral programs. (Note it is **not** necessary to complete each item under Question 3. 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 particularly successful program that other utilities may want to emulate.)

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

**Homeowners responsibility.**

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

**Homeowners responsibility.**

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       Lateral Replacement:

**City will repair or replace from ROW to main tap.**

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X 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 area, where are building owners directed to connect the foundation or tile drain lines that have to be disconnected?):

**To natural drain or storm sewer.**

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

**Lateral reconnections are private responsibility, but City inspects.**

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

**Lateral inspections are done at homeowners request. A case by case scenario.**

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

**Residential lateral \$1600 tap and expansion. \$200 service inspection fee. Commercial is based on water meter size. Contact for more details.**

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X New Connection Enforcement Mechanisms:

**City inspects from main to foundation. Local Health Department inspects from foundation into home or business.**

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**4. Program Implementation** (duplicate [copy and paste] Question 4 for **each** section completed in Question 3 above)

Implementation Date: 1990 Why implemented? Consent order.  
(e.g., consent order/decreed, reduce CSOs/SSOs, obtain capacity to alleviate sewer moratorium, more cost-effective than "old" program, etc.)

Consent order resolved in 1996. EQ basics and relief systems constructed.

Ongoing Program?  Or End Date: \_\_\_\_\_ Why Ended? \_\_\_\_\_

What Legal Authority was Required to Implement the Lateral Program? \_\_\_\_\_ Resolution  
(Check all that apply. If possible, attach an electronic [pdf] copy for the PPVL. Scan hard copy if necessary.) \_\_\_\_\_ Ordinance  
\_\_\_\_\_ State Enabling Legislation  
 Other (Specify) Voluntary City

Program consists of public education and voluntary compliance by property owner.

**5. Program Funding** (duplicate [copy and paste] Question 5 for **each** section completed in Question 3 above)

Who Pays:  Utility  Property Owner \_\_\_\_\_ Other (Specify): \_\_\_\_\_  
(Check all that apply. "Other" could include grants, loans, low & moderate income programs, block development grants, etc.)

Funding Description: Public Utilities Budget.

Describe any special programs to assist customers who may have difficulty paying the required fees.

Eligible Customers: \_\_\_\_\_ Low income \_\_\_\_\_ Senior citizens \_\_\_\_\_ Other (Specify): \_\_\_\_\_  
(Check all that apply.)

Special Funding Description: None

**6. Program Construction** (duplicate [copy and paste] Question 6 for **each** section completed in Question 3 above)

Who Does the Work: \_\_\_\_\_ Utility Internal Forces \_\_\_\_\_ Utility Selects & Pays Contractor

Property Owner                      \_\_\_\_\_ Property Owner But Only From Utility List

\_\_\_\_\_ Other (Specify): \_\_\_\_\_

Construction Description: **In some cases the City may get involved depending on impact to system. A case by case review.**

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Construction Details: Are standard details/specifications used?  Yes No \_\_\_\_\_  
(If possible, attach electronic [pdf] copies for PPVL.)

Describe/List Details: **City has a construction service division and construction manual.**

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### 7. Public Education/Information Program

How is Lateral Program Publicized?  Door hangers                      \_\_\_\_\_ Bill stuffers  
(If possible, attach electronic [pdf] copies for the PPVL.)                       Meetings                       Brochures

\_\_\_\_\_ Customer Specific (e.g., provide property owner with CCTV still shot of lateral interior, field mark/locate [flag or cone] problem, provide picture of field location in case flag or cone is removed, etc.)

Other. Specify \_\_\_\_\_

Additional Description of Material(s): **On-going – began in 1992.**

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### 8. Lessons Learned

What Would You Do Differently? **This is a broad question. Please contact Dave Crouch by phone (513) 896-8153.**

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**9. Performance Indicators**

What Performance Measures Are/Were Used? Maintaining capacity.  
(e.g., plant flow reduction, CSO/SSC reduction, basement backup reduction, service call (roots, etc.,) reduction, sewer moratorium lifted, etc.,) Describe results of Lateral Program on those performance measures:

We have very specific details. Feel free to contact for more information.

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**10. 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?

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

Private Pump Stations (e.g., apartment complexes, industries, etc.)	<u>X</u>	Yes	___	No
Residential Connections (e.g., grinder pumps, low pressure systems, etc.)	<u>X</u>	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	<u>X</u>	Yes	<u>X</u>	No
Only if requested by the customer	<u>X</u>	Yes	<u>X</u>	No
Routinely installed as a utility “best management practice”	<u>X</u>	Yes	<u>X</u>	No
Do not install any backflow preventer	___	Yes	<u>X</u>	No

How do you control I/I at the connection point between the public system and the private system? Describe.

Public education and case by case inspection when possible.

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**11. Follow-Up Electronic Submittal**

After completing this questionnaire, please email the completed Word file to Laurie Chase, PPVL Chair, at

[laurie.chase@stantec.com](mailto:laurie.chase@stantec.com)

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

**WEF® CSC Use Only**

PPVL Questionnaire Received: \_\_\_\_\_  
Date

Utility Assigned to: \_\_\_\_\_  
PPVL Committee Member Name

\_\_\_\_\_ Date

Questionnaire Review:

\_\_\_\_\_ Date

List of Attached Materials:  
(Compile from Questionnaire)

\_\_\_\_\_ Name or Description of Material

\_\_\_\_ Yes \_\_\_\_ No  
File Received

\_\_\_\_\_

\_\_\_\_ Yes \_\_\_\_ No

\_\_\_\_\_

\_\_\_\_ Yes \_\_\_\_ No

\_\_\_\_\_

\_\_\_\_ Yes \_\_\_\_ No

\_\_\_\_\_

\_\_\_\_ Yes \_\_\_\_ No

Utility Follow-Up:  
(If required)

\_\_\_\_\_ Utility Contact Name

\_\_\_\_\_ Contact Details (telephone # or email address)

\_\_\_\_\_ Date

\_\_\_\_\_ PPVL Committee Member Name (If different)

Questionnaire Revision:  
(If required)

\_\_\_\_\_ Date

\_\_\_\_\_ Name of Person Revising Questionnaire

List of Attached Materials:  
(If different)

\_\_\_\_\_

\_\_\_\_ Yes \_\_\_\_ No

\_\_\_\_\_

\_\_\_\_ Yes \_\_\_\_ No

\_\_\_\_\_

\_\_\_\_ Yes \_\_\_\_ No

\_\_\_\_\_

\_\_\_\_ Yes \_\_\_\_ No

\_\_\_\_\_

\_\_\_\_ Yes \_\_\_\_ No

Questionnaire Acceptance:

\_\_\_\_\_ Date

\_\_\_\_\_ PPVL Committee Member Name

\_\_\_\_ Yes \_\_\_\_ No  
Uploaded to PPVL Website