

**PRIVATE PROPERTY PROGRAM QUESTIONNAIRE**  
Revised April 15, 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**

Utility Name & Address: Village of Morton 120 N. Main St.  
 Utility Name Street Address  
 EPA Region 5 P.O. Box 28 Morton, Illinois 61550  
 (insert #) Mailing Address City, State and Zip Code  
 Contact Name & Details: Bob Wright 309-266-5361  
 Contact Name Telephone Number  
bwright@morton-il.gov www.morton-il.gov  
 Contact Email Address Agency Website Address

Utility Characteristics: 17,000 Number of Customers (i.e., approximate population served)  
6,000 Number of Taps (i.e., approximate number of connection points)  
94 Total Miles of Public Sanitary Sewers (separated sewers and combined sewers)  
1.1 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.) Public from sewer main to R.O.W. Line / Private out of R.O.W. or in easement  
 (Note if (& how) utility treats laterals in easements differently than laterals in ROWs)  
 \_\_\_ Building To Tap on Sewer Main Line  
 \_\_\_ Other (Specify details) \_\_\_\_\_

(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.)	<u>Required</u>	<u>Usually Exists</u>	
	_____	_____	At building
	<u>2006</u>	_____	At ROW
	_____	_____	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 \_\_\_ 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

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.):

A) Responsibility of Property Owner from R.O.W Line to building. No permits & contractors not licensed.

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

B) Responsibility of Property Owner from ROW Line to building. Permit & inspection required & contractors licensed.

Lateral Replacement:

C) Same as Lateral Repair.

D)  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?):

Village is in year 15 of sump pump/perimeter tile (SP/PT) disconnect program. Inspected (TV &/or Ag) 1983 homes (out of 6000 total) in targeted areas. Disconnected 600 ~~total~~ illegal connections. Property owner contracts work & Village gives \$500 grant. Discharge to existing storm sewer, storm inlet, or creek. If a discharge point is not available, the Village installs a sump pump & collector line (small diameter storm sewer) on the private property at public expense. New subdivisions include sump pump & collector line since 1980.

E)  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):

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

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

Permit required, contractors licensed, inspection by Village and record on GIS.

H)  New Connection Enforcement Mechanisms:

Permit required, contractors licensed, inspection by Village and record on GIS.

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

Implementation Date: 1980 Why implemented? New Village Engr./ Div. of P.W & Basement Backups  
(A, B, C, G, H) (e.g., consent order/decreed, reduce CSOs/SSOs, obtain capacity to alleviate sewer Backups moratorium, more cost-effective than "old" program, etc.)  
All but SP/PT Disconnect Programs

D) SP/PT Disconnect program started 1993, lots of basement backups during wet periods I/E. Neighborhood systems surcharged - Treatment Plant and Trunk sewers overloaded  
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) \_\_\_\_\_

Refer to Morton Municipal Code on Village's web site:  
www.morton-il.gov, Sections 8-3-3 thru 6 and 8-10.

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

Who Pays: \_\_\_\_\_ Utility <sup>A, B, C, G, H</sup> Property Owner \_\_\_\_\_ Other (Specify): D  
(Check all that apply. "Other" could include grants, loans, low & moderate income programs, block development grants, etc.)

Funding Description: Village funding from wastewater user fees.

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: \_\_\_\_\_

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

Who Does the Work: D Utility Internal Forces \_\_\_\_\_ Utility Selects & Pays Contractor  
A, B, C, D, G, H Property Owner \_\_\_\_\_ Property Owner But Only From Utility List  
\_\_\_\_\_ Other (Specify): \_\_\_\_\_

Construction Description: SP/PT disconnect program: Village does inspection (TV or dye). Property owner responsible for work i.e., Contractor's licensed, inspection by Village required.

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

Describe/List Details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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  
X 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): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**8. Lessons Learned**

What Would You Do Differently? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**9. Performance Indicators**

What Performance Measures Are/Were Used? *Huge reduction in neighborhood basement backups,*  
(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:

*100+ service calls per 2" riser, to less than 10/year.*  
\_\_\_\_\_  
\_\_\_\_\_

**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? (Check one.)      \_\_\_ Yes      \_\_\_ No       Planned

Do you have private pump stations connected to your system?  
(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 the private system? Describe.

*Licensed Contractors and inspection by Village required.*  
\_\_\_\_\_  
\_\_\_\_\_

**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  
\_\_\_\_\_

Questionnaire Review: \_\_\_\_\_  
Date

List of Attached Materials: (Compile from Questionnaire)	_____	_____ Yes _____ No
	Name or Description of Material	File Received
	_____	_____ 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	
	_____	_____ Yes _____ No
	PPVL Committee Member Name	Uploaded to PPVL Website