



PRIVATE SANITARY SEWER COLLECTION SYSTEM (PSSCS) INSPECTIONS REPORT FORM

Checklist to complete the Private Sanitary Sewer Collection System Inspection.

Private Sanitary Sewer Collection System (PSSCS):

- ☐ The inspection must be conducted by a Qualified Contractor from the City provided List of Qualified Contractors.
 - Per Ordinance No. 2322, a Private Sanitary Sewer Collection System Inspection must be completed by a Qualified Contractor (Licensed Plumber [C-36] with the State of California, has a City of Morgan Hill Business License, and is NASSCO Certified). Please see the list provided on the website (link below).
- ☐ CCTV footage of each lateral line, as well as the main sewer line running through the development must be completed by a Qualified Contractor to the city main connection. A map detailing the layout of the system must be provided by the plumber. The map must label each lateral line and correlate them to the CCTV footage provided.
- ☐ All lines on the report must be filled out and signed by the Property Owner/Property Manager and Qualified Contractor.
- ☐ If repairs are needed, obtain all necessary permits from the Building Department or Engineering Department:
 - Email - permits@morganhill.ca.gov
 - Phone - 408-778-6480 (press 1)
- ☐ After repairs are complete, conduct a new inspection by a Qualified Contractor to pass inspection.

Submission Checklist:

1. Complete PSSCS Inspection Report Form
 - Check that all fields are filled out by the Property Owner/Property Manager and Qualified Contractor.
2. CCTV video inspection with address, date, and time stamp.
3. Submit this completed document to PSL.WC@morganhill.ca.gov for review and request a Dropbox link to upload CCTV.

Visit the homepage for more information and Forms:

<https://www.morganhill.ca.gov/2155/Private-Sanitary-Sewer-Collection-System>

**ALL INFORMATION MUST BE PROVIDED TO AVOID RESTART OF FIVE-DAY REVIEW TIME.
INCLUDE PARCEL NUMBER AND CORRECT SIGNATURES.**

This section (below) is for the Property Owner/Property Manager to complete:

Property Address: _____

Parcel Number: _____ Phone Number: _____

Property Owner Email Address: _____

*I confirm that I have reviewed the results of the attached PSSCS Inspection Report Form conducted for this property by a
Qualified Contractor (below).

Property Owner's Printed Name: _____

Property Owner's Signature: _____ Date: _____

This section (below) is for the Qualified Contractor to complete:

Plumbing Company Name: _____

The information submitted herewith complies with all requirements set forth by the City of Morgan Hill Municipal Code Ordinance 13.20.073. Furthermore, I have reviewed the qualified contractor. I declare under the penalty of perjury that all information submitted here applies to listed address only and is true and correct.

Fill in Video Technician information, if different than Qualified Plumbing Contractor.

Video Technician's Signature: _____ Date: _____

Video Technician's Printed Name: _____

Video Technician's NASSCO Certificate # _____

Qualified Contractor's Signature: _____ Date: _____

Qualified Contractor's Printed Name: _____ Phone Number: _____

C-36 Contractor's License # _____ City of Morgan Hill Business License # _____

Qualified Contractor's NASSCO Certificate # _____

**Per Ordinance No. 2322, a Private Sanitary Sewer Collection System Inspection must be completed by a Qualified Contractor chosen from the City's provided list (A C-36 licensed with the State of California, has a City of Morgan Hill Business License, and is NASSCO Certified).*

INSPECTION REPORT OBSERVATIONS

Property Address: _____

Property Type:

Residential _____ Commercial _____ Condo/Apt _____

PRIVATE SANITARY SEWER CONNECTION SYSTEM INSPECTION

Qualified Contractor must perform inspection based on NASSCO standards (e.g., film at 30 feet per minute)

Property Details (select all that apply):

- ☐ Cleanout is accessible outside of the buildings. (Note – having a cleanout is not required.)
- ☐ Was not able to complete the Private Sanitary Sewer Collection System Inspection, **see notes below.**

Pipe Size: _____ Pipe Material: _____

CCTV Date: _____ Time: _____

Camera Direction - With flow: _____ Against flow: _____ Total length: _____ feet

Observation Codes:

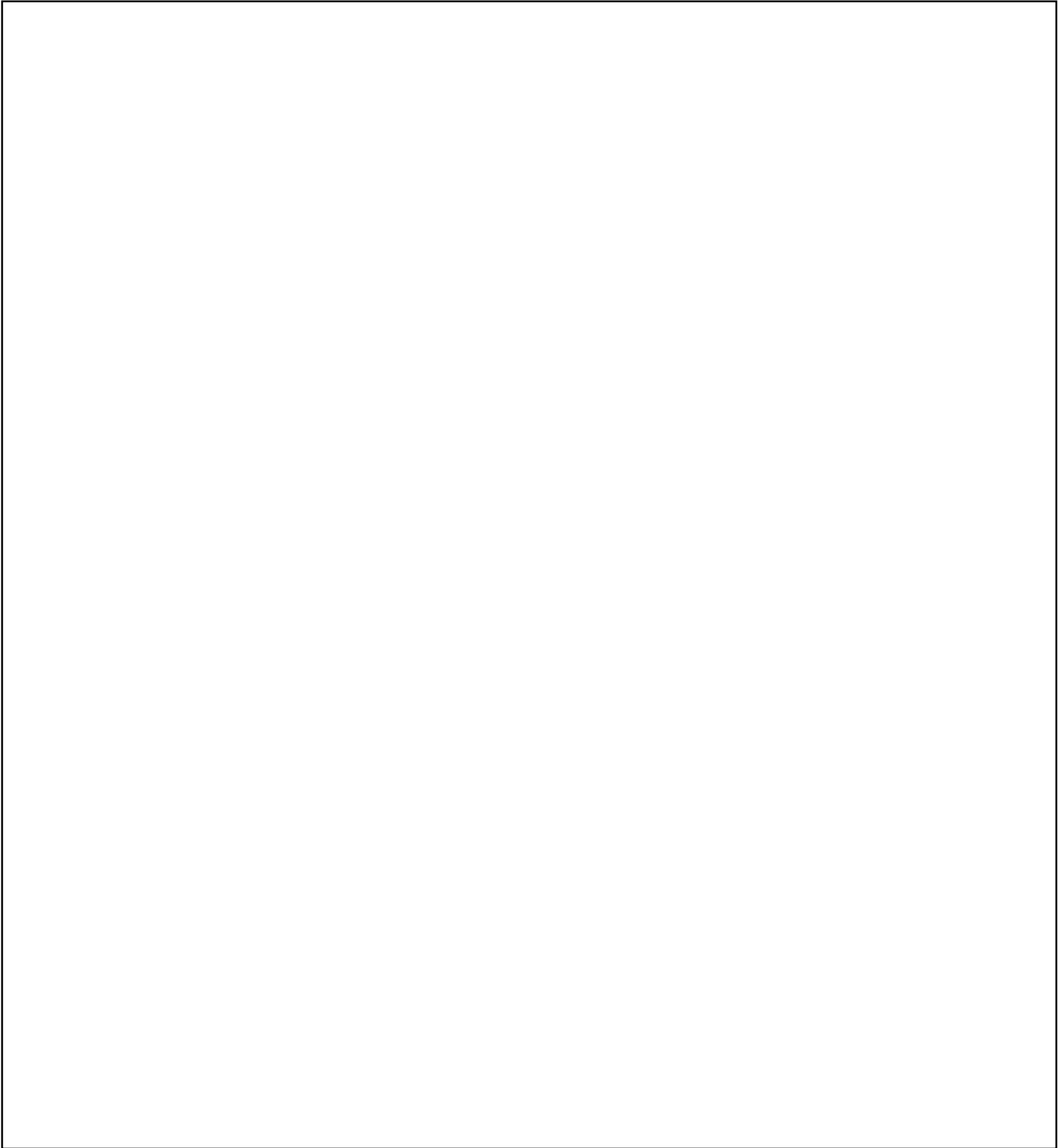
The PSSCS inspection fails if any of the following observations noted below are found, or other noted deficiencies shall cause and contribute to any overflows within the public sewer system or PSSCS (B, C, DC, I, R, S, and O).

B	BROKEN OR MISSING PIPE OR JOINTS	R	ROOTS (all roots, including fine roots)
C	CRACKED OR FRACTURED PIPE OR JOINTS	S	SAG (>50%)
DC	OTHER DRAINAGE CONNECTION (NOT SEWER)	O	OFFSET JOINTS (>1 pipe wall thickness)
I	INFILTRATION OR EXFILTRATION		

Inspection Log

Code	Distance	Observation

Site Sketch

A large, empty rectangular box with a thin black border, intended for a site sketch. It occupies the majority of the page area below the title and above the explanatory text.

Sketch of each lateral line and entire development sewer line must be included and labeled to provide easy navigation of correlating videos. Separate map can be submitted instead of site sketch above. Include lot and building referenced to front curb or edge of pavement and side property lines where possible. Note: Spacing of cleanouts and entry location for insertion of camera.

INSPECTION RESULTS

Private Sanitary Sewer Collection System:

- ☐ **Passed Inspection** – Submit passing inspection report form and video footage to PSL.WC@morganhill.ca.gov.
- ☐ **Failed Inspection** – Repair PSSCS per Qualified Contractor recommendations, then complete a new inspection and email the new passing inspection report form and video footage to PSL.WC@morganhill.ca.gov.

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

Qualified Plumber's Signature: _____ Date: _____

FOR CITY OFFICIAL USE ONLY

Date: _____ Staff Signature/Stamp: _____

PLUMBING COMPANY RECOMMENDATIONS and/or NOTES

Private Sanitary Sewer Collection System:
