

Sewer Video Inspection Request

**Submit request to: Town of Hillsborough, Video Inspection Program,
1600 Floribunda Ave., Hillsborough, CA 94010**

Street address of lateral(s): _____

Resident's name: _____

How many separate buildings have sewer laterals?

What year was the building constructed?

Do the laterals merge/intersect on your property?

Does the lateral have a cleanout by the building?

Does the lateral have a cleanout by the street?

Does the lateral flow towards your street?

Do you know what your lateral is made of?

Have you experienced problems with tree roots in the lateral in the past?

Do you periodically hire a plumber to clean tree roots from your lateral?

Date of last root cleaning?

When did you purchase your home?

| <input type="checkbox"/> Main Residence <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No ____/____/____ ____/____/____ | <input type="checkbox"/> Pool House <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No ____/____/____ ____/____/____ | <input type="checkbox"/> Other <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No ____/____/____ ____/____/____ |
|---|---|--|
|---|---|--|

Daytime Phone: _____

Email: _____

Applicant Affidavit

- Applicant owns the property listed above.
- Applicant hereby requests video inspection of a privately-owned lateral(s) at the address above.
- Applicant agrees to give Town employees and its contractors access to inspect the lateral.
- Applicant understands that the video inspection will be reviewed by the Town, and the City Engineer will advise the resident if repairs or replacement of the lateral are required.
- Applicant agrees to hold harmless the Town, its directors, officers, and employees, against all loss, damage, expense, and liability resulting from any loss, destruction or damage to property arising out of or in any way connected with the conduct of video inspection.
- Applicant affirms that the information set forth in this Video Inspection Request is true and accurate, to the best of your knowledge.

Signature of applicant: _____

Date: _____

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| <i>For Town Use: Received: ____/____/____ <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: ____/____/____</i> |
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Hillsborough Video Inspection Program

The Town of Hillsborough is offering free video inspections of sewer laterals as of July 1, 2009.

This program has been implemented as part of a Supplemental Environmental Program ordered by the Regional Water Quality Control Board (Region 2) as part of Cease and Desist Order R2-2009-0020 which prescribes measures needed to avoid sanitary sewer overflows from the Town of Hillsborough's sewer system.

The Process:

1. Resident completes the Video Inspection Request
2. Town reviews and approves the request if it meets program criteria.
3. Town works with Resident to schedule video inspection by Town contractor.
4. City Engineer reviews video inspection and provides report to resident to advise of condition of the sewer lateral and when appropriate the need for repairs or replacement of the lateral.

The entire process should take less than 8 weeks from the date the Video Inspection Application is submitted.

Residents who need to repair their laterals may be eligible for a \$500 reimbursement from the Town, which requires a separate application.

Completing the Form:

Lateral is the pipe that connects the lowest drain fixture in your home to the Town's sewer main. If you have separate buildings on your property it is possible you have more than one lateral that connects to the main.

Cleanout is the pipe connection from your lateral to the ground surface. Most homes have 2 or more cleanouts, usually found immediately outside the building and near the curb of the street. Usually it is a 4" black pipe covered by a lid. In order to inspect the lateral, a camera must be placed into a cleanout.

Flow is the direction of where the sewage flows. Some houses flow the street, and others flow to easement areas behind the home. You can identify the direction by looking at the direction of the cleanout from the house e.g. If your cleanout is behind your home, it probably flows towards an easement.

Year of Construction will help the Town evaluate what kind of material was likely used for your lateral and its condition.

Root problems will help the Town evaluate if the line requires cleaning prior to inspection.