



You are logged-in as:

Navigate to: . If this account does not belong to you, please log out.

Š	anita	ry S	Sewer	Sys	tems (3enera	I C)rd	е

Category 1 Spill

SSS Menu Spill Location Name:

Spill Event ID: Sanitary Sewer System:

Agency:

Spill Report Type:

Initial Draft Submitted

Spill Report Status: Original Certified On:

On:

Certification Attachments

General Info Attachments Certification					
	Report for Category 1 Spills iness days of the Enrollee's knowledge of a Category 1 spill.				
Save Work in Progress Submit Draft					
[‡] 1. Name of Enrollee contact person to respond to spill- pecific questions:					
*1.a. Telephone number of Enrollee contact person to respond to spill-specific questions:	n				
2. Spill Location Name:					
*3. Date and time the Enrollee was notified of, or self- discovered, the spill:					
*4. Operator arrival time:					
*5. Estimated spill start date and time:					
*6. Date and time the Enrollee notified the California Office of Emergency Services:					
*6.a. Assigned control number:					
*7. Description, photographs, and GPS coordinates of the system location where the spill originated: If a single spill event results in multiple appearance points, provide GPS coordinates for the appearance point closest to the failur point and describe each additional appearance point in the spill appearance point explanation field: Submit photographs under the Attachments tab					
*7.a. Lattitude:	decimal degrees [Show Map]				
*7.b. Longitude:	decimal degrees [Show Map]				
*7.c. Appearance points:	Backflow Prevention Device Combined Sewer Drain Inlet. (Combined Collection System Only) Force Main Gravity Mainline Inside Building or Structure Lateral Clean Out (Private) Lateral Clean Out (Private) Lower Lateral (Private)				
7.d. If other, describe:	1000 characters remaining. (Attach document if description is greater than 1000 characters, enter "See Attachment" into the box)				

7.e. Additional spill appearance point(s) explanation:	1000 characters remaining. (Attach document if description is greater than 1000 characters, enter "See Attachment" into the box)			
*8. Estimated total spill volume exiting the system:	Gallons			
*9. Description and photographs of the extent of the spill and spill boundaries:				
Submit photographs under the Attachments tab	1000 characters remaining. (Attach document if description is greater than 1000 characters, enter "See Attachment" into the box)			
*10. Did the spill reach a drainage conveyance system?	Select			
10.a. Description of the drainage conveyance system transporting the spill and photographs of the drainage conveyance system entry location(s):				
Submit photographs under the Attachments tab	1000 characters remaining. (Attach document if description is greater than 1000 characters, enter "See Attachment" into the box)			
(Required if answer for question 10 is 'Yes') 10.b. Estimated spill volume fully recovered from the drainage conveyance system: (Required if answer for question 10 is 'Yes')	Gallons			
10.c. Estimated spill volume remaining within the drainage conveyance system: (Required if answer for question 10 is 'Yes')	Gallons			
*11. Description and photographs of all discharge point(s) into the surface water:				
Submit photographs under the Attachments tab	1000 characters remaining. (Attach document if description is greater than 1000 characters, enter "See Attachment" into the box)			
*12. Estimated spill volume that discharged to surface waters:	Gallons			
*13. Estimated total spill volume recovered:	Gallons			
Save Work in Progress Submit Draft				
Note : Questions with "*" are required to be answered.				