

City of San Mateo

Sewer Lateral Inspection Form

A licensed plumber/contractor must complete this form.

Reason for Inspection: Sale of Property Improvements \geq \$90,000 Sewer Lateral Overflow

Property Information:

Property Address: _____

Property Owner(s) name: _____

Mailing address of owner (if different from above): _____

City: _____ State: _____ Zip Code: _____

Owner Contact Phone Number: _____

Inspector Information:

Company Name: _____ Inspector Name: _____

Contact Phone: _____ Email Address: _____

Contractors License: _____

Lateral Inspection Information:

Inspection Date: ____/____/____ Pipe Size: _____ Pipe Material: _____

Length (from cleanout to sewer main): _____

Other Information: _____

Were any corrections required to bring the lateral up to "passing" condition? Yes No

If "Yes," please select all the apply:

Full sewer lateral replacement

Spot Repair

New connection to main

Old P-trap removed / New cleanout installed

Cleaning – Jet to remove debris/deposits/blockage

Cleaning – Root removal

Other: _____

Please answer ALL of the questions below:

Yes ____ No ____ Property should have a backwater valve

Yes ____ No ____ Property has a working backwater valve

Yes ____ No ____ Property has outside drains or sump pumps connected to building sanitary sewer

NOTE: The following requirements must be met to pass a Sewer Lateral inspection:

1. Pipe shall have a standard building clean-out (P-traps are not allowed)
2. The Private Sewer Lateral shall not have any connections to outside drains or sump pumps
3. The Private Sewer Lateral shall not have a grade (5) structural defect
4. The Private Sewer Lateral shall not have a grade (4) or grade (5) operational condition
5. The sum of all defect grades is less than thirteen (13) (see inspection sheet for grading scores)
6. All internal pipe surface area shall be visible in the inspection video

Please see the reverse page for inspection notes

As the inspector for the property mentioned above, I certify under penalty of law that the information provided on this form is true and correct.

Signature of Inspector: _____ Date: _____

Passing Criteria

A sewer lateral inspection passing grade shall have **no pipe with structural grade 5 defects and no operational grade 4 or 5 defects, and the sum of all defect grades shall be less than thirteen (13)**. Please note that multiple structural defects within the pipe are counted once for grading, while operational defects are counted on a per-incident basis.

Scoring System

Structural Defects

- Crack = 2
- Fracture = 3
- Broken/Hole/Deformed/Collapsed = 5
- Medium offset or Separation (≤ 1 pipe thickness) = 3
- Large offset or separation (> 1 pipe thickness) = 4
- Sag – Shallow ($< 30\%$) = 3
- Sag – Medium ($30\% - 50\%$) = 4
- Sag – Deep ($> 50\%$) = 5

Operational Defects

- Roots – Fine ($< 5\%$) = 1
- Roots – Medium ($5\% - 50\%$) = 3
- Roots – Ball ($> 50\%$) = 4
- Deposits ($< 20\%$) = 2
- Deposits ($20\% - 30\%$) = 4
- Deposits ($> 30\%$) = 5

Inspection

Distance (ft)	Defect	Grade	Remarks
Example 20ft	Crack	2	6 o'clock location
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
	Sum of Grades:		<input type="checkbox"/> Pass <input type="checkbox"/> Fail

Please submit the completed form to pwencroachment@cityofsanmateo.org