



SEWER SYSTEM EVALUATION SURVEY (SSES) - ANNUAL REPORT (2018-2019)

THIS ANNUAL REPORT SHALL BE SUBMITTED TO RER-DERM NO LATER THAN MARCH 1st OF EACH YEAR.
NEXT REPORT DUE by 3/01/2019

Permit Number (PSO#):

Facility Name:

Facility Address:

Property Folio(s) #:

I. Changes in the permitted sanitary sewer- collection system during the last year (outside buildings only).

A. Gravity sewer piping: Yes / No	B. Sanitary Manholes: Yes / No	C. Clean/Outs: Yes / No
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II. Changes in the permitted sanitary sewer - transmission system during the last year. If property does not have at least one pump station, go to Item III.

A. Force Main Pipes: Yes / No

B. Changes/Upgrades of the Sanitary Sewer Pump Station(s): Yes / No

If yes, please complete the following items below:

B.1. Pump(s) replaced: Yes / No

B.2. Pump Manufacturer:

B.3. Pump Model:

B.4. Motor Horse Power (HP), if changed:

B.5. Control panel replaced: Yes / No

B.6. Any Changes to the Remote Telemetry Unit: Yes / No

B.7. Describe changes to the Remote Telemetry Unit:

III. Maintenance / Service Contractor

A. Service / maintenance contractor company change in the last year: Yes / No

B. Was the Emergency Contact Sign updated: Yes / No

C. Was DERM notified of the change: Yes / No

IV. Changes in ownership of the permitted property.

A. Property Owner changed: Yes / No

B. If Yes, was DERM Notified: Yes / No

The PSO Permit is not transferable. If property owner changed and DERM was not notified, contact DERM - PSO Program (305-372-6600) to obtain a Permit Modification Application. The completed Permit Modification Application form shall be submitted to DERM along with this Annual Report.

V. Tracking of Maintenance Activities

A. Is there a LOG BOOK to record ALL maintenance Activities performed during the last year: Yes / No

I certify under penalty of law that this document was prepared by me or under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or the persons directly responsible for gathering the information, that the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Permittee (print Name):

As shown in current permit

Permittee, or authorized representative in DERM records - Title:

Permittee, or authorized representative in DERM records - Signature:

Signature Date: