

**HOMESTEAD VALLEYSANITARY DISTRICT**

**District Manager**  
Bonner Beuhler  
(415) 388-4796 OFFICE, 415) 725-7852 CELL

FOR DISTRICT USE ONLY

PERMIT NO: \_\_\_\_\_  
PERMIT FEE: \$ \_\_\_\_\_  
APPLICATION DATE: \_\_\_\_\_  
EXPIRATION DATE: \_\_\_\_\_

PERMIT APPLICATION  
PRIVATE SEWER LATERAL

LATERAL INSPECTION REVIEW – CONSTRUCTION – REPAIR – REPLACEMENT

NAME: FIRST & LAST (PROPERTY OWNER) \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CROSS STREET \_\_\_\_\_  
PHONE \_\_\_\_\_ CELL \_\_\_\_\_ FAX \_\_\_\_\_

APPLICANT, IF DIFFERENT THAN ABOVE (Plumber or Contractor)  
APPLICANT NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
PHONE \_\_\_\_\_ CELL \_\_\_\_\_ FAX \_\_\_\_\_

LOCATION OF WORK  PUBLIC RIGHT OF WAY\*  
 EASEMENT/PRIVATE PROPERTY

NATURE OF WORK  PRIVATE LATERAL INSPECTION REVIEW  
 REPAIR OR REPLACEMENT OF PRIVATE LATERAL  
 NEW CONSTRUCTION OF PRIVATE LATERAL

I AGREE TO THE FOLLOWING:

- Will submit written Repair Proposal with drawings
- Will not start work without approval of Repair Proposal
- Will have the bedding ½ way up pipe with bands and pipe joints exposed for District review before backfilling
- Will have all pipes connected and cleanout(s) installed (where applicable)
- Will contact District representative Bonner Beuhler (415) 388-4796 Office or (415) 725-7852 cell at least one (1) business days in advance of site inspections to confirm inspections times.
- New or complete replacement laterals must be water or air tested with District Representative present (see Approved Repair Proposal)

DATE WORK SCHEDULED TO START \_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

\*If the work proposed is in the Public Right of Way a County of Marin or City of Mill Valley Encroachment Permit is required.

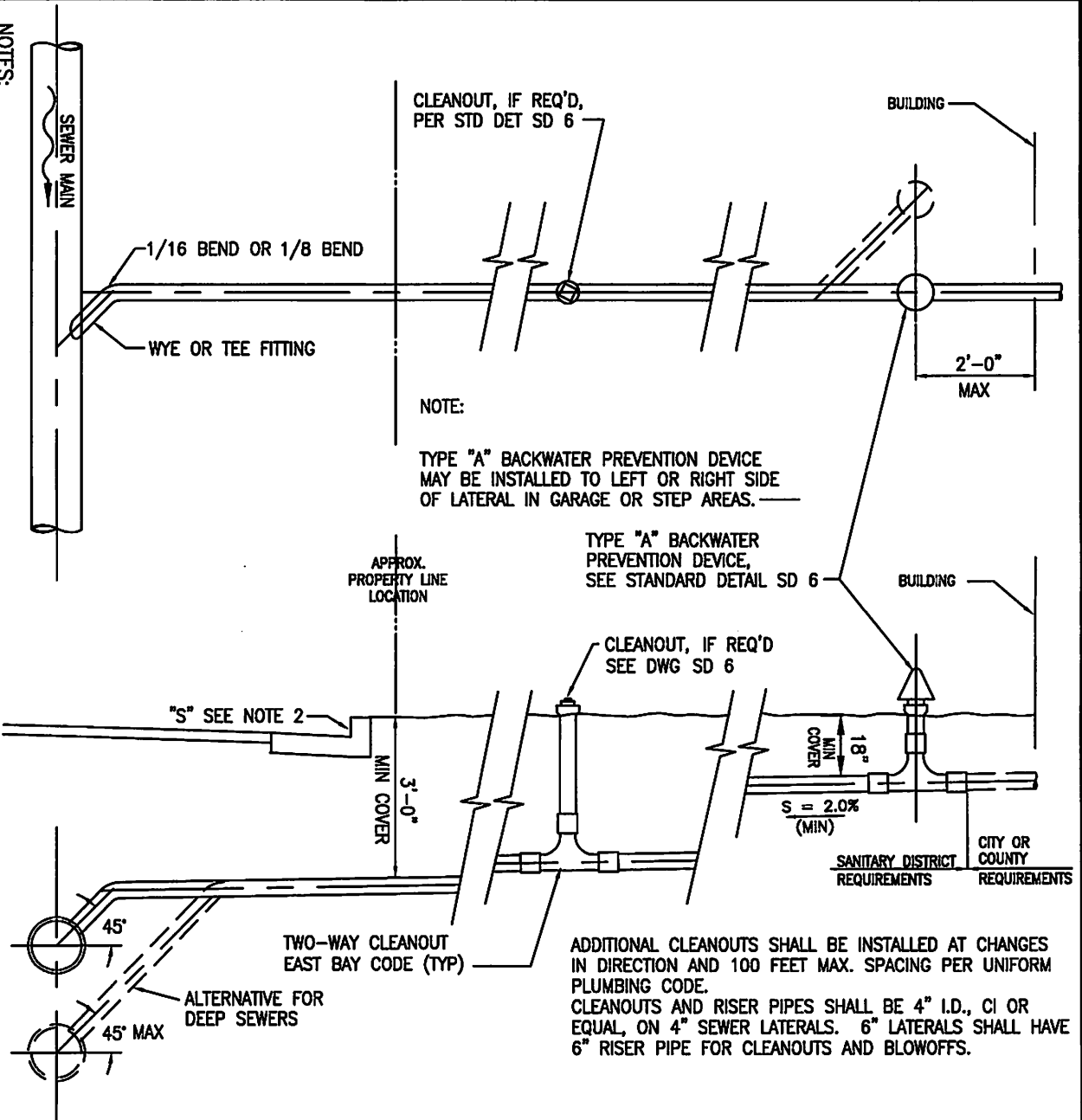
FOR DISTRICT USE ONLY:

REPAIR PROPOSAL APPROVAL DATE \_\_\_\_\_ REVIEWED BY \_\_\_\_\_  
DATE INSPECTED \_\_\_\_\_ INSPECTED BY \_\_\_\_\_  
TEST (AIR OR WATER) \_\_\_\_\_ CCTV OF REPAIR \_\_\_\_\_

Existing Pipe Material \_\_\_\_\_ Repair Pipe Material \_\_\_\_\_  
Length of Lateral \_\_\_\_\_ Distance from Left Property Corner \_\_\_\_\_  
Repair Length \_\_\_\_\_ Connection Type (At Main) \_\_\_\_\_  
Upstream MH \_\_\_\_\_ Downstream MH \_\_\_\_\_  
Overflow (Contra Costa Valve) Required  Yes  No Backflow (Check Valve) Required:  Yes  No

COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**NOTES:**

1. WHEN A LATERAL SEWER IS INSTALLED IN ADVANCE OF THE BUILDING SEWER, IT SHALL BE TERMINATED AT OR NEAR THE PROPERTY LINE. THE END OF THE LATERAL SHALL BE MARKED WITH A 4" x 4" REDWOOD STAKE, PAINTED GREEN, FROM THE TOP OF THE PIPE TO A MINIMUM OF 6" ABOVE THE FINISHED GROUND SURFACE.
2. WHERE CONCRETE CURBS AND GUTTERS EXIST OR ARE TO BE A PART OF AN IMPROVEMENT, EACH SIDE SEWER SHALL BE PERMANENTLY LOCATED BY IMPRINTING OR CHISELING AN "S" ( 3" size) IN THE FACE OF THE CURB VERTICALLY ABOVE THE SEWER PIPE.
3. BACKFILL SHALL NOT BE PLACED UNTIL PIPE INSTALLATION HAS BEEN INSPECTED AND APPROVED BY THE DISTRICT.
4. TYPE A BACKWATER PREVENTION DEVICE (CONTRA COSTA RELIEF VALVE, ALSO KNOWN AS MUSHROOM CAP) SHALL BE INSTALLED ON A 4" MINIMUM RISER PIPE NOT MORE THAN 3' FROM BUILDING WALL, PER STANDARD DETAIL SD6.
5. LATERAL TRENCHES IN AREA OF PUBLIC STREET CURB, GUTTER AND SIDEWALK SHALL BE COMPACTED THE SAME AS TYPICAL TRENCH DETAIL SD 4. AREAS AROUND NEW CONCRETE CLEAN-OUT BOXES SHALL BE SOILS TESTED TO 90% COMPACTED. CONTRACTOR IS TO USE WHATEVER MEANS NECESSARY TO ACHIEVE 90% COMPACTON.
6. CLEANOUT MAY BE PLACED IN A BOX AS LOCATION REQUIRES.

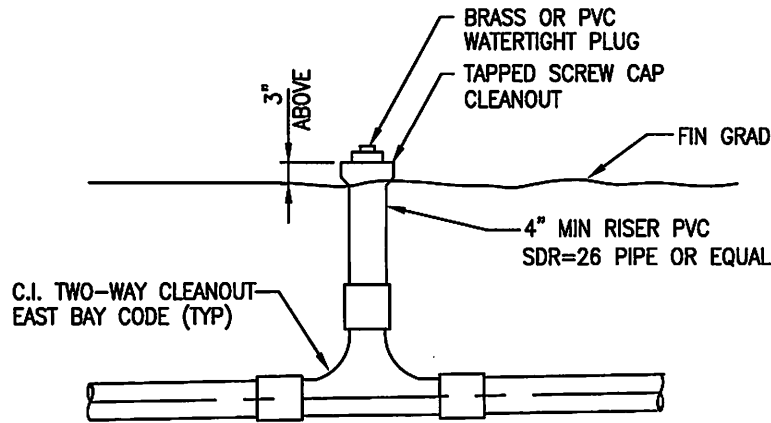
**HOMESTEAD VALLEY  
SANITARY DISTRICT**

TYPICAL SIDE  
SEWER DETAILS

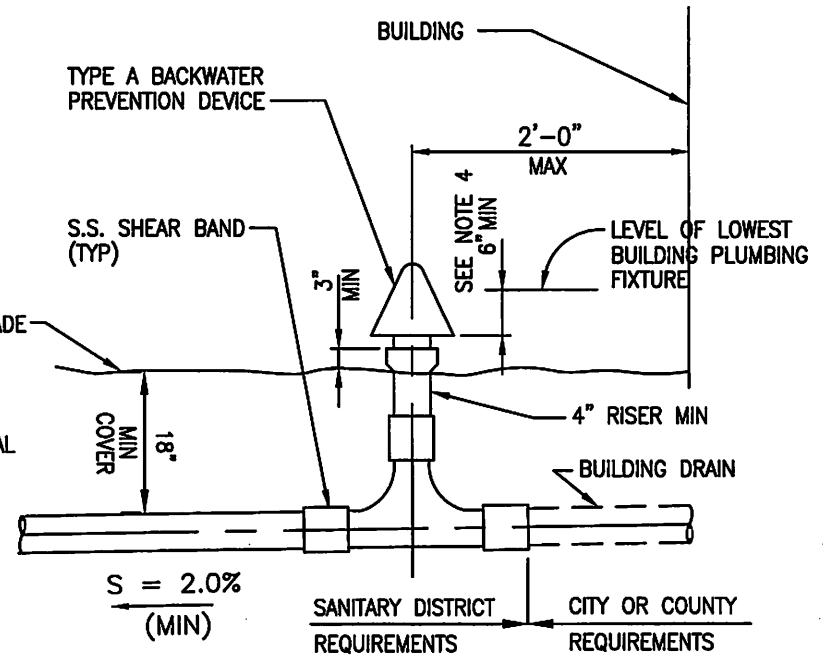
2012

SD 5

CLEANOUTS LOCATED UNDER PAVED DRIVEWAYS, WALKWAYS, ETC. SHALL BE RAISED TO GRADE AND INSTALLED IN PRECAST CONC METER BOXES FLUSH FITTED TO PAVING W/ GALVANIZED STEEL CHECKERED PLATE TRAFFIC LIDS MARKED "SEWER", CHRISTY B9 W/ 61D15 LID, OR EQUAL, AS DIRECTED BY THE DISTRICT.



**STANDARD CLEANOUT**



**TYPE A BACKWATER PREVENTION DEVICE**

**NOTES:**

1. A STANDARD 4" C.I. CLEANOUT IS THE MINIMUM DISTRICT REQUIREMENT.
2. A BACKWATER PREVENTION DEVICE IS REQUIRED AND SHALL BE INSTALLED ON ALL SIDE SEWERS.
3. A TYPE "A" BACKWATER PREVENTION DEVICE SHALL BE INSTALLED IN A LOCATION WHERE SEWAGE CAN OVERFLOW ON THE SURROUNDING AREA WITHOUT DAMAGE TO PROPERTY.
4. IF THE DIFFERENCE IN ELEVATION OF THE LOWEST FIXTURE AND THE TYPE "A" BACKWATER PREVENTION DEVICE IS LESS THAN SIX (6) INCHES, A BACKWATER CHECK VALVE SHALL BE INSTALLED AS SHOWN IN STANDARD DETAIL SD 7.

2012	STANDARD CLEANOUT AND BACKWATER PREVENTION DEVICE	HOMESTEAD VALLEY SANITARY DISTRICT
SD 6		

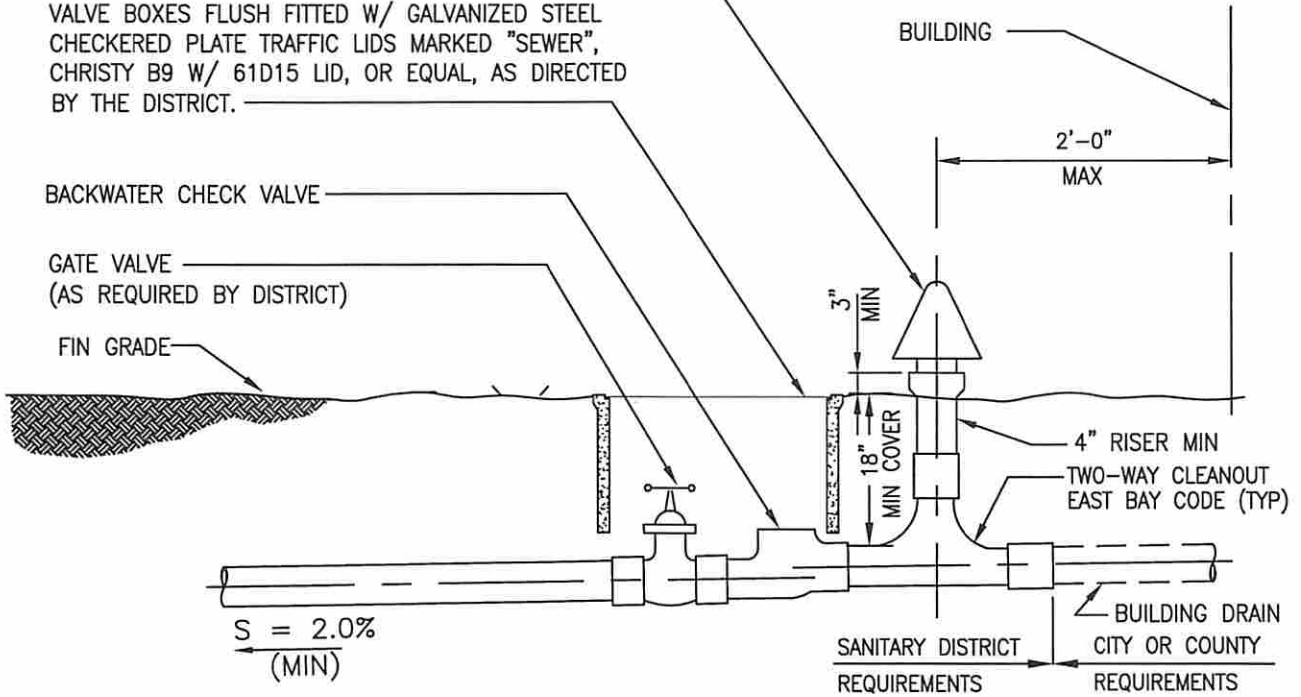
TYPE A BACKWATER PREVENTION DEVICE,  
SEE STANDARD DETAIL SD 6

VALVES SHALL BE INSTALLED IN PRECAST CONCRETE  
VALVE BOXES FLUSH FITTED W/ GALVANIZED STEEL  
CHECKERED PLATE TRAFFIC LIDS MARKED "SEWER",  
CHRISTY B9 W/ 61D15 LID, OR EQUAL, AS DIRECTED  
BY THE DISTRICT.

BACKWATER CHECK VALVE

GATE VALVE  
(AS REQUIRED BY DISTRICT)

FIN GRADE



# HOMESTEAD VALLEY SANITARY DISTRICT

## BACKWATER CHECK VALVE AND SHUTOFF SYSTEM

2012

SD 7

# HOMESTEAD VALLEY SANITARY DISTRICT

P.O. BOX 149, MILL VALLEY, CALIFORNIA 94942 (415) 388-4796

## CONNECTION FEE WORKSHEET FOR ADDITIONS TO EXISTING RESIDENCES

ADDRESS \_\_\_\_\_ A.P. NO. \_\_\_\_\_ - \_\_\_\_\_

OWNER \_\_\_\_\_ CONTRACTOR \_\_\_\_\_

ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE NO. \_\_\_\_\_ PHONE NO. \_\_\_\_\_

DESCRIPTION \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TYPE OF FIXTURE	COUNT	FIXTURE UNITS/EA.	EXTENSION
BAR SINK		1	
BATHTUB		2	
BIDET		2	
DISHWASHER		2	
LAUNDRY		2	
LAVATORY		1	
SHOWER		2	
SINK		2	
TOILET		3	
OTHER			

TOTAL FIXTURE UNITS: \_\_\_\_\_

ADMINISTRATION/INSPECTION: \$200.00

ADDITIONAL FIXTURE UNITS @ \$200/EA. = \_\_\_\_\_ X \$200 = \_\_\_\_\_

CONNECTION FEE : \_\_\_\_\_

PREPARED BY \_\_\_\_\_

DATE \_\_\_\_\_