

**SANITARY SEWER SYSTEMS GENERAL ORDER
ORDER 2022-0103-DWQ**

**GUIDANCE FOR REPORTING CATEGORY 4 SPILLS
IN THE
CALIFORNIA INTEGRATED WATER QUALITY SYSTEM (CIWQS)**



Last Revised: April 2024

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Reporting Category 4 Spills in the Online California Integrated Water Quality System (CIWQS) Sanitary Sewer System Database

Per Attachment E1, Section 3.4. of [General Order 2022-0103-DWQ](#), the Enrollee shall report and certify the estimated total volume and total number of all Category 4 spills to the online CIWQS Sanitary Sewer System Database (<https://ciwqs.waterboards.ca.gov>), within 30 calendar days after the end of the month in which the spills occurred.

Per Attachment E1, Section 4.4. of the Order, the Enrollee is required to maintain records of all Category 4 spills and annually upload and certify a report by February 1st after the end of calendar year in which the spills occurred (Attachment E1, Section 3.6.)

Per Attachment E1, Section 3.7. of the Order, if no spills occur during a calendar month, the Enrollee shall certify, within 30 calendar days after the end of each calendar month, a “No-Spill” certification statement.

Attachment E2, Table E2-4 of the Order provides summary of the notification, monitoring, and reporting requirements for Category 4 spills. Below is a snapshot of Table E2-4 for your convenience:

Table E2-4
Spill Category 4: Spills Less Than 50 Gallons That Do Not Discharge to Surface Waters

Spill Requirements	Due	Method
Notification	Not Applicable	Not Applicable
Monitoring	Conduct spill-specific monitoring.	(Section 2 of Attachment E1)
Reporting	<ul style="list-style-type: none"> • If, during any calendar month, Category 4 spills occur, certify monthly, the estimated total spill volume exiting the sanitary sewer system, and the total number of all Category 4 spills into the online CIWQS Sanitary Sewer System Database, within 30 days after the end of the calendar month in which the spills occurred. • Upload and certify a report, in an acceptable digital format, of all Category 4 spills to the online CIWQS Sanitary Sewer System Database, by February 1st after the end of the calendar year in which the spills occur. 	(Section 3.4, 3.6, 3.7 and 4.4 of Attachment E1)

Figure 1 – Spills Less Than 50 Gallons That Do Not Discharge to Surface Waters

The Order requires two types of reporting for Category 4 spills:

- 1- Monthly certified spill reporting of total spill volume and total number of spills;
Due 30 calendar days after the end of the month in which the spill(s) occurred (Attachment E1, Section 3.4).

- Recordkeeping of all Category 4 spills per Attachment E1, Section 4.4, and annual certified spill reporting of all spills that happened in the calendar year (Attachment E1, Section 3.6) into CIWQS Sanitary Sewer System Database (<https://ciwqs.waterboards.ca.gov>);

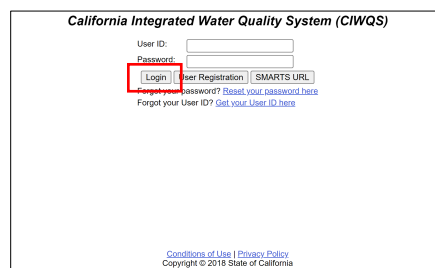
Due by February 1st after the end of the calendar year in which the spills occurred.

Monthly Certification of Total Volume and Total Number of Category 4 Spills

- Log into the CIWQS website at:

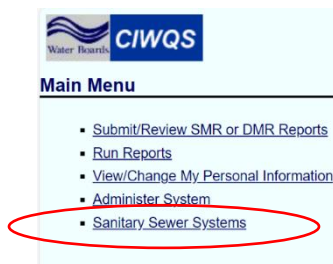
<https://ciwqs.waterboards.ca.gov/>

- Enter your user account credentials and click on the “Login” button.

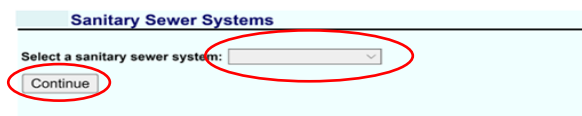


NOTE: Sharing user account information amongst staff is prohibited. CIWQS may remove all reports certified by incorrect users.


- Once logged into your personal CIWQS user account, click on the “Sanitary Sewer Systems” link under the Main Menu.





NOTE: If you represent more than one sanitary sewer system, from the dropdown menu, select the applicable sanitary sewer system. Click on the “Continue” button.





- Click on the “Monthly Certification of ‘No-Spills’ or ‘Category 4 Spills’ and/or ‘Non-Category 1 Enrollee-owned Lateral Spills’” link.


- [Annual Report](#) 


A new Enrollee shall complete and submit its first certified Annual Report within 30 days of obtaining a CIWQS account; All subsequent Annual Reports are due by April 1 of each year.
- [Internal Audit Report Upload](#) 


The Legally Responsible Official shall submit an audit report into the online CIWQS Sanitary Sewer System Database per the requirements in section 3.10 of Attachment E1 of the General Order.
- [Sewer System Management Plan Upload](#) 


Plan updates are due within every six years after the last Plan update due date.
New Enrollees: The Plan shall be uploaded and certified within 12 months of the Application for Enrollment approval date. This establishes the last Plan update due date.
Continuing Enrollees: The last Plan update due date was established under the 2006 Order. All subsequent Plan updates are due within every six years after the last Plan update due date.
- [New Spill Report](#) 

Submit individual spill reports for Category 1, Category 2 and Category 3 spill events.
- [New Category 4 and Enrollee-owned/operated Lateral Spill Report](#) 

Submit spill reports for Category 4 and Enrollee-owned/operated lateral spill events.
NOTE: Spills of any volume that discharge to a surface water are Category 1 spills, and must be reported using the "New Spill Report" link.
- [Privately-Owned Sewer Laterals and/or Private Systems Spill Report \(Voluntary\)](#) 

Voluntarily report spills from a private sewer lateral or private sanitary sewer system that is not owned/operated by the Enrollee.
- [Existing Spill Reports](#) 

View, update and/or amend a previously reported spill.
- [Monthly Certification of "No-Spills" or "Category 4 Spills" and/or "Non-Category 1 Enrollee-owned Lateral Spills"](#) 

Within 30 calendar days after the end of each calendar month, certify either (1) no spills occurred during a calendar month or (2) only Category 4, and/or Enrollee-owned and/or operated lateral spills (that do not discharge to a surface water) occurred during a calendar month.
- [View Spill Incident Map - Public Sewer Systems \(Not Site Specific\)](#) 

The data displayed in this map represents spill reports, for individual locations, where sewage was discharged from a sanitary sewer system enrolled under the Statewide Sanitary Sewer Systems General Order. It does not include Category 4 spills.

5. On the Monthly “No-Spills” or “Category 4 Spills” and/or “Non-Category 1 Enrollee-owned and/or Operated Lateral Spills Certification” page, select the month and year for which the certification is being submitted. This is the month during which the Category 4 spills being summarized (number and volume) occurred.

**Monthly Certification of “No-Spills”
or
Monthly Certification of “Category 4 Spills” and/or “Non-Category 1 Lateral Spills”**

Month/Year of Certification:

NOTE: If no spills occurred from the system during the calendar month, complete Step 6. Afterwards, proceed to Step 10.

NOTE: If Category 4 Spills occurred from the system during the previous calendar month, complete Step 7 and 8. Afterwards, proceed to Step 9.

6. If no Category 1, 2, 3, 4, or Enrollee owned/operated lateral spills occurred during the reporting month, check the box to certify that no spills occurred from the system during the previous calendar month.

I CERTIFY THAT NO SPILLS OCCURRED FROM THIS SYSTEM DURING THE PREVIOUS CALENDAR MONTH.

I certify under penalty of perjury under the laws of the State of California that the electronically submitted information was prepared under my direction or supervision. Based on my inquiry of the person(s) directly responsible for gathering the information, to the best of my knowledge and belief, the information submitted is true, accurate, and complete, and complies with the Statewide Sanitary Sewer Systems General Order. I am aware that there are significant penalties for submitting false information.

7. Check the box to certify that Category 4 spills occurred from the system if during the previous calendar month your system had Category 4 spills (spills of less than

50 gallons that did not discharge to surface water and that did not originate in enrollee owned or operated laterals).

OR
(Check one or more applicable boxes below)

I CERTIFY THAT CATEGORY 4 SPILLS OCCURRED FROM THIS SYSTEM DURING THE PREVIOUS CALENDAR MONTH*.
I certify under penalty of perjury under the laws of the State of California that the electronically submitted information was prepared under my direction or supervision. Based on my inquiry of the person(s) directly responsible for gathering the information, to the best of my knowledge and belief, the information submitted is true, accurate, and complete, and complies with the Statewide Sanitary Sewer Systems General Order. I am aware that there are significant penalties for submitting false information.

* Please report the estimated total spill volume and the total number of all Category 4 spills for the previous calendar month.

1. Estimated total Category 4 spill volume exiting the sanitary sewer system: Gallons

2. Total number of all Category 4 spills:

8. Report the estimated Category 4 total spill volume exiting the sanitary sewer system in gallons as a whole number and provide the total number of all Category 4 spills that occurred during the calendar month.

OR
(Check one or more applicable boxes below)

I CERTIFY THAT CATEGORY 4 SPILLS OCCURRED FROM THIS SYSTEM DURING THE PREVIOUS CALENDAR MONTH*.
I certify under penalty of perjury under the laws of the State of California that the electronically submitted information was prepared under my direction or supervision. Based on my inquiry of the person(s) directly responsible for gathering the information, to the best of my knowledge and belief, the information submitted is true, accurate, and complete, and complies with the Statewide Sanitary Sewer Systems General Order. I am aware that there are significant penalties for submitting false information.

* Please report the estimated total spill volume and the total number of all Category 4 spills for the previous calendar month.

1. Estimated total Category 4 spill volume exiting the sanitary sewer system: Gallons

2. Total number of all Category 4 spills:

9. If the system also had non-Category 1 lateral spills, check the box certifying that non-Category 1 Lateral Spills occurred from the system during the previous calendar month. Refer to Enrollee Owned/Operated Lateral Spill Reporting guidance document, for more information.

I CERTIFY THAT NON-CATEGORY 1 LATERAL SPILLS OCCURRED FROM THIS SYSTEM DURING THE PREVIOUS CALENDAR MONTH.
I certify under penalty of perjury under the laws of the State of California that the electronically submitted information was prepared under my direction or supervision. Based on my inquiry of the person(s) directly responsible for gathering the information, to the best of my knowledge and belief, the information submitted is true, accurate, and complete, and complies with the Statewide Sanitary Sewer Systems General Order. I am aware that there are significant penalties for submitting false information.

10. Enter certifier name, certifier initials, and title. Click on the “Certify” button.

I CERTIFY THAT NON-CATEGORY 1 LATERAL SPILLS OCCURRED FROM THIS SYSTEM DURING THE PREVIOUS CALENDAR MONTH.
I certify under penalty of perjury under the laws of the State of California that the electronically submitted information was prepared under my direction or supervision. Based on my inquiry of the person(s) directly responsible for gathering the information, to the best of my knowledge and belief, the information submitted is true, accurate, and complete, and complies with the Statewide Sanitary Sewer Systems General Order. I am aware that there are significant penalties for submitting false information.

Certification

Certifier Name: Title:

Certifier Initial: Certification Date:

[Previous Submissions](#)

11. After the certification, you will receive a message confirming successful completion along with a confirmation number.

**Monthly Certification of “No-Spills”
or
Monthly Certification of “Category 4 Spills” and/or “Non-Category 1 Lateral Spills”**

12. You may view past submissions by clicking on “Previous Submissions” below the “Certify” button.

Previous Submissions:

1 2 3 (1 of 3) Display 20 per page

Confirmation Number	Month/Year	Certification Type	Entered Date/Time	Certified UserID	Certified Name	General Order Number
Category 4 Spills						
		Total Number, Total Volume (Gallons)				

Annual Reporting of all Category 4 Spills

Guidance Document: Reporting Category 4 Spills

There are two options for reporting details of Category 4 spills that occurred during the calendar year to fulfill the annual reporting of Category 4 spills (due February 1st) requirement:

- 1 - Report each individual Category 4 spill using a report form.
- 2 - Upload a report of multiple Category 4 spills at once using a spreadsheet.

NOTE: The details of Category 4 spills can be reported throughout the year or all at once. Regardless of which method is used, the Enrollee shall still:

- Certify the monthly summary of Category 4 spills
- Certify the details of each spill by February 1st of the following year.

How to Report Individual Category 4 Spills

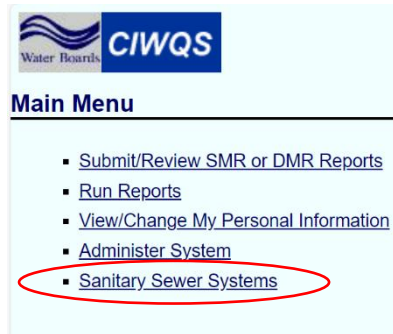
1. Log into the CIWQS website at:

<https://ciwqs.waterboards.ca.gov/>

2. Enter your user account credentials and click on the “Login” button.

NOTE: Sharing user account information amongst staff is prohibited. CIWQS may remove all reports certified by incorrect users.

3. Once logged into your personal CIWQS user account, click on the “Sanitary Sewer Systems” link under the CIWQS Main Menu.



NOTE: If you represent more than one sanitary sewer system, from the dropdown menu, select the applicable sanitary sewer system. Click on the “Continue” button.

- Click on the “New Category 4 and Enrollee-owned/operated Lateral Spill Report” link.

- Annual Report** [?](#)
 A new Enrollee shall complete and submit its first certified Annual Report within 30 days of obtaining a CIWQS account; All subsequent Annual Reports are due by April 1 of each year.
- Internal Audit Report Upload** [?](#)
 The Legally Responsible Official shall submit an audit report into the online CIWQS Sanitary Sewer System Database per the requirements in section 3.10 of Attachment E1 of the General Order.
- Sewer System Management Plan Upload** [?](#)
 Plan updates are due within every six years after the last Plan update due date.
New Enrollees: The Plan shall be uploaded and certified within 12 months of the Application for Enrollment approval date. This establishes the last Plan update due date.
Continuing Enrollees: The last Plan update due date was established under the 2006 Order. All subsequent Plan updates are due within every six years after the last Plan update due date.
- New Spill Report** [?](#)
 Submit individual spill reports for Category 1, Category 2 and Category 3 spill events.
- New Category 4 and Enrollee-owned/operated Lateral Spill Report** [?](#)
 Submit spill reports for Category 4 and Enrollee-owned/operated lateral spill events.
NOTE: Spills of any volume that discharge to a surface water are Category 1 spills, and must be reported using the “New Spill Report” link.

- Click on the “Report an Individual Spill” link:

Select the method for reporting either Category 4 spills or Enrollee-Owned/Operated Lateral spills. These spills need to be reported by February 1, of the year following the calendar year within which they occurred.
Note: Reporting is not required if the Sanitary Sewer System did not have any Category 4 or Enrollee Owned/Operated spills during the reporting year.

- Report an Individual Spill**
- Upload Multiple Spills

NOTE: Annual reporting is not required if the Sanitary Sewer System did not have any Category 4 or Enrollee Owned/Operated lateral spills during the reporting year.

- You will be directed to the “Certified Spill Reporting for Individual Category 4 and/or Enrollee-Owned/Operated Lateral Spill” screen. Enter the required information.

Certified Spill Reporting for Individual Category 4 and/or Enrollee-Owned/Operated Lateral Spill	
Annual reporting is due by February 1st after the end of the calendar year in which the spill occurred.	
<div style="display: flex; justify-content: space-between;"> Save Work in Progress Ready to Certify </div>	
Please Note: <ul style="list-style-type: none"> Use this module to report Category 4 and Enrollee-owned/operated Non-Category 1 Lateral spills individually throughout the year or annually. If you have entered all required information and have the report ready to certify, please click on the "Ready to Certify". Reports cannot be certified unless the "Ready to Certify" button is clicked first. 	
*1. Choose Spill Type:	<input type="text"/>
*2. Did the spill result in a discharge to a surface water, including a surface water body that contains no flow or volume of water?:	Select <input type="text"/>
3. Did the spill reach a drainage conveyance system?:	Select <input type="text"/>
3.a. Did the spill result in a discharge to a drainage conveyance system that discharges to surface waters?:	Select <input type="text"/>
3.b. 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 <small>(Required if answer for question 3 is "Yes")</small>	<input type="text"/> <small>1000 characters remaining</small> <small>(Attach document if description is greater than 1000 characters, enter "See Attachment" into the box)</small>
3.c. Estimated spill volume fully recovered from the drainage conveyance system: <small>(Required if answer for question 3 is "Yes")</small>	<input type="text"/> Gallons
3.d. Estimated spill volume remaining within the drainage conveyance system: <small>(Required if answer for question 3 is "Yes")</small>	<input type="text"/> Gallons
*4. Name of Enrollee contact person to respond to spill-specific questions:	<input type="text"/>

Step by Step Guidance for Reporting Individual Category 4 Spills

The below information explains each question on the “Certified Spill Reporting for Individual Category 4 spills.

NOTE: Once questions 1, 5, 6a, and 6b are completed, you can save your work in progress by clicking on the “Save Work in Progress” button. A green banner stating “Changes saved successfully” will appear below the report tabs when the minimum required fields have been completed and you can navigate away from the tab with your work saved.

1. Choose Spill Type:

From the drop-down menu, select “Category 4 Spill”.

*1. Choose Spill Type:	Category 4 Spill <input type="text"/>
*2. Did the spill result in a discharge to a surface water, including a surface water body that contains no flow or volume of water?:	Select <input type="text"/>
3. Did the spill reach a drainage conveyance system?:	Select <input type="text"/>

2. Did the spill result in a discharge to a surface water, including a surface water body that contains no flow or volume of water?


Use the drop-down menu to select whether the spill resulted in a discharge to surface water.

*2. Did the spill result in a discharge to a surface water, including a surface water body that contains no flow or volume of water?:	Select <input type="text"/>
3. Did the spill reach a drainage conveyance system?:	Select <input type="text"/>
3.a. Did the spill result in a discharge to a drainage conveyance system that discharges to surface waters?:	Yes <input type="text"/>
	No <input type="text"/>

NOTE: If “Yes” is selected, you will receive an error message indicating that the spill must be reported as a Category 1 spill.

3. Did the spill reach a drainage conveyance system?


Use the drop-down menu to select whether the spill reached a drainage conveyance system.

3. Did the spill reach a drainage conveyance system?:	Select 
3.a. Did the spill result in a discharge to a drainage conveyance system that discharges to surface waters?:	Select
3.b. Description of the drainage conveyance system transporting the spill and photographs of the drainage conveyance system entry location(s):	Yes No

NOTE: If “Yes” is selected, then Questions 3.b., 3.c., and 3.d. must also be filled out. If “No” was selected, continue to Question 4.

3.a. Did the spill result in a discharge to a drainage conveyance system that discharges to a surface water?

Use the drop-down menu to select whether the spill resulted in a discharge to a drainage conveyance system which discharges to surface waters. If you selected “Yes”, continue to respond to questions 3b, 3c and 3d.

3.a. Did the spill result in a discharge to a drainage conveyance system that discharges to surface waters?:	Select 
3.b. 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 <small>(Required if answer for question 3 is "Yes")</small>	Select Yes No <small>(Attach document)</small>

3.b. 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.

Describe the drainage conveyance system and provide photographs of the drainage conveyance system entry locations.

3.b. 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 <small>(Required if answer for question 3 is "Yes")</small>	<input type="text"/> <small>(Attach document if description is greater than 1000 characters, enter "See Attachment" into the box) 1000 characters remaining.</small>
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3.c. Estimated spill volume fully recovered from the drainage conveyance system:

Provide a number value as a whole number for the estimated spill volume fully recovered from the drainage conveyance system.

3.c. Estimated spill volume fully recovered from the drainage conveyance system:
(Required if answer for question 3 is 'Yes')

 Gallons

3.d. Estimated spill volume remaining within the drainage conveyance system:

Provide a number value as a whole number for the estimated spill volume remaining within the drainage conveyance system.

3.d. Estimated spill volume remaining within the drainage conveyance system:
(Required if answer for question 3 is 'Yes')

 Gallons

4. Name of Enrollee contact person to respond to spill-specific questions:

Provide the Enrollee's contact person's name.

*4. Name of Enrollee contact person to respond to spill-specific questions:

4.a. Telephone number of Enrollee contact person to respond to spill-specific questions:

Provide the telephone number of the Enrollee's contact person who will be able to answer questions, if necessary. Enter only numbers; the system will display the entry in (XXX) XXX-XXXX format.

*4.a. Telephone number of Enrollee contact person to respond to spill-specific questions:

5. Spill Location Name:

Provide the name of the spill location.

*5. Spill Location Name:

6. Description of the system location where the spill originated (if the spill has more than one appearance point, include additional latitude and longitude coordinates in the response to this question):

Describe the system location where the spill originated.

*6. Description of the system location where the spill originated (if the spill has more than one appearance point, include additional latitude and longitude coordinates in the response to this question):

1000 characters remaining.

(Attach document if description is greater than 1000 characters, enter "See Attachment" into the box)

6a. Latitude:

This field is to enter the latitude of the location where spill originated. If you do not know the latitude, use the "[Show Map]" button next to the field. You may enter the address on top of the map and click on the "Go" button. Or, you may zoom in on the map to drop a pin on the spill location. Click on the "Set Coordinates" button. Make sure the units are in decimal degrees.

*6.a. Latitude:	<input type="text"/> decimal degrees	[Show Map]	
*6.b. Longitude:	<input type="text"/> decimal degrees	[Show Map]	
*7. Date and time the Enrollee was notified of, or self-discovered, the spill:	<input type="text"/>		
*8. Estimated total spill volume exiting the system:	<input type="text"/> Gallons		
*9. Estimated spill start date and time:	<input type="text"/>		
*10. Spill end date and time:	<input type="text"/>		
11. Spill cause(s):	<input type="checkbox"/> Air Relief Valve (ARV)/ Blow-Off Valve (BOV) Failure <input type="checkbox"/> Collection System Maintenance Failure (specify below) <input type="checkbox"/> Construction Diversion Failure <input type="checkbox"/> Damage by Others Not Related to Collection System <input type="checkbox"/> Debris from Construction <input type="checkbox"/> Debris from Lateral <input type="checkbox"/> Debris-General <input type="checkbox"/> Debris-Rags <input type="checkbox"/> Debris-winner (Non-distinguishable)		

6b. Longitude:

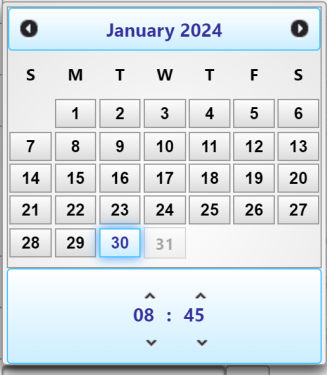
This field is to enter the longitude of the location where spill originated. If you do not know the longitude, use the “[Show Map]” button next to the field. You may enter the address on top of the map and click on the “Go” button. Or you may zoom in on the map to drop a pin on the spill location. Click on the “Set Coordinates” button. Make sure the units are in decimal degrees.

*6.a. Latitude:	<input type="text"/> decimal degrees	[Show Map]	
*6.b. Longitude:	<input type="text"/> decimal degrees	[Show Map]	
*7. Date and time the Enrollee was notified of, or self-discovered, the spill:	<input type="text"/>		
*8. Estimated total spill volume exiting the system:	<input type="text"/> Gallons		
*9. Estimated spill start date and time:	<input type="text"/>		
*10. Spill end date and time:	<input type="text"/>		
11. Spill cause(s):	<input type="checkbox"/> Air Relief Valve (ARV)/ Blow-Off Valve (BOV) Failure <input type="checkbox"/> Collection System Maintenance Failure (specify below) <input type="checkbox"/> Construction Diversion Failure <input type="checkbox"/> Damage by Others Not Related to Collection System <input type="checkbox"/> Debris from Construction <input type="checkbox"/> Debris from Lateral <input type="checkbox"/> Debris-General <input type="checkbox"/> Debris-Rags <input type="checkbox"/> Debris-winner (Non-distinguishable)		

7. Date and time the Enrollee was notified of, or self-discovered, the spill:

Use the calendar icon to select the date and time or manually enter the date and time when your agency was notified of or discovered the spill. Make sure the time is entered in a 24-hour clock format and the date in the MM/DD/YY format. The date and time must be the same or later than the estimated spill start date and time (Question 9).

*4. Name of Enrollee contact person to respond to spill-specific questions:	
*4.a. Telephone number of Enrollee contact person to respond to spill-specific questions:	
*5. Spill Location Name:	
*6. Description of the system location where the spill originated (if the spill has more than one appearance point, include additional latitude and longitude coordinates in the response to this question):	
*6.a. Latitude:	
*6.b. Longitude:	
*7. Date and time the Enrollee was notified of, or self-discovered, the spill:	



8. Estimated total spill volume exiting the system:


Enter the estimated total spill volume exiting the system in gallons and as a whole number.

*8. Estimated total spill volume exiting the system:	<input type="text"/>	Gallons
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9. Estimated spill start date and time:

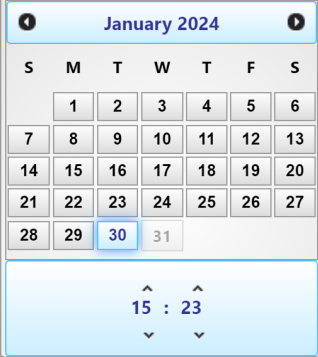
Use the calendar icon to select the date and time or manually enter the estimated spill start date in the MM/DD/YY format and time in a 24-hour clock format. The date and time must be earlier than the estimated spill end date and time.

*5. Spill Location Name:	
*6. Description of the system location where the spill originated (if the spill has more than one appearance point, include additional latitude and longitude coordinates in the response to this question):	
*6.a. Latitude:	
*6.b. Longitude:	
*7. Date and time the Enrollee was notified of, or self-discovered, the spill:	
*8. Estimated total spill volume exiting the system:	
*9. Estimated spill start date and time:	



10. Spill end date and time:

Use the calendar icon to select the date and time or manually enter the estimated spill end date in the MM/DD/YY format and time in a 24-hour clock format. The date and time must be later than the estimated spill start date and time (Question 9).

*10. Spill end date and time:	<input type="text"/> 
11. Spill cause(s):	
11.a. If other, describe:	

11. Spill cause(s):

Select the appropriate spill cause(s) from the drop-down menu. If your selection was “Other (specify below)”, you are required to enter a description of the spill causes in question 11.a.

11. Spill cause(s):	<ul style="list-style-type: none"> <input type="checkbox"/> Air Relief Valve (ARV)/ Blow-Off Valve (BOV) Failure <input type="checkbox"/> Collection System Maintenance Failure (specify below) <input type="checkbox"/> Construction Diversion Failure <input type="checkbox"/> Damage by Others Not Related to Collection System Construction/Maintenance <input type="checkbox"/> Debris from Construction <input type="checkbox"/> Debris from Lateral <input type="checkbox"/> Debris-General <input type="checkbox"/> Debris-Rags <input type="checkbox"/> Debris-swines/Non-droppables
---------------------	--

11.a. If other, describe:

Use the space to describe the spill response activities not listed.

12. System failure location (for example, main, pump station, etc.):

Select the appropriate system failure location from the drop-down menu. If your selection was “Other (specify below)”, you are required to enter a description of the system failure location in question 12.a.

12. System failure location (for example, main, pump station, etc.):	<ul style="list-style-type: none"> <input type="checkbox"/> Air Relief Valve (ARV)/ Blow-Off Valve (BOV) <input type="checkbox"/> Force Main <input type="checkbox"/> Gravity Mainline <input type="checkbox"/> Lower Lateral <input type="checkbox"/> Manhole <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Pump Station - Controls <input type="checkbox"/> Pump Station - Mechanical <input type="checkbox"/> Pump Station - Power
--	--

12.a. If other, describe:

Use the space to describe the spill response activities not listed.

13. Spill response activities

Select the appropriate spill response activity from the drop-down menu. If your selection was “Other (specify below)”, you are required to enter a description of the spill response activities in question 13.a.

<p>13. Spill response activities:</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Cleaned Up (specify below) <input type="checkbox"/> Contained All or Portion of Spill <input type="checkbox"/> Mitigated Effects of Spill (specify below) <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Other Enforcement Agency Notified <input type="checkbox"/> Property Owner Notified <input type="checkbox"/> Restored Flow <input type="checkbox"/> Returned All Spill to Sanitary Sewer System <input type="checkbox"/> Returned Portion of Spill to Sanitary Sewer System
---------------------------------------	---

13.a. If other, describe:

Use the space to describe the spill response activities not listed.

13.b. Description of spill response activities including description of immediate spill containment and cleanup efforts:

Use the following text box to describe spill response activities and provide a description of immediate spill containment and cleanup efforts.

<p>13.b. Description of spill response activities including description of immediate spill containment and cleanup efforts:</p>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> <p style="text-align: right; font-size: small; color: red;">1000 characters remaining.</p> <p style="text-align: center; font-size: x-small;">(Attach document if description is greater than 1000 characters, enter "See Attachment" into the box)</p>
---	---

14. Description of how the spill volume estimations were calculated, including at a minimum:

The methodology, assumptions and type of data relied upon, such as supervisory control and data acquisition (SCADA) records, flow monitoring or other telemetry information, used to estimate the volume of the spill discharged, and the volume of the spill recovered (if any volume of the spill was recovered):

Describe how the spill volume estimates were calculated. Include the methodology, assumptions, type of data, flow monitoring, and other available information.

<p>14. Description of how the spill volume estimations were calculated, including at a minimum:</p> <p>The methodology, assumptions and type of data relied upon, such as supervisory control and data acquisition (SCADA) records, flow monitoring or other telemetry information, used to estimate the volume of the spill discharged, and the volume of the spill recovered (if any volume of the spill was recovered):</p>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> <p style="text-align: right; font-size: small; color: red;">1000 characters remaining.</p> <p style="text-align: center; font-size: x-small;">(Attach document if description is greater than 1000 characters, enter "See Attachment" into the box)</p>
--	---

14.a. Description of the methodology(ies), assumptions and type of data relied upon for estimations of the spill start time and the spill end time:

Use the following text box to describe methodologies, assumptions, and type of data used for estimating the spill start and end time.

<p>14.a. Description of the methodology(ies), assumptions and type of data relied upon for estimations of the spill start time and the spill end time:</p>	<div style="border: 1px solid black; height: 40px; width: 100%;"></div> <p style="text-align: right; color: red; font-size: small;">1000 characters remaining.</p> <p style="text-align: center; font-size: x-small;">(Attach document if description is greater than 1000 characters, enter "See Attachment" into the box)</p>
--	---

15. Description of system operation, maintenance and program modifications implemented to prevent repeated spill occurrences at the same spill location: Submit documentation verifying immediately implemented system modifications and operating/maintenance modifications under the "Attachments."

Use the following text box to describe operations, maintenance, and program modifications implemented to prevent repeated spill occurrences at the same spill location. Submit documentation under the Attachments tab.

<p>15. Description of system operation, maintenance and program modifications implemented to prevent repeated spill occurrences at the same spill location: Submit documentation verifying immediately implemented system modifications and operating/maintenance modifications under the "Attachments"</p>	<div style="border: 1px solid black; height: 40px; width: 100%;"></div> <p style="text-align: right; color: red; font-size: small;">1000 characters remaining.</p> <p style="text-align: center; font-size: x-small;">(Attach document if description is greater than 1000 characters, enter "See Attachment" into the box)</p>
---	---

16. Spill corrective action:

Use the drop-down menu to report spill corrective action(s). If your selection was "Other (specify below)", you are required to enter a description of the spill corrective action in question 16.a.

<p>*16. Spill corrective action: <i>Required when reporting an Enrollee-owned/operated Lateral spill</i></p>	<div style="border: 1px solid black; padding: 5px;"> <ul style="list-style-type: none"> <input type="checkbox"/> Added Sewer to Preventive Maintenance Program <input type="checkbox"/> Adjusted Schedule/Method of Preventive Maintenance <input type="checkbox"/> Enforcement action against Fats, Oil, and Grease (FOG) source <input type="checkbox"/> Inspected Sewer Using CCTV to Determine Cause <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Plan Rehabilitation or Replacement of Sewer <input type="checkbox"/> Repaired Facilities or Replaced Defect </div>
--	--

16.a. If other, describe:

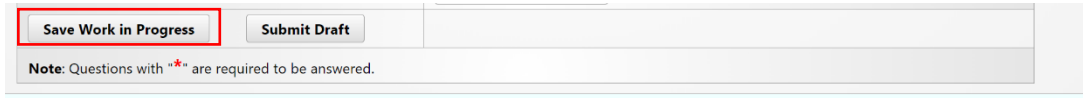
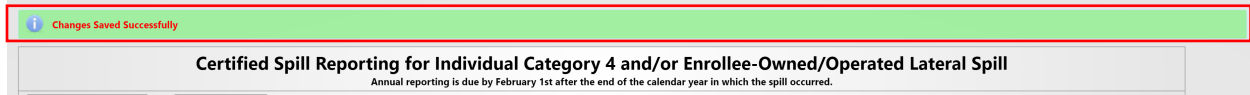
Use the space to describe the spill response activities not listed.

16.b. Local regulatory enforcement action taken against an illicit discharge in response to this spill, as applicable:

Use the following text box to describe local regulatory enforcement actions taken against an illicit discharge in response to this spill if applicable.

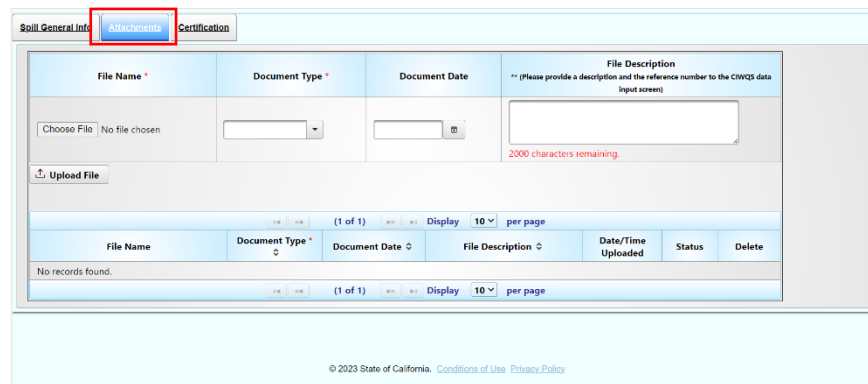
<p>16.b. Local regulatory enforcement action taken against an illicit discharge in response to this spill, as applicable:</p>	<div style="border: 1px solid black; height: 40px; width: 100%;"></div> <p style="text-align: right; color: red; font-size: small;">1000 characters remaining.</p> <p style="text-align: center; font-size: x-small;">(Attach document if description is greater than 1000 characters, enter "See Attachment" into the box)</p>
---	---

Once all the required questions are answered, click on the “Save Work in Progress” button to save the report.

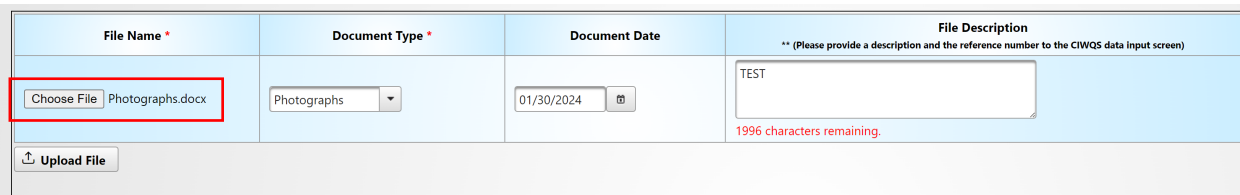



How to Attach Documents and Save an Individual Category 4 Spill Report

1. Click on the “Attachments” tab to upload attachments.



2. To upload attachments to the saved report, click on “Choose File” to select the file to be uploaded. Next, select the type of file you are uploading from the “Document Type” drop down options. The “Document Date” is the date the document was created. Finally, enter a brief description of the file in the “File Description” text box.



- Click on the “Upload File” button to upload the file to the spill report. You will know the file is uploaded when the file is displayed in the table below the “Upload File” button.

File Name *	Document Type *	Document Date	File Description <small>** (Please provide a description and the reference number to the CIWQS data input screen)</small>
Choose File No file chosen			2000 characters remaining.
<input type="button" value="Upload File"/>			

File Name	Document Type	Document Date	File Description	Date/Time Uploaded	Status	Delete
Photographs.docx	Photographs	01/30/2024	TEST	01/30/2024 17:21:50	OK	<input type="button" value="Delete"/>

- Repeat the above steps, until all desired files are uploaded.
- Once all the spill report questions are properly answered and the necessary attachments uploaded, and you are ready to certify the report, click on the “Spill General Info” tab to go back to the spill reporting screen. To prepare the report for certification, click on the “Ready to Certify” button. If all was done properly, you will receive a message stating, “Confirmation: Spill Report is now Ready for Certification.”

Spill General Info	Attachments	Certification
---------------------------	-------------	---------------

Certified Spill Reporting for Individual Category 4 and/or Enrollee-Owned/Operated Lateral Spill
Annual reporting is due by February 1st after the end of the calendar year in which the spill occurred.

Please Note:

- Use this module to report Category 4 and Enrollee-owned/operated Non-Category 1 Lateral spills individually throughout the year or annually.
- If you have entered all required information and have the report ready to certify, please click on the “Ready to Certify”.
- Reports cannot be certified unless the “Ready to Certify” button is clicked first.

Confirmation: Spill Report is now Ready for Certification.

Certified Spill Reporting for Individual Category 4 and/or Enrollee-Owned/Operated Lateral Spill
Annual reporting is due by February 1st after the end of the calendar year in which the spill occurred.

How to Certify an Individual Category 4 Spill Report

The Legally Responsible Official shall certify all Spill Reports to the online CIWQS Sanitary Sewer System Database.

1. Click on the “Certification” tab.

Certified Spill Reporting for Individual Category 4 and/or Enrollee-Owned/Operated Lateral Spill
Annual reporting is due by February 1st after the end of the calendar year in which the spill occurred

Certification

Please Note:

- In order to certify the report, please click on the “Certify” button after populating the certification section.

I certify under penalty of perjury under the laws of the State of California that the electronically submitted information was prepared under my direction or supervision. Based on my inquiry of the person(s) directly responsible for gathering the information, to the best of my knowledge and belief, the information submitted is true, accurate, and complete, and complies with the Statewide Sanitary Sewer Systems General Order. I am aware that there are significant penalties for submitting false information.

Certifier Name: * Title: *

Certifier Initials: * Certification Date: 01/30/2024

2. Check the box certifying under penalty of perjury, that to the best of your knowledge, the information submitted is accurate and complete. Enter certifier name, certifier initials, and title. Click on the “Certify” button.

Certified Spill Reporting for Individual Category 4 and/or Enrollee-Owned/Operated Lateral Spill
Annual reporting is due by February 1st after the end of the calendar year in which the spill occurred

Certification

Please Note:

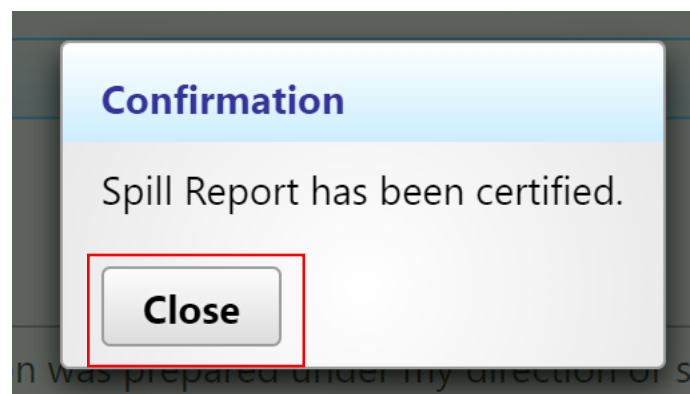
- In order to certify the report, please click on the “Certify” button after populating the certification section.

I certify under penalty of perjury under the laws of the State of California that the electronically submitted information was prepared under my direction or supervision. Based on my inquiry of the person(s) directly responsible for gathering the information, to the best of my knowledge and belief, the information submitted is true, accurate, and complete, and complies with the Statewide Sanitary Sewer Systems General Order. I am aware that there are significant penalties for submitting false information.

Certifier Name: * Title: *

Certifier Initials: * Certification Date: 01/30/2024

3. After clicking on the certify button, you will see the confirmation message “Spill Report has been certified”. Click on the “Close” button and this will take you back to the main menu.



How to Amend an Individual Category 4 Spill Report

A certified Spill Report may be amended. To amend a Spill Report:

1. Click on the “Existing Spill Reports” link in the main menu.

- [Annual Report](#) [?](#)

A new Enrollee shall complete and submit its first certified Annual Report within 30 days of obtaining a CIWQS account; All subsequent Annual Reports are due by April 1 of each year.

- [Internal Audit Report Upload](#) [?](#)

The Legally Responsible Official shall submit an audit report into the online CIWQS Sanitary Sewer System Database per the requirements in section 3.10 of Attachment E1 of the General Order.

- [Sewer System Management Plan Upload](#) [?](#)

Plan updates are due within every six years after the last Plan update due date.

New Enrollees: The Plan shall be uploaded and certified within 12 months of the Application for Enrollment approval date. This establishes the last Plan update due date.

Continuing Enrollees: The last Plan update due date was established under the 2006 Order. All subsequent Plan updates are due within every six years after the last Plan update due date.

- [New Spill Report](#) [?](#)

Submit individual spill reports for Category 1, Category 2 and Category 3 spill events.

- [New Category 4 and Enrollee-owned/operated Lateral Spill Report](#) [?](#)

Submit spill reports for Category 4 and Enrollee-owned/operated lateral spill events.

NOTE: Spills of any volume that discharge to a surface water are Category 1 spills, and must be reported using the "New Spill Report" link.

- [Privately-Owned Sewer Laterals and/or Private Systems Spill Report \(Voluntary\)](#) [?](#)

Voluntarily report spills from a private sewer lateral or private sanitary sewer system that is not owned/operated by the Enrollee.

- [Existing Spill Reports](#) [?](#)

View, update and/or amend a previously reported spill.

- [Monthly Certification of "No-Spills" or "Category 4 Spills" and/or "Non-Category 1 Enrollee-owned Lateral Spills"](#) [?](#)

Within 30 calendar days after the end of each calendar month, certify either (1) no spills occurred during a calendar month or (2) only Category 4, and/or Enrollee-owned and/or operated lateral spills (that do not discharge to a surface water) occurred during a calendar month.

- [View Spill Incident Map - Public Sewer Systems \(Not Site Specific\)](#) [?](#)

The data displayed in this map represents spill reports, for individual locations, where sewage was discharged from a sanitary sewer system enrolled under the Statewide Sanitary Sewer Systems General Order. It does not include Category 4 spills.

2. Enter appropriate search criteria to search for the spill record that needs to be amended and click the “Search” button. When search results are returned, click on the Spill Id corresponding to the record that needs to be amended.

Spill Id	Status	Version	Region	Type
892188	Certified	1.2	5	SSS

NOTE: A Spill Id is provided upon saving a spill report.

3. On the Certification tab, click on the “Amend Report” button.

Certified Spill Reporting for Individual Category 4 and/or Enrollee-Owned/Operated Lateral Spill
Annual reporting is due by February 1st after the end of the calendar year in which the spill occurred

Amend Report

Certification

Please Note:

- In order to certify the report, please click on the "Certify" button after populating the certification section.

- After clicking on the "Amend Report" button, the Legally Responsible Official will receive the following message as shown below. The message alerts the Legally Responsible Official that that an amended version of the report is saved to track history (the spill ID will be the same, but with a different version).

Spill General Info | Attachments | **Certification**

Report has been Amended. An Amended version of the report is saved to track history.

Certified Spill Reporting for Individual Category 4 and/or Enrollee-Owned/Operated Lateral Spill
Annual reporting is due by February 1st after the end of the calendar year in which the spill occurred

Certification

Please Note:

- In order to certify the report, please click on the "Certify" button after populating the certification section.

I certify under penalty of perjury under the laws of the State of California that the electronically submitted information was prepared under my direction or supervision. Based on my inquiry of the person(s) directly responsible for gathering the information, to the best of my knowledge and belief, the information submitted is true, accurate, and complete, and complies with the Statewide Sanitary Sewer Systems General Order. I am aware that there are significant penalties for submitting false information.

Certifier Name: Title:

Certifier Initials: Certification Date: 01/30/2024


- Return to the Spill Reports list and click on the newly created duplicate Report Id with status "Work in Progress" which would be the spill report that needs to be amended.


Spill Id	Status	Version	Region	Type
892188	Amended	1.2	5	SSS
892188	Work In Progress	2.0	5	SSS


- Follow previous instructions under "Step by Step Guidance for Reporting Individual Category 4 Spills" as well as "How to Attach Documents and Save an Individual Category 4 Spill Report." Afterwards, use the "How to Certify an Individual Category 4 Spill Report" section to recertify the amended report.


Step by Step Guidance for Uploading Multiple Category 4 Spill Reports


1. Click on the “New Category 4 and Enrollee-owned/operated Lateral Spill Report” link.

- [Annual Report](#) 

A new Enrollee shall complete and submit its first certified Annual Report within 30 days of obtaining a CIWQS account; All subsequent Annual Reports are due by April 1 of each year.
- [Internal Audit Report Upload](#) 

The Legally Responsible Official shall submit an audit report into the online CIWQS Sanitary Sewer System Database per the requirements in section 3.10 of Attachment E1 of the General Order.
- [Sewer System Management Plan Upload](#) 

Plan updates are due within every six years after the last Plan update due date.
New Enrollees: The Plan shall be uploaded and certified within 12 months of the Application for Enrollment approval date. This establishes the last Plan update due date.
Continuing Enrollees: The last Plan update due date was established under the 2006 Order. All subsequent Plan updates are due within every six years after the last Plan update due date.
- [New Spill Report](#) 

Submit individual spill reports for Category 1, Category 2 and Category 3 spill events.
- [New Category 4 and Enrollee-owned/operated Lateral Spill Report](#) 

Submit spill reports for Category 4 and Enrollee-owned/operated lateral spill events.
NOTE: Spills of any volume that discharge to a surface water are Category 1 spills, and must be reported using the "New Spill Report" link.

2. Click on the “Upload Multiple Spills” link:

Select the method for reporting either Category 4 spills or Enrollee-Owned/Operated Lateral spills. These spills needs to be reported by February 1, of the year following the calendar year within which they occurred.
Note: Reporting is not required if the Sanitary Sewer System did not have any Category 4 or Enrollee Owned/Operated spills during the reporting year.

- [Report an Individual Spill](#)
- [Upload Multiple Spills](#)

3. You will be directed to the Batch Upload Page.

Download spreadsheet to upload multiple spills: [Category 4 and Enrollee-owned/operated Lateral Spill Report Reporting Spreadsheet](#). Utilize the provided spreadsheet to upload multiple spills at once. Fill the template file with info of your spills immediate after header line. (The upload process may take a few minutes depending on the speed of your internet connection and the size of the file. Do not attempt to click the "Refresh")

Batch Upload File

Choose File | No file chosen

Certification

I certify under penalty of perjury under the laws of the State of California that the electronically submitted information was prepared under my direction or supervision. Based on my inquiry of the person(s) directly responsible for gathering the information, to the best of my knowledge and belief, the information submitted is true, accurate, and complete, and complies with the Statewide Sanitary Sewer Systems General Order. I am aware that there are significant penalties for submitting false information.

Certifier Name: * Certifier Title: *

Executed On: * Executed At:

4. For batch upload of Category 4 spills, click on the “Category 4 and Enrollee-owned/operated Lateral Spill Report Reporting Spreadsheet” link to download the spreadsheet template to be completed with the details of the Category 4 spills being reported.

Download spreadsheet to upload multiple spills: [Category 4 and Enrollee-owned/operated Lateral Spill Report Reporting Spreadsheet](#). Utilize the provided spreadsheet to upload multiple spills at once. Fill the template file with info of your spills immediate after header line. (The upload process may take a few minutes depending on the speed of your internet connection and the size of the file. Do not attempt to click the "Refresh")

Batch Upload File

Choose File | No file chosen

- Enter detailed information about the Category 4 spills that occurred during the reporting year into the spreadsheet; please make sure to use the items from the drop-down list.

	A	B	C	D	E	F	G	H	I	J	K
	Choose Spill Type	Did The Spill Result In A Discharge To A Surface Water Including A Surface Water Body That Contains No Flow Or Volume Of Water (Yes/No)	Did The Spill Reach A Drainage Conveyance System (Yes/No)	Did The Spill Result In A Discharge To A Drainage Conveyance System That Discharges To Surface Waters (Yes/No)	Description Of Drainage Conveyance System Location	Estimated Spill Volume Fully Recovered	Estimated Spill Volume Remaining Within Conveyance	Name Of Enrollee Contact Person	Telephone Number Of Enrollee Contact Person	Spill Location Name	Description Of The System Location Where The Spill Originated
1											
2		Yes or No (Drop Down)	Yes or No (Drop Down)	Yes or No (Drop Down)	TEXT BOX	NUMERIC BOX	NUMERIC BOX	TEXT BOX	NUMERIC BOX (XXX)-XXX-XXXX	TEXT BOX	TEXT BOX
3											

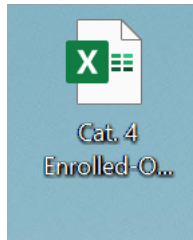
NOTE: Utilize the provided spreadsheet to report multiple spills at once.

NOTE: Check the data type in each cell. For example, make sure your entry under the volume column is a numeric value.

NOTE: Reference the “Step by Step Guidance for Reporting Individual Category 4 Spills” section of this document for elaboration of spreadsheet questions.

How to Upload and Certify Multiple Category 4 Spills

1. Once the spreadsheet has been completed, save a copy to your computer.



2. On the Batch Upload page, click on the “Choose File” button to upload the file.

Cat. 4 Enrolled-OwnedOperated Lateral Template (TEST) 1/30/2024 6:10 PM Microsoft Excel Work... 35 KB

Download spreadsheet to upload multiple spills: [Category 4 and Enrollee-owned/operated Lateral Spill Report Reporting Spreadsheet](#). Utilize the provided spreadsheet to upload multiple spills at once. Fill the template file with info of your spills immediate after header line. (The upload process may take a few minutes depending on the speed of your internet connection and the size of the file. Do not attempt to click the "Refresh")

Batch Upload File

Choose File | Cat. 4 Enroll...e (TEST).xlsx

3. By completing the fields provided and clicking the “Upload and Certify” button, you are certifying under penalty of perjury that information you have provided is true and accurate to the best of your knowledge. Enter certifier name, certifier initials, and title. Click on the “Upload and Certify” button.

Certification

I certify under penalty of perjury under the laws of the State of California that the electronically submitted information was prepared under my direction or supervision. Based on my inquiry of the person(s) directly responsible for gathering the information, to the best of my knowledge and belief, the information submitted is true, accurate, and complete, and complies with the Statewide Sanitary Sewer Systems General Order. I am aware that there are significant penalties for submitting false information.

Certifier Name: * Certifier Title: *

Executed On: * Executed At

4. After clicking on the “Upload and Certify” button, the following message should appear: “The data file has been processed successfully”.

NOTE: If required fields are missing from the file or entries are not provided in the correct format or using the drop-down values provided, error messages will display below the certification fields. If this occurs, go back to the Excel file, make corrections, save, and then upload it again.

Download spreadsheet to upload multiple spills: [Category 4 and Enrollee-owned/operated Lateral Spill Report Reporting Spreadsheet](#). Utilize the provided spreadsheet to upload multiple spills at once. Fill the template file with info of your spills immediate after header line. (The upload process may take a few minutes depending on the speed of your internet connection and the size of the file. Do not attempt to click the "Refresh")

Batch Upload File

Choose File | No file chosen

Certification

I certify under penalty of perjury under the laws of the State of California that the electronically submitted information was prepared under my direction or supervision. Based on my inquiry of the person(s) directly responsible for gathering the information, to the best of my knowledge and belief, the information submitted is true, accurate, and complete, and complies with the Statewide Sanitary Sewer Systems General Order. I am aware that there are significant penalties for submitting false information.

Certifier Name: * Certifier Title: *

Executed On: * Executed At

You have completed the reporting of Category 4 Spills. Click on the “Close” button to go back to the main menu.