



**COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC WORKS
SEWER AREA STUDY CORRECTIONS LIST**

- REJECT**
- INCOMPLETE REPORT
- MISSING ITEMS

ADDRESS or TR/PM/CUP NO. _____
PRIVATE CONTRACT (PC) NO. _____

- DESIGN CHECK
- DETAIL CHECK
- DIRECT CHECK

ENGINEERING FIRM _____
PROJECT ENGINEER _____
TELEPHONE No. _____
CSMD INDEX _____

CHECKED BY _____ TEL. No. _____
DATE _____
REVIEW NO. _____
THOMAS GUIDE _____

Your plans have been checked and the necessary corrections, additions, and instructions are checked below. The plans will not be rechecked until the correction list is returned showing either your check mark indicating the correction has been made or a brief explanation for each item that does not have your check mark. **Make all corrections checked below. Also, make corrections or additions indicated in red on the attached check print(s).**

A. Provide the following checked items:

- Initial deposit of \$ 2,000.00 plan check fee for the initial review. Please be advised that there may be additional fees based on the cumulative time spent on this project.
- Copy of Sewer Maintenance Division (CSMD) index maps that cover the tributary area ending at entrance to the trunk sewer. Please leave the sewer manhole numbers intact on the index maps for areas that are within the boundaries of Unincorporated Los Angeles County.
- An area map (the CSMD index maps may be used for this purpose) showing the following information: boundary of the tributary area; location of project (highlighted); topographic details including contour data; existing sewer lines with diameter and direction of flow indicated. You may superimpose zoning/land use and acreage information on the area map by color coding.
- Copy of the LA County zoning map or City zoning map covering the entire tributary area in order to support zone-dependent calculations for maximum allotment of discharge per subarea. If copies of the zoning maps are not available, replicate the zoning information on the area map and provide the following certification on the map: "A thorough investigation of available zoning records from the County Department of Regional Planning/ City of _____ has been conducted by the undersigned and is factually presented herewith as part of the sewer area study for TR/PM/CUP_____. The sewer area study shall be invalidated should the total number of dwelling units increase, the density increases, or dwelling units occur on previously identified building restricted lots." The engineer's signature and wet stamp shall accompany this certification. This will not replace the required signature and wet stamp at the title page of the report.
- Include a table, similar in format to the attached sample table. Please use original manhole numbers as stated on the CSMD index maps. Please use Kutter's Formula with n=0.013 (Graph S-C4 in PC Manual) to find the design capacity for each sewer segment.
- Peak exit Q from the City of _____ per a separate approved sewer area study. This corresponds to manhole number _____ on CSMD index map number _____ on _____ N/S/W/E of _____.
- Calculations supporting all entries in the table.
- Obtain outlet approval from the City of _____. When outlet approvals are required, the applicant shall obtain the city's stamp and signature on the area study with the notation "For Outlet Approval Only."
- Obtain a "will serve letter" from the trunk agency indicating the availability of capacity to serve the project and if necessary its annexation into their jurisdiction.
- Prior to area study approval, obtain tentative/exhibit map comments from Sewer Maintenance Division for non-gravity sewer facilities (such as pump stations, treatment plants, siphons, etc.).
- Backups for calculating acreages for each subarea.
- Copy of tentative map and condition of approvals.
- Copy of As-built plans from project site to trunk connection.
- Copy of As-built plans for downstream analysis.

