Texas Commission on Environmental Quality
Sanitary Sewer Overflow (SSO) Agreement
Annual Progress Report

INSTRUCTIONS

- This form is required to be completed and submitted to TCEQ each year for ongoing participation in the SSO Initiative program.
- The **annual reporting period is located in your Agreement.** Typically, an initial progress report is due 90 days after the effective date of the Agreement, with progress reports due annually thereafter.
- When reporting, you must attach to this form and any additional information that demonstrates the progress made during the reporting period (such as graphs, photos, work order receipts, etc.)
- Use of this form may also serve as a template for developing your SSO plan.
- For each section that is completed, please reference the corresponding provision number from the Agreement.
- Participants are required to report the items marked with an asterisk (*) including all items in Section 1 through Section 5.

SECTION1. PARTICIPANT INFORMATION

1.1	**Participant Name***	
1.2	**Case Number (located on the Agreement)***	
1.3	**Regulated Entity Number***	
1.4	**State Water Quality Permit Number (if applicable)***	
1.5	**Representative Name & Title***	
1.6	**Representative Phone Number***	
1.7	**Annual Reporting Period (see instructions)***	

SECTION 2. EVALUATING THE EFFECTIVENESS OF THE PLAN

2.1	**Provide the total number of SSOs (including the date, volume, and cause for each SSO) that occurred during the reporting period.***	
2.2	**Provide a brief summary of how the corrective actions that were completed during this reporting period have already contributed to a reduction of SSOs in the system.***	
2.3	**What actions are currently being taken or planned to ensure a reduction of SSOs will occur in the future?***	
2.4	**Provide any additional information that demonstrates the success of your program (e.g. Compare the number of wet weather overflows with dry weather overflows to show inflow/infiltration (I/I) reduction).***	

SECTION 3. INTERIM MEASURES TO MITIGATE SSOs

3.1	**Describe your SSO response plan.***	
3.2	**What actions were taken during this reporting period to mitigate SSOs?***	
3.3	**What improvements were made to your SSO response plan?***	

SECTION 4. SOURCES OF FUNDING

4.1	**Provide a summary of the costs expended for completed projects during this reporting period.***	

4.2	**Describe the anticipated and confirmed sources of funding for the next two years.***	

SECTION 5. OPERATIONS AND MAINTENANCE (O&M) PROGRAM

5.1	**Briefly describe your O&M Program for the reporting period.***	
5.2	**O&M Activities**	**Quantify the following components of your O&M activities for the reporting period. If you did not conduct an activity, please indicate with N/A.**
5.2.1	**Inspection frequency of the system (sewer pipes, lift stations, manholes, etc.)***	
5.2.2	**Cleaning frequency of the system (sewer pipes, lift stations, manholes, etc.)***	
5.2.3	**Total number of linear feet of sewer pipe in the system***	
5.2.4	**Total number of linear feet of sewer pipe inspected***	
5.5.5	**Total number of manholes in the system***	
5.2.6	**Total number of manholes inspected***	
5.2.7	**Total number of lift stations in the system***	
5.2.8	**Total number of lift stations inspected***	
5.2.9	**Total number of linear feet of sewer pipe cleaned***	

5.2.10	**Describe the types of SSO-related employee training that was completed (e.g., Capacity, Management, Operations, & Maintenance; Fats, Oils, & Grease; etc.)***	
5.2.11	**Other**	

SECTION 6. SYSTEM EVALUATION & REHABILITATION

6.1	**System Evaluation**	**Quantify or describe the following measures used to evaluate your system's capacity; inflow/infiltration (I/I) rate; etc. that were completed during the reporting period. If you did not conduct an activity, please indicate with N/A.**
6.1.1	**Flow Monitoring (e.g., wastewater treatment facility; lift stations; rainfall records, etc.)**	
6.1.2	**Dye Testing (e.g., to identify leaks, illegal connections, etc.)**	
6.1.3	**Smoke Testing (e.g., to identify illegal connections, exposed cleanouts, etc.)**	
6.1.4	**Evaluation to identify the location and condition of sewer pipes.**	
6.1.5	**Evaluation to identify the location and condition of manholes.**	
6.1.6	**Evaluation to identify the location and condition of lift stations.**	
6.1.7	**Closed Circuit Television**	
6.1.8	**System Mapping Updates**	
6.1.9	**Other**	

6.2	Rehabilitation Projects	Quantify or describe the following rehabilitation projects that were completed during the reporting period. Please provide specific details, such as the number of linear feet, sizes of sewer pipes, number of manholes, etc. If you did not conduct an activity, please indicate with N/A.
6.2.1	Sewer Pipes Repaired/Rehabilitated*	
6.2.2	Sewer Pipes Replaced*	
6.2.3	Sewer Pipes Removed	
6.2.4	Sewer Pipes Added	
6.2.5	General Sewer Pipe Improvements	
6.2.6	Manholes Repaired/Rehabilitated*	
6.2.7	Manholes Replaced*	
6.2.8	Manholes Removed	
6.2.9	Manholes Added	
6.2.10	General Manhole Improvements (e.g., installing locks, replacing covers, etc.)	
6.2.11	Lift Stations Repaired/Rehabilitated*	
6.2.12	Lift Stations Replaced*	
6.2.13	Lift Stations Removed	
6.2.14	Lift Stations Added	
6.2.15	General Lift Station Improvements (e.g., electrical upgrades, installation of monitoring systems, etc.)	
6.2.16	Other	

SECTION 7. PUBLIC EDUCATION PROGRAMS

7.1	**General SSO Education & Outreach**	**Quantify or describe the following measures completed under your SSO Education Program (if applicable) during the reporting period. Please provide specific details, such as number/frequency of brochures distributed, etc.**
7.1.1	**Educational Brochures (e.g., bill inserts, door knockers, etc.)**	
7.1.2	**Media Advertisements (e.g., television, radio, newspaper, etc.)**	
7.1.3	**Website Updates**	
7.1.4	**Educational/Training Opportunities (e.g., community events, school programs, etc.)**	
7.1.5	**City Ordinances**	
7.1.6	**Other**	
7.2	**Fats, Roots, Oil, & Grease (FROG) Program**	**Quantify or describe the following measures completed under your FROG Program (if applicable) during the reporting period. Please provide specific details, such as number/frequency of brochures distributed, etc.**
7.2.1	**Grease Trap/Interceptor Inspections***	
7.2.2	**Grease Ordinance Updates**	
7.2.3	**Grease Ordinance Enforcement**	
7.2.4	**Grease Control Methods**	
7.2.5	**Food Service Establishment Training**	
7.2.6	**Root Control Methods**	

SECTION 8. ADHERENCE TO MILESTONES

8.1	**Discuss/describe all of the milestones that were completed in accordance with the requirements of the Agreement during the reporting period.***	
8.2	**Discuss/describe all of the milestones that were NOT completed in accordance with the requirements of the Agreement during this reporting period. Include any changes you plan to make to ensure that milestones are completed for the next two years.***	
8.3	**Provide a list of scheduled projects that are planned for the next two years.***	

SECTION 9. MISCELLANEOUS

Provide any additional information you feel necessary to demonstrate compliance under the terms of the SSO Initiative.	

SECTION 10. SIGNATURE

_____ _____

Signature **Date**

_____ _____

Name (printed or typed) **Title**