



City of Hollister Customer Contact Report

| | | | |
|------------------|--------------------------------|----------------------|---------------------------|
| Route To: | Associate Engineer (Utilities) | Utilities Supervisor | Senior Maintenance Worker |
| | Maintenance | Engineering | |

Date: _____

Time: _____

Name of Contact: _____

Address: _____ Mailing Address: _____

Phone Number: _____ Account Number: _____

- | | | |
|---|---|---|
| <input type="checkbox"/> Sewer Inspection | <input type="checkbox"/> Sewer Spill (See back of Contact Report) | |
| <input type="checkbox"/> Sewer Connection | <input type="checkbox"/> Report of Sale/Transfer | <input type="checkbox"/> Emergency H2O Turn Off |
| <input type="checkbox"/> Backflow Required? | <input type="checkbox"/> Change of Address | <input type="checkbox"/> End H2O Meter Read |
| <input type="checkbox"/> Odor Complaint | <input type="checkbox"/> H2O Service: On/Off | <input type="checkbox"/> High Water Use |

Reason for Call:

Office Comments:

Supervisors Comments:

| | | |
|---|---------------------|-------------|
| Staff Generating Report: _____ | Inspected By: _____ | Date: _____ |
| Problem Corrected? _____ | | |
| Follow Up Activities: _____ | | |
| Correspondence sent out? _____ Dated: _____ | | |



City of Hollister
Customer Contact Report: Sewer Spill Contact Information

SPILL START TIME NOTES

Caller Interview: Is sewage spilling? [] Yes [] N If Yes, From: Manhole [] PLCO [] Two-Way C/O []
Inside Building [] Wet Well []

Time Caller noticed spill: ____:____ [] AM [] PM [] N/A

Comments:

If spill is Yes: Last time Caller observed NO Spill occurring: ____:____ [] AM [] PM Date: __/__/__

Comments:

Ask Caller to describe spill:

Suggested Questions: Is it currently spilling? How would you compare it to a garden hose running full? How big would you say the wet stain is – compared to your driveway? What else can you tell me?

Arrival Time: ____:____ [] AM [] PM
SSO Discovery ____:____ [] AM [] PM



On Site Interview 1: Name/Address:

Observation Description:

Time Observed Spill: ____:____
[] AM [] PM [] N/A

On Site Interview 2: Name/Address:

Observation Description:

Time Observed Spill: ____:____
[] AM [] PM [] N/A