



IDAHO PUBLIC WASTEWATER COLLECTION SYSTEM CLASSIFICATION WORKSHEET

**OFFICE USE ONLY
DON'T WRITE HERE**

System Class _____

Approved by: _____

Date: _____

Name of System: _____

Legal Owner of Treatment System: _____

System Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Contact Person: _____ **Title:** _____

Business Phone Number: (____) _____ **Email:** _____

Collection System Classification Worksheet is (check one):

- Initial System Rating**
 System Upgrade
 Standard 5 yr Rating

Date of last system classification rating (if applicable) _____

Collection System - Design Flow /Actual Flow _____ / _____

Item	Points	Your System
<i>System Size (Minimum 3 points)</i>		
Miles of Line	1 point/10 miles or part	
Number of Connections = _____ (Use Connection Equivalencies)	1 point /250 or part	
Number of Manholes	1 point/150 or part	
Lift Stations	1 point/each	
Miles of Force Mains	1 point/mile or part	
<i>Odor Abatement</i>		
Chemical Feed System	2 points	
Air Entrainment System	2 points	
Bio-filter System	2 points	
<i>Maintenance Management System</i>		
Manual Maintenance Management System	3 points	
Manual Mapping System	3 points	
Computerized Maintenance Management System	5 points	
Computerized Mapping System	5 points	
Alarm or SCADA System for Lift Stations	5 points	
TOTAL POINTS FOR YOUR SYSTEM		
System Classification Key		
VSWWS** Class I 0-30 points		
Class II 31-55 points	Class III 56-75 points	Class IV 76 or greater points
YOUR SYSTEM CLASSIFICATION		VSWWS, I, II, III, IV (Circle one)

**The Very Small Wastewater System Classification is applicable to a system that serves 500 connections with a system size of six points or less.

_____/_____
Signature of Legal Owner or Owner's Representative Date

Mail form to: Department of Environmental Quality, 1410 N. Hilton, Boise, Idaho 83706, Attn: Mike May