

Collection Systems Award Nomination

Kansas Water Environment Association Collection Systems Award Nomination Form

CATEGORY I – LESS THAN 250 MILES OF COLLECTION SYSTEM

CATEGORY II – 250 TO 500 MILES OF COLLECTION SYSTEM

CATEGORY III – GREATER THAN 500 MILES OF COLLECTION SYSTEM

Section A: General Information

- 1. **Name of Organization** _____
- 2. **Mailing Address** _____
City _____ **State** _____ **Zip Code** _____
- 3. **Person completing this form** _____ **Phone** _____
- 4. **Title** _____ **Date** _____

Section B: System Information

- 1. **Average Daily Flow in Millions of Gallons** _____
- 2. **Maximum Peak Daily Flow in Millions of Gallons** _____
- 3. **Total Miles of Sewer Maintained (estimated)** _____
- 4. **Date Original Collection System was Constructed** _____
- 5. **Date of Latest Collection System Improvements** _____
- 6. **Total Number of Manholes (estimated)** _____
- 7. **Total Number of Lift Stations** _____
- 8. **Number of Collection System Employees (including supervisor)** _____
- 9. **Total Number of Collection System Employees Who are Members of KWEA** _____

Section C: Award Information

- 1. **Number of Personnel with ABC Collection Systems Certification** _____
- 2. **Average Number of Hours per Employee of Training and/or Seminars for Collection System Personnel** _____
- 3. **Number of Reported System Overflow Discharge(s)** _____
- 4. **Does Organization have a Comprehensive Plan for I&I and for Capacity Issues?** _____
- 5. **Does Organization have a Collection System Maintenance Program?** _____
- 6. **Collection System O&M Budget in Dollars** _____
- 7. **Number of Backups that were the Responsibility of the Municipality** _____
- 8. **Number of Man-Hours Lost Due to Injuries and/or Accidents** _____

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9. Amount of System Inspected Annually:

- | | Length/Quantity |
|-----------------------------------|------------------------|
| a. Television | _____ |
| b. Lamp | _____ |
| c. Smoke (Testing) | _____ |
| d. Manhole Observation/Inspection | _____ |

10. Flow Monitoring Conducted (Yes) _____ **(No)** _____

11. Corrective Maintenance Used: **Length/Quantity**

- | | |
|--|-------|
| a. Rodding/Cleaning | _____ |
| b. Installation of Trenchless Technology | _____ |
| c. Foaming/Root Control | _____ |
| d. Line Replacement/Sewer Relief | _____ |
| e. Manhole Adjustments/Rehabilitation | _____ |
| f. Line Repairs | _____ |
| g. Lines Flushed Annually | _____ |
| h. Other | _____ |

12. Lift Stations

- a. Number of Times Checked per Week _____
- b. Check the items that apply to your lift stations:
- Adequate spare parts inventory
 - Emergency plans are in place; i.e. back up power supplies, etc.
 - Routine maintenance program is implemented; i.e. exercising valves, grease bearings, record keeping, etc.
 - Remote monitoring; i.e., SCADA, telemetry, etc.

13. Safety – Check the safety items that are available and/or apply to your collection system operation:

- Full body harness
- Ventilation blower
- Hazardous gas detector
- Tripod or lifting device
- Self-contained breathing apparatus
- Communication equipment; i.e. radios, mobile phone
- Regular safety meetings
- Confined space entry program
- Other, please explain _____

Complete and return this form to the KWEA Collection Systems Committee Award Chairman for evaluation by **June 15, 2009**. Submit completed nomination form, with required supporting material, to:

Tamara Lorenzen, P.E.
KWEA Collection Systems Award Subcommittee
CDM
9200 Ward Parkway, Suite 500
Kansas City, Missouri 64114



Golden Manhole Award

2009 NOMINATION FORM GOLDEN MANHOLE AWARD SOCIETY

To be completed by nominator

I. NOMINATOR:

Person Making Nomination: _____

Nominating Person's Address: _____

Phone Number: _____

II. NOMINEE:

Name of Nominee: _____

Employer: _____

Title: _____

Address: _____

Phone Number: _____

III. On a separate sheet, list the significant contributions the candidate has made that promote pride and safety in the workplace, teamwork, education and the promotion of professionalism in the collection systems field.

Please provide attachments, or additional information as necessary.

SUBMIT TO: Golden Manhole Society Selection Committee, c/o Jim Stuit, PO Box 708, Lawrence, Kansas 66044,
Phone: (785) 832-7815, Fax: (785) 832-7897, e-mail: jstuit@ci.lawrence.ks.us by **March 1, 2009**

