



**City of Santa Barbara - Public Works Department**  
**SEWER LATERAL CERTIFICATE**  
**OF COMPLIANCE**

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**APPLICANT:**

**SITE ADDRESS:**

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*The City of Santa Barbara has reviewed the sanitary sewer lateral condition of the above referenced property based upon the following submitted information:*

- Videotape and Inspection Form of the Sewer Lateral*
- Final Inspection Signoff of Sewer Repair / Replacement*

*This Certificate is to notify you that the subject sewer lateral checked below complies with the City of Santa Barbara's Lateral Ordinance.*

- Upper Sewer Lateral only*    *Lower Sewer Lateral only*    *Upper and Lower Sewer Lateral*

**EFFECTIVE DATE:**

**EXPIRATION DATE**

*If you have any questions, or if we can provide any other assistance, please call (805) 568-1032.*

Thank you,

CITY OF SANTA BARBARA

Dale Escobar  
Sewer Lateral Inspection Program Coordinator