NORTH DAKOTA NDIRF INSURANCE RESERVE FUND

SEWER BACKUP INCIDENT REPORT FORM

Incident form for reported backups, overflows, response actions, and follow-up.

Member/Entity (if applicable) _____

Use this form to document work consistently and retain it with sewer program records.			
Date Reported		**Incident No.**	
Address/Location		**Time Reported**	
Phone/Contact		**Reported By**	
		Responding Staff	

Initial Incident Information

Reported Symptoms/Complaint	
Observed Conditions on Arrival	
Preliminary Cause/ Suspected Cause	
Immediate Actions Taken	

Responsibility and Notifications

☐ Public Main ☐ Private Service Line/Plumbing ☐ Undetermined

	Supervisor notified		Contractor notified
	Public health/DEQ/other notice reviewed if applicable		Photos taken
	Follow-up cleaning/televising scheduled		Claim or risk-management notice considered

Outcome and Follow-Up

Service Restored/ Current Status	
Corrective Action Needed	
Additional Notes/Witness Information	

For North Dakota Local Government.

NDIRF Template Form – Optional Use. Members may modify this form to meet local operational needs.

☐ No Follow-Up Needed

☐ Follow-Up Work Order Created

Work Order # _____

Completed Date _____

Prepared by		**Reviewed by**	
Date		**Date**	