



2023 ANNUAL SUMMARY REPORT CROSS CONNECTION & BACKFLOW PREVENTION

Received Feb 8 2024 Cross Connection

D	leage fill out the Assert Community			
C	lease fill out the Annual Summary Report accurately and completely with data from 2023. Keep a completed ppy for your records.			
P	LEASE ANSWER ALL QUESTIONS. INCOMPLETE REPORTS WILL DELAY PROCESSING.			
E	eturn completed reports by March 31, 2024 mail: cross.connection@odhsoha.oregon.gov , Fax: 971-673-0694 fail: DWS-Cross Connection; 800 NE Oregon Street, Suite 640; Portland, OR 97293			
1.	Water System Name: City of Halsey PWS ID# 41-00364			
2.	What size is your water system?			
3.	ASR Contact Information: (if there are questions about the ASR who should we contact?) Name: Andy Ridinger			
	Email: andy@halseyor.gov Phone #: 541-369-2550			
4.	Customer Base: Who does your water system serve? Count each service connection only once, include connections with and without a backflow assembly.			
	a. Do you have any residential connections in your water system? Yes No How many: 318			
	b. Do you have any high hazard connections in your water system? Yes No How many: 9			
	c. Do you have any other types of connections not listed above? Yes No How many: 0			
Co	mments:			
5.	An <u>enabling authority</u> is required for all community water systems. The enabling authority allows for a water system to discontinue service for various reasons. A sample enabling authority is available for small water systems on our website: <u>www.healthoregon.org/crossconnection</u> . If you have not submitted an enabling authority to the State, please complete one and submit it as soon as possible.			
6. 7.	Does your water system have an enabling authority? Yes No (see note above) Was your enabling authority revised within the last year? Yes, email a copy to the Cross Connection program cross.connection@odhsoha.oregon.gov No			

requir	ed written backflow prevention pr	IS ONLY (Large = 300+ Service Connections rogram plan outlined in OAR 333-061-0070)	s) and are speci 9)(b)
8. Certified	d Cross Connection Specialist Info	ormation:	
Name: A	ndy Ridinger	Cert #: 4493	
Email Ad	dress: andy@halseyor.com	Cert #: 4493 Phone #: 541-3692550	
9. Does you	ır water system have a current <u>wr</u>	itten backflow prevention program plan?	Yes No
0. Does the	backflow prevention plan include	e the following:	
a. A list o	f premises where health hazard cross c sted in Table 42 (High Hazard Table).	onnections exist, including, but not limited to,	☐ Yes ■ No
b. Proced premis	ure for continually evaluating the des.	egree of hazard posed by a water users	☐ Yes ■No
c. Proced	ure for notifying the water user if a ed, and for informing the water use	non-health hazard or health hazard is r of any corrective action required.	☐ Yes ■No
d. The type comme	be of protection required to prevent ensurate with the degree of hazard the	backflow into the public water supply, nat exists on the water user's premises.	☐ Yes ■No
e. A description with the	ription of what corrective actions we e water suppliers cross connection of	ill be taken if a water user fails to comply control requirements.	☐ Yes ■ No
f. Current comple	records of approved backflow prevented, test results, and verification of	vention assemblies installed, inspections current backflow assembly tester certification.	Yes No
g. A publi	c education program about cross co	nnection control.	Yes No
a. How m b. How m c. How m	re any Reduced Pressure Backflow Prom? Yes No (if you answered yes, any assemblies are installed in your was any assemblies were tested? any assemblies passed their annual test any assemblies failed their annual test?	?	alled in your

12. D	o you have any Double Check Backflow Prevention Assemblies (DC, DCVA, & DCDA) install	led in your water
sy	stem? Yes No (if you answered yes, answer the questions below)	iod in your water
a.	How many assemblies are installed in your water system?	374
b.	How many assemblies were tested?	374
c.	How many assemblies passed their annual test?	353
d.	How many assemblies failed their annual test?	22
e.	Comments:	
13 Dc	Voli have any Deagange Volume Dead A Color Color	
	you have any Pressure Vacuum Breaker Assemblies (PVB, PVBA, & SVBA) installed in your Yes No (if you answered yes, answer the questions below)	r water system?
a.	How many assemblies are installed in your water system?	
b.	How many assemblies were tested?	
c.	How many assemblies passed their annual test?	
d.	How many assemblies failed their annual test?	
e.	Comments:	
I certif penalti	by the information provided is true to the best of my knowledge. Providing false information to the water system.	on may result in
Printe	d Name: Andy Ridinger Title: Lead PV	V
Signati	ure: Andy Ridinger Date: 2-8	-24

Return completed reports by March 31, 2024. Email: cross.connection@odhsoha.oregon.gov, Fax: 971-673-0694 or Mail: DWS-Cross Connection; 800 NE Oregon Street, Suite 640; Portland, OR 97293

Questions? cross.connection@odhsoha.oregon.gov or 971-673-0321

Drinking Water Updates

If you would like to receive the Pipeline newsletter, in addition to other important notifications sign up for Drinking Water Email Alerts! Go to www.healthoregon.org/dws and click on the Sign Up for DWS News button!

To get Cross Connection notifications, go to www.healthoregon.org/crossconnection and click on the Sign_Up for Cross Connection News