

2018 Annual Summary Report (ASR)

Row 305

Primary

Entered

Data Online

Water System Name SLEEPY HOLLOW PHASE I WS, 41-00756

ASR Contact Karen Mitchell

Email Address SHPhaseonewater@outlook.com

Contact Phone Number 971-304-4990

Residential Connections 44

High Hazard Connections 0

Other Connections 0

Enabling Authority Yes

Revised Enabling Authority No

CCCS Name

CCCS Information

CCCS Cert #

CCCS Phone

CCCS Email

Current written backflow prevention program plan?

**BFPP - list of
high hazards**

**BFPP -
Procedure**

**BFPP Notify
Water User**

**BFPP - Type of
Protection**

**BFPP -
Corrective
Action**

**BFPP - Current
records**

**BFPP - Public
Education**

**Do you have
RP?** No

RP - How Many 0

RP - Tested

RP - Passed

RP - Failed

% Tested #DIVIDE BY ZERO

RP - Comments

**Do you have
any DC?** Yes

DC - How Many 10

DC - Tested 10

DC - Passed 10

DC - Failed 0

DC - Comments

**Do you have
any PVBs?** No

**PVB - How
Many**

PVB - Tested

PVB - Passed

PVB - Failed

**PVB -
Comments**

I certify

Column47
