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| Water System Name and PWS ID# | WAMIC WATER ASSOCIATION, 41-00931 |
| System Size | Small System, 1-299 connections |
| Date Report was Received | 04/01/21 1:06 AM |
| ASR Contact | Pam Petersen |
| Email Address | wamicwaterandsanitary@ gmail.com |
| Contact Phone Number | 541-993-7627 |
| Residential Connection | 65.00 |
| High Hazard Connection | 0 |
| Other Connections | 9 |
| Total Connections | 74 |
| Enabling Authority | Yes |
| Did you revise your Enabling Authority? | No |
| This section for LARGE Systems Only | |
| Cross Connection Specialist | |
| Specialist Cert # | |
| WS Employee/Contracted | |
| Phone # | |
| Email Address | |
| Written Backflow Protection Program | |
| Written BFP program plan? | |
| List of high hazards | |
| Procedure | |
| Notify Water Users | |
| Type of Protection | |
| Corrective Action | |
| Current Records | |
| Public Education | |

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|---|
| <p>Do you have any RPs? ^{No}</p> <p>How many ⁰</p> <p>Tested</p> <p>Passed</p> <p>Failed</p> <p>% of RPs tested</p> <p>Comments</p> |
| <p>Do you have any DCs? ^{No}</p> <p>How many ⁰</p> <p>Tested</p> <p>Passed</p> <p>Failed</p> <p>% of DCs tested</p> <p>Comments</p> |
| <p>Do you have any PVBs? ^{No}</p> <p>How many ⁰</p> <p>Tested</p> <p>Passed</p> <p>Failed</p> <p>% of PVBs Tested</p> <p>Comments</p> |

I certify the information provided is true to the best of my knowledge. Providing false information may result in penalties to the individual and to the water system ^{true}