



2021 ANNUAL SUMMARY REPORT  
CROSS CONNECTION & BACKFLOW PREVENTION

RECEIVED  
MAR 24 2022  
Certification  
Drinking Water Services

Please fill out the Annual Summary Report accurately and completely with data from 2021. Keep a completed copy for your records.

PLEASE ANSWER ALL QUESTIONS. INCOMPLETE REPORTS WILL DELAY PROCESSING.

Return completed reports by **March 31, 2022**

Email: [cross.connection@dhsosha.state.or.us](mailto:cross.connection@dhsosha.state.or.us), Fax: 971-673-0694

Mail: DWS-Cross Connection; 800 NE Oregon Street, Suite 640; Portland, OR 97293

1. Water System Name: CEDAR TREE MHP / 45 CENTRAL LLC PWS ID# 41- 01043

2. What size is your water system?  Small (1-299 connections)  Large (300+ connections)

3. ASR Contact Information: (if there are questions about the ASR who should we contact?)

Name: TODD PENTRACK

Email: TALFIN196@GMAIL.COM Phone #: 503-369-9995

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: 28

b. Do you have any high hazard connections in your water system?  Yes  No How many: \_\_\_\_\_

c. Do you have any other types of connections not listed above?  Yes  No How many: \_\_\_\_\_

Comments: \_\_\_\_\_

5. An **enabling authority** 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: [www.healthoregon.org/crossconnection](http://www.healthoregon.org/crossconnection). If you have not submitted an enabling authority to the State, please complete one and submit it as soon as possible.

6. Does your water system have an **enabling authority**?  Yes  No (see note above)

7. Was your enabling authority revised within the last year?  
 Yes, email a copy to the Cross Connection program [cross.connection@state.or.us](mailto:cross.connection@state.or.us)  No

# Health

STATE OF CALIFORNIA  
DEPARTMENT OF PUBLIC HEALTH  
COMMUNITY WATER SYSTEMS DIVISION

## WATER SYSTEMS REGISTRATION REPORT

REGISTRATION NUMBER: [ ] DATE: [ ]

MK

These weights  
2nd pg in envelope

R

- a. Do you have any residential connection in your water system?  Yes  No
- b. Do you have any high hazard connections in your water system?  Yes  No
- c. Do you have any other types of connections not listed above?  Yes  No
- d. Do you have any connections in your water system that are not listed above?  Yes  No
- e. Do you have any connections in your water system that are not listed above?  Yes  No
- f. Do you have any connections in your water system that are not listed above?  Yes  No
- g. Do you have any connections in your water system that are not listed above?  Yes  No
- h. Do you have any connections in your water system that are not listed above?  Yes  No
- i. Do you have any connections in your water system that are not listed above?  Yes  No
- j. Do you have any connections in your water system that are not listed above?  Yes  No
- k. Do you have any connections in your water system that are not listed above?  Yes  No
- l. Do you have any connections in your water system that are not listed above?  Yes  No
- m. Do you have any connections in your water system that are not listed above?  Yes  No
- n. Do you have any connections in your water system that are not listed above?  Yes  No
- o. Do you have any connections in your water system that are not listed above?  Yes  No
- p. Do you have any connections in your water system that are not listed above?  Yes  No
- q. Do you have any connections in your water system that are not listed above?  Yes  No
- r. Do you have any connections in your water system that are not listed above?  Yes  No
- s. Do you have any connections in your water system that are not listed above?  Yes  No
- t. Do you have any connections in your water system that are not listed above?  Yes  No
- u. Do you have any connections in your water system that are not listed above?  Yes  No
- v. Do you have any connections in your water system that are not listed above?  Yes  No
- w. Do you have any connections in your water system that are not listed above?  Yes  No
- x. Do you have any connections in your water system that are not listed above?  Yes  No
- y. Do you have any connections in your water system that are not listed above?  Yes  No
- z. Do you have any connections in your water system that are not listed above?  Yes  No

13. Do you have any **Double Check Backflow Prevention Assemblies** (DC, DCVA, & DCDA) installed in your water system?  Yes  No (if you answered yes, answer the questions below)

a. How many assemblies are installed in your water system? \_\_\_\_\_ 0

b. How many assemblies were tested? \_\_\_\_\_ 0

c. How many assemblies passed their annual test? \_\_\_\_\_ 0

d. How many assemblies failed their annual test? \_\_\_\_\_ 0

e. Comments: \_\_\_\_\_

14. Do you have any **Pressure Vacuum Breaker Assemblies** (PVB, PVBA, & SVBA) installed in your water system?  Yes  No (if you answered yes, answer the questions below)

a. How many assemblies are installed in your water system? \_\_\_\_\_ 0

b. How many assemblies were tested? \_\_\_\_\_ 0

c. How many assemblies passed their annual test? \_\_\_\_\_ 0

d. How many assemblies failed their annual test? \_\_\_\_\_ 0

e. Comments: \_\_\_\_\_

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.

Printed Name: S. TODD PEURBAEK Title: 415 CENTRAL LLC  
PRESIDENT

Signature: \_\_\_\_\_ Date: 3/22/22

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**Email:** [cross.connection@dhsoha.state.or.us](mailto:cross.connection@dhsoha.state.or.us), **Fax:** 971-673-0694 or  
**Mail:** DWS-Cross Connection; 800 NE Oregon Street, Suite 640; Portland, OR 97293

**Questions?** [cross.connection@dhsoha.state.or.us](mailto:cross.connection@dhsoha.state.or.us) 971-673-0321

**💧 Drinking Water Updates 💧**

October 2018 was the last printed Pipeline! If you would like to continue receiving the Pipeline newsletter, in addition to other important notifications sign up for Drinking Water Email Alerts! Go to [www.healthoregon.org/dws](http://www.healthoregon.org/dws) and click on the **'Subscribe to Email Alerts'** button!

To get Cross Connection notifications, go to [www.healthoregon.org/crossconnection](http://www.healthoregon.org/crossconnection) and click on the **'Subscribe to Email Alerts'**