



**2018 ANNUAL SUMMARY REPORT (ASR)  
CROSS CONNECTION & BACKFLOW PREVENTION**

Please fill out the Annual Summary Report accurately and completely with data from 2018. Keep a completed copy for your records.

**PLEASE ANSWER ALL QUESTIONS. INCOMPLETE REPORTS WILL DELAY PROCESSING.**

Return completed reports by **March 31, 2019**

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

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

1. **Water System Name:** Camelot Mobile Residence **PWS ID#** 41-00027

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

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

Name: Wanda Gloude

Address: 2045 36th Avenue SE

City: Albany

State: OR

Zip: 97322

Email: twsgloude@comcast.net

Phone #: 541-926-2863

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: 50

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

**QUESTIONS 8 - 10 are for LARGE SYSTEMS ONLY (Large = 300+ Service Connections) and are specific to the required written backflow prevention program plan outlined in OAR 333-061-0070(9)(b)**

**8. Certified Cross Connection Specialist Information:**

Water system Employee       Contracted service  
Name: \_\_\_\_\_ Cert #: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Alt Phone #: \_\_\_\_\_

9. Does your water system have a current written backflow prevention program plan?       Yes  No

**10. Does the backflow prevention plan include the following:**

- a. A list of premises where health hazard cross connections exist, including, but not limited to, those listed in Table 42.       Yes  No
- b. Procedure for continually evaluating the degree of hazard posed by a water user's premises.       Yes  No
- c. Procedure for notifying the water user if a non-health hazard or health hazard is identified, and for informing the water user of any corrective action required.       Yes  No
- d. The type of protection required to prevent backflow into the public water supply, commensurate with the degree of hazard that exists on the water user's premises.       Yes  No
- e. A description of what corrective actions will be taken if a water user fails to comply with the water suppliers cross connection control requirements.       Yes  No
- f. Current records of approved backflow prevention assemblies installed:       Yes  No
  - i. inspections completed,       Yes  No
  - ii. backflow prevention assembly test results on backflow prevention assemblies,       Yes  No
  - iii. verification of current backflow assembly tester certification       Yes  No
- g. A public education program about cross connection control.       Yes  No

11. Are there any backflow assemblies or devices installed in your water system?  Yes  No

12. Do you have any **Reduced Pressure Backflow Prevention Assemblies (RP, RPBA, & RPDA)** 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? \_\_\_\_\_
- b. How many assemblies were tested? \_\_\_\_\_
- c. How many assemblies passed their annual test? \_\_\_\_\_
- d. How many assemblies failed their annual test? \_\_\_\_\_

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

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? \_\_\_\_\_
  - b. How many assemblies were tested? \_\_\_\_\_
  - c. How many assemblies passed their annual test? \_\_\_\_\_
  - d. How many assemblies failed their annual test? \_\_\_\_\_
  - 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? \_\_\_\_\_
  - b. How many assemblies were tested? \_\_\_\_\_
  - c. How many assemblies passed their annual test? \_\_\_\_\_
  - d. How many assemblies failed their annual test? \_\_\_\_\_
  - e. Comments: \_\_\_\_\_

15. Do you track any **Atmospheric Vacuum Breakers (AVB)** installed in your water system?  Yes  No

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: Wanda Gloude Title: Owner  
 Signature: Wanda Gloude Date: 3-29-19

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