PUBLIC HEALTH DIVISION Center for Health Protection, Drinking Water Services



## 2023 ANNUAL SUMMARY REPORTReceivedCROSS CONNECTION & BACKFLOW PREVENTIONApril 18 2024Cross ConnectionCross Connection

Please fill out the Annual Summary Report accurately and completely with **data from 2023**. Keep a completed copy for your records.

PLEASE ANSWER ALL QUESTIONS. INCOMPLETE REPORTS WILL DELAY PROCESSING.

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

1. Water System Name: Usho Day Water

PWS ID# 41- 00060

Yes No How many:

Yes No How many:

- 2. What size is your water system? Small (1-299 connections)
- 3. ASR Contact Information: (if there are questions about the ASR who should we contact?)

Name: 10m Alfonse Phone #: 503 325 1062 Email:

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: 110

b. Do you have any high hazard connections in your water system?

c. Do you have any other types of connections not listed above?

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: <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. Does your water system have an <u>enabling authority</u>? Yes No (see note above)
- 7. Was your enabling authority revised within the last year?
  Yes, email a copy to the Cross Connection program <u>cross.connection@odhsoha.oregon.gov</u>



<b>QUESTIONS 8 - 10</b> are for <b>LARGE SYSTEMS ONLY</b> (Large = 300+ Service Connections) and are specific to the required <b>written backflow prevention program plan</b> outlined in OAR 333-061-0070(9)(b)			
	s Connection Specialist Information:	nungen	
Name:	Cert #:		
	Phone #:		
9. Does your wat	er system have a current written backflow prevention program plan?	Yes No	
a. A list of prem	flow prevention plan include the following: hises where health hazard cross connections exist, including, but not limited to, Table 42 (High Hazard Table).	Yes No	
b. Procedure fo premises.	or continually evaluating the degree of hazard posed by a water users	Yes No	
	or notifying the water user if a non-health hazard or health hazard is nd for informing the water user of any corrective action required.	Yes No	
• I I I	protection required to prevent backflow into the public water supply, ate with the degree of hazard that exists on the water user's premises.	Yes No	
	n of what corrective actions will be taken if a water user fails to comply er suppliers cross connection control requirements.	Yes No	
	rds of approved backflow prevention assemblies installed, inspections est results, and verification of current backflow assembly tester certification.	Yes No	
g. A public edu	acation program about cross connection control.	Yes No	
water system?	Reduced Pressure Backflow Prevention Assemblies (RP, RPBA, & RPDA) insta Yes No <i>(if you answered yes, answer the questions below)</i> assemblies are installed in your water system?	lled in your	
b. How many a	ssemblies were tested?		
c. How many a	ssemblies passed their annual test?		
d. How many a	ssemblies failed their annual test?		
Comments:			
		<u></u>	

12. Do you have any <b>Double Check Backflow Prevention Assemblies</b> (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:
13. Do you have any Pressure Vacuum Breaker Assemblies (PVB, PVBA, & SVBA) installed in your water system?
$\Box$ Yes $\boxed{M}$ 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:
*
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: 10m Alfonse Title: President
Signature: Tom Olfonse Date: 4.18.24
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 <u>www.healthoregon.org/dws</u> and click on the 'Sign Up for DWS News' button!

To get Cross Connection notifications, go to <u>www.healthoregon.org/crossconnection</u> and click on the 'Sign Up for Cross Connection News'