

# 2018 Annual Summary Report (ASR)

Row 368

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**Primary**

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**Entered** **Data Online** **Water System Name** YOUNGS RIVER LEWIS & CLARK WD, 41-00062**ASR Contact** Carl Gifford**Email Address** Carl@yrlcoffice.org**Contact Phone Number** 503-325-4330**Residential Connections** 81**High Hazard Connections** 6**Other Connections** 3**Enabling Authority** Yes**Revised Enabling Authority** No**CCCS Name** Carl Gifford**CCCS Information** Water System Employee, or**CCCS Cert #** 6271**CCCS Phone** 503-741-0282**CCCS Email** Carl@yrlcoffice.org**Current written backflow prevention program plan?** Yes

**BFPP - list of high hazards** Yes

**BFPP - Procedure** Yes

**BFPP Notify Water User** Yes

**BFPP - Type of Protection** Yes

**BFPP - Corrective Action** Yes

**BFPP - Current records** Yes

**BFPP - Public Education** Yes

**Do you have RP?** Yes

**RP - How Many** 6

**RP - Tested** 6

**RP - Passed** 6

**RP - Failed** 1

**% Tested** 100%

**RP - Comments**

**Do you have any DC?** Yes

**DC - How Many** 90

**DC - Tested** 90

**DC - Passed** 90

**DC - Failed** 5

**DC - Comments**

**Do you have any PVBs?** No

**PVB - How Many**

**PVB - Tested**

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**PVB - Passed**

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**PVB - Failed**

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**PVB -  
Comments**

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I certify

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**Column47**

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