



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.

| COI | ompleted copy for your records. | | | |
|----------|--|-------------|-----------------|--|
| PΙ | LEASE ANSWER ALL QUESTIONS. INCOMPLETE REPORTS W | ILL DEL | AY PROCESSING. | |
| En | Leturn completed reports by March 31, 2019 Email: 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: Dietz Airpark Water System, Inc | P | WS ID# 41-00158 | |
| 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: Robert Armstrong | | | |
| | Address: 25474 S Skylane Drive | | | |
| | City: Canby Stat | te: OR | Zip: 9701 3 | |
| | Email: daws.drc@canby.com Phone #: | 503-263 | 8-8853 | |
| 4. | Customer Base: Who does your water system serve? Count each service connection only once, included connections with and without a backflow assembly. | | | |
| | a. Do you have any residential connections in your water system? | Yes T | No How many: 38 | |
| | 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: | |
| Co | Comments: | | | |
| | | | | |
| 5. | An <u>enabling authority</u> 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. 7. | | No (see not | , | |

| QUESTIONS 8 - 10 are for LARGE SYSTEMS ONLY (Large = 300+ Service) | | | | | |
|--|------------------------------|--|--|--|--|
| to the required <u>written backflow prevention program plan</u> outlined in <u>OAR 3</u> | 33-061-0070(9)(b) | | | | |
| Certified Cross Connection Specialist Information: Water system Employee Contracted service Name: N/A Cert #: N/A | | | | | |
| Address: | | | | | |
| Email Address: | Zip. | | | | |
| Phone #: Alt Phone #: | | | | | |
| 9. Does your water system have a current written backflow prevention pro | ogram 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 no those listed in Table 42. | ot limited to, ☐ Yes ■No | | | | |
| Procedure for continually evaluating the degree of hazard posed by a water premises. | er user's | | | | |
| c. Procedure for notifying the water user if a non-health hazard or health hazard identified, and for informing the water user of any corrective action requi | | | | | |
| d. The type of protection required to prevent backflow into the public water commensurate with the degree of hazard that exists on the water user's pr | | | | | |
| e. A description of what corrective actions will be taken if a water user fails with the water suppliers cross connection control requirements. | to comply Yes •No | | | | |
| f. Current records of approved backflow prevention assemblies installed:i. inspections completed,ii. backflow prevention assembly test results on backflow prevention as | Yes No Yes No | | | | |
| iii. verification of current backflow assembly tester certification | ssemblies, 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, RPB. | A, & RPDA) installed in your | | | | |
| water system? Tyes 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? | N/A | | | | |
| c. How many assemblies passed their annual test? | N/A | | | | |
| d. How many assemblies failed their annual test? | <u>N/A</u> | | | | |
| Comments: * Unknown | | | | | |
| | | | | | |
| | | | | | |

| 13. Do | you have any Double Check Backflow Prevention Assemblies (DC, DCVA, & DCDA) installed | in your water | | | | |
|---|---|---------------|--|--|--|--|
| sys | tem? Tes No (if you answered yes, answer the questions below) | | | | | |
| a. | How many assemblies are installed in your water system? | 2 | | | | |
| b. | How many assemblies were tested? | 0 | | | | |
| c. | How many assemblies passed their annual test? | N/A | | | | |
| d. | How many assemblies failed their annual test? | N/A | | | | |
| e. | Comments: | | | | | |
| 14. Do you have any Pressure Vacuum Breaker Assemblies (PVB, PVBA, & SVBA) installed in your water system? \[\textstyle \textsty | | | | | | |
| a. | How many assemblies are installed in your water system? | | | | | |
| b. | How many assemblies were tested? | N/A | | | | |
| c. | How many assemblies passed their annual test? | N/A | | | | |
| d. | How many assemblies failed their annual test? | N/A | | | | |
| e. | Comments: * Unknown | | | | | |
| 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: Robert Armstrong Title: Dietz Alirpart Water System DRC | | | | | | |
| Signat | cure: Robert Charles Date: 1/21/201 | 9 | | | | |

Return completed reports by March 31, 2019
Email: cross.connection@state.or.us or click the email button

Fax: 971-673-0694

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