

2018 Annual Summary Report (ASR)

Row 80

Primary**Entered** ☒**Data Online** ☐**Water System Name** DEPOE BAY, CITY OF, 41-00254**ASR Contact** Brady Weidner**Email Address** weidner@cityofdepobay.org**Contact Phone Number** 541-765-3005**Residential Connections** 1012**High Hazard Connections** 5**Other Connections** 174**Enabling Authority** Yes**Revised Enabling Authority** No**CCCS Name** Brady Weidner**CCCS Information** Water System Employee, or**CCCS Cert #** 5893**CCCS Phone** 541-765-3005**CCCS Email** weidner@cityofdepobay.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

22

RP - Tested

22

RP - Passed

22

RP - Failed

0

% Tested

RP - Comments

Do you have any DC?

Yes

DC - How Many

26

DC - Tested

26

DC - Passed

26

DC - Failed

0

DC - Comments

**Do you have
any PVBs?** No

**PVB - How
Many**

PVB - Tested

PVB - Passed

PVB - Failed

**PVB -
Comments** Please note, One home owner has installed an AVB that I keep track
of, and check each summer. B.W.

I certify ☒

Column47
