### Public Health Division

#### **Drinking Water Services**



# 2024 ANNUAL SUMMARY REPORT CROSS CONNECTION & BACKFLOW PREVENTION

Please fill out the Annual Summary Report accurately and completely with **data from 2024**. Keep a completed copy for your records.

PLEASE ANSWER ALL QUESTIONS. INCOMPLETE REPORTS WILL DELAY PROCESSING.

## Submit completed reports by March 31, 2025

Email: cross.connection@odhsoha.oregon.gov, Fax: 971-673-0694

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

1.	Water System Name: City of Drain	PWS ID# 41-00260		
2.	What size is your water system? ☐ Small (1-299 connections) ■ Large (300+ connections)			
3.	ASR Contact Information: (if there are questions about the ASR who should we contact?) Name: Daniel Bird			
	Email: daniel@cityofdrain.org Phone	#: (541) 836-2113		
4.	Customer Base: Who does your water system serve? Count each service connection on once, include connections with and without a backflow assembly.  a. Do you have any residential connections in your water system?  Yes No How many: 520			
	b. Do you have any high hazard connections in your water system  Yes No How many: 19	n?		
	c. Do you have any other types of connections not listed above?  Yes No How many: 90			
	Comments:			
5.	Does your water system have an enabling authority?   Yes	☐ No (see note above)		
6.	Was your enabling authority revised within the last year?  Yes, email a copy to <a href="mailto:cross.connection@odhsoha.oregon.gov">cross.connection@odhsoha.oregon.gov</a>	■ No		

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Ql	JESTIONS 8 - 10 are for LARGE SYSTEMS ONLY (Large = 300+ Servi	ce Connect	ions) and are	
sp	ecific to the required <u>written backflow prevention program plan</u> outline	ed in <u>OAR</u> 3	<u> 333-061-</u>	
00	<u>70(9)(b)</u>			
7.	Certified Cross Connection Specialist Information:  Water system Employee			
	Name: Daniel Bird Cert #: 6353 Email Address: daniel@cityofdrain.org Phone #: (541) 836-			
	Email Address: daniel@cityofdrain.org			
8.	Does your WS have a current <u>written backflow prevention program plan?</u> Yes No			
9.	Does the <u>backflow prevention plan</u> include the following:  a. A list of premises where health hazard cross connections exist, include not limited to, those listed in Table 42 (High Hazard Table).	ding, but	Yes 🗌 No	
	<ul> <li>b. Procedure for continually evaluating the degree of hazard posed by a water users premises.</li> </ul>		∰ 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 \subseteq 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.			
	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.			
	f. Current records of approved backflow prevention assemblies installed inspections completed, test results, and verification of current backflo assembly tester certification.	<b>≅</b> Yes		
	g. A public education program about cross connection control.		Yes No	
10. Do you have any <b>Reduced Pressure Backflow Prevention Assemblies</b> (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?	19		
	b. How many assemblies were tested?	19	9	
	c. How many assemblies passed their annual test?	19		
	d. How many assemblies failed their annual test?	3	<u>-</u>	
Co	mments: We had 20 assemblies last year. After hazard assessment we r system.	removed 1 F	RP from our	

11. Do you have any Double Check Backflow Prevention Assemblies (I	DC, DCVA, & DCDA)	
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?	216	
b. How many assemblies were tested?	207	
c. How many assemblies passed their annual test?	205	
d. How many assemblies failed their annual test?	4,	
e. Comments: 2 assemblies failed in 2024 but were replaced/repaired	d first part of 2025.	
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:	BA, & SVBA) installed	
I certify the information provided is true to the best of my knowled information may result in penalties to the individual and to the water	•	
Printed Name: Daniel Bird	Title: Specialist	
Signature: Den Col	Date: 03/27/2025	

## Return completed reports by March 31, 2025.

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

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