



PUBLIC HEALTH DIVISION  
Center for Health Protection, Drinking Water Services  
Kate Brown, Governor

# Oregon Health Authority

## 2020 ANNUAL SUMMARY REPORT CROSS CONNECTION & BACKFLOW PREVENTION

Please fill out the Annual Summary Report accurately and completely with **data from 2020**. Keep a completed copy for your records.

**PLEASE ANSWER ALL QUESTIONS. INCOMPLETE REPORTS WILL DELAY PROCESSING.**

Return completed reports by **March 31, 2021**

Email: [cross.connection@dhsoha.state.or.us](mailto:cross.connection@dhsoha.state.or.us), Fax: 971-673-0694

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

1. Water System Name: KINGSWOOD HEIGHTS WATER CO OP PWS ID# 41-00358
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: RICHARD DECHAIINE  
Email: rbdechaine@msn.com Phone #: 503.636.0424
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: 48
- 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: \_\_\_\_\_
- 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: [www.healthoregon.org/crossconnection](http://www.healthoregon.org/crossconnection). 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 **enabling authority**? ☒ Yes ☐ No (see note above)
7. Was your enabling authority revised within the last year?  
☐ Yes, email a copy to the Cross Connection program [cross.connection@state.or.us](mailto:cross.connection@state.or.us) ☒ No

**QUESTIONS 8 - 10 are for LARGE SYSTEMS ONLY** (Large = 300+ Service Connections) and are specific to the required written backflow prevention program plan outlined in OAR 333-061-0070(9)(b)

**8. Certified Cross Connection Specialist Information:**

☐ Water system Employee ☒ Contracted service

Name: RICHARD DECHANE

Cert #: 2605

Email Address: rbdechaine@msn.com

Phone #: 503.636.0424

Alt Phone #:

**9. Does your water system have a current written backflow prevention program 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 not limited to, those listed in Table 42.

☐ Yes ☒ No

b. Procedure for continually evaluating the degree of hazard posed by a water users premises.

☐ 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 ☒ 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.

☐ Yes ☒ No

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.

☐ Yes ☒ No

f. Current records of approved backflow prevention assemblies installed:

☐ Yes ☒ No

i. inspections completed,

☐ Yes ☒ No

ii. backflow prevention assembly test results on backflow prevention assemblies,

☐ Yes ☒ No

iii. verification of current backflow assembly tester certification

☐ 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, 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?

b. How many assemblies were tested?

c. How many assemblies passed their annual test?

d. How many assemblies failed their annual test?

Comments:



13. Do you have any **Double Check Backflow Prevention Assemblies** (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? 3
- b. How many assemblies were tested? 0
- c. How many assemblies passed their annual test? \_\_\_\_\_
- d. How many assemblies failed their annual test? \_\_\_\_\_
- e. Comments: ALL DISCONNECTED

14. Do you have any **Pressure Vacuum Breaker Assemblies** (PVB, PVBA, & SVBA) 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: \_\_\_\_\_

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: Richard DeChaine

Title: Water Manager

Signature: \_\_\_\_\_

Date: 3/30/21

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1. **Water System Name:** CARVER MOBILE RANCH **PWS ID#** 41-00189

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: RICHARD DECHAIINE

Email: rbdechaine@msn.com

Phone #: 503.636.0424

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: 62

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:         

Comments: NO DEVICES IN SYSTEM

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: [www.healthoregon.org/crossconnection](http://www.healthoregon.org/crossconnection). 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 **enabling authority**? ☐ Yes ☒ No (see note above)

7. Was your enabling authority revised within the last year?

☐ Yes, email a copy to the Cross Connection program [cross.connection@state.or.us](mailto:cross.connection@state.or.us) ☐ No



**QUESTIONS 8 - 10 are for LARGE SYSTEMS ONLY** (Large = 300+ Service Connections) and are specific to the required written backflow prevention program plan outlined in OAR 333-061-0070(9)(b)

**8. Certified Cross Connection Specialist Information:**

☐ Water system Employee      ☒ Contracted service

Name: RICHARD DECHaine

Cert #: 2605

Email Address: rbdechaine@msn.com

Phone #: 503.636.0424

Alt Phone #:

**9. Does your water system have a current written backflow prevention program 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 not limited to, those listed in Table 42.

☐ Yes ☒ No

b. Procedure for continually evaluating the degree of hazard posed by a water users premises.

☐ 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 ☒ 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.

☐ Yes ☒ No

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.

☐ Yes ☒ No

f. Current records of approved backflow prevention assemblies installed:

☐ Yes ☒ No

i. inspections completed,

☐ Yes ☒ No

ii. backflow prevention assembly test results on backflow prevention assemblies,

☐ Yes ☒ No

iii. verification of current backflow assembly tester certification

☐ 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, 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?

\_\_\_\_\_

b. How many assemblies were tested?

\_\_\_\_\_

c. How many assemblies passed their annual test?

\_\_\_\_\_

d. How many assemblies failed their annual test?

\_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

13. Do you have any **Double Check Backflow Prevention Assemblies** (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: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Do you have any **Pressure Vacuum Breaker Assemblies** (PVB, PVBA, & SVBA) 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: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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: Richard DeChaine

Title: Water Manager

Signature: \_\_\_\_\_

Date: 3/30/21

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1. **Water System Name:** EXCALIBUR VILLAGE **PWS ID#** 41-00599

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: RICHARD DECHAIINE

Email: rbdechaine@msn.com

Phone #: 503.636.0424

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: 83

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:           

Comments: NO DEVICES IN SYSTEM

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: [www.healthoregon.org/crossconnection](http://www.healthoregon.org/crossconnection). If you have not submitted an enabling authority to the State, please complete one and submit it as soon as possible.

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Email Address: rbdechaine@msn.com

Phone #: 503.636.0424

Alt Phone #: \_\_\_\_\_

**9. Does your water system have a current written backflow prevention program 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 not limited to, those listed in Table 42.      ☐ Yes ☒ No
- b. Procedure for continually evaluating the degree of hazard posed by a water users premises.      ☐ 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 ☒ 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.      ☐ Yes ☒ No
- 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.      ☐ Yes ☒ No
- f. Current records of approved backflow prevention assemblies installed:      ☐ Yes ☒ No
- i. inspections completed,      ☐ Yes ☒ No
- ii. backflow prevention assembly test results on backflow prevention assemblies,      ☐ Yes ☒ No
- iii. verification of current backflow assembly tester certification      ☐ 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, 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? \_\_\_\_\_

b. How many assemblies were tested? \_\_\_\_\_

c. How many assemblies passed their annual test? \_\_\_\_\_

d. How many assemblies failed their annual test? \_\_\_\_\_

Comments: \_\_\_\_\_





13. Do you have any **Double Check Backflow Prevention Assemblies** (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: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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☐ Yes ☒ No (if you answered yes, answer the questions below)

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b. How many assemblies were tested? \_\_\_\_\_

c. How many assemblies passed their annual test? \_\_\_\_\_

d. How many assemblies failed their annual test? \_\_\_\_\_

e. Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Printed Name: Richard DeChaine

Title: Water Manager

Signature: \_\_\_\_\_



Date: 3/30/21

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**Reminder Details**

Printed on: 23-Mar-2021

Test Due Letter 2

Time: 9:51 AM

By Customer Name and Facility Address

Customer Name	Facility Address	Account No	Serial No	Test Due	Last Letter Sent	Last Letter Expired
Blackman	2212 Glenmorrie Ln, Lake Oswego	092.01	723727	01-May-2020	20-May-2020	19-Jul-2020
Edwards, Ray	2424 Glenmorrie Dr, Lake Oswego	057.01	03218	01-May-2020	20-May-2020	19-Jul-2020
Furlong, Elaine	2277 Glenmorrie Dr, Lake Oswego	055.01	908803	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customeer	2165 Glenmorrie Dr, Lake Oswego	051.51	AL059	01-May-2020	20-May-2020	19-Jul-2020
GLENMORRIE CUSTOMER	1180 Cherry Ln, Lake Oswego	027.51	65269	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	1218 Cherry Ln, Lake Oswego	028.01	A46266	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	16342 Ivy Ln, Lake Oswego	121.01	129579	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	16470 Glenwood Ct, Lake Oswego	105.51	89253	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	16493 Glenwood Ct, Lake Oswego	106.11	23708	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	16560 Glenwood Ct, Lake Oswego	109.11	A817489	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	16695 Glenwood Ct, Lake Oswego	114.01	M9127	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	1679 Cherry Ln, Lake Oswego	138.01	HA91963	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	17037 Chapin Way, Lake Oswego	011.01	170712	01-May-2019	20-May-2020	19-Jul-2020
Glenmorrie Customer	2031 Lillie Ln, Lake Oswego	122.01	1272045	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	2064 Glenmorrie Ln, Lake Oswego	084.11	A23498	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	2066 Glenmorrie Dr, Lake Oswego	049.11	218858	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	2066 Glenmorrie Dr, Lake Oswego	049.11	HA43938	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	2147 Glenmorrie Ln, Lake Oswego	088.21	H00034	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	2445 Glenmorrie Dr, Lake Oswego	057.11	142421	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	2628 Glenmorrie Dr, Lake Oswego	062.01	1317631	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Customer	3177 Stonebridge Way, Lake Oswego	148.01	1824710	01-May-2019	20-May-2020	19-Jul-2020
Glenmorrie Customer	3242 Glenmorrie Dr SW, Lake Oswego	74.01	832381	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Resident	1748 Glenmorrie Terr, Lake Oswego	097.01	AF 1853	01-May-2018	20-May-2020	19-Jul-2020
Glenmorrie Resident	1856 Glenmorrie Terr, Lake Oswego	099.01	B6412	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Resident	1874 Glenmorrie Terr, Lake Oswego	100.05	06683	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Resident	1890 Glenmorrie Terr, Lake Oswego	102.01	E2221	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Resident	2065 Lilli Ln, Lake Oswego	123.11	786919	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Resident	2516 Glenmorrie Dr, Lake Oswego	059.01	HA61700	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Resident	2662 Glenmorrie Dr, Lake Oswego	063.11	D3244	01-May-2020	20-May-2020	19-Jul-2020
Glenmorrie Resident	3040 Stonebridge Way, Lake Oswego	142.11	2811932	01-May-2020	20-May-2020	19-Jul-2020
Wylder, Jim	281 Viewcrest Ln, Lake Oswego	150.01	850	01-May-2020	20-May-2020	19-Jul-2020







Backflow Test Reports

For

Carver Mobile H100189

Kingwood Hts H100338

Excalibur Village H100599