



2018 ANNUAL SUMMARY REPORT (ASR) CROSS CONNECTION & BACKFLOW PREVENTION

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Ple	ease fill out the Annual Summary Report accurately and completely with data from 2018. Keep a mpleted copy for your records.		
PL	EASE ANSWER ALL QUESTIONS. INCOMPLETE REPORTS WILL DELAY PROCESSING.		
En	eturn completed reports by March 31, 2019 nail: cross.connection@state.or.us , Fax: 971-673-0694 ail: DWS-Cross Connection; 800 NE Oregon Street, Suite 640; Portland, OR 97293		
1.	Water System Name: C1ty of Longueek PWS ID# 41-00490		
	. 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: Don Porter		
	Address: P.o Box 489		
	City: Longikeek State: OR Zip: 97856		
	Address: P.O Box 489 City: Longikeek State: OR Zip: 97856 Email: Doporter@orteleo.net Phone#: 541-421-5200		
4.	Table 1 Count and government on the connection only once include		
	a. Do you have any residential connections in your water system? Yes \(\text{No How many:} \(\text{103} \)		
	b. Do you have any high hazard connections in your water system? Yes \(\subseteq No \) How many: \(\subseteq \)		
	c. Do you have any other types of connections not listed above?		
Co	omments:		
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: 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. 7.	The state of the s		

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			
Address:	Address:		
City: State	Zip:	·	
Email Address: Alt Phone #:			
9. Does your water system have a current written backflow preven	ention program plan?	☐ Yes ☐No	
 Does the <u>backflow prevention plan</u> include the following: a. A list of premises where health hazard cross connections exist, include those listed in Table 42. 	ing, but not limited to,	☐ Yes ☐No	
 Procedure for continually evaluating the degree of hazard posed premises. 	by a water user's	☐ Yes ☐No	
c. Procedure for notifying the water user if a non-health hazard or identified, and for informing the water user of any corrective ac	health hazard is tion required.	☐ Yes ☐No	
d. The type of protection required to prevent backflow into the pul commensurate with the degree of hazard that exists on the water	olic water supply, r user's premises.	☐ Yes ☐No	
 e. A description of what corrective actions will be taken if a water with the water suppliers cross connection control requirements. 	user fails to comply	☐ Yes ☐No	
 f. Current records of approved backflow prevention assemblies in i. inspections completed, ii. backflow prevention assembly test results on backflow pre iii. verification of current backflow assembly tester certification 	vention assemblies,	Yes	
g. A public education program about cross connection control.	NA	Yes No	
11. Are there any backflow assemblies or devices installed in your water system? Kes No			
12. Do you have any Reduced Pressure Backflow Prevention Assemblies (RP, RPBA, & RPDA) installed in your			
water system? Yes (if you answered yes, answer the questions be	elow)	3	
a. How many assemblies are installed in your water system?		0	
b. How many assemblies were tested?c. How many assemblies passed their annual test?			
d. How many assemblies failed their annual test?			
Comments:			

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13. Do you have any Double Check Backflow Prevention Assemblies (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?
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:
15. Do you track any Atmospheric Vacuum Breakers (AVB) installed in your water system? Yes Yes
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: Don Porter Title: MAYOR Signature: Don Ponton Date: 3-25/19
Signature: Don Ponton Date: 3-25/19

Return completed reports by March 31, 2019

Email: cross.connection@state.or.us or click the email button

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