



## 2023 ANNUAL SUMMARY REPORT CROSS CONNECTION & BACKFLOW PREVENTION

Received March 21 2024 Cross Connection

	ease fill out the Annual Summary Report accurately and completely with <b>data from 2023</b> . Keep a completed py for your records.			
PΙ	LEASE ANSWER ALL QUESTIONS. INCOMPLETE REPORTS WILL DELAY PROCESSING.			
En	eturn completed reports by March 31, 2024 nail: <a href="mailto:cross.connection@odhsoha.oregon.gov">cross.connection@odhsoha.oregon.gov</a> , Fax: 971-673-0694 ail: DWS-Cross Connection; 800 NE Oregon Street, Suite 640; Portland, OR 97293			
1.	Water System Name: City of Merrill OR PWS ID# 41-00518			
2.	What size is your water system?			
3.	ASR Contact Information: (if there are questions about the ASR who should we contact?) Name: Gregory Matthews			
	Email: gregmatthews788@gmail.com Phone #: 541-891-3178			
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: 392			
	b. Do you have any high hazard connections in your water system?  Yes No How many: 0			
Co	c. Do you have any other types of connections not listed above?  Past high hazards are no longer in business. 22 non residential.			
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.	Does your water system have an enabling authority?  Yes  No (see note above)  Was your enabling authority revised within the last year?  Yes, email a copy to the Cross Connection program cross.connection@odhsoha.oregon.gov			

Certified Cross Connection Specialist Information:  Water system Employee  Contracted service		
Name: Rob Grounds	Cert #: 3255	
Email Address: cityofmalin@yahoo.com	Cert #: 3255 Phone #: 541-723-202	1
Does your water system have a current written back	sflow prevention program plan?	■ Yes □No
. Does the <u>backflow prevention plan</u> include the follow	wing:	
a. A list of premises where health hazard cross connections those listed in Table 42 (High Hazard Table).	exist, including, but not limited to,	■ Yes □No
b. Procedure for continually evaluating the degree of h premises.	azard posed by a water users	■ Yes □No
c. Procedure for notifying the water user if a non-healt identified, and for informing the water user of any content identified.		■ Yes □No
d. The type of protection required to prevent backflow commensurate with the degree of hazard that exists of		■ Yes □No
e. A description of what corrective actions will be take with the water suppliers cross connection control rec	1 7	■ Yes □No
f. Current records of approved backflow prevention as completed, test results, and verification of current backflow	• •	Yes No
g. A public education program about cross connection	control.	■ Yes No
. Do you have any Reduced Pressure Backflow Prevention		stalled in your
water system? Yes No (if you answered yes, answer the a. How many assemblies are installed in your water system	-	3
b. How many assemblies were tested?		3
c. How many assemblies passed their annual test?		3
d. How many assemblies failed their annual test?  Comments: Merrill Elementary School Dollar Ger	neral Les Schwab	0

12. Do you have any <b>Double Check Backflow Prevention Assemblies</b> (DC, DCVA, & DCDA) installed	ed in your water
system? Yes No (if you answered yes, answer the questions below)	
a. How many assemblies are installed in your water system?	8
b. How many assemblies were tested?	8
c. How many assemblies passed their annual test?	8
d. How many assemblies failed their annual test?	0
e. Comments: Mainly underground sprinklers	
13. Do you have any <b>Pressure Vacuum Breaker Assemblies</b> (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:	<del></del>
I certify the information provided is true to the best of my knowledge. Providing false information penalties to the individual and to the water system.	ion may result in
Printed Name: Gregory Matthews Title: Public Wo	orks Director
Signature: Date: 3-21	-24

Return completed reports by March 31, 2024. Email: <a href="mailto:cross.connection@odhsoha.oregon.gov">cross.connection@odhsoha.oregon.gov</a>, 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

## **Drinking Water Updates**

If you would like to receive the Pipeline newsletter, in addition to other important notifications sign up for Drinking Water Email Alerts! Go to <a href="https://www.healthoregon.org/dws">www.healthoregon.org/dws</a> and click on the 'Sign Up for DWS News' button!

To get Cross Connection notifications, go to <a href="www.healthoregon.org/crossconnection">www.healthoregon.org/crossconnection</a> and click on the 'Sign Up for Cross Connection News'