

# 2018 Annual Summary Report (ASR)

Row 234

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**Primary**


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**Entered** 


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**Data Online** 


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**Water System Name** OCHOCO WEST WTR & SAN AUTHORITY, 41-00681
 

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**ASR Contact** Ray Horton
 

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**Email Address** owwsa@prinetime.net
 

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**Contact Phone Number** 541-447-1934
 

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**Residential Connections** 139
 

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**High Hazard Connections** 2
 

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**Other Connections** 8
 

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**Enabling Authority** Yes
 

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**Revised Enabling Authority** No
 

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**CCCS Name**


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**CCCS Information**


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**CCCS Cert #**


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**CCCS Phone**


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**CCCS Email**


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**Current written backflow prevention program plan?**


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**BFPP - list of  
high hazards**

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**BFPP -  
Procedure**

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**BFPP Notify  
Water User**

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**BFPP - Type of  
Protection**

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**BFPP -  
Corrective  
Action**

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**BFPP - Current  
records**

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**BFPP - Public  
Education**

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**Do you have  
RP?** No

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**RP - How Many**

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**RP - Tested**

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**RP - Passed**

---

**RP - Failed**

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**% Tested** #DIVIDE BY ZERO

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**RP - Comments**

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**Do you have  
any DC?** Yes

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**DC - How Many** 148

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**DC - Tested** 146

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**DC - Passed** 133

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**DC - Failed** 13

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**DC - Comments**

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**Do you have  
any PVBs?** No

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**PVB - How  
Many**

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**PVB - Tested**

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**PVB - Passed**

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**PVB - Failed**

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**PVB -  
Comments**

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**I certify**



**Column47**

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