

2024 ANNUAL SUMMARY REPORT CROSS CONNECTION & BACKFLOW PREVENTION

Received
April 1 2025
Cross Connection

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

Mail. DW3-Closs Collifection, 800 NE Oregon Street, Suite 640, Fortiand, ON 97293				
	B	00706		
1.	Water System Name: City of Riddle	PWS ID# 41 ×00408		
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: Robert Tilton			
	Email: corpwrt@frontier.com Phone	#: 541-874-2905		
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: 443 			
	 Do you have any high hazard connections in your water system Yes No How many: 20 	1?		
	c. Do you have any other types of connections not listed above? (a) Yes (No How many: 87			
	Comments:			
5.	Does your water system have an enabling authority?	☐ No (see note above)		
ô.	Was your enabling authority revised within the last year? Yes, email a copy to cross.connection@odhsoha.oregon.gov	■ No		

QUESTIONS 8 - 10 are for LARGE SYSTEMS ONLY (Large = 300+ Service Connections) and are specific to the required <u>written backflow prevention program plan</u> outlined in <u>OAR 333-061-0070(9)(b)</u>					
7.	Certified Cross Connection Specialist Information: Water system Employee				
	Name: Robert Tilton	_ Cert #: 34	222 541-874-2905		
			1		
8.	Does your WS have a current written backflow prevention program	plan?	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 46 (High Hazard Table).	ling, but	Yes No		
	b. Procedure for continually evaluating the degree of hazard posed by a users premises.	water	Yes No		
	c. Procedure for notifying the water user if a non-health hazard or health identified, and for informing the water user of any corrective action red				
	d. The type of protection required to prevent backflow into the public war commensurate with the degree of hazard that exists on the water use premises.		Yes No		
	e. A description of what corrective actions will be taken if a water user facomply with the water suppliers cross connection control requirement		■ Yes □No		
	Current records of approved backflow prevention assemblies installed, nspections completed, test results, and verification of current backflow assembly tester certification.		Yes No		
	g. A public education program about cross connection control.		■ Yes □ Nó		
10. Do you have any Reduced Pressure Backflow Prevention Assemblies (RP, RPBA, & RPDA) installed in your water system? Yes \(\subseteq No\) (if you answered yes, answer the questions below)					
	a. How many assemblies are installed in your water system?	30			
	b. How many assemblies were tested?	20			
	c. How many assemblies passed their annual test?				
	d. How many assemblies failed their annual test?	2	2		
Comments: 5 RP's not tested. Closed down and not in service. Other 5 no records at writing.					

11. Do you have any Double Check Backflow Prevention Assemblies (DC, DCVA, & DCDA)					
installed in your water system? Tes No (if you answered yes, answer t	he questions below)				
a. How many assemblies are installed in your water system?	18				
b. How many assemblies were tested?	13				
c. How many assemblies passed their annual test?	13				
d. How many assemblies failed their annual test?	0				
e. Comments:					
12. Do you have any Pressure Vacuum Breaker Assemblies (PVB, PV	BA, & 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?	1				
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: Robert L Tilton Title: PW Director					
Signature: Mount 2 Sitts	Date: <u>4/1/25</u>				

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

To get Cross Connection notifications, go to www.healthoregon.org/crossconnection and click on the 'Sign Up for Cross Connection News'