

2018 Annual Summary Report (ASR)

Row 312

Primary

Entered

Data Online

Water System Name ST HELENS, CITY OF, 41-00724

ASR Contact SHERI INGRAM

Email Address sherii@ci.st-helens.or.us

Contact Phone Number 503-397-3532

Residential Connections 4537

High Hazard Connections 82

Other Connections 198

Enabling Authority Yes

Revised Enabling Authority No

CCCS Name David Elder

CCCS Information Water System Employee, or

CCCS Cert # 3493

CCCS Phone 503-397-3532

CCCS Email davee@ci.st-helens.or.us

Current written backflow prevention program plan? Yes

BFPP - list of high hazards	Yes
BFPP - Procedure	Yes
BFPP Notify Water User	Yes
BFPP - Type of Protection	Yes
BFPP - Corrective Action	Yes
BFPP - Current records	Yes
BFPP - Public Education	Yes
Do you have RP?	Yes
RP - How Many	122
RP - Tested	122
RP - Passed	122
RP - Failed	2
% Tested	100%
RP - Comments	Failed devices were repaired and retested and passed.
Do you have any DC?	Yes
DC - How Many	403
DC - Tested	403
DC - Passed	403
DC - Failed	2
DC - Comments	Failed devices were repaired and retested and passed.
Do you have any PVBs?	Yes
PVB - How Many	4

PVB - Tested 4

PVB - Passed 4

PVB - Failed 0

**PVB -
Comments**

I certify

Column47
