



2022 ANNUAL SUMMARY REPORT CROSS CONNECTION & BACKFLOW PREVENTION

Received March 10 2023 Cross Connection

Please fill out the Annual Summary Report accurately and completely with data from 2022. Keep a completed copy for your records. PLEASE ANSWER ALL QUESTIONS. INCOMPLETE REPORTS WILL DELAY PROCESSING. Return completed reports by March 31, 2023 Email: cross.connection@dhsoha.state.or.us, Fax: 971-673-0694 Mail: DWS-Cross Connection; 800 NE Oregon Street, Suite 640; Portland, OR 97293 1. Water System Name: Foley Lakes MHP PWS ID# 41-00871 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: James M. Jans Email: cwd.jim@gmail.com Phone #: 541 806-2848 4. Customer Base: Who does your water system serve? Count each service connection only once, include connections with and without a backflow assembly. Yes No How many: 150 a. Do you have any residential connections in your water system? b. Do you have any high hazard connections in your water system? Yes No How many: c. Do you have any other types of connections not listed above? Yes No How many: Comments: 5. An enabling authority 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. Does your water system have an enabling authority? • Yes No (see note above) 7. Was your enabling authority revised within the last year? Yes, email a copy to the Cross Connection program cross.connection@state.or.us I No

Q i	Certified Cross Connection Specialist Information:	
	☐ Water system Employee ☐ Contracted service	
	Name: Cert #:	
	Email Address:	
		Yes No
	Does the <u>backflow prevention plan</u> include the following: a. A list of premises where health hazard cross connections exist, including, but not limited to, those listed in Table 42.	Yes No
	b. Procedure for continually evaluating the degree of hazard posed by a water users premises.	■ Yes ■No
	c. Procedure for notifying the water user if a non-health hazard or health hazard is identified, and for informing the water user of any corrective action required.	Yes No
	d. The type of protection required to prevent backflow into the public water supply, commensurate with the degree of hazard that exists on the water user's premises.	Yes No
	e. A description of what corrective actions will be taken if a water user fails to comply with the water suppliers cross connection control requirements.	Yes No
	i. inspections completed,ii. backflow prevention assembly test results on backflow prevention assemblies,	Yes No Yes No Yes No Yes No
	g. A public education program about cross connection control.	☐ Yes ☐No
	Are there any backflow assemblies or devices installed in your water system? Yes No Do you have any Reduced Pressure Backflow Prevention Assemblies (RP, RPBA, & RPDA) instawater system? Yes No (if you answered yes, answer the questions below) a. How many assemblies are installed in your water system?	lled in your
	b. How many assemblies were tested?	
	c. How many assemblies passed their annual test?	A CONTRACTOR OF THE CONTRACTOR
	d. How many assemblies failed their annual test?	2000
	Comments:	

13. Do you have any Double Check Backflow Prevention Assemblies (DC, DCVA, & DCDA) insta	ned in your water
system? Yes No (if you answered yes, answer the questions below)	
a. How many assemblies are installed in your water system?	1
b. How many assemblies were tested?	1
c. How many assemblies passed their annual test?	1
d. How many assemblies failed their annual test?	0
e. Comments:	
14. Do you have any Pressure Vacuum Breaker Assemblies (PVB, PVBA, & SVBA) installed in you	our 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?	N ames and Alliana and Alliana
c. How many assemblies passed their annual test?	
d. How many assemblies failed their annual test?	And the second s
e. Comments:	
I certify the information provided is true to the best of my knowledge. Providing false inform	ation may result in
penalties to the individual and to the water system.	
Printed Name: James M. Jans Title: Cert	Ор
Signature: Date: 3/9/2	023
Return completed reports by March 31, 2022	
Email: cross.connection@dhsoha.state.or.us, Fax: 971-673-0694 or	
Mail: DWS-Cross Connection; 800 NE Oregon Street, Suite 640; Portland, OR 97293	
Questions? cross.connection@dhsoha.state.or.us 971-673-0321	
• Drinking Water Updates • October 2018 was the last printed Pipeline! If you would like to continue receiving the	Pineline

October 2018 was the last printed Pipeline! If you would like to continue receiving the Pipeline newsletter, in addition to other important notifications sign up for Drinking Water Email Alerts! Go to www.healthoregon.org/dws and click on the 'Subscribe to Email Alerts' button!

To get Cross Connection notifications, go to www.healthoregon.org/crossconnection and click on the Subscribe to Email Alerts





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to the required <u>written backflow prevention program plan</u> outlined in <u>OAR 333-061-0070(9)</u>				
8. Certified Cross Connection Specialist Information: Water system Employee Contracted service Name: Cert #:				
Email Address: Alt Phone #:				
9. Does your water system have a current written backflow prevention program plan?	Yes No			
 10. Does the <u>backflow prevention plan</u> include the following: a. A list of premises where health hazard cross connections exist, including, but not limited to, those listed in Table 42. 	Yes No			
 Procedure for continually evaluating the degree of hazard posed by a water users premises. 	Yes No			
c. Procedure for notifying the water user if a non-health hazard or health hazard is identified, and for informing the water user of any corrective action required.	Yes No			
d. The type of protection required to prevent backflow into the public water supply, commensurate with the degree of hazard that exists on the water user's premises.	Yes No			
e. A description of what corrective actions will be taken if a water user fails to comply with the water suppliers cross connection control requirements.	Yes No			
 f. Current records of approved backflow prevention assemblies installed: i. inspections completed, ii. backflow prevention assembly test results on backflow prevention assemblies, iii. verification of current backflow assembly tester certification 	Yes No Yes No Yes No Yes No			
g. A public education program about cross connection control.	Yes No			
11. Are there any backflow assemblies or devices installed in your water system? Yes No				
12. Do you have any Reduced Pressure Backflow Prevention Assemblies (RP, RPBA, & RPDA) 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?	11			
b. How many assemblies were tested?	10			
c. How many assemblies passed their annual test?	10			
d. How many assemblies failed their annual test?	1 of bains			
Comments: That one assembly had froze and was damaged and is in the process replaced.	or being			

13. Do	you have any Double Check Backflow Prevention Assemblies (DC, DCVA, & DCDA) installed	in your water
sys	stem? Yes No (if you answered yes, answer the questions below)	
a.	How many assemblies are installed in your water system?	92
b.	How many assemblies were tested?	92
c.	How many assemblies passed their annual test?	92
d.	How many assemblies failed their annual test?	8
e.	Comments: Of those 8 assemblies that failed, all have been replaced and passed.	and the state of t
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:	
	fy the information provided is true to the best of my knowledge. Providing false information ies to the individual and to the water system.	on may result in
Printe	ed Name: John HirataTitle: Operato	or
Signa	Date: 3/9/23	

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Drinking Water Updates

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