



## 2020 ANNUAL SUMMARY REPORT CROSS CONNECTION & BACKFLOW PREVENTION

Received
April 14 2025
Cross Connection

Please fill out the Annual Summary Report accurately and completely with data from 2020. Keep a completed copy for your records. PLEASE ANSWER ALL QUESTIONS. INCOMPLETE REPORTS WILL DELAY PROCESSING. Return completed reports by March 31, 2021 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: Sunget Lake RU. Park PWS ID# 41-00933 3. ASR Contact Information: (if there are questions about the ASR who should we contact?) Name: Tevesa Ramey and Gene Ramey
Email: rnw 4920@ gmail. com Phone #: 541-420-5578 4. Customer Base: Who does your water system serve? Count each service connection only once, include connections with and without a backflow assembly. Do you have any residential connections in your water system? Yes No How many: 10000 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? X Yes No (see note above) 7. Was your enabling authority revised within the last year? 

8. Certified Cross Connection Specialist Information:	
☐ Water system Employee ☐ Contracted service  Name:	
Email Address: Cert #:	
Phone #:Alt Phone #:	
Does your water system have a current written backflow prevention program plan?	Yes No
0. Does the backflow prevention plan 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
l. D. 1 C	L res Elno
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.	16 6
water suppliers cross connection control requirements.	☐ Yes ☐ No
f. Current records of approved backflow prevention assemblies installed:	Yes No
1. Inspections completed,	Yes No
ii. backflow prevention assembly test results on backflow prevention assemblies,	Yes No
iii. verification of current backflow assembly tester certification	☐ 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) inst	alled in your
water system? Yes Sano (if you answered yes, answer the questions below)	va iii youi
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?	
Comments:	The second secon
	ne cont

13. Do you have any Double Check Backflow	Prevention Assemblies (DC, DCVA, & DCDA) installed in your water
system? A res No (if you answered ye	es, answer the questions below)
a. How many assemblies are installed in	your water system?
b. How many assemblies were tested?	a11
c. How many assemblies passed their ann	a (, )
d. How many assemblies failed their annu	None-
e. Comments:	
14. Do you have any Pressure Vacuum Break	er Assemblies (PVB, PVBA, & SVBA) installed in your water system?
☐ Yes ☑No (if you answered yes, answer	the questions below)
<ul> <li>a. How many assemblies are installed in y</li> </ul>	our water system?
b. How many assemblies were tested?	
c. How many assemblies passed their annual	ual test?
d. How many assemblies failed their annu	al test?
e. Comments:	
I certify the information provided is true to a penalties to the individual and to the water s	
Printed Name: Tevesa Ran	ney Title: Contact
Signature: Leeby M	My Date: 3-21-21

Return completed reports by March 31, 2020

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 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 'Subscribe to Email Alerts' button!

To get Cross Connection notifications, go to <a href="www.healthoregon.org/crossconnection">www.healthoregon.org/crossconnection</a> and click on the <a href="www.healthoregon.org/crossconnection">Subscribe to Email Alerts</a>