PUBLIC HEALTH DIVISION
Center for Health Protection, Drinking Water Services

Oregon Health Authority

2023 ANNUAL SUMMARY REPORT
CROSS CONNECTION & BACKFLOW PREVENTION

Received
April 28 2025
Cross Connection

Please fill out the Annual Summary Report accurately and completely with **data from 2023**. Keep a completed copy for your records.

PLEASE ANSWER ALL QUESTIONS. INCOMPLETE REPORTS WILL DELAY PROCESSING.

Return completed reports by **March 31, 2024**
Email: cross.connection@odhsoha.oregon.gov, Fax: 971-673-0694
Mail: DWS-Cross Connection; 800 NE Oregon Street, Suite 640; Portland, OR 97293

1. **Water System Name:** Cline Fall Mobile Home Park **PWS ID# 41-**01126

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: Teresa Ramey
   Email: rnw4920@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.
   a. Do you have any residential connections in your water system? ☒ Yes ☐ No How many: 40
   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@odhsoha.oregon.gov ☐ No

QUESTIONS 8 - 10 are for **LARGE SYSTEMS ONLY** (Large = 300+ Service Connections) and are specific to the required **written backflow prevention program plan** outlined in OAR 333-061-0070(9)(b)

8. **Certified Cross Connection Specialist Information:**
   ☐ Water system Employee ☐ Contracted service

   Name: _____ Cert #: _____

   Email Address: N/A. Phone #: _____

9. **Does your water system have a current written backflow prevention program plan?** ☐ Yes ☐ No

10. **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 (High Hazard Table). ☐ 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

    f. Current records of approved backflow prevention assemblies installed, inspections completed, test results, and verification of current backflow assembly tester certification. ☐ Yes ☐ No

    g. A public education program about cross connection control. ☐ Yes ☐ No

11. 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? _____
    b. How many assemblies were tested? _____
    c. How many assemblies passed their annual test? _____
    d. How many assemblies failed their annual test? _____

    Comments: _____

12. Do you have any **Double Check Backflow Prevention Assemblies** (DC, DCVA, & DCDA) 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? 40

b. How many assemblies were tested? all

c. How many assemblies passed their annual test? all

d. How many assemblies failed their annual test? none

e. Comments: _____

13. 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: _____

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: Teresa Ramey **Title:** on site Manager.

Signature: Teresa Ramey **Date:** 3-20-24

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Questions? cross.connection@odhsoha.oregon.gov or 971-673-0321

Drinking Water Updates

If you would like to receive 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 'Sign Up for DWS News' button!

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

Enabling Authority

Water System Name: Cline Fall Mobile Home Park.

PWS ID# 41- 01126 Revised Date: 3-20-24

Purpose

The purpose of this ordinance is to protect the health of the people served by this water system by preventing contaminants from flowing backwards into the water supply. To accomplish this, these rules are in compliance with Oregon Administrative Rules (OARs) 333-061-0070 through 333-061-0074.

Requirements

Actual or potential cross connections are prohibited. If a potential exists for a cross connection the water system must be protected by an appropriate backflow prevention device or assembly.

Any high hazards, as specified in the OARs will be given the highest priority, and protected with an approved air gap or reduced pressure backflow assembly.

Enforcement

The water system has the right to refuse or terminate water service to any customer who does not:

- Install a backflow device or assembly, when an actual or potential cross connection exists.
- Test the assembly at least annually and complete necessary repairs

The water system reserves the right to require a backflow device at the customer's side of the water meter if access is not allowed to determine if a backflow device or assembly is necessary.

The water system will allow a reasonable time to achieve compliance with our rules, but should a backflow incident occur, the water system has the right to terminate service immediately and restore it only after compliance.

Additional

A list of all high hazard connections and how they are protected from a cross connection is attached to this enabling authority.

This enabling authority is approved and adopted and will remain in effect as of this date until such time as revised or eliminated.

Printed Name: Kevin A. Hall Title: owner / partner

Signature: Kevin Hall Date: 3-20-24

Printed Name: _____ Title: _____

Signature: _____ Date: _____