By Cross Connection at 3:26 pm, Jun 18, 2021



Kate Brown, Governor

2020 ANNUAL SUMMARY REPORT CROSS CONNECTION & BACKFLOW PREVENTION

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: Saunders Creek Co-Op PWS ID# 41-01201 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: Sam Morris Phone #: 541-425-1949 Email: sistersam4u@hotmail.com 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: 42 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. ☐ No (see note above) 6. Does your water system have an enabling authority? • Yes 7. Was your enabling authority revised within the last year? Yes, email a copy to the Cross Connection program cross.connection@state.or.us

Certified Cross Connection Specialist Information:	
□ Water system Employee □ Contracted service Name:	
Phone #: Alt Phone #:	
Does your water system have a current written backflow prevention program plan?	☐ Yes ☐No
. 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
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: i. inspections completed, ii. backflow prevention assembly test results on backflow prevention assemblies, 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) installed in your water system?	talled 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:	

13. Do	you have any Double Check Backflow Prevention Assemblies (DC, DCVA, & DCD	A) installed in your water	
sys	tem? 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:		
14. Do	you have any Pressure Vacuum Breaker Assemblies (PVB, PVBA, & SVBA) instal	led 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:		
	by the information provided is true to the best of my knowledge. Providing false es to the individual and to the water system.	information may result in	
Printe	d Name: Sam MorrisTitle:	President of SCHOC Board of Directors	
Signat	ure: Date:	6/18/2021	

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

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