

# 2018 Annual Summary Report (ASR)

Row 154

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**Primary**

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**Entered** **Data Online** **Water System Name** HILAND WC - SHADY COVE, 41-01520**ASR Contact** Matt Olson**Email Address** matt@hilandwater.com**Contact Phone Number** 503-438-0471**Residential Connections** 242**High Hazard Connections** 0**Other Connections** 14**Enabling Authority** Yes**Revised Enabling Authority** No**CCCS Name****CCCS Information****CCCS Cert #****CCCS Phone****CCCS Email**

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**Current written  
backflow  
prevention  
program plan?**

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**BFPP - list of  
high hazards**

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**BFPP -  
Procedure**

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**BFPP Notify  
Water User**

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**BFPP - Type of  
Protection**

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**BFPP -  
Corrective  
Action**

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**BFPP - Current  
records**

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**BFPP - Public  
Education**

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**Do you have  
RP?            Yes**

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**RP - How Many    61**

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**RP - Tested            57**

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**RP - Passed           53**

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**RP - Failed            4**

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**% Tested              93%**

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**RP - Comments**

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**Do you have  
any DC?            Yes**

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**DC - How Many    49**

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**DC - Tested            49**

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**DC - Passed           48**

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**DC - Failed            1**

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**DC - Comments**

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**Do you have any PVBs?**      No

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**PVB - How Many**

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**PVB - Tested**

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**PVB - Passed**

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**PVB - Failed**

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**PVB - Comments**

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**I certify**     

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**Column47**

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