



2022 ANNUAL SUMMARY REPORT CROSS CONNECTION & BACKFLOW PREVENTION

Received April 21 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: McCUDDY'S LANDING PWS ID# 41- 06090 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: MARK T. AMPERSON Email: manderson & mccuddysmarina (OM Phone #: 503-979-9402 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: 50 a. Do you have any residential connections in your water system? Yes No How many: b. Do you have any high hazard connections in your water system? 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.

7. Was your enabling authority revised within the last year?

6. Does your water system have an enabling authority? Yes No (see note above)

☐ Yes, email a copy to the Cross Connection program <u>cross.connection@state.or.us</u>
☐ No

	Certified Cross Connection Specialist Information:			
	Water system Employee C			
		Cert #:		
En	nail Address:	41. PM		
Ph	one #:	Alt Phone #:		
De	oes your water system have a cu	rrent written backflow prevention program plan?	Yes No	
). D	oes the backflow prevention pla	n include the following:		
a.	A list of premises where health haza those listed in Table 42.	ard cross connections exist, including, but not limited to,	☐ Yes ☐No	
b.	Procedure for continually evalua premises.	ting the degree of hazard posed by a water users	☐ Yes ☐No	
c.		r user if a non-health hazard or health hazard is water user of any corrective action required.	☐ Yes ☐No	
d.	the state of the s	o prevent backflow into the public water supply, f hazard that exists on the water user's premises.	☐ Yes ☐No	
e.	A description of what corrective with the water suppliers cross co	actions will be taken if a water user fails to comply nnection control requirements.	☐ Yes ☐No	
f.	i. inspections completed,	kflow prevention assemblies installed:	Yes No	
	iii. verification of current backf	oly test results on backflow prevention assemblies, low assembly tester certification	Yes No	
g.	A public education program about	ut cross connection control.	☐ Yes ☐No	
2. Do	o you have any Reduced Pressure Enter system? Yes No (if you a	r devices installed in your water system? Tycs No Backflow Prevention Assemblies (RP, RPBA, & RPDA) insuswered yes, answer the questions below)	stalled in your	
a.	How many assemblies are installed	d in your water system?		
b.	How many assemblies were tested	?		
C.	How many assemblies passed their	r annual test?	Section 1	
d.	How many assemblies failed their	annual test?		
	Comments:			

13. Do	o you have any Double Check Backflow Prevention Assemblies (DC, DCVA, & DCD	A) 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?	141.		
b.	How many assemblies were tested?			
c.	How many assemblies passed their annual test?			
d.	. How many assemblies failed their annual test?	27 marsh 12 2 2 1 m		
e.	Comments:			
	o you have any Pressure Vacuum Breaker Assemblies (PVB, PVBA, & SVBA) instal	lled 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?	01		
c.	. How many assemblies passed their annual test?			
d.	. How many assemblies failed their annual test?			
e.	Comments:			
	tify the information provided is true to the best of my knowledge. Providing false lities to the individual and to the water system.	e information may result in		
Print	ted Name: MARK T. ANDERSON Title	: HARBORMASTER		
Signa	ted Name: MARK T. ANDERSON Title ature: Mark 7. ANDERSON Date	: 3/31/23		

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

brinking 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 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'