

**2024 ANNUAL SUMMARY REPORT  
CROSS CONNECTION & BACKFLOW PREVENTION**

Please fill out the Annual Summary Report accurately and completely with **data from 2024**. Keep a completed copy for your records.

**PLEASE ANSWER ALL QUESTIONS. INCOMPLETE REPORTS WILL DELAY PROCESSING.**

**Submit completed reports by March 31, 2025**

Email: [cross.connection@odhsoha.oregon.gov](mailto: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:** CLACKAMAS RIVER RV PARK **PWS ID#** 41-94761
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: VALERIE GOURNEAU  
Email: gourneauv@rconnects.net Phone #: (503) 888-6209
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: 120
  - 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: 6Comments:
5. **Does your water system have an enabling authority?** ☒ Yes ☐ No (see note above)
6. **Was your enabling authority revised within the last year?**  
☐ Yes, email a copy to [cross.connection@odhsoha.oregon.gov](mailto: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\(9\)\(b\)](#)

**7. Certified Cross Connection Specialist Information:**

☐ Water system Employee ☐ Contracted service

Name: \_\_\_\_\_ Cert #: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

**8. Does your WS have a current written backflow prevention program plan?** ☐ Yes ☐ No

**9. 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 46 (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

**10. 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: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

11. 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? 1
- b. How many assemblies were tested? 1
- c. How many assemblies passed their annual test? 1
- d. How many assemblies failed their annual test? 0
- e. Comments: \_\_\_\_\_

12. 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:** Valerie Gourneau **Title:** Operator

**Signature:** Valerie Gourneau **Date:** 4/29/2025

**Return completed reports by March 31, 2025.**

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**Mail:** DWS-Cross Connection; 800 NE Oregon Street, Suite 640; Portland, OR 97293

**Questions?** [cross.connection@odhsoha.oregon.gov](mailto:cross.connection@odhsoha.oregon.gov) or 971-673-0321

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