



Cross-Connection Control Program Summary Report For 2008

Describe the characteristics of the PWS's CCC Program at the end of 2008. Complete this form only if PWS had written CCC program plan, policies or procedures at end of 2008.

Part 1: Public Water System (PWS) Identification

PWS ID: 38000	PWS Name: KELSO, CITY OF	County: COWLITZ
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Part 2: Cross-Connection Control (CCC) Program Characteristics

A. Type of Program Currently Implemented

Type of Program	Check One
Premises isolation only.	<input type="checkbox"/>
Combination program: reliance on both premises isolation and in-premises protection.	<input checked="" type="checkbox"/>
In transition from a combination program to a premises isolation only program.	<input type="checkbox"/>

B. Coordination with Local Administrative Authority (LAA) on Cross-Connection Issues

Indicate the status of coordination with LAAs in your service area. The LAA is the entity that enforces the Uniform Plumbing Code. *Check one box in each of last 3 columns for each LAA in your service area.*

LAA No.	Name of LAA (e.g., the City or County Building Department)	PWS Currently:		LAA Declined to Coordinate
		Coordinates with LAA	Has Written Agreement with LAA	
1	KELSO COMMUNITY DEVELOPMENT	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>
2	COWLITZ 2 FIRE & RESCUE	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>
3	COWLITZ COUNTY DEPARTMENT OF HEALTH	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>
4		Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
5		Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>

¹ If more than 5 LAAs, attach separate sheet giving the above information.

C. Corrective or Enforcement Actions Available to the Purveyor

Type of Corrective Action	Indicate Whether Available	Most Often Used (Check One)
Denial or discontinuance of water service.	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	<input checked="" type="checkbox"/>
Purveyor installs backflow preventer and bills customer.	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	<input type="checkbox"/>
Assessment of fines (in addition to elimination or control of cross-connection).	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	<input type="checkbox"/>
Other corrective actions (describe):	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	<input type="checkbox"/>

D. CCC Program Responsibilities

Do not include enforcement action related procedures or circumstances.

CCC Program Activity	Responsible Party (Check one per row)	
	Customer	Purveyor
Hazard Evaluation by DOH-certified CCS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Backflow preventer (BP) ownership	<input checked="" type="checkbox"/>	<input type="checkbox"/>
BP installation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
BP <i>initial</i> inspection (for proper installation - all BPs)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
BP <i>initial</i> test (for testable assemblies)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
BP <i>annual</i> inspection (Air Gaps and AVBs)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
BP <i>annual</i> test (for testable assemblies)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
BP maintenance and repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>

E. Backflow Protection for Fire Protection Systems

Please remember to enter number of days allowed if you require retrofitting.

PWS coordinates with LAA on CCC issues for fire protection systems(FPS).	Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>
PWS coordinates with local Fire Marshal on CCC issues for FPS.	Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>
PWS ensures backflow prevention is installed before serving new connections with FPS.	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
PWS requires retrofits to high -hazard FPS.	Y <input checked="" type="checkbox"/> No. of days allowed: 90 N <input type="checkbox"/> N/A <input type="checkbox"/>
PWS requires retrofits to low -hazard FPS.	Y <input checked="" type="checkbox"/> No. of days allowed: 365 N <input type="checkbox"/> N/A <input type="checkbox"/>

F. Backflow Protection for Irrigation Systems

Minimum level of backflow prevention required on irrigation systems without chemical addition.	Not Addressed <input type="checkbox"/> AVB <input type="checkbox"/> PV/SVBA <input type="checkbox"/> DCVA <input checked="" type="checkbox"/> RPBA <input type="checkbox"/>
PWS currently inspects AVBs upon initial installation.	Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
PWS currently inspects AVBs upon repair, reinstallation or relocation.	Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

G. Used Water

PWS prohibits, by ordinance, rules, policy or agreement, the intentional return of used water (e.g. for heating or cooling) into the distribution system.	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
If not prohibited at present, date plan to prohibit use.	N/A <input checked="" type="checkbox"/>
Current number of service connections returning used water to distribution system.	0

H. Backflow Protection for Auxiliary Water Supplies¹ NOT Interconnected with PWS

Indicate the minimum backflow preventer and type of protection required for service connections having unapproved auxiliary water supplies when they are NOT interconnected to the PWS. Check one box per row.

Existing service connections.	None <input checked="" type="checkbox"/> DCVA <input type="checkbox"/> RPBA <input type="checkbox"/> AG <input type="checkbox"/>
Type of protection required.	None <input checked="" type="checkbox"/> In-premises protection <input type="checkbox"/> Premises isolation <input type="checkbox"/>
New service connections.	None <input type="checkbox"/> DCVA <input type="checkbox"/> RPBA <input checked="" type="checkbox"/> AG <input type="checkbox"/>

Type of protection required.	None <input type="checkbox"/>	In-premises protection <input type="checkbox"/>	Premises isolation <input checked="" type="checkbox"/>
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¹ An auxiliary water supply is any water supply on or available to customer's premises in addition to the purveyor's potable water supply.

I. Backflow Protection for Tanker Trucks and Temporary Water Connections

<i>Minimum</i> level of backflow protection (installed on or associated with the truck) required for tanker trucks taking water from PWS.	AG <input type="checkbox"/> DCVA <input type="checkbox"/> RPBA <input checked="" type="checkbox"/> Not Specified <input type="checkbox"/> Tanker trucks not allowed <input type="checkbox"/>
PWS requires tanker trucks to obtain water at designated filling sites each equipped with permanently installed backflow preventer(s).	Y <input type="checkbox"/> (Min. protection: DCVA <input type="checkbox"/> RPBA <input type="checkbox"/>) N <input checked="" type="checkbox"/> N/A <input type="checkbox"/> No sites provided <input type="checkbox"/>
PWS currently accepts tanker trucks approved by other PWSs without further inspection or testing.	Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>
<i>Minimum</i> level of backflow protection required for temporary water connections (e.g. for construction sites).	AG <input type="checkbox"/> DCVA <input type="checkbox"/> RPBA <input type="checkbox"/> Not specified <input checked="" type="checkbox"/> Temp. connections not allowed <input type="checkbox"/>
PWS requires testing each time the temporary connection backflow preventer is relocated.	Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A <input type="checkbox"/> (Temp. connections not allowed)
PWS provides approved backflow preventer for temporary connections.	Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A <input type="checkbox"/> (Temp. connections not allowed)

J. Backflow Protection for Non-Residential Connections

For each category shown, indicate whether PWS has non-residential connections of that type and the **minimum** level of *premises isolation* backflow protection required (whether or not PWS currently has that type of customer).

Type of Connection	PWS has Customers of this Type	Minimum Premises Isolation Backflow Protection Required
Commercial	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Not Required <input checked="" type="checkbox"/> DCVA <input type="checkbox"/> RPBA <input type="checkbox"/>
Industrial	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Not Required <input checked="" type="checkbox"/> DCVA <input type="checkbox"/> RPBA <input type="checkbox"/>
Institutional	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Not Required <input checked="" type="checkbox"/> DCVA <input type="checkbox"/> RPBA <input type="checkbox"/>

K. Backflow Protection for Wholesale Customers

Indicate whether the PWS requires backflow protection at interties with wholesale customers (other PWSs).

Type of Intertie	PWS has (plans to have) Customers of this Type	Backflow Protection Required
Existing	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Not specified / Not required <input checked="" type="checkbox"/> Always required <input type="checkbox"/> Required only if purchaser's CCC program is inadequate <input type="checkbox"/> Minimum required (if applicable): DCVA <input type="checkbox"/> RPBA <input type="checkbox"/>
New	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Not specified / Not required <input checked="" type="checkbox"/> Always Required <input type="checkbox"/> Required only if purchaser's CCC program is inadequate <input type="checkbox"/> Minimum required (if applicable): DCVA <input type="checkbox"/> RPBA <input type="checkbox"/>

Part 3: CCC Program Record-Keeping and Inventory

Indicate the type or name of computer software used by the PWS to track CCC records.

Cross-Track (BMI) <input checked="" type="checkbox"/>	BPMS <input type="checkbox"/>	XC2 (Engsoft) <input type="checkbox"/>	Tokay <input type="checkbox"/>	Other commercial CCC software (specify) <input type="checkbox"/>
Custom developed for or by PWS ¹ <input type="checkbox"/> Other non-CCC software (e.g. Excel) <input type="checkbox"/> None Used <input type="checkbox"/>				

¹ Do not include commercial CCC software customized for PWS. If PWS uses customized commercial software, check the box for the appropriate commercial software name.

Part 4: Comments and Clarifications

Enter comments or clarifications to any of the information provided in this report.

Part No.	Comment

Part 5: CCC Program Summary Completion Information

I certify that the information provided in this CCC Program Summary is complete and accurate to the best of my knowledge.		
CCC Program Mgr. Name ¹ : Garrett Yates		Title: Cross Connection Specialist
Signature:		Date: 04/16/2009
Phone: (503) 255-1619	E-mail*: gyates@bmibackflow.com	
I certify that the information provided in this report accurately represents the status and description of this water system's CCC Program.		
PWS Mgr/Owner Name ² : DAVID M. SYPHER		Title: PUBLIC WORKS DIRECTOR
Signature:	Op. Cert. No.:	Date: 04/16/2009

*Required Field. For security reasons, an e-mail address must be provided. DOH will e-mail you to confirm any changes made to your data

- ¹ The CCC Program Manager is generally the CCS responsible for developing and implementing the PWS's CCC program.
- ² The person that the CCC Program Manager reports to or other manager having direct responsibility and/or oversight of the CCC program. This person doesn't need to be in charge of the entire water system.

