



Cross-Connection Control Activities (Blue) Annual Summary Report Form for 2015

PWS ID:	PWS Name:	County:
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Part 1: Designated Cross-Connection Control Specialist (CCS) Information

CCS Name (Last, First & MI)	CCS Phone (____) ____-____
CCS Cert. #	BAT Cert. # (if applicable)
CCS is (check one): PWS owner or employee <input type="checkbox"/> On contract to PWS <input type="checkbox"/> Volunteer or other <input type="checkbox"/>	

Part 2: Status of Cross-Connection Control (CCC) Program at end of 2015

PWS has: A written CCC program plan ¹ Y <input type="checkbox"/> N <input type="checkbox"/> CCC implementation activities ² Y <input type="checkbox"/> N <input type="checkbox"/>	Program Plan Last Updated ³ (Enter date in MM/DD/YYYY format)
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¹ Enter "Yes" if PWS has **any** type of written CCC Program Plan, policies, or procedures. Written CCC Program Plan must be part of a Water System Plan (WSP) or Small Water System Management Program (SWSMP).

² Enter "Yes" if PWS implemented **any** CCC Program activities during the reporting year, such as establishing legal authority, conducting hazard evaluations, requiring installation of backflow assemblies to protect the PWS, requiring assembly testing, maintaining CCC records, or enforcing the PWS's or CCC Program requirements.

³ PWS can update the CCC Program Plan at any time (independent of WSP or SWSMP update).

Provide information about PWS's specific CCC Program Elements. Check one box in each column for each row.

Program Element Number	Description of Element [See WAC 246-290-490(3)]	This Program Element is Currently:	
		Included in Written Program Plan	Being Implemented or is Completed
1	Legal Authority Established	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
2	Hazard Evaluation Procedures and Schedules	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
3	Procedures/Schedules for Ensuring Installation of Backflow Preventers	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
4	Certified CCS Provided	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
5	Backflow Preventer Inspection and Testing	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
6	Assembly Testing Quality Assurance/Quality (QA/QC) Program	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
7	Backflow Incident Response Procedures	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
8	Public Education Program	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
9	CCC Records	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
10	Reclaimed Water Permit	Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>

Part 3A: PWS Characteristics at End of 2015

Enter the number of connections (new and existing) served by the PWS by type.

Type of Service Connection	Number
Residential (as defined by PWS)	
All Other (include dedicated fire lines, dedicated irrigation lines and PWS-owned facilities such as water and wastewater treatment plants and pumping stations, parks, piers, and docks)	
Total Number of Connections	

Part 3B: CCC for Severe and High-Hazard Premises and High-Hazard Dedicated Lines Served by PWS

Answer the following questions carefully. These answers control your access to pages 2 and 3 for data entry.

- If you answer Yes to both questions, you must enter data in at least one row on page 2 and one row on page 3.
- If you answer Yes to Question 1 and No to Question 2, you must enter data on page 2 only.
- If you answer No to both questions, pages 2 and 3 will be grayed out to prevent data entry.

1. Does PWS serve any severe or high-hazard premises or any high-hazard dedicated fire or irrigation lines?	Y <input type="checkbox"/> N <input type="checkbox"/>
2. Does PWS serve any high-hazard medical premises?	Y <input type="checkbox"/> N <input type="checkbox"/>

- Count only premises PWS serves water to.
- Report data as accurately as possible. **DOH currently bases CCC compliance actions on this information.**

Type of Severe or High-Hazard Premises or Dedicated Lines [WAC 246-290-490(4)(b)]	Number of Connections at end of 2015			
	A. Being Served Water by PWS ¹	B. With Premises Isolation by AG or RP ²	C. With Column B AG Inspected or RP Tested ³	D. Granted Exception from Premises Isolation
Agricultural (farms and dairies)				
Beverage bottling plants (including breweries)				
Car washes				
Chemical plants				
Commercial laundries and dry cleaners				
Both reclaimed water and potable water provided				
Film processing facilities				
Dedicated fire lines with chemical addition or using unapproved auxiliary supplies				
Food processing plants (including canneries, slaughter houses, rendering plants)				
Hospitals, medical centers, medical, dental and veterinary clinics, mortuaries, nursing homes, etc., reported on Part 3C page 3 (website will import totals from page 3)				
Dedicated irrigation lines using PWS water supply <i>and</i> with chemical addition ⁴				
Laboratories				
Metal plating industries				
Petroleum processing or storage plants				
Piers and docks				
Radioactive material processing plants or nuclear reactors				
Survey access denied or restricted				
Wastewater lift/pump stations (non-residential only)				
Wastewater treatment plants				
Unapproved auxiliary water supply interconnected with potable water supply				
Other (describe): ⁵				
Other (describe): ⁵				
Totals				

¹ Count multiple connections or parallel installations to the same premises as **separate** connections.

²Count only connections with premises isolation AGs or RPs. Don't include connections with in-premises preventers only or connections with DCVAs or DCDAs installed for premises isolation. The number in Column B can't be larger than the number in Column A in the same row.

³ Count only connections whose premises isolation preventers were inspected (AGs) or tested (RPs) during the reporting year.

⁴ For example, dedicated irrigation lines to parks, playgrounds, golf courses, cemeteries, estates, etc.

⁵ Premises with hazardous materials or processes (requiring isolation by AG or RP), such as aircraft and automotive manufacturers, pulp and paper mills, metal manufacturers, military bases, and wholesale customers that pose a high hazard to the PWS. May be grouped together in categories, for example: "Other manufacturing" or "Other commercial".

Part 3C: Cross-Connection Control for Medical Premises Served by the PWS

- Count only medical premises PWS serves water to.
- Don't count the same premises more than once. If you serve different medical category premises through a single connection, count the connection under the medical category you consider to pose the highest hazard to PWS.
- Report data as accurately as possible. **DOH currently bases CCC compliance actions on this information.**

Type of High-Hazard Medical Premises [WAC 246-290-490(4)(b)]	Number of Connections at end of 2015			
	A. Being Served Water by PWS ¹	B. With Premises Isolation by AG or RP ²	C. With Column B AG Inspected or RP Tested ³	D. Granted Exception from Premises Isolation
Hospitals				
Hospitals (include psychiatric hospitals and alcohol and drug treatment centers)				
Facilities for Treatment and Care of Patients not Located in Hospitals Counted Above				
Same day surgery centers				
Out-patient clinics and offices				
Alternative health out-patient clinics and offices				
Psychiatric out-patient clinics and offices				
Chiropractors with water-connected X-ray equipment				
Hospice care centers				
Childbirth centers				
Kidney dialysis centers				
Blood centers				
Dental clinics and offices				
Facilities for Housing Patients				
Nursing homes				
Assisted Living Facilities (formerly known as Boarding homes)				
Residential treatment centers				
Other Medical-Related Facilities				
Mortuaries with embalming equipment				
Morgues and autopsy facilities (not in hospitals)				
Veterinarian offices, clinics, and hospitals				
Other (describe): ⁵				
Other (describe): ⁵				
Totals				

¹Count multiple connections or parallel installations to the same premises as separate connections.

²Count only connections with premises isolation AGs or RPs. Don't include connections with in-premises preventers only or connections with DCVAs or DCDAs installed for premises isolation. The number in Column B can't be larger than the number in Column A in the same row.

³Count only connections with premises isolation AGs or RPs. Don't include connections with in-premises backflow preventers only or connections with premises isolation DCVAs or DCDAs isolation.

Part 4A: Backflow Preventer Inventory and Testing Information for 2015

- Complete all cells. Enter zero (0), if no backflow preventers in a specific category.
- Count only backflow preventers relied on to protect the PWS.
- Count AVBs on *irrigation systems only*. Select No to AVB question above Table 2 if PWS doesn't track AVBs.
- Count multiple tests (or failures) for the same backflow preventer as one test (or failure) for that backflow preventer.
- For multiple service connections or parallel installations, count each assembly separately.
- Count RPDAs and DCDA as **single** assemblies. Count the tests of the mainline assembly and bypass assembly as **one test**. Count the failure of either the mainline or bypass assembly (or the failure of both) as **one failure**. Count an entire detector assembly taken out of service as **one assembly removed from service**.
- Count assemblies installed on dedicated fire or irrigation lines as **Premises Isolation Assemblies** in Table 1.

Backflow Preventer Category and Inspection/Testing Information		Air Gap	RPBA	RPDA	DCVA	DCDA	PVBA	SVBA	AVB
Table 1: Premises Isolation Preventers (include preventers isolating PWS-owned facilities)									
Existing Premises Isolation Backflow Preventers									
1	In service at beginning of 2015								
2	Inspected and/or tested in 2015 ¹								
3	Failed inspection or test in 2015								
New Premises Isolation Backflow Preventers									
4	Installed in 2015 ²								
5	Inspected and/or tested in 2015 ¹								
6	Failed inspection or test in 2015								
Premises Isolation Backflow Preventers (existing or new)									
7	Removed from service in 2015 ³								
Total Premises Isolation Preventers at End of 2015⁴									

Does PWS track AVBs on irrigation systems? Y N

Table 2: In-Premises Preventers (include preventers within PWS-owned facilities)									
Existing In-Premises Backflow Preventers									
8	In service at beginning of 2015								
9	Inspected and/or tested in 2015 ¹								
10	Failed inspection or test in 2015								
New In-Premises Backflow Preventers									
11	Installed in 2015 ²								
12	Inspected and/or tested in 2015 ¹								
13	Failed inspection or test in 2015								
In-Premises Backflow Preventers (existing or new)									
14	Removed from service in 2015 ³								
Total In-Premises Preventers at End of 2015⁴									
Grand Total at End of 2015									

¹ Initial and/or routine annual inspection (for proper installation and approval status) and/or test (for testable assemblies only, using DOH-approved USC field test procedures).
² Includes preventers installed on connections where backflow prevention was not previously required and any preventers that replaced those in service at the beginning of the reporting year. Replacement preventers may be of a different type than the originals.
³ Existing or new preventers taken out of service, whether or not they were replaced by the same or a different type of preventer.
⁴ Total at end of 2015 should be equal to the number of preventers in service at beginning of 2015 plus those installed during 2015 minus the number of preventers taken out of service during 2015.

Part 4B: Other Implementation Activities in 2015

Complete all cells. Enter zero (0) if not applicable.

Water Use Questionnaires			
Did your PWS send any water use questionnaires to customers during 2015?		Y <input type="checkbox"/> N <input type="checkbox"/> Number	
On-site Hazard Surveys			
Did your CCS conduct any on-site hazard surveys during 2015?		Y <input type="checkbox"/> N <input type="checkbox"/> Number	
		Service Connection Type	
		New	Existing
		Total	
1. Number of connections surveyed for cross-connection hazards to PWS.			
2. Number of connections requiring backflow prevention to protect PWS. ^{1,2}			
New Exceptions to Premises Isolation			
Did your CCS grant any new premises isolation exceptions in 2015 to high-hazard premises? ³		Y <input type="checkbox"/> N <input type="checkbox"/> Number	
CCC Enforcement Actions			
Did your PWS take any enforcement actions during 2015? ⁴		Y <input type="checkbox"/> N <input type="checkbox"/> Number	

¹ Include services where either premises isolation or in-premises preventers were required to protect the PWS.

² Include existing services that need new, additional or higher level backflow prevention.

³ Submit a completed DOH Exception Form (green) for each new exception granted in the reporting year.

⁴ "Enforcement actions" means actions taken by the PWS (such as water shut-off, PWS installation or testing of backflow preventer, assessment of fines, etc.) when the customer fails to comply with the PWS's CCC requirements.

Part 5: Backflow Incidents, Risk Factors, and Indicators during 2015

Complete all cells. Enter zero if not applicable.

Backflow Incidents, Risk Factors, and Indicators During 2015		Number
<i>Backflow Incidents during 2015</i>		
1	Backflow incidents that contaminated the PWS. ⁵	
2	Backflow incidents that contaminated the customer's drinking water system <i>only</i> . ⁵	
<i>Risk Factors for Backflow during 2015</i>		
3	Distribution main breaks per 100 miles of pipe.	
4	Low-pressure events (<20 psi in PWS distribution system).	
5	Water outage events.	
<i>Indicators of Possible Backflow during 2015</i>		
6	Total health-related complaints received by PWS. ⁶	
7	Received during BWA or PN events. ⁷	
8	Received during low pressure or water outage events.	
9	Total aesthetic complaints (color, taste, odor, air in lines, etc.).	
10	Received during BWA or PN events. ⁷	
11	Received during low pressure or water outage events.	

⁵ Purveyors must submit a Backflow Incident Report form for each backflow incident known to have contaminated the public water system. DOH is also interested in receiving incident report forms for backflow incidents that contaminated the customer's drinking water system only.

⁶ Such as stomachache, headache, vomiting, diarrhea, skin rashes, etc.

⁷ "BWA" means *Boil Water Advisory* and "PN" means *Public Notification* for water quality reasons.

Part 6: Comments and Clarifications

- Enter comments to:
 - Explain or clarify information in this report.
 - Describe challenges faced or accomplishments made in this reporting year.
 - Share your goals and objectives for the coming reporting year.

Part No.	Comment

Part 7: Report Certification and Contact Information

I certify that the information in this form is true, complete and accurate to the best of my knowledge.					
Last Saved			All ASR Forms Certified/Submitted		
Designated CCS/CCC Program Manager¹					
Name		Title		CCS Cert #	
Email Address		Phone		Phone Ext	
PWS Manager²					
Name		Title		Operator Cert #	
Email Address		Phone		Phone Ext	

¹ The CCS responsible for developing and implementing the PWS's CCC program (CCC Program Manager).

² The person the designated CCS/CCC Program Manager reports to or other manager having direct oversight of the CCC Program.

For people with disabilities, this form is available on request in other formats. To submit a request, please call 1.800.525.0127 (TDD/TTY call 711).