



CROSS CONNECTION CONTROL & BACKFLOW PREVENTION POLICY RESOLUTION 125

AS AMENDED OCTOBER 21, 2025



**SUNLAND WATER DISTRICT
5762 WOODCOCK ROAD
SEQUIM, WA 98382**



CONTENTS

- 1.0 REQUIREMENT FOR A CROSS CONNECTION-CONTROL PROGRAM
 - 2.0 LEGAL AUTHORITY AND CROSS CONNECTION CONTROL COMPLIANCE
 - 3.0 DISTRICT OFFICE
 - 4.0 EMPLOYEE CCS CERTIFICATION
 - 5.0 DEFINITIONS
 - 6.0 CROSS CONNECTION CONTROL PROGRAM
 - 7.0 PERMIT REQUIREMENTS
 - 8.0 QUALITY CONTROL OF BPA TESTING PROCESS
 - 9.0 BACKFLOW INCIDENT RESPONSE
 - 10.0 INTENTIONAL RETURN OF WATER PROHIBITED
 - 11.0 CROSS CONNECTION-CONTROL RECORDS
 - 12.0 CUSTOMER EDUCATION AND COMMUNICATION
 - 13.0 ENFORCEMENT
 - 14.0 BPA INSTALLERS/TESTERS
- APPENDICES
- A. APPLICATION FOR WATER SERVICE
 - B. CROSS CONNECTION PERMIT
 - C. BACKFLOW INCIDENT RESPONSE
 - D. CROSS CONNECTION CONTROL PROGRAM ANNUAL ACTIVITIES REPORT



SunLand Water District
CROSS-CONNECTION CONTROL PROGRAM: BACKFLOW PREVENTION POLICY
Resolution No. 125 as Amended October 21, 2025
Reference: WAC 246-290-490

**A RESOLUTION OF THE SUNLAND WATER DISTRICT TO ESTABLISH A POLICY FOR
CROSS-CONNECTION CONTROL AND BACKFLOW PREVENTION
(Supersedes Policy of January 23, 2014 and October 8, 2019)**

1.0 REQUIREMENT FOR A CROSS-CONNECTION CONTROL PROGRAM

The SunLand Water District (SWD) is a public utility special district that has the responsibility to protect the health of consumers served by the District. This is the first and foremost reason for developing and implementing a CCC program. The SWD provides water and sewer services to the community of SunLand and water service to the development known as Southern View Estates (SVE) that borders SunLand.

The safety of the SWD's consumers is assured by preventing contamination of the water system via "Cross-Connections". A Cross-Connection may be defined as any actual or potential physical linkage through which contaminated water or other substances may enter the SWD's drinking water distribution system by "Backflow". Backflow means the movement of water from any source into the potable water supply due to "Back siphonage" or "Backpressure."

All public water systems in the State of Washington are required to develop and implement Cross-Connection Control (CCC) programs. In accordance with WAC 246-290-490 of the Group A Drinking Water Regulations, the minimum required elements of a CCC program are:

- Identification of legal authority and program policies.
- Evaluation of premises for cross-connection hazards.
- Elimination and/or control of Cross-Connections.
- Provision of qualified personnel.
- Inspection and testing of backflow preventers.
- Quality control of the testing process.
- Response to backflow incidents.
- Public education for consumers.
- Recordkeeping for the CCC program.
- Special requirements for reclaimed water use.



2.0 LEGAL AUTHORITY AND CROSS-CONNECTION CONTROL COMPLIANCE

The SunLand Water District was established and approved by the SunLand electorate by special election on May 17, 1977. The SWD operates under Washington State Title 57 RCW and is administered by an elected Board of Commissioners. The Board has oversight on all SWD programs and policies and full fiduciary responsibility.

The SWD is committed to providing quality, cost-efficient service in the production, testing, and delivery of safe drinking water to all customers. Safe and reliable drinking water is recognized as a carefully managed product.

To protect the public water system from contamination through the elimination and control of actual or potential cross connections, the SunLand Water District's Cross-Connection Program was developed in accordance with the Cross-Connection Control (CCC) requirements required of all public water systems by the State of Washington's Administrative Code (WAC) 246-290-490 of the Group A Drinking Water Regulations. The SWD first implemented a Cross-Connection Control Program in 2000 and previously amended the policy in 2008, 2014, 2019 and 2025

Consumers must comply with all requirements of the SWD's Cross Connection Control program and all directives of the Board of Commissioners and their designees regarding cross connection prevention and control.

3.0 DISTRICT OFFICE

Management of the Cross-Connection Program is administered by the District Manager from the District Office located at 5762 Woodcock Road. This includes the following:

- dissemination of public education material
- issuing annual reminders of Backflow Prevention Assembly test requirements
- issuing Cross-Connection Permits (and Side Sewer Permits)
- receiving, filing and maintaining BPA test reports
- CCC program database administration

Other functions managed from this office include billing, accounts receivable and accounts payable. The water operations staff office is located next to the District Office.

4.0 EMPLOYEE CCS CERTIFICATION

The District Manager and two members of the water operations staff presently possess Department of Health (DOH) Cross-Connection Specialist certifications. Holders of the CCS certification execute the



tasks of development and implementation of the Cross Connection Control program under the direction of the District Manager.

5.0 DEFINITIONS

- 5.1 Approved Backflow Assembly List** refers to the Washington State Approved Backflow Prevention Assembly List.
- 5.2 Auxiliary Water Supply** - means any water source to a premises other than the SunLand Water District's public potable water utility.
- 5.3 BAT - Backflow Assembly Tester** – an individual certified by the Department of Health to test any backflow device. BATs are recertified yearly.
- 5.4 Backflow** - the undesirable reversal of flow of non-potable water, or other substances, through a Cross-Connection and into the piping of a public water system or consumers' potable water system. There are two types of backflow – ¹⁾ backpressure backflow and ²⁾ back-siphonage.
- 5.4.1 Backpressure** – refers to backflow caused by increased pressure above the supply pressure from pumps, gravity, or other pressure sources. In other words, backpressure is caused by a downstream pressure that is greater than the upstream or supply pressure in a public water system or consumers' potable water system. Back-pressure can result from an increase in downstream pressure, a reduction in the potable water supply pressure, or a combination of both. Increases in downstream pressure can be created by pumps and temperature increases in boilers, and other reasons. Reductions in potable water pressure can occur whenever the amount of water being used exceeds the amount being supplied, such as water main flushing, firefighting, or during water main breaks.
- 5.4.2 Back siphonage** -refers to backflow caused by a negative pressure in a public water system, or a consumers' potable water system. The effect is similar to drinking water through a straw. Back-siphonage can occur when there is a stoppage of water supply due to nearby firefighting or a break in a water main.
- 5.5 Backflow Incident** – refers to a backpressure or back siphonage condition that cause water to flow backwards – from the customer's plumbing system into the public water system. Backflow can occur at any potential physical "Cross-Connection" between a public water system or the customer's water system and any source of liquid, solid or gas that could contaminate the water supply.
- 5.6 Backflow Prevention Assembly (BPA)** – refers to a Backflow Prevention Device that is designed to be in-line tested and repaired to meet the head loss and flow requirements of the SunLand Water District. The "assembly" consists of the backflow prevention unit, two resilient seated shutoff valves, and test cocks.



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- 5.7 Backflow Prevention Device** – refers to a backflow preventer that is not designed for in-line testing. The following text describes the devices accepted for this purpose under SWD and State requirements:
- 5.7.1 Air Gap (AG)** – means a physical separation between the free-flowing end of a potable water supply pipeline and the overflow rim of an open or non-pressurized receiving vessel.
- 5.7.2 Double Check Valve Assembly (DCVA)** – an approved backflow prevention device consisting of two independently operating check valves assembled in series, often with a ball valve or gate valve installed at each end for isolation, and test cocks for testing purposes. The device is loaded to the closed position by springs or weights, and installed as a unit with, and between, two resilient seated shut-off valves and having suitable connections for testing. DCVAs are commonly used to protect potable water supplies in residential applications, and irrigation systems.
- 5.7.3 Reduced pressure Backflow Assembly (RPBA)** – an approved mechanical backflow preventor that consists of two independently acting, spring-loaded check valves with a hydraulically operating, mechanically independent, spring-loaded pressure differential relief valve between the check valves and below the first check valve. It includes shutoff valves at each end of the assembly, and is equipped with test cocks. An RPBA is effective against backpressure and back-siphonage and may be used to isolate health or non-health hazards. RPBA's are required in hospitals, mortuaries, manufacturing facilities and other hazardous businesses.
- 5.7.4 Atmospheric Vacuum Breaker (AVB)** – an approved type of backflow prevention assembly. The make, model and size must be on state-approved list, such as the one from the USC Foundation for Cross-Connection Control, which is referenced by the Washington State Department of Health. AVBs must comply with state and local regulations, primarily found in WAC 246-290-490 and the Uniform Plumbing Code (UPC). They are approved for preventing back-siphonage only.
- 5.8 Backflow Assembly Tester (BAT)** – a person holding a valid Backflow Assembly Tester certificate under WAC Chapter 246-292.
- 5.9 BPA Database** – refers to the SunLand Water District's Excel meter database that lists meter ID numbers for residential and commercial customers. The database also lists the ID number and the last test date and PASS/FAIL for the Backflow Prevention Assemblies (BPA) installed on properties. This data is recorded by the District from information contained in the BPA Test Report sent by the BATs to the District Office.
- 5.10 BPA Test Reports** – refers to the reports completed by certified BATs on tests performed on a BPA device installed on a customer's property. The report includes information on the location, make, model and serial number of the installed device, the date of the test and the PASS/FAIL result of the tests performed. If failed, recommended corrective action (repair or replacement)



is also recorded. The test report is sent to the District Office by the BAT where it is recorded, filed and available for DOH inspection.

5.11 Cross-Connection -refers to any point in the public drinking water system that is actually or potentially connected to a source of contamination or pollution that could enter the system through backflow or back siphonage. For a drinking water supply to become contaminated from a Cross-Connection, three things must happen simultaneously:

- The potable water supply piping must be unprotected (or improperly protected) from a Cross-Connection;
- A physical Cross-Connection must be made between the potable water supply piping and the contaminant source; and
- Backflow conditions must occur.

Common Cross-Connections include automatic sprinkler systems, drinking fountains, fire suppression systems, and garden hoses, to name a few. State law mandates that all Cross-Connections require backflow prevention (WAC Chapter 246-290).

5.12 Cross-Connection Permit - refers to a permit application to allow installation of a BPA on the customer's side of the meter. State law requires the water system purveyor to ensure that an approved air gap and/or Backflow Prevention Device is installed for premises isolation purposes on service connections that pose a high health cross-connection hazard. This pertains to all new residences and existing residences when customers are installing underground sprinklers, or other systems mentioned in this policy and listed on Table 9 of WAC Chapter 246-290. Upon receipt of a completed permit application and payment of applicable fees, the District Office will issue the permit.

5.13 CCC – Cross-Connection Control – is a plan that controls potential contamination of a water distribution system with the installation of approved backflow preventers.

The effects of potable water contaminated by a cross-connected source can range from taste, odor and color impacts that are annoying, but not necessarily a threat to public health, to serious contamination that can make people very sick. For this reason, the State of Washington requires public water system purveyors to have an active CCC program in place. These programs can reasonably reduce the risk of contamination to drinking water systems

5.14 CCS – Cross-Connection Specialist – refers to an individual certified by the State of Washington DOH to carry out the provisions of the District's Cross-Connection control program. (Note: Three members of the District's staff hold a Cross-Connection Control Specialist certification.)

5.15 District – refers to the SunLand Water District

5.16 DOH – Department of Health



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- 5.17 High Health Cross-Connection Hazard** – means a cross-connection that could degrade the quality of potable water and create a health hazard through the spread of disease-bearing organisms, sewage, industrial liquids, or waste.
 - 5.18 In-Premise Protection** – means a method of backflow prevention in which a Backflow Prevention Assembly is installed on the consumer’s internal water supply line prior to a fixture, piece of equipment, or area that has been determined to have backflow potential. The installation method must effectively isolate the fixture, piece of equipment or area from the rest of the consumer’s distribution system.
 - 5.19 Owner/Customer** – means any person who has a legal title to, or license to operate or occupy, a property upon which a cross-connection inspection will be made or upon which a cross-connection is present.
 - 5.20 Potable Water** - also known as drinking water and means any water that is safe for human consumption. Potable water comes from surface and ground water sources. Surface water is always treated to protect the public health. Some groundwater wells are considered potable due to the soil’s natural filtration process. Others may require treatment due to undesirable minerals such as iron and manganese. *SunLand’s water is excellent just as it comes out of the wells and is not treated in any way. (Note: SunLand’s two wells received Evergreen Rural Water’s 1st and 2nd place honors in 2025 for “Best Tasting rural Water in Washington”.)*
 - 5.21 Premise Isolation**- a method of protecting a public water system by installation of approved air gaps or approved backflow prevention assemblies at or near the service connection to separate the consumer’s plumbing system from the purveyor’s distribution system.
 - 5.22 Non-Potable Water** – means water from any source that is not safe for human consumption.
 - 5.23 Purveyor** – means the entity in charge of the utility; i.e., the SunLand Water District.
 - 5.24 Reclaimed Water** – means effluent (discharge) derived in any part from a sewage collection system that is no longer considered wastewater. Reclaimed water has been adequately treated to be suitable for a beneficial use that would not otherwise occur, such as irrigation.
 - 5.25 SWD** – refers to the SunLand Water District.
 - 5.26 SVE** – refers to Southern View Estates.



6.0 CROSS-CONNECTION CONTROL PROGRAM

6.1 The SunLand Water District’s Cross Connection Control Program controls and eliminates cross-connections, which are any actual or potential connections between the public water system and another source of non-potable water or other substances.

6.2 Responsibility

The SWD is responsible for inspection and testing of all District-owned backflow devices.

BPA Testing: The District requires the customer to be responsible for the initial and annual inspection and testing of backflow devices owned by the customer. AVBs do not require regular annual inspection and testing but all other devices must be tested initially and annually thereafter. The customer shall employ, at customer expense, a DOH-certified BAT to conduct the initial and annual inspection and test of homeowner devices. The test report results shall be completed and signed by the BAT and submitted to the District Office.

Customer Liability: Customers are responsible for any contamination that occurs on their property due to an unprotected or inadequately protected cross-connection.

Indemnification: The SWD is not liable for any cross-connection incident on a customer’s premises.

Compliance: Customers must comply with the program’s requirements, and violations that lead to contamination may result in the customer being liable for all expenses incurred by the SWD to clean or repair its system.

6.3 Water Service and Cross-Connection Control Program

Compliance with the provisions of the SWD’s Cross-Connection Control Program is a condition of receiving service from the District. Customers, owners, and contractors should be aware of the following general requirements:

6.3.1 Contaminant Backflow: It is unlawful for any person to allow any contaminant or pollutant to backflow from their property into the SWD’s water distribution system. Connections that cannot be discontinued and/or eliminated require the installation of an approved Backflow Prevention Assembly that must be regularly inspected and tested in accordance with the provisions of this policy.

6.3.2 Premises Isolation: All newly constructed and newly remodeled homes, as well as irrigation service meters, are required to have an approved premises isolation backflow assembly immediately downstream from the service meter. The Owner is responsible for water quality beyond the outlet end of the premise isolation assembly.

6.3.3 Fixture Isolation: May be required for existing connections if the District Manager determines that such a device is adequate to protect the SWD’s distribution system, and the customer agrees, in writing, to (a) implement and maintain the fixture isolating backflow



protection to the satisfaction of the District, and b) comply with all applicable plumbing codes, including permitting requirements. Fixture isolation assemblies must be installed in accordance with the Uniform Plumbing Code. The owner's responsibility starts immediately downstream of the SWD's water meter.

6.3.4 Approved Backflow Prevention Assemblies: Approved BPAs are limited to those models listed in the Washington Department of Health Publication No. 331-090 Cross-Connection Control Rules and Definitions. The DOH publication also constitutes the SWD's approved backflow device list for purposes of compliance with the requirements of this program.

6.3.5 Courtesy List: The District Office will maintain a list of DOH-certified Backflow Assembly Testers (BATs) that may be provided to customers upon request.

7.0 PERMIT REQUIREMENTS

7.1 Permit Requirements for New Residential Services

The SunLand Water District requires that property owners intending to build a home in SunLand or *Southern View Estates submit the following:

- Application for Side Sewer Permit (n/a for SVE*)
- Application for Water Service (Appendix A)
- Cross-Connection Application (Appendix B)
- All applicable fees

*The procedure for water service to a new home in Southern View Estates differs from the SunLand community policy in that they do not pay a sewer hook-up fee.

7.1.1 Based on the severity of possible contamination, owners of all newly-constructed homes must provide and install at least one State-approved Backflow Prevention Assembly at the customer side of the meter setter or at the point where the irrigation lines connect to the house water supply line. Although not mandatory, the District encourages the installation of two BPA's to protect both premise isolation and irrigation system isolation, thus providing the SunLand community and the individual homeowner with an additional degree of protection.

7.1.2 Upon submittal and approval of the application for water/sewer service, a Cross-Connection Permit and payment of applicable fees, the proposed water service installation site and proposed DOH-approved DCVA or RPBA Cross-Connection device (BPA) will be inspected and approved by the District's certified CCS (per WAC 246-290-490).

7.1.3 Following installation and inspection of a Backflow Prevention Assembly by the owner/contractor and District CCS, and annually thereafter, testing and pressure testing of the BPA (or BPAs), must be performed by a certified BAT technician and the test report(s) submitted to the District Office.



7.2 Permit Requirements for New Non-Residential Services:

Upon submitting the application for water/sewer service, a Cross-Connection Permit, and payment of applicable fees, the customer’s proposed water service installation site and DOH-approved DCVA or RPBA Cross-Connection device will be inspected and approved by a certified District CCS (per WAC 246-290-490).

7.3 Evaluation of Premises for Cross Connection Hazards; Includes an Initial Cross Connection Hazard Survey and adherence to the Initial Assessment Task Schedule.

7.3.1 Initial Cross-Connection Hazard Survey

All applicants for new residential or commercial water service are required to install a backflow device based on the District’s minimum requirements for protection of the public water supply system. During the permitting process for residential or commercial water service, a SunLand CCS will survey the construction site for possible cross-connection hazards.

7.3.2 Initial Assessment Task Schedule

	Initial Assessment Task	Schedule
1.	Assessment of all new connections	At the time of application for water service.
2.	Identification and assessment of high hazard premises (WAC 246-290-490)	Within 9 months
3.	Identification of residential connections with special plumbing facilities or water use on the premises.	Within 15 months.

7.4 Special Circumstances and High Hazard Locations

Residential customers with special plumbing requirements or water use on the premises are required, at a minimum, to have a DCVA device installed. Special plumbing would include a lawn irrigation system, a solar heating system, an auxiliary source of supply (such as a well), piping for livestock/hobby farming, or a residential fire sprinkler system.

The District requires that high-hazard facilities be protected, at a minimum, with an RPBA device.

7.5 Requirements for Existing Residential Services

All residential lawn and/or HOA landscapes with an underground irrigation system require the installation of at least one approved BPA on the customer side of the meter setter, or at the point where the irrigation lines connect to the house water supply line.



Annual testing of the device, at customer expense, performed by a Washington State-certified BAT, is mandatory to ensure the assembly is in proper working order. Failure to comply with this requirement may ultimately result in disruption of water service to the sprinkler system.

If unsure whether or not an irrigation system has a backflow assembly installed, the owner may contact the SWD to set up a consultation

7.6 Installation Location

All BPA's must be installed at a location that is easily accessible for inspection and testing;

- Assemblies located in vaults must have adequate clearances and depths to allow the SWD to inspect and a BAT to test.
- Assemblies that cannot be readily inspected must be relocated and re-plumbed as required by the SWD; and
- Owner must contact the SWD to ascertain site-specific requirements and standards prior to commencing installation.

7.10 Bypass Lines: All bypass lines parallel to a line on which a BPA is installed must include an approved BPA that is equal in type to the assembly required on the main line.

7.11 Backflow Prevention Assembly Installation Guidelines

All Backflow Prevention Assemblies should be installed as follows:

- The orientation for which they are approved.
- A manner and location that facilitates their proper operation, maintenance, testing, or inspection.
- A manner that will protect them from weather-related conditions such as flooding and freezing.
- Compliance with applicable safety regulations.



8.0 QUALITY CONTROL OF TESTING PROCESS

8.1 Pre-Approved BATs: The SWD will maintain a list of local, DOH-certified BATs that are pre-approved by District to perform backflow preventer inspection for proper installation and backflow assembly testing.

8.2 Pre-Approval Qualifications: BATs who wish to be included on the SWD's pre-approved list and/or provide testing in the SWD's service area must apply to the SWD and provide the following information:

- Evidence of current DOH certification in good standing.
- Make and model of testing equipment (BAT listing only).
- Evidence of test equipment verification of accuracy and/or calibration within the past 12 months.

9.0 BACKFLOW INCIDENT RESPONSE

Backflow incidents, where unusual conditions can cause the water to flow backwards from a customer's plumbing system into the public water system, can pose a serious threat to public health. If a backflow incident occurs, customers may call to express concerns about degraded water quality or loss of pressure. The District will respond quickly and investigate all potential backflow incidents. If the customer is aware of a backflow incident where the public water system or the consumer's water system has been, or may have been, contaminated, the consumer must notify the District office immediately. If a backflow incident has occurred, the District Manager and water operators and District staff will follow DOH guidelines, as follows:

Find the cause of the backflow and assess the risk.

Identify the affected area and work to limit the spread of contamination.

Call the DOH regional office (working hours 360-236-3030 or after-hours number 877-481-4901). The DOH will help to decide which customers must be contacted and whether to issue a health advisory. The first priority is to protect customer health.

Communicate with affected customers about what happened and tell them what they should do to protect their health and what the District is doing to correct the situation. If the risk assessment points to the possibility of chemical contamination, including a substance capable of causing bodily harm, the *Drinking Water Warning: Backflow Incident* public notice (Appendix C) will be issued. If the risk is limited to microbial contamination, a different public notice will be issued that allows customers to use the tap water if they boil it first.

Flush affected parts of the distribution system to remove any contaminants. The flushing plan should effectively move any known contaminants to the nearest discharge point without unnecessarily spreading contamination through the distribution system.



Disinfect affected parts of the system to reduce the risk of waterborne disease. Customers should be notified before adding a disinfectant.

Collect water quality samples after normal operating pressure is restored, including coliform, and possibly certain chemical samples, to confirm the system meets drinking water standards.

Submit Backflow Incident Report.

10.0 INTENTIONAL RETURN OF USED WATER PROHIBITED

The intentional return of used water, including but not limited to, water used for heating, cooling or other purposes within the consumer's water system, to the SWD's distribution system is prohibited.

11.0 CROSS-CONNECTION CONTROL RECORDS

Types of Records to be Maintained: *(Note: Such records retained by the SWD will be considered public, non-confidential information.)*

- BAT annual certifications.
- Annual instrument calibration certificates submitted by BATs .
- Backflow Prevention Assembly test reports submitted by BATs, copied electronically and hard copies filed in the District Office within 30 days of the testing date.
- Service connections/customer premises information including the required backflow preventer to protect the public water system.
- Backflow assembly location of known residential and commercial customers with installed BPAs including BPA location, assembly description (type, manufacturer, model , size and serial number). Installation, inspection and test dates, test results and data and person performing test.
- The District will maintain records on all known assemblies that protect the public water system from contamination. At a minimum, the District will maintain records on all known premises isolation assemblies required to protect the public water system.

Records to be Prepared and Submitted to the DOH:

The District will develop and maintain CCC records including, but not limited to, the following:

- A master list of service connections and/or consumers' premises where the District relies upon approved known backflow preventers to protect the public water system from contamination, the assessed hazard level of each connection, and the required backflow preventer(s):
- Inventory information on:
 - Approved Air Gaps installed in lieu of approved assemblies
 - Approved known backflow assemblies including exact assembly location, assembly description (type, manufacturer, model, size and serial number), assessed degree of



hazard, installation date, history of inspections, tests and repairs, test results, and person performing tests.

- Approved AVBs used for irrigation system applications including location and description.
 - Cross-Connection Control program activities report for the calendar year (Appendix D).
 - Cross-Connection Control program summary information, when required, or when there are significant policy changes.
 - Backflow incident reports.
 - Documentation when exceptions to mandatory premises isolation are granted.

At a minimum, the District's CCS will prepare and sign the exception reports.

The District's CCS will prepare and sign all CCC-related reports required by WAC 246-290-490. The District Manager will review all CCC-related reports for correctness. The District's CCS shall sign the CCC reports before submission to the DOH.

12.0 CUSTOMER EDUCATION AND COMMUNICATION

The District will distribute with the annual water bill, or by some other means, public education brochures describing backflow prevention to system customers.

Each year, the District Office will remind customers of the State mandate to arrange for annual testing of their backflow prevention devices by a DOH-certified BAT. The notification will be posted on the SWD website and sent via email reminders to all customers. Educational material explaining the function of a BPA is also emailed and is included in the District's Newsletter which is also posted on the www.sunlandwater.com website. The information distributed by the SWD may include, but not be limited to, the following subjects:

- Cross-connection hazards in general.
- Irrigation system hazards and corrective actions.
- Fire sprinkler cross-connection hazards.
- Importance of annual inspection and/or testing of backflow preventers.

13.0 ENFORCEMENT

A survey of BPA devices installed in SunLand is ongoing, as time permits. The SWD will make reasonable efforts to bring customers into compliance with state and local regulations

When identified, the owners of properties that have inadequate or non-existent backflow protection will receive a notice from the District office requiring corrections to bring these systems into compliance. A Cross-Connection Permit is required before work can begin and must be purchased for \$25.00 at the District office (see Section 7).



The SWD may take appropriate corrective action within its authority if:

- A Cross-Connection exists that is not controlled commensurate to the degree of hazard assessed by the SWD; or
- A consumer fails to comply with SWD requirements regarding the installation, inspection, testing, maintenance, or repair of an approved backflow preventer required by this policy.

This resolution of the Board authorizes the SWD to take appropriate corrective action and may include, but is not limited to:

1. Charging a penalty for ignoring annual testing of BPAs. *(Note: The penalty charged may increase by an amount authorized by the Board if consumer continues to disregard the testing requirement.)*
2. Denying or discontinuing water service to a Consumer's premises, when the District Manager determines that an actual or potential health hazard to the water utility exists, until the cross-connection hazard is eliminated or controlled to the satisfaction of the District's CCS.
3. Taking alternate corrective action such as installing a backflow prevention assembly at consumer's expense. This action may be taken only for situations other than public health emergencies necessitating suspension of service.

(Note: As the SWD bills on a flat annual rate basis, the District has limited ability to enforce WAC 246-290-490 and District policy compliance except by charging a penalty fee or terminating service which has not thus far been implemented.)

14.0 BACKFLOW ASSEMBLY INSTALLERS/TESTERS

In Washington State, installing new BPAs does not require a specific backflow installation license but requires a certified BAT certification for testing, maintenance and repair of the assemblies. Actual installation is often performed by a certified plumber, or another qualified individual, provided they follow SWD requirements and state plumbing codes.

Testing of a newly installed BPA, and annual testing thereafter, must be performed by a DOH-certified Backflow Assembly Tester (BAT). WSDOH certified Backflow Assembly Testers (BATs) must use approved test methods and test equipment per WAC 246-290-490. Annual calibration test certificates must be submitted to the District Office.

A current list of BATs who have current validation cards and instrument calibration certificates on file is available from the District Office upon request.



5762 Woodcock Road

Sequim, WA 98382

APPENDICES

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- B. CROSS-CONNECTION PERMIT
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- D. CROSS-CONNECTION CONTROL PROGRAM ANNUAL ACTIVITIES REPORT



5762 Woodcock Road

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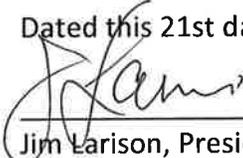
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WHEREAS, WAC 246-290-490 of the State of Washington, requires that the SunLand Water District have a Cross-Connection Control Program, and

WHEREAS, the SunLand Water District wishes to comply with said Washington Administrative Code and to protect SunLand's water system from contamination, now, therefore be it

RESOLVED, that the SunLand Water District Board of Commissioners adopts the SunLand Water District's Cross-Connection Control Program and Backflow Prevention Policy, as amended on 21 October 2025.

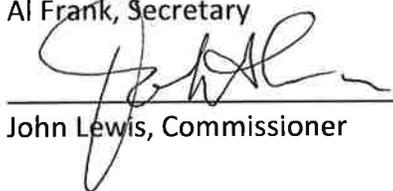
Dated this 21st day of October 2025.



Jim Larison, President



Al Frank, Secretary



John Lewis, Commissioner



WATER SERVICE APPLICATION/CONTRACT

I, _____, and _____ (Print)
 _____, and _____ (Signature)

Hereby make application for water service(s) from the SunLand Water District at:
 (address) _____, subject to all the provisions of District Resolutions
 established service policies and rates effective on today’s date or as amended in the future.

With customer(s) signature and acceptance by the District, the application becomes a contract committing the
 customer(s) to pay for utility services at the above location or any location served hereafter at the applicable and
 established rates and minimum charges and for any unpaid services previously rendered to the customer(s) by the
 District, and to be governed by the policies and Resolutions of the District. Breach of contract by the customer(s) shall
 obligate the customer(s) for all loss suffered by the District by reason thereof.

Customer

SunLand Water District

Accepted by: _____

Accepted by: _____

Date: _____

Date: _____

Mailing Address

Customer Phone Number(s):

Home _____
 Cell _____

Requirements and Specifications for New Water Connections

Revised October 22, 2025

1. Any new approved water service connection to the SunLand Water System includes a meter and meter setter appropriately sized for the service use. Typically, this will be a 5/8 by 3/4 Sensus iPERL touch-read in gallons to include the water box lid adapter. The District will install at no additional cost.
2. A new water connection for Southern View Estates (SVE) vacant property is initiated when an Application for Water Service is completed and submitted to the District office. SVE owners must pay for a meter to be installed on the meter setter provided by the owner, developer, or contractor. The charge for the meter will be in keeping with the current cost of meters purchased by the SunLand Water District.
3. Cross Connection: Any new water connection in SunLand or Southern View Estates must include a Washington State-approved Backflow Prevention Assembly installed at the customer(s) side of the meter setter. Whereas a new connection is a potential cross-connection, a Cross-Connection Permit Application must be submitted with a \$100.00 fee. The completed permit is kept on file with the SunLand Water District.



CROSS CONNECTION PERMIT

SUNLAND WATER DISTRICT

5762 Woodcock Road
Sequim, WA 98382
360-683-3905

Permit No. CC _____

Date Issued _____

Permit Fee: \$100.00 – payable to the SunLand Water District

Cross Connection location address _____

Current Property Owner _____

Purpose for Cross Connection

Backflow Protection Type (Double Check, Pressure Vacuum Breaker, Other State-approved devices)

Backflow Prevention Assembly Manufacturer

Model & Serial No. of BPA

Backflow Assembly Installer's Name _____

Date of Installation _____

Note: Washington Administrative Code 246-290-490 requires that all backflow prevention assemblies be tested upon installation and annually thereafter, with the exception of Atmospheric Vacuum Breaker devices which do not require annual testing but are only effective for back-siphonage backflow prevention.

Backflow Assembly Tester's Name _____

Date and Test Results _____

Questions regarding this permit or the SunLand Water District Cross-Connection Control Program should be addressed to the District Office at 360-683-3905.



Application Form—CCC Program

Backflow Incident Report Form

331-457-F • June 2024

Note: Use this form to comply with WAC 246-290-490(8)(g).

Part 1: Public Water System (PWS) Information

PWS ID	PWS Name	County	Choose an item.
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Part 2: Backflow Incident Information

A. Incident Identification

Incident Date	Date	Incident Time	Enter Time	Incident ID (ODW Use Only)	Internal ID#
---------------	------	---------------	------------	----------------------------	--------------

B. Information on Premises where Backflow Originated

Name of Premises	Click or tap here to enter text.		
Premises Physical Address	Click or tap here to enter text.		
City	Enter Text	Zip Code	Click or tap here to enter text.
Premises Type	Non-Residential <input type="checkbox"/>	Residential <input type="checkbox"/>	
Premises category/description (Table 13 formerly Table 9 category,* if applicable)	Click or tap here to enter text.		
Most Recent Hazard Evaluation Prior To Incident (mm/dd/yyyy)	Click or tap here to enter text.	None <input type="checkbox"/>	
PWS's Assessed Hazard Level	Click or tap here to enter text.		
Premises Isolation Required by PWS? Yes <input type="checkbox"/> No <input type="checkbox"/>	PWS Relies on In-Premises Protection? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Type of Backflow Preventer Required by PWS	Click or tap here to enter text.		
Other Hazard Evaluation Information	Click or tap here to enter text.		

*See WAC 246-290-490(4)(b)(i).

C. Backflow Discovery Method

How was the backflow discovered? Check all that apply.	Direct observation	<input type="checkbox"/>	Water quality complaint	<input type="checkbox"/>
	Meter running backwards	<input type="checkbox"/>	Illness/injury complaint	<input type="checkbox"/>
	Water use decrease	<input type="checkbox"/>	Result of Investigation	<input type="checkbox"/>
	Disinfectant residual monitoring	<input type="checkbox"/>	Other (Describe)	Click or tap here to enter text.
	Water quality monitoring	<input type="checkbox"/>		
By whom was the incident reported to the PWS?	PWS Personnel	<input type="checkbox"/>	Other (Please Specify)	Click or tap here to enter text.
	Premises Owner/Occupant	<input type="checkbox"/>		
	Other PWS Customer	<input type="checkbox"/>		
	Backflow Assembly Tester	<input type="checkbox"/>		

D. Contaminant Information

Contaminant Type (Check all that apply.)	Microbiological <input type="checkbox"/>	Chemical <input type="checkbox"/>	Physical <input type="checkbox"/>
Describe contaminant (for example, the organism name, chemical, etc.). Please attach lab analysis or MSDS, if available.	Click or tap here to enter text.		

E. Extent and Effects of Contamination

Estimated extent of contamination	Contained within Premises	<input type="checkbox"/>
	Entered PWS Distribution System	<input type="checkbox"/>
Estimated number of connections affected	Residential	Click or tap here to enter text.
	Non-residential	Click or tap here to enter text.
Estimated population affected or at risk	Residential	Click or tap here to enter text.
	Non-residential	Click or tap here to enter text.
Number of water quality complaints	Click or tap here to enter text.	

Describe water quality complaints	Click or tap here to enter text.
Number of illnesses reported	Click or tap here to enter text.
Describe Illnesses/irritation (specifics, if known)	Click or tap here to enter text.
Number of physical injuries (i.e., burns) or irritations (e.g., rashes) cases reported	Click or tap here to enter text.

Part 3: Public Water System (PWS) Information

A. Source of Contamination

Source of contaminant or fixture type (Check all that apply.)

Air conditioner/heat exchanger	<input type="checkbox"/>	Industrial/commercial process water/fluid	<input type="checkbox"/>
Auxiliary water supply	<input type="checkbox"/>	Medical/dental fixture	<input type="checkbox"/>
Beverage machine	<input type="checkbox"/>	Reclaimed water system	<input type="checkbox"/>
Boiler, hot water system	<input type="checkbox"/>	Swimming pools, spa	<input type="checkbox"/>
Chemical injector/aspirator	<input type="checkbox"/>	Wastewater (sewage) system	<input type="checkbox"/>
Fire protection system	<input type="checkbox"/>	Other (specify)	Click or tap here to enter text.
Irrigation system (PWS supplied)	<input type="checkbox"/>		

B. Distribution System Pressure Conditions in the Vicinity of the Backflow Incident

Backflow Type Backsiphonage Backpressure

Typical distribution system pressure in vicinity of incident (if range, enter lower end of range) Click or tap here to enter text. psi

Main/pressure status at time of incident (Check all that apply.)

Normal	<input type="checkbox"/>	Source/plant outage	<input type="checkbox"/>
Main break	<input type="checkbox"/>	Scheduled water shutoff by PWS	<input type="checkbox"/>
Firefighting	<input type="checkbox"/>	Unscheduled/emergency shutoff	<input type="checkbox"/>
Other high usage	<input type="checkbox"/>	Unknown	<input type="checkbox"/>
Power outage	<input type="checkbox"/>	Other (specify)	Click or tap here to enter text.

Describe causes and circumstances leading to backflow incident.

Click or tap here to enter text.

C. Backflow Preventer Information/Installation/Approval Status at Site of Backflow

Complete the tables in C and D for the premises isolation preventer for either of the following situations:

- ◆ If a premises isolation backflow preventer is installed and the contaminant entered the PWS distribution system.
- ◆ If the premises isolation assembly is the only backflow preventer at the site.

In all other cases, complete tables in C and D for the in-premises backflow preventer installed at the fixture. If more than one backflow preventer was involved in the backflow incident, copy tables C and D and complete them for the additional preventer(s)

If no backflow preventer was installed at the time the incident occurred, check this box and go directly to Part 4. Don't fill out the tables below (C and D).

Backflow Preventer Information	Type Installed	Click or tap here to enter text.
	Installed For	Click or tap here to enter text.
	Make	Click or tap here to enter text.
	Model	Click or tap here to enter text.
	Size	Click or tap here to enter text.
	Serial Number	Click or tap here to enter text.
	Date Installed	Click or tap to enter a date.

Installation Status. Check all that Apply.	Properly installed/plumbed	<input type="checkbox"/>
	Improperly installed/plumbed	<input type="checkbox"/>
	Improperly protected bypass present	<input type="checkbox"/>
	If so, explain	Click or tap here to enter text.

Commensurate with assessed degree of hazard?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If not, explain. Click or tap here to enter text.
--	------------------------------	-----------------------------	---

DOH/USC-approved at time of backflow incident?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If not, approved when installed? Yes <input type="checkbox"/>	No <input type="checkbox"/>
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D. Backflow Preventer Inspection/Testing Information at Site of Backflow

Most recent inspection/test information prior to backflow incident. Attach test report(s), if available.	Not test report on record.	<input type="checkbox"/>
--	----------------------------	--------------------------

Inspection/test information after backflow incident [per WAC 246-290-490(7)(b)]. Attach test report.	Date tested/inspected.	Click or tap to enter a date.
--	------------------------	-------------------------------

Inspection/test information after backflow incident [per WAC 246-290-490(7)(b)]. Attach test report.	Passed test/inspection <i>without</i> repairs.	<input type="checkbox"/>
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Inspection/test information after backflow incident [per WAC 246-290-490(7)(b)]. Attach test report.	Failed initial test/inspection, passed <i>after</i> repair.	<input type="checkbox"/>
--	---	--------------------------

Inspection/test information after backflow incident [per WAC 246-290-490(7)(b)]. Attach test report.	Failed test/inspection, no repairs made.	<input type="checkbox"/>
--	--	--------------------------

Inspection/test information after backflow incident [per WAC 246-290-490(7)(b)]. Attach test report.	Not tested/inspected.	<input type="checkbox"/>
--	-----------------------	--------------------------

Inspection/test information after backflow incident [per WAC 246-290-490(7)(b)]. Attach test report.	Date tested/inspected.	Click or tap to enter a date.
--	------------------------	-------------------------------

Inspection/test information after backflow incident [per WAC 246-290-490(7)(b)]. Attach test report.	Passed test/inspection <i>without</i> repairs.	<input type="checkbox"/>
--	--	--------------------------

Inspection/test information after backflow incident [per WAC 246-290-490(7)(b)]. Attach test report.	Failed initial test/inspection, passed <i>after</i> repair.	<input type="checkbox"/>
--	---	--------------------------

Inspection/test information after backflow incident [per WAC 246-290-490(7)(b)]. Attach test report.	Failed test/inspection, no repairs made.	<input type="checkbox"/>
--	--	--------------------------

Backflow Preventer failure information, if applicable. Check all that apply.	Fouled check	<input type="checkbox"/>
--	--------------	--------------------------

Backflow Preventer failure information, if applicable. Check all that apply.	Debris	<input type="checkbox"/>
--	--------	--------------------------

Backflow Preventer failure information, if applicable. Check all that apply.	Weather-related damage	<input type="checkbox"/>
--	------------------------	--------------------------

Backflow Preventer failure information, if applicable. Check all that apply.	Damaged seat	<input type="checkbox"/>
--	--------------	--------------------------

Backflow Preventer failure information, if applicable. Check all that apply.	Other	Click or tap here to enter text.
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If preventer failed inspection/test, did failure allow backflow?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, explain. Click or tap here to enter text.
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Part 4: Corrective Action/Notification

Action taken by PWS to restore water quality. Check all that apply.	None	<input type="checkbox"/>
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Action taken by PWS to restore water quality. Check all that apply.	Flushed/cleaned mains	<input type="checkbox"/>
---	-----------------------	--------------------------

Action taken by PWS to restore water quality. Check all that apply.	Flushed/cleaned plumbing	<input type="checkbox"/>
---	--------------------------	--------------------------

Action taken by PWS to restore water quality. Check all that apply.	Disinfected mains	<input type="checkbox"/>
---	-------------------	--------------------------

Action taken by PWS to restore water quality. Check all that apply.	Disinfected plumbing	<input type="checkbox"/>
---	----------------------	--------------------------

Action taken by PWS to restore water quality. Check all that apply.	Other treatment (describe)	Click or tap here to enter text.
---	----------------------------	----------------------------------

Action taken by PWS to restore water quality. Check all that apply.	Replaced mains	<input type="checkbox"/>
---	----------------	--------------------------

Action taken by PWS to restore water quality. Check all that apply.	Replaced plumbing	<input type="checkbox"/>
---	-------------------	--------------------------

Action taken by PWS to restore water quality. Check all that apply.	Other	Click or tap here to enter text.
---	-------	----------------------------------

Action ordered by PWS to correct cross-connection. Check all that apply.	None	<input type="checkbox"/>
	Eliminate cross-connection	<input type="checkbox"/>
	Remove by-pass	<input type="checkbox"/>
	Install new preventer	<input type="checkbox"/>
	For premises isolation	<input type="checkbox"/>
	For fixture protection	<input type="checkbox"/>
	Change existing preventer	<input type="checkbox"/>
	Repair/replumb	<input type="checkbox"/>
Reinstall correctly	<input type="checkbox"/>	
Replace with same type	<input type="checkbox"/>	
Upgrade type	<input type="checkbox"/>	
Other	Click or tap here to enter text.	
Action ordered accomplished?	Yes <input type="checkbox"/>	Date Click or tap to enter a date.
	No <input type="checkbox"/>	Explain Click or tap here to enter text.
Agency notifications per WAC 246-290-490(8)(f). Check all that apply.	DOH	<input type="checkbox"/>
	Local Health Agency	<input type="checkbox"/>
	Local Administrative Authority	<input type="checkbox"/>
	Issued by end of next business day	Click or tap here to enter text.
Notifications of consumers in area of incident (check all that apply)	Population at risk	<input type="checkbox"/>
	Public Notification (PN per DOH regs)	<input type="checkbox"/>
	Boil Water Advisory	<input type="checkbox"/>
	Other (describe)	Click or tap here to enter text.
Other enforcement/corrective actions (describe).	Click or tap here to enter text.	

Part 5: Cost of Backflow Incident (Optional)

Item	PWS Personnel Hours Expended	Cost to PWS (\$)	Cost to Premises Owner (\$)
Investigation	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Restoration of Water Quality	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Correction of Cross-Connection Situation	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Litigation and/or Settlement	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Other Not Included in Above	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

Part 6: Further Information/Documentation

Additional information about this incident such as pictures, sketches, newspaper/journal articles, water quality analyses, epidemiological reports, etc. is helpful. Provide information in electronic or hard copy form.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Part 7: Form Completion Information

Note: Form should be completed by a person currently certified as a Cross-Connection Control Specialist.

I certify that the information provided in this Backflow Incident Report is complete and accurate to the best of my knowledge.

CCC Program Manager Name	Click or tap here to enter text.
Title	Click or tap here to enter text.
CCS Certification Number	Click or tap here to enter text.
Signature	
Date	Click or tap to enter a date.
Phone	Click or tap here to enter text.
Email	Click or tap here to enter text.

I have reviewed this report and certify that the information is complete and accurate to the best of my knowledge.

PWS Manager/Representative Name	Click or tap here to enter text.
Title	Click or tap here to enter text.
Operator Certification Number	Click or tap here to enter text.
Signature	
Date	Click or tap to enter a date.

Please send completed backflow incident form to:

Mail

Washington State Department of Health
Office of Drinking Water—CCC Program Manager
P O Box 47822
Olympia, WA 98504-7822

Email cccprogram@doh.wa.gov

Please send any form questions, comments, or suggestions to the address above or email cccprogram@doh.wa.gov.



To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov. If in need of translation services, call 1-800-525-0127.

Drinking Water Warning: Backflow Incident

Public Notification

The _____ Water System, ID _____, located in _____ County may be contaminated because of a backflow incident in which _____ (describe the substance) flowed back into the drinking water system. You are located in the service area potentially affected by this backflow incident.

Do Not Use Tap Water for Drinking, Laundry, or Bathing Until Further Notice. Use only purchased bottled water for drinking, making ice, brushing teeth, washing dishes, food preparation, and hand washing.

When backflow occurs, microbial or chemical contamination can be drawn into the water system. These contaminants can cause severe injury or illness.

What caused the backflow incident?

What is the affected area?

What are we doing to correct the problem?

Where can customers get bottled water?

What should you do before you begin using your tap water?

We will notify you when the water is safe to use.

For more information, please call _____ at () ____ - ____ or email _____.

Please share this notice with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments and businesses). You can post it in a public place, share copies by hand, or mail it.

The _____ Water System sent this notice to you on ___/___/___

For Water Utility Use Only:

Backflow Incident Public Notice Certification Form Within 10 days of notifying your customers, please complete this certification form and send a copy of each type of notice you distributed (hand-delivered notices, new releases, email, phone transcript, etc.) to our regional office. Call 1-800-521-0323 for the regional office address.		
Distribution was completed on ___/___/___.	Check all that apply:	
Were the water users notified within 24 hours? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Hand delivery, <input type="checkbox"/> News release (TV, radio, newspaper, etc.), <input type="checkbox"/> Posting at _____ <input type="checkbox"/> Other _____ + _____	
_____ Signature of owner or operator	_____ Position	_____ Date

DOH Form (331-495) 6/14

For people with disabilities, this form is available on request in other formats. To submit a request, please call 800-525-0127 (TDD/TTY 711).



**Public Water System
Cross-Connection Control Activities
Annual Summary Report for _____**

Part 1: Public Water System (PWS) and Cross-Connection Control Specialist (CCS) Information

PWS ID:	PWS Name:	County:
Provide name and certification number of CCS who develops and implements your CCC program.		
CCS Name (Last, First & MI):		CCS Phone: (____) ____ - ____
CCS Cert. No.:	BAT Cert. No. (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 Reporting Year

PWS has (check one box in each column below):	
A written CCC program plan Y <input type="checkbox"/> N <input type="checkbox"/>	CCC implementation activities Y <input type="checkbox"/> N <input type="checkbox"/>

(CCC program plan may be a separate document or part of water system plan or small water system management program.)

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	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	CCC Procedures and Schedules	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	Testing Quality Control Assurance 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"/>

Did you check one box in EACH of the above columns for EACH row?

Part 3A: System Characteristics

Indicate the number of connections of each type that the PWS serves (whether or not they are protected by backflow preventers). **Estimate if necessary.**

Type of Service Connection	Number
Residential (as defined by PWS)	
All Other (include dedicated fire sprinkler and 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: Cross-Connection Control for High-Hazard Premises or Systems Served by the PWS

If PWS does not serve any high-hazard premises or systems, check here and go to Part 4.

- Complete all cells. Count only premises PWS serves water to. Enter zero (0) if PWS doesn't serve such premises.
- Report data as accurately as possible. DOH currently bases CCC compliance actions on this information.

Type of High-Hazard Premises or Systems [WAC 246-290-490(4)(b)]	Number of Connections			
	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	D. Granted Exception from Mandatory 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 protection systems with chemical addition or using unapproved auxiliary supplies				
Food processing plants (including canneries, slaughter houses, rendering plants)				
Hospitals, medical centers, nursing homes, veterinary, medical and dental clinics, blood plasma centers and mortuaries. Please complete Part 3C on next page.				
Dedicated irrigation systems using purveyor's water supply and 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 high-hazard premises (please list): ⁵				
Totals				

¹ Count multiple connections or parallel installations to the same premises as *separate* connections.
² Count only those connections with AG or RPBA installed for premises isolation. Don't include connections with in-premises protection only, or connections with DCVAs or DCDA's installed for premises isolation.
³ Count only those connections *whose premises isolation preventers* were inspected (AG) or tested (RPBA) during report year.
⁴ For example, dedicated lines to irrigation systems in parks, playgrounds, golf courses, cemeteries, estates, etc.
⁵ Premises with hazardous materials or processes (requiring isolation by AG or RPBA) 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, e.g.: *other manufacturing* or *other commercial*. **If needed, attach additional sheet giving same information as requested in table.**

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

If PWS does not serve any medical premises of the types shown below, check here and go to Part 4.

- Complete all cells. **Do not count the same premises more than once.**
- Count only premises PWS serves water to. Enter zero (0) if PWS doesn't serve such premises.
- Report data as accurately as possible. DOH will base CCC compliance actions on this information.

Type of High-Hazard Premises or Systems [WAC 246-290-490(4)(b)]	Number of Connections at end of year			
	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 Mandatory 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				
Hospice care centers				
Childbirth centers				
Kidney dialysis centers				
Blood centers				
Dental clinics and offices				
Facilities for Housing Patients				
Nursing homes				
Boarding homes				
Residential treatment centers				
Other Medical-Related Facilities				
Mortuaries				
Morgues and autopsy facilities (not in hospitals)				
Veterinarian offices, clinics, and hospitals				
All other (describe in Part 6: Comments on pg 6)				
Totals				

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

² Count only connections with premises isolation AGs or RPs (RPBA or RPDA). Don't include connections with in-premises protection only or connections with DCVAs or DCDAs installed for premises isolation.

³ Count only connections whose premises isolation preventers were inspected (AG) or tested (RP's) during report year. The number in Column C can't be larger than the number in Column B in the same row.

Part 4A: Backflow Preventer Inventory and Testing Data

- Complete all cells. **Count only backflow preventers relied on to protect the PWS.** Enter zero (0), if there are no backflow preventers in that category.
- **If PWS records don't distinguish between premises isolation and in-premises protection preventers, enter all data in rows 1-6 and check box above row 1.**
- Count AVBs on irrigation systems only. **If you don't track AVBs, check the box above the "AVB" column.**
- Count multiple tests (or failures) for any particular backflow preventer as one test (or failure).
- Count each assembly separately for multiple service connections or parallel installations. Count RPDA's and DCDA's as single assemblies (don't count bypass separately).
- Count assemblies installed on dedicated fire or irrigation lines as Premises Isolation Assemblies. **If PWS doesn't track AVBs, check here.**

Backflow Preventer Category and Inspection/Testing Information		Air Gap	RPBA	RPDA	DCVA	DCDA	PVBA	SVBA	AVB
Premises Isolation, including preventers isolating PWS-owned facilities. <i>If In-Premises Protection preventers are also included, check here</i> <input type="checkbox"/> .									
<i>Rows 1 – 3 pertain ONLY to Premises Isolation preventers in service at beginning of the year _____ (fill in report year)</i>									
1	In service at beginning of year								
2	Inspected and/or tested ¹								
3	Failed inspection or test this year								
<i>Rows 4 – 6 pertain ONLY to NEW Premises Isolation preventers installed during the reporting year</i>									
4	New preventers installed ²								
5	Inspected and/or tested ¹								
6	Failed inspection or test ³								
7	Preventers taken out of service this year ³								
Premises Isolation Total at end of year⁴									
In-Premises Protection (Fixture Protection or Area Isolation), including preventers within PWS-owned facilities.									
<i>Rows 8 – 10 pertain ONLY to In-Premises Protection Preventers in service at beginning of report year</i>									
8	In service at beginning of year								
9	Inspected and/or tested ¹								
10	Failed inspection or test this year								
<i>Rows 11 – 13 pertain ONLY to NEW In-Premises Protection preventers installed during the reporting year</i>									
11	New preventers installed ²								
12	Inspected and/or tested ¹								
13	Failed inspection or test this year								
14	Preventers taken out of service ³								
In-Premises Protection Total at end of year⁴									
Grand Total at end of reporting year									

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

Part 4B: Other Implementation Activities

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

Activity or Condition	Number
<i>New</i> service connections evaluated for cross-connection hazards to PWS.	
<i>New</i> service connections requiring backflow protection to protect the PWS. ¹	
<i>Existing</i> service connections evaluated for cross-connection hazards to PWS.	
<i>Existing</i> service connections requiring backflow protection to protect the PWS. ^{1, 2}	
Exceptions granted to high-hazard premises per WAC 246-290-490(4)(b). ³	
CCC enforcement actions taken by PWS. ⁴	

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 to High-Health Hazard Premises Isolation Requirements Form (green) for each exception granted during the year.

⁴ “Enforcement actions” mean actions taken by the PWS (such as water shut-off, PWS installation of backflow preventer, etc.) when the customer fails to comply with PWS’s CCC requirements.

Part 5: Backflow Incidents, Risk Factors, and Indicators During Report Year: _____

Complete only one column for each row. Check “Data Not Available” if PWS doesn’t track such data.

Backflow Incidents, Risk Factors, and Indicators		Number (Enter 0 if none)	Check if Data Not Available
Backflow Incidents			
1	Backflow incidents that contaminated the PWS. ⁵		<input type="checkbox"/>
2	Backflow incidents that contaminated the customer’s drinking water system only. ⁵		<input type="checkbox"/>
Risk Factors for Backflow			
3	Distribution main breaks per 100 miles of pipe.		<input type="checkbox"/>
4	Low-pressure events (<20 psi in PWS distribution system).		<input type="checkbox"/>
5	Water outage events.		<input type="checkbox"/>
Indicators of Possible Backflow			
6	Total health-related complaints received by PWS. ⁶		<input type="checkbox"/>
7	Received during BWA or PN events. ⁷		<input type="checkbox"/>
8	Received during low pressure or water outage events.		<input type="checkbox"/>
9	Total aesthetic complaints (color, taste, odor, air in lines, etc.).		<input type="checkbox"/>
10	Received during BWA or PN events. ⁷		<input type="checkbox"/>
11	Received during low pressure or water outage events.		<input type="checkbox"/>

⁵ Purveyors must submit a completed DOH Backflow Incident Report form for each backflow incident known to contaminate the public water system. DOH is also interested in receiving information on backflow incidents that contaminated the customer’s drinking water system only. The DOH Incident Report form, Form #331-243, is available on the Office of Drinking Water (ODW) website at <http://www.doh.wa.gov/Portals/1/Documents/Pubs/331-457-F.pdf> or from ODW on request.

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 or clarifications to any of the information included in this report. *Please date the comment.*

Part No.	Comment	Date

Part 7: Report Completion Information

Enter dates in MM/DD/YYYY format.

I certify that the information provided in this CCC Activities Report is complete and accurate to the best of my knowledge.		
CCC Program Mgr. Name (print) ¹ :	Title:	
Signature:	Date:	
Phone: (____) ____-____	E-mail: _____@_____	
I have reviewed this report and certify that the information provided is complete and accurate to the best of my knowledge.		
PWS Mgr./Owner Name (print) ² :	Title:	
Signature:	Op. Cert. No.:	Date:

¹ 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.

If you have a question or comment regarding this form, you can find contact information at <https://www.doh.wa.gov/communityandenvironment/drinkingwater> or email us at CCCprogram@doh.wa.gov.

If you need this publication in an alternate format, call (800) 525-0127. For TTY/TDD, call (800) 833-6388.