

Return completed form to:
Sanitary Engineering Branch
State Department of Health Services
2151 Berkeley Way, Rm. 234
Berkeley, CA 94704

COPY

Date: 3-11-84
Please submit by February 28, 1984

1983 Annual Report to the Sanitary Engineering Branch
(for year ending December 31, 1983)

I.

55-016

ODD FELLOWS SIERRA REC ASSOC
P.O. BOX 116
LONG BARN CA 95335

Name or Address
(if there has been a change)

(zip code)

II. ORGANIZATION

Manager

Bert Johnson

Chief Engineer or
Consultant

Superintendent

If different from above:

Local Representative

Title

PRESIDENT

Address

P.O. Box 116
LONG BARN CALIF
95335
(zip code)

Local Rep. Telephone No. (with area code) (209) 586-7586

Local Rep. Emergency No. (with area code) _____

Office Hours

III. REPORT SUBMITTED BY

Name

Bert Johnson

Title

PRES. OF ASSOC.

IV. DOMESTIC WATER SOURCES IN SYSTEM (Specify Number)

a. Groundwater Sources (wells, tunnels, springs)(1) Total active wells as of December 31 (owned and leased) 2(2) New wells added during the past year. 0

Give name or number _____

(3) Wells inactivated (or disconnected) during the past year. 1Give name or number well # 3(4) Wells destroyed or abandoned during the past year. 0

Give name or number _____

b. Surface Sources (including infiltration galleries)(1) Active surface sources as of December 31. 1(2) New surface sources added during report year. 0(3) Surface sources inactivated (or disconnected) during report year. 0(4) Surface sources abandoned during report year. 0c. Purchased Water(1) Active purchased sources as of December 31. 0(2) New purchased sources added during report year. 0(3) Purchased sources abandoned during report year. 0(4) Purchased sources inactivated (or disconnected) during report year. 0

V. AMOUNT OF WATER PRODUCED FOR MAXIMUM DAY AND MONTH *

a. Maximum day (skip this line if daily records are not kept)

(1) Produced by system _____ million gal. (2) Purchased from others _____ million gal.

b. Month of maximum water use (determined by adding water produced by system and purchased water). Name of month April

c. Total water production during the month of maximum use.

(1) Produced by system ~~1.242,000~~ million gal. (2) Purchased from others 0 million gal.1,242,000 gal

* Water obtained from all sources listed in Section IV, above.

VI. TOTAL ANNUAL WATER PRODUCED, PURCHASED AND SOLD

- a. Produced by system 12 ~~30000~~ million gallons
- b. Purchased from others ~~0~~ million gal.
- c. Water sold to other water utilities 0 million gallons
- d. Water sold to agricultural customers 0 million gallons

VII. CUSTOMERS (not counting fire hydrants)

- a. General (including commercial and industrial)
- b. (Irrigation) Agricultural
- c. Other Water Utilities
- d. Total Active Connections (d should equal a + b + c)

Metered	Flat Rate	Total

VIII. POPULATION SERVED

- a. Permanent 50
- b. Maximum Seasonal (if there is a large seasonal influx 400 (week ends) ~~500~~)

IX. COMPLAINTS (Written or verbal)

Type	Number	Number Checked and Corrections Made
Taste and Odor	_____	_____
Color	_____	_____
Turbidity	_____	_____
Worms & Other Larger Organisms	_____	_____
Pressure (high or low)	_____	_____
Water Outage	_____	_____
Leaks	_____	_____
Other	_____	_____
TOTAL	_____	_____

X. EMERGENCY NOTIFICATION PLANS

Please review your Emergency Notification Plan. If any changes are necessary, please submit a new plan. Contact your Sanitary Engineering Section District Office for advice and assistance in preparing a new or updated plan.

XI. IMPROVEMENTS

Describe changes, modifications, or improvements in operation and facilities made during the report year or planned for this year. The addition of new sources (including wells) or treatment facilities require an application for amended permit—see the California Safe Drinking Water Act.

XII. CHEMICAL QUALITY

Attach copies of any chemical analyses of your water supply obtained during this year that have not previously been submitted.

XIII. CROSS-CONNECTION CONTROL

Are written records of cross-connection control data kept? _____

Number of service connection backflow devices in system _____

Number of service connection backflow devices installed this year _____

Number of service connection backflow devices tested this year. _____