



800 NE Oregon Street, Suite #640 Portland, OR 97232-2162 (971) 673-0405 (971) 673-0694 – FAX www.healthoregon.org/crossconnection

OHA Cashier – DWS- CC&BF PO Box 14260 Portland, OR 97293

Annual Fee Invoice Drinking Water Services Cross Connection & Backflow Prevention

The 2005 Oregon Legislature passed House Bill 3108 authorizing the Oregon Health Authority to assess an annual fee on Community Public Water Systems to fund the Cross Connection Program. This fee is based on the number of service connections in your water system.

A late fee of 50% of the original fee will be assessed if your payment is not postmarked by January 31. Water System ID# 41-_____ Contact Name: Water System Name: City: ______ State: _____ Zip: _____ The fee for your Community Public Water System with 10,000 or more service connections is: \$350.00 QC 104 50204-51061-2220 \$525.00 if post marked after January 31 - *QC 113 50204-51061-2080* Make check or money order payable to: OHA Cashier Mail invoice and payment to: OHA Cashier PO Box 14260 Portland OR 97293 [Oregon Health Authority Federal Tax ID # (EIN) is: 93-6001752] Printed Name: ______ Title: _____ Signature: ______ Date: _____