

**State of Oregon Drinking Water Program
Monthly Disinfection Report for Ground Water Systems**

System Name **Siuslaw Marina**

PWS ID# **41 05289**

Month/Year **9/2022** Entry Point: **EP-A**

Required Minimum Residual **0.4 mg/L**

Date	Time	Source(s) in use KITCHEN TAP	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1	9:10 P.M.	"	0.5	
2	8:36 "	"	0.5	
3	9:22 "	"	0.5	
4	8:55 "	"	0.5	
5	8:35 "	"	0.5	
6	8:25 "	"	0.5	
7	8:48 "	"	0.5	
8	9:08 "	"	0.5	
9	8:40 "	"	0.5	
10	9:28 "	"	0.5	
11	8:51 "	"	0.5	
12	7:02 "	"	0.4	
13	7:33 "	"	0.5	
14	8:10 "	"	0.6	
15	7:25 "	"	0.6	
16	8:19 "	"	0.6	
17	7:55 "	"	0.6	
18	8:40 "	"	0.6	
19	8:23 "	"	0.5	
20	8:15 "	"	0.5	
21	8:35 "	"	0.5	
22	7:49 "	"	0.5	
23	8:25 "	"	0.5	
24	8:20 "	"	0.5	
25	8:39 "	"	0.5	
26	8:54 "	"	0.5	
27	8:10 "	"	0.5	
28	7:30 "	"	0.6	
29	8:45 "	"	0.6	
30	7:29 "	"	0.6	
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Was the chlorine residual ever less than the required minimum residual of **mg/L?** Yes No
 If yes, what was the longest time period until the required level was restored? _____ hours - if > 4 hours, Drinking Water Program to be notified by end of next business day.

<p>GWS Serving 3,300 or Fewer</p> <p>If yes, did you monitor every four hours until the residual returned to _____ mg/L as required? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Attach those results and submit them with this form.</p>	<p>GWS Serving More Than 3,300</p> <p>Did continuous monitoring equipment fail at any time this reporting month? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, were grab samples collected every four hours until the continuous monitoring equipment was returned to service as required? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Attach grab sample results and submit them with this form.</p>
	<p>Date continuous monitoring equipment failed: / /</p> <p>Date it was returned to service: / /</p>

Printed Name: **MARJORIE HANSEN** Title: **OWNER** Operator Certification #: _____
 Signature: *Marjorie Hansen* Phone #: **(541) 997-3254** OR
 Date: **10/4/22** Small Groundwater System