

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

System Name TRIANGLE LAKE CHARTER SCHOOL

PWS ID# 41 90566



Month/Year FEB/2025

Entry Point: SOUTH KITCHEN SINK

Required Minimum Residual 0.2 mg/L

Date	Time AM	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1	SAT			NO SCHOOL
2	SUN			NO SCHOOL
3	5:30		.72	
4	5:30		.73	
5	5:30		.70	
6	5:30		.71	
7	FRI			NO SCHOOL
8	SAT			NO SCHOOL
9	SUN			NO SCHOOL
10	5:30		.68	
11	5:30		.62	
12	5:30		.67	
13	5:30		.70	
14	FRI			NO SCHOOL
15	SAT			NO SCHOOL
16	SUN			NO SCHOOL
17	MON			PRESIDENTS DAY NO SCHOOL
18	5:30		.65	
19	5:30		.62	
20	5:30		.60	
21	6:00		.61	
22	SAT			NO SCHOOL
23	SUN			NO SCHOOL
24	5:30		.58	
25	5:30		.62	
26	5:30		.62	
27	5:30		.65	
28	FRI			NO SCHOOL
29				
30				
31				

Was the chlorine residual ever less than the required minimum residual of 0.2 mg/L? ☐ Yes ☒ No

If yes, what was the longest time period until the required level was restored?
notified by end of next business day.

hours – If > 4 hours, Drinking Water Program to be

GWS Serving 3,300 or Fewer

If yes, did you monitor every four hours until the residual returned to mg/L as required? ☐ Yes ☐ No

Attach those results and submit them with this form.

GWS Serving More Than 3,300

Did continuous monitoring equipment fail at any time this reporting month? ☐ Yes ☐ No

If yes, were grab samples collected every four hours until the continuous monitoring equipment was returned to service as required? ☐ Yes ☐ No

Attach grab sample results and submit them with this form.

Date continuous monitoring equipment failed:

/ /

Date it was returned to service:

/ /

Printed Name: SHANE BENSCOTER

Title:
MAINTENANCE/FACILITIES

Operator Certification #:

Signature:

Phone #: (541) 925-2175

OR

Date: 3/3/2025

Small Groundwater System ☐

Return by 10th of following month by either email dlwp.dmce@state.or.us; fax 971-673-0694;
or mail to Drinking Water Services, PO Box 14350, Portland, OR 97293-0350.