

October 2022

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

System Name Coast Marina		PWS ID# 41 91839	
Month/Year 10 2022		Entry Point: A	
		Required Minimum Residual 1.4 mg/L	

Date	Time	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1	12:00		1.5	
2	10:44		1.4	
3	10:15		1.4	
4	10:22		1.4	
5	10:41		1.4	
6	10:45		1.4	
7	11:17		1.4	
8	10:45		1.4	
9	11:29		1.4	
10	11:17		1.4	
11	11:29		1.4	
12	11:12		1.4	
13	11:09		1.4	
14	10:44		1.3	
15	11:00		1.5	
16	11:21		1.4	
17	11:09		1.4	
18	11:17		1.5	
19	11:27		1.4	
20	10:29		1.4	
21	10:40		1.4	
22	11:00		1.4	
23	10:28		1.4	
24	11:22		1.5	
25	11:07		1.4	
26	10:41		1.4	
27	10:49		1.4	
28	10:42		1.4	
29	10:15		1.4	
30	11:20		1.4	
31	11:30		1.4	

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.

GWS Serving 3,300 or Fewer 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 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? <input type="checkbox"/> Yes <input type="checkbox"/> No 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 Attach grab sample results and submit them with this form.	Date continuous monitoring equipment failed: / / Date it was returned to service: / /
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Printed Name: Lindy Kern Title: Manager Operator Certification #: _____
 Signature: Lindy Kern Phone #: () 541-590-5157 OR
 Date: 11/11/2022 Small Groundwater System December 19, 2012

Faxed and emailed 11/1/2022
 Lindy