

Monthly Disinfection Report for Ground Water Systems

System Name Ray's food place #71

PWS ID# 41 94437

Month/Year April 2025 Entry Point: A

Required Minimum Residual .5 mg/L

Date	Time	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1	7:53	A		3.2
2	7:57	A		3.2
3	7:52	A		2.0
4	7:30	A		3.2
5	6:32	A		3.4
6	7:20	A		2.6
7	7:50	A		3.0
8	8:01	A		3.0
9	7:56A	A		3.0
10	7:16A	A		3.0
11	7:15A	A		3.0
12	7:15A	A		2.9
13	8:00	A		3.4
14	7:45	A		3.4
15	8:17	A		3.4
16	7:32	A		3.2
17	7:16	A		2.7
18	8:30	A		2.4
19	7:16	A		2.9
20	7:23	A		2.9
21	7:46	A		3.0
22	6:50	A		3.0
23	12:30	A		2.9
24	7:20A	A		3.0
25	7:10	A		3.0
26	7:25	A		3.0
27	7:11	A		2.0
28	7:45	A		3.2
29	7:32	A		3.4
30	8:01	A		3.4
31				

Was the chlorine residual ever less than the required minimum residual of .5 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: ROBERTASH

Title: Manager

Operator Certification #:

Signature: 

Phone #: (571) 359-1466

OR

Date: 5/10/25

Small Groundwater System ☐