

OHA - Drinking Water Program - Turbidity Monitoring Report Form County: Linn
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

System Name: ALBANY, CITY OF ID #: OR4100012 WTP:-WTP-B Month/Year: 1/2022

DAY	12 AM	4 AM	8 AM	NOON	4 PM	8 PM	Highest Reading of the Day (1)
	[NTU]	[NTU]	[NTU]	[NTU]	[NTU]	[NTU]	[NTU]
1	0.03	0.03	0.03	0.03	0.03	0.03	0.03
2	0.03	0.03	0.03	0.03	0.03	0.03	0.03
3	0.03	0.03	0.03	0.03	0.03	0.03	0.03
4	0.03	0.03	0.03	0.03	0.03	0.03	0.03
5	0.03	0.03	0.03	0.03	0.03	0.03	0.03
6	0.03	0.03	0.03	0.03	0.03	0.03	0.03
7	0.03	0.03	0.03	0.03	0.03	0.03	0.03
8	0.03	0.03	0.03	0.03	0.03	0.03	0.03
9	0.03	0.03	0.03	0.03	0.03	0.03	0.03
10	0.03	0.03	0.03	0.03	0.03	0.03	0.03
11	0.03	0.03	0.03	0.03	0.03	0.03	0.03
12	0.03	0.03	0.03	0.03	0.03	0.03	0.03
13	0.03	0.03	0.03	0.03	0.03	0.03	0.03
14	0.03	0.03	0.03	0.03	0.03	0.03	0.03
15	0.03	0.03	0.03	0.03	0.03	0.03	0.03
16	0.03	0.03	0.03	0.03	0.03	0.03	0.03
17	0.03	0.03	0.03	0.03	0.03	0.03	0.03
18	0.03	0.03	0.03	0.03	0.03	0.03	0.03
19	0.03	0.03	0.03	0.03	0.03	0.03	0.03
20	0.03	0.03	0.03	Plant Off	0.03	0.03	0.03
21	0.03	0.03	0.03	0.03	0.03	0.03	0.03
22	0.03	0.03	0.03	0.03	0.03	0.03	0.03
23	0.03	0.03	0.03	0.03	0.03	0.03	0.03
24	0.03	0.03	0.03	0.03	0.03	0.03	0.03
25	0.03	0.03	0.03	0.03	0.03	0.03	0.03
26	0.03	0.03	0.03	0.03	0.03	0.03	0.03
27	0.03	0.03	Plant Off	Plant Off	0.03	0.03	0.03
28	0.03	0.03	0.03	0.03	0.03	0.03	0.03
29	0.03	0.03	0.03	0.03	0.03	0.03	0.03
30	0.03	0.03	0.04	0.04	0.03	0.03	0.04
31	0.03	0.03	0.03	0.03	0.03	0.03	0.03

Membrane Filtration		Monthly Summary (Answer Yes or No)	
95% of turbidity readings <= 1 NTU? (2)	Yes / No	CT's met everyday?	All CL2 residuals at entry point >= 0.2 mg/l?
All daily turbidity readings <= 5 NTU?	Yes / No	Yes / No	Yes / No
Notes:	PRINTED NAME: <i>Chuck Leffler</i>		DATE: <i>2-4-22</i>
	SIGNATURE: <i>[Signature]</i>		CERT #: <i>T-7158 FE</i>
	PHONE #: <i>541-990-1907</i>		

(1) Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous readings' maximum. (2) Filtered systems only.

OHA - Drinking Water Program - Surface Water Quality Data Form

System Name: ALBANY, CITY OF ID #: OR4100012 WTP:-WTP-B **Month/Year: 1/2022**

Date / Time	Minimum CL2 Residual @ 1st User (C) (1)	Contact Time (T)	Actual CT	Temp.	pH	Reqd. CT	CT Met? (1)	Peak Hourly Demand Flow (2)
	[ppm or mg/L]	[minutes]	C x T	[°C]		Use tables	Yes / No	[GPM]
1	1.25	244.2	305.3	3.9	8.17	46.0	Y	5,090
2	1.35	230.8	311.6	3.7	8.21	47.7	Y	5,211
3	1.24	222.0	275.3	4.1	8.25	46.3	Y	5,600
4	0.85	250.8	213.2	4.1	8.24	44.2	Y	4,996
5	0.95	240.6	228.6	4.8	8.15	41.0	Y	5,238
6	1.17	301.9	353.2	5.1	8.29	43.7	Y	4,595
7	1.06	212.9	225.7	5.9	8.32	41.2	Y	4,948
8	1.06	273.6	290.0	5.6	8.36	42.6	Y	4,707
9	1.24	272.6	338.0	5.0	8.31	44.6	Y	4,609
10	1.29	329.1	424.5	4.9	8.24	43.9	Y	3,878
11	1.21	221.0	267.4	5.5	8.24	41.7	Y	5,686
12	1.22	214.4	261.6	5.4	8.32	43.4	Y	5,131
13	1.15	266.3	306.2	5.2	8.34	44.0	Y	4,842
14	1.17	269.1	314.8	4.9	8.46	47.1	Y	4,611
15	1.17	261.5	306.0	4.9	8.41	46.2	Y	4,557
16	1.23	292.2	359.4	4.6	8.36	46.6	Y	3,882
17	1.22	272.8	332.8	4.5	8.33	46.5	Y	3,982
18	1.22	252.7	308.3	4.5	8.34	46.5	Y	4,524
19	1.22	231.0	281.8	5.0	8.35	45.0	Y	5,103
20	1.19	267.0	317.7	5.3	8.37	44.3	Y	3,960
21	1.12	209.3	234.4	4.9	8.39	45.8	Y	4,337
22	1.32	220.2	290.7	4.5	8.42	48.3	Y	4,107
23	1.27	258.9	328.8	4.3	8.29	46.7	Y	4,225
24	1.27	255.2	324.1	4.0	8.30	47.9	Y	3,945
25	1.19	325.5	387.3	3.8	8.25	46.9	Y	3,844
26	1.17	224.4	262.5	3.3	8.22	48.1	Y	4,889
27	1.17	262.5	307.1	3.0	8.22	49.3	Y	4,525
28	1.15	281.8	324.1	2.9	8.29	50.6	Y	4,110
29	1.17	309.5	362.1	2.9	8.29	50.6	Y	3,611
30	1.17	267.6	313.1	3.2	8.22	48.5	Y	4,582
31	1.15	276.7	318.2	4.1	8.18	44.5	Y	4,364

Signature: _____

Handwritten signature

Date: _____

2-4-22

Print Name: _____

Chuck Jeffers

Cert #: _____

T-7158 FE

(1) If Cl2 at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.
 (2) Prior to 11/2014, Peak Instantaneous Demand Flow is used.

Department of Human Services - Drinking Water Section

Membrane Integrity Report Form

Public Water System Name: Albany

PWS ID#: 41 00012 B

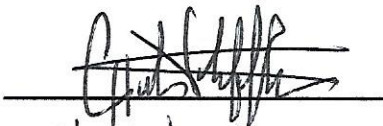
Month/Year:

1/ 2022

Albany/Millersburg Water Plant

Date	Membrane 1	Membrane 2	Membrane 3	Membrane 4
01/01/22	Pass	Pass	Pass	Pass
01/02/22	Pass	Pass	Pass	Pass
01/03/22	Pass	Pass	Pass	Pass
01/04/22	Pass	Pass	Pass	Pass
01/05/22	Pass	Pass	Pass	Pass
01/06/22	Pass	Pass	Pass	Pass
01/07/22	Pass	Pass	Pass	Pass
01/08/22	Pass	Pass	Pass	Pass
01/09/22	Pass	Pass	Pass	Pass
01/10/22	Pass	Pass	Pass	Pass
01/11/22	Pass	Pass	Pass	Pass
01/12/22	Pass	Pass	Pass	Pass
01/13/22	Pass	Pass	Pass	Pass
01/14/22	Pass	Pass	Pass	Pass
01/15/22	Pass	Pass	Pass	Pass
01/16/22	Pass	Pass	Pass	Pass
01/17/22	Pass	Pass	Pass	Pass
01/18/22	Pass	Pass	Pass	Pass
01/19/22	Pass	Pass	Pass	Pass
01/20/22	Pass	Pass	Pass	Pass
01/21/22	Pass	Pass	Pass	Pass
01/22/22	Pass	Pass	Pass	Pass
01/23/22	Pass	Pass	Pass	Pass
01/24/22	Pass	Pass	Pass	Pass
01/25/22	Pass	Pass	Pass	Pass
01/26/22	Pass	Pass	Pass	Pass
01/27/22	Pass	Pass	Pass	Pass
01/28/22	Pass	Pass	Pass	Pass
01/29/22	Pass	Pass	Pass	Pass
01/30/22	Pass	Pass	Pass	Pass
01/31/22	Pass	Pass	Pass	Pass

Signature: _____



Print Name: _____

Chuck Leffler

Date: _____

2-4-22

Cert. #: _____

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