

Membrane Filter Monthly Operating Report

County: **Linn**

System Name: **ALBANY, CITY OF**

PWS ID # **41-00012**

PlantID: **WTP-B**

Month/Year: **12/2023**

Minimum test pressure (applied || req'd): **15.8** psi || **11.4** psi

Day	CFE Daily Turbidity [NTU]	Highest CFE [NTU]	Highest IFE [NTU]	Highest PDR of the day [psi/min]	Lowest LRV of the day [log removal]	DIT Daily [Yes/No or Off]
1	0.019	0.020	0.052	0.33	4.51	Y
2	0.018	0.026	0.046	0.30	4.48	Y
3	0.018	0.019	0.048	0.31	4.48	Y
4	0.018	0.019	0.046	0.30	4.49	Y
5	0.018	0.022	0.048	0.32	4.50	Y
6	0.018	0.020	0.048	0.31	4.50	Y
7	0.018	0.067	0.065	0.32	4.49	Y
8	0.019	0.033	0.052	0.30	4.50	Y
9	0.018	0.022	0.056	0.32	4.52	Y
10	0.018	0.022	0.047	0.31	4.49	Y
11	0.018	0.024	0.054	0.31	4.51	Y
12	0.019	0.022	0.037	0.31	4.52	Y
13	0.019	0.078	0.048	0.32	4.52	Y
14	0.019	0.022	0.050	0.32	4.48	Y
15	0.019	0.022	0.050	0.32	4.50	Y
16	0.019	0.022	0.037	0.31	4.53	Y
17	0.018	0.020	0.046	0.32	4.52	Y
18	0.019	0.020	0.050	0.30	4.52	Y
19	0.019	0.020	0.048	0.31	4.54	Y
20	0.019	0.037	0.046	0.30	4.54	Y
21	0.019	0.020	0.052	0.31	4.51	Y
22	0.019	0.020	0.052	0.31	4.53	Y
23	0.019	0.020	0.032	0.31	4.53	Y
24	0.019	0.020	0.050	0.30	4.51	Y
25	0.019	0.020	0.061	0.31	4.54	Y
26	0.019	0.020	0.044	0.30	4.52	Y
27	0.018	0.022	0.056	0.31	4.51	Y
28	0.019	0.066	0.054	0.29	4.51	Y
29	0.019	0.020	0.061	0.30	4.54	Y
30	0.019	0.019	0.048	0.29	4.51	Y
31	0.019	0.020	0.039	0.29	4.54	Y

Compliance summary (operator to complete any blank fields)				
95% of daily turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Y / <input type="checkbox"/> N	All turbidity readings ≤ 5 NTU? <input checked="" type="checkbox"/> Y / <input type="checkbox"/> N	All IFE turbidity readings ≤ 0.15 NTU? <input checked="" type="checkbox"/> Y / <input type="checkbox"/> N	Performance std met? (PDR ≤ PDRMax, LRV ≥ LRC) <input checked="" type="checkbox"/> Y / <input type="checkbox"/> N	DIT Daily? <input checked="" type="checkbox"/> Y / <input type="checkbox"/> N
CT's met daily? <input checked="" type="checkbox"/> Y / <input type="checkbox"/> N	All Cl2 residual at EP ≥ 0.2 mg/L? <input checked="" type="checkbox"/> Y / <input type="checkbox"/> N	PDR ≤ PDRMax (###)? <input checked="" type="checkbox"/> Y / <input type="checkbox"/> N	LRV _{ambient} ≥ LRC (4.00)? <input checked="" type="checkbox"/> Y / <input type="checkbox"/> N	
PRINT NAME: <i>Chris Germond</i> SIGNATURE: <i>Chris Germond</i> NOTES:			DATE: <i>1/5/2024</i> WT CERT #: <i>7-08682</i> PHONE #: <i>541-709-2309</i>	

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: 12/2023

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	0.02	0.02	0.02	0.02	0.02	0.02	0.02
2	0.02	0.02	0.02	0.02	0.02	0.02	0.02
3	0.02	0.02	0.02	0.02	0.02	0.02	0.02
4	0.02	0.02	0.02	0.02	0.02	0.02	0.02
5	0.02	0.02	0.02	0.02	0.02	0.02	0.02
6	0.02	0.02	0.02	0.02	0.02	0.02	0.02
7	0.02	0.02	0.02	0.02	0.02	0.02	0.02
8	0.02	0.02	0.02	0.02	0.02	0.02	0.02
9	0.02	0.02	0.02	0.02	0.02	0.02	0.02
10	0.02	0.02	0.02	0.02	0.02	0.02	0.02
11	0.02	0.02	0.02	0.02	0.02	0.02	0.02
12	0.02	0.02	0.02	0.02	0.02	0.02	0.02
13	0.02	0.02	0.02	0.02	0.02	0.02	0.02
14	0.02	0.02	0.02	0.02	0.02	0.02	0.02
15	0.02	0.02	0.02	0.02	0.02	0.02	0.02
16	0.02	0.02	0.02	0.02	0.02	0.02	0.02
17	0.02	0.02	0.02	0.02	0.02	0.02	0.02
18	0.02	0.02	0.02	0.02	0.02	0.02	0.02
19	0.02	0.02	0.02	0.02	0.02	0.02	0.02
20	0.02	0.02	0.02	0.02	0.02	0.02	0.02
21	0.02	0.02	0.02	0.02	0.02	0.02	0.02
22	0.02	0.02	0.02	0.02	0.02	0.02	0.02
23	0.02	0.02	0.02	0.02	0.02	0.02	0.02
24	0.02	0.02	0.02	0.02	0.02	0.02	0.02
25	0.02	0.02	0.02	0.02	0.02	0.02	0.02
26	0.02	0.02	0.02	0.02	0.02	0.02	0.02
27	0.02	0.02	0.02	0.02	0.02	0.02	0.02
28	0.02	0.02	0.02	0.02	0.02	0.02	0.02
29	0.02	0.02	0.02	0.02	0.02	0.02	0.02
30	0.02	0.02	0.02	0.02	0.02	0.02	0.02
31	0.02	0.02	0.02	0.02	0.02	0.02	0.02

Membrane Filtration	Monthly Summary (Answer Yes or No)	
95% of turbidity readings <= 1 NTU? (2)	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	CT's met everyday?
All daily turbidity readings <= 5 NTU?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	All CL2 residuals at entry point >= 0.2 mg/l?
		<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
Notes:	PRINTED NAME: <i>Chris Germond</i>	
	SIGNATURE: <i>Chris Germond</i>	DATE: <i>1/5/2024</i>
	PHONE #: <i>541-704-2309</i>	CERT #: <i>T-08682</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: 12/2023

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	1.02	126.7	129.2	6.7	8.11	36.0	Y	6,731
2	0.76	136.6	103.8	7.3	8.12	33.6	Y	6,680
3	0.91	142.0	129.2	8.0	8.09	32.0	Y	6,696
4	0.56	141.5	79.2	9.4	8.03	27.5	Y	7,295
5	0.80	114.9	91.9	9.7	8.02	27.5	Y	7,507
6	0.97	142.1	137.8	9.8	8.09	28.7	Y	5,002
7	0.73	140.7	102.7	8.8	8.05	29.3	Y	5,425
8	0.96	145.2	139.4	8.4	8.06	31.2	Y	5,410
9	1.09	135.6	147.8	7.5	8.15	34.8	Y	5,743
10	1.15	115.8	133.2	7.7	8.15	34.6	Y	6,628
11	0.84	129.1	108.4	8.7	8.14	30.9	Y	4,452
12	1.09	112.6	122.7	8.7	8.12	31.8	Y	5,192
13	0.98	219.5	215.1	8.0	8.11	32.6	Y	5,950
14	0.93	198.2	184.3	8.1	8.08	31.7	Y	6,243
15	0.98	278.1	272.5	8.1	8.09	32.3	Y	3,538
16	1.11	181.0	200.9	7.6	8.14	34.3	Y	5,278
17	1.07	144.6	154.7	7.3	8.11	34.8	Y	6,702
18	1.11	157.9	175.3	7.1	8.09	34.9	Y	6,043
19	0.99	164.2	162.6	7.7	8.09	33.2	Y	6,235
20	1.12	123.6	138.4	8.6	8.10	31.8	Y	6,812
21	1.04	136.3	141.8	8.5	8.15	32.2	Y	6,204
22	1.14	142.5	162.5	7.9	8.20	34.6	Y	5,573
23	1.02	140.4	143.2	7.1	8.21	36.1	Y	5,631
24	0.91	140.3	127.7	6.8	8.14	35.5	Y	6,583
25	0.97	177.6	172.3	7.1	8.06	34.1	Y	5,796
26	1.00	163.8	163.8	7.9	8.06	32.4	Y	6,754
27	0.69	165.6	114.3	8.6	8.05	29.7	Y	5,368
28	0.81	150.8	122.1	8.4	8.06	30.7	Y	5,607
29	1.05	137.0	143.9	8.4	8.12	32.2	Y	5,888
30	0.61	136.2	83.1	8.7	8.05	29.1	Y	6,601
31	1.06	165.1	175.0	8.2	8.17	33.2	Y	6,289

Signature: Chris Germond Date: 1/5/2024
 Print Name: Chris Germond Cert #: F-08682

(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:

12/ 2023

Albany/Millersburg Water Plant

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

Signature: Chris Germond

Date: 1/5/2024

Print Name: Chris Germond

Cert. #: T-0868Z