

Membrane Filter Monthly Operating Report

County: **Linn**

System Name: **ALBANY, CITY OF**

PWS ID # **41-00012**

PlantID: **WTP-B**

Month/Year: **3/2024**

Minimum test pressure (applied || req'd): **15.7** 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	0.017	0.018	0.052	0.28	4.59	Y
2	0.017	0.057	0.039	0.90	4.60	Y
3	0.017	0.018	0.052	0.29	4.56	Y
4	0.017	0.018	0.035	0.29	4.53	Y
5	0.017	0.018	0.046	0.29	4.57	Y
6	0.017	0.018	0.052	0.34	4.54	Y
7	0.017	0.018	0.037	0.31	4.54	Y
8	0.017	0.017	0.050	0.30	4.56	Y
9	0.017	0.019	0.083	0.29	4.57	Y
10	0.017	0.020	0.041	0.29	4.59	Y
11	0.017	0.019	0.044	0.29	4.55	Y
12	0.017	0.018	0.046	0.29	4.56	Y
13	0.017	0.018	0.046	0.29	4.53	Y
14	0.017	0.019	0.052	0.29	4.56	Y
15	0.017	0.017	0.068	0.29	4.58	Y
16	0.017	0.017	0.048	0.28	4.56	Y
17	0.017	0.018	0.098	0.28	4.56	Y
18	0.017	0.018	0.061	0.33	4.56	Y
19	0.017	0.019	0.046	0.29	4.54	Y
20	0.017	0.017	0.044	0.29	4.62	Y
21	0.017	0.019	0.114	0.29	4.60	Y
22	0.017	0.019	0.052	0.28	4.56	Y
23	0.017	0.019	0.048	0.27	4.58	Y
24	0.017	0.017	0.039	0.27	4.58	Y
25	0.017	0.018	0.045	0.26	4.60	Y
26	0.017	0.017	0.052	0.26	4.62	Y
27	0.017	0.017	0.237	0.26	4.58	Y
28	0.017	0.017	0.046	0.26	4.60	Y
29	0.017	0.017	0.081	0.27	4.62	Y
30	0.017	0.017	0.043	0.26	4.58	Y
31	0.017	0.017	0.054	0.26	4.61	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 (0.7 psi/min)? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	LRVambient ≥ LRC (4.00)? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
PRINT NAME: <i>Scott LaRoque</i>			DATE: <i>4/4/24</i>	
SIGNATURE: <i>[Signature]</i>			WT CERT #: <i>T-9188</i>	
NOTES:			PHONE #: <i>541 570 5719</i>	

OHA - Drinking Water Program - Surface Water Quality Data Form

System Name: ALBANY, CITY OF ID #: OR4100012 WTP:-WTP-B	Month/Year: 3/2024
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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	0.79	109.7	86.7	6.7	8.15	35.4	Y	7,283
2	0.97	119.2	115.6	6.8	8.13	35.7	Y	6,692
3	1.06	141.9	150.4	6.6	8.14	36.7	Y	6,459
4	0.99	147.9	146.4	6.2	8.14	37.3	Y	6,274
5	1.02	156.5	159.6	6.5	8.13	36.6	Y	6,012
6	1.16	144.4	167.5	6.2	8.16	38.5	Y	5,170
7	1.13	117.0	132.2	6.2	8.16	38.2	Y	6,271
8	1.09	112.5	122.6	6.4	8.21	38.1	Y	7,167
9	1.04	133.4	138.7	7.6	8.21	34.9	Y	5,998
10	1.03	121.5	125.1	7.7	8.22	34.9	Y	7,377
11	0.99	76.6	75.8	7.9	8.26	34.8	Y	7,377
12	0.88	144.3	127.0	7.7	8.19	33.8	Y	5,848
13	0.76	125.8	95.6	7.4	8.21	34.4	Y	6,605
14	0.91	117.6	107.0	7.1	8.26	36.3	Y	7,283
15	1.06	116.2	123.2	7.4	8.30	37.0	Y	6,801
16	1.04	109.9	114.3	8.0	8.29	35.1	Y	7,136
17	1.04	138.4	143.9	8.5	8.23	33.3	Y	5,790
18	1.06	123.4	130.8	8.8	8.24	32.8	Y	6,389
19	1.04	122.1	127.0	9.1	8.25	32.1	Y	7,596
20	1.04	114.3	118.9	9.6	8.30	31.5	Y	7,114
21	1.03	113.7	117.1	9.3	8.34	32.7	Y	7,179
22	1.09	190.9	208.1	9.2	8.35	33.2	Y	6,007
23	1.06	163.0	172.8	9.0	8.23	32.3	Y	7,563
24	1.06	152.3	161.4	8.7	8.22	32.8	Y	6,478
25	1.13	166.2	187.8	8.7	8.24	33.1	Y	6,657
26	1.11	167.9	186.4	8.7	8.20	32.6	Y	6,643
27	1.06	179.0	189.7	8.7	8.25	33.2	Y	7,128
28	0.84	162.3	136.3	8.4	8.17	32.0	Y	7,502
29	0.92	155.9	143.4	7.7	8.15	33.5	Y	7,177
30	0.93	158.0	146.9	8.4	8.20	32.8	Y	8,656
31	1.12	156.2	174.9	8.6	8.24	33.6	Y	6,984

Signature: <u></u>	Date: <u>4/19/24</u>
Print Name: <u>Scott LaRoque</u>	Cert #: <u>T-7188</u>

(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.

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: 3/2024

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="radio"/> Yes <input type="radio"/> No	CT's met everyday? <input checked="" type="radio"/> Yes <input type="radio"/> No	All CL2 residuals at entry point >= 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No
All daily turbidity readings <= 5 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No		
Notes:	PRINTED NAME: <i>Scott LaRoque</i>	
	SIGNATURE: <i>[Signature]</i>	DATE: <i>4/4/24</i>
	PHONE #: <i>541 570 5719</i>	CERT #: <i>T-9188</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.

