

Membrane Filter Monthly Operating Report

County: **Linn**

System Name: **ALBANY, CITY OF**

PWS ID # **41-00012**

PlantID: **WTP-B**

Month/Year: **4/2024**

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	0.017	0.017	0.052	0.26	4.60	Y
2	0.017	0.017	0.058	0.25	4.59	Y
3	0.017	0.019	0.034	0.25	4.61	Y
4	0.017	0.019	0.052	0.44	4.49	Y
5	0.017	0.017	0.035	0.25	4.47	Y
6	0.017	0.017	0.050	0.25	4.58	Y
7	0.017	0.017	0.039	0.24	4.62	Y
8	0.017	0.024	0.056	0.25	4.60	Y
9	0.017	0.017	0.069	0.26	4.61	Y
10	0.017	0.017	0.044	0.26	4.60	Y
11	0.017	0.017	0.033	0.25	4.60	Y
12	0.017	0.017	0.048	0.24	4.61	Y
13	0.017	0.017	0.059	0.24	4.60	Y
14	0.017	0.017	0.041	0.24	4.62	Y
15	0.017	0.017	0.059	0.24	4.61	Y
16	0.017	0.019	0.045	0.24	4.58	Y
17	0.018	0.019	0.061	0.25	4.60	Y
18	0.018	0.019	0.061	0.25	4.59	Y
19	0.018	0.019	0.054	0.25	4.59	Y
20	0.018	0.019	0.063	0.25	4.57	Y
21	0.019	0.019	0.048	0.23	4.55	Y
22	0.018	0.019	0.084	0.23	4.50	Y
23	0.018	0.019	0.093	0.24	4.58	Y
24	0.019	0.019	0.037	0.25	4.56	Y
25	0.025	0.022	0.067	0.24	4.52	Y
26	0.019	0.031	0.091	0.25	4.48	Y
27	0.019	0.020	0.090	0.23	4.47	Y
28	0.019	0.020	0.056	0.26	4.46	Y
29	0.019	0.022	0.075	0.25	4.45	Y
30	0.019	0.020	0.067	0.26	4.47	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>Chris Germond</i>		DATE: <i>5/9/2024</i>		
SIGNATURE: <i>Chris Germond</i>		WT CERT #: <i>4-08682</i>		
NOTES:		PHONE #: <i>541-990-0748</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: 4/2024

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	Plant Off	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	Plant Off	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

Membrane Filtration	Monthly Summary (Answer Yes or No)	
95% of turbidity readings <= 1 NTU? (2) <input checked="" type="radio"/> Yes / No	CT's met everyday? <input checked="" type="radio"/> Yes / No	All CL2 residuals at entry point >= 0.2 mg/l? <input checked="" type="radio"/> Yes / No
All daily turbidity readings <= 5 NTU? <input checked="" type="radio"/> Yes / No		
Notes:	PRINTED NAME: Chris Germond	
	SIGNATURE: <i>Chris Germond</i>	DATE: 5/9/2024
	PHONE #: 541-990-0748	CERT #: 7-08682

(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: 4/2024
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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	1.10	155.8	171.4	8.8	8.24	32.8	Y	7,467
2	1.08	140.5	151.7	9.8	8.25	30.6	Y	7,756
3	1.10	157.0	172.7	10.4	8.26	29.7	Y	7,861
4	1.04	171.0	177.8	0.0	8.38	63.3	Y	7,602
5	0.91	166.6	151.6	8.3	8.21	32.8	Y	7,767
6	0.93	179.1	166.6	8.9	8.20	31.6	Y	6,876
7	1.01	151.9	153.4	8.9	8.24	32.3	Y	8,416
8	0.98	142.5	139.7	9.6	8.24	30.7	Y	7,691
9	1.06	141.0	149.5	9.9	8.31	31.1	Y	7,710
10	1.09	131.4	143.2	9.5	8.29	31.8	Y	8,246
11	1.04	152.8	158.9	10.2	8.38	31.3	Y	7,178
12	1.05	146.6	153.9	10.8	8.34	29.6	Y	8,457
13	1.02	168.0	171.4	10.2	8.29	30.1	Y	7,457
14	1.04	149.9	155.9	10.3	8.23	29.5	Y	8,947
15	1.00	159.5	159.5	10.6	8.26	29.0	Y	8,770
16	1.02	162.9	166.2	10.3	8.32	30.4	Y	7,739
17	1.02	143.7	146.6	9.9	8.29	30.9	Y	7,209
18	1.03	152.0	156.6	10.3	8.36	30.7	Y	7,720
19	1.04	159.9	166.3	11.0	8.34	29.3	Y	6,969
20	1.00	168.2	168.2	11.6	8.31	27.6	Y	7,679
21	1.04	183.5	190.8	10.9	8.31	29.0	Y	7,442
22	1.02	146.6	149.5	11.6	8.33	27.9	Y	6,563
23	1.03	133.0	137.0	11.9	8.31	27.1	Y	7,595
24	1.04	143.3	149.0	12.4	8.37	26.7	Y	7,689
25	1.00	125.6	125.6	11.8	8.28	27.0	Y	8,386
26	1.09	148.5	161.9	11.7	8.22	26.8	Y	6,935
27	1.04	171.1	177.9	10.9	8.23	28.2	Y	7,210
28	1.02	162.5	165.8	10.6	8.16	28.1	Y	7,449
29	1.00	134.8	134.8	10.1	8.20	29.3	Y	7,525
30	1.04	163.5	170.0	9.5	8.26	31.3	Y	7,559

Signature: <u>Chris Germond</u>	Date: <u>5/9/2024</u>
Print Name: <u>Chris Germond</u>	Cert #: <u>T-08682</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.

Department of Human Services - Drinking Water Section

Membrane Integrity Report Form

Public Water System Name: Albany

PWS ID#: 41 00012 B

Month/Year:

1/ 2024

Albany/Millersburg Water Plant

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

Signature: Chris Germond

Date: 5/9/2024

Print Name: Chris Germond

Cert. #: T-08682