

Membrane Filter Monthly Operating Report

County: Linn

System Name: ALBANY, CITY OF

PWS ID # 41-00012

PlantID: WTP-B

Month/Year: 6/2024

Minimum test pressure (applied || req'd): 15.5 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	0.020	0.020	0.039	0.28	4.35	Y
2	0.020	0.020	0.039	0.27	4.42	Y
3	0.020	0.020	0.039	0.27	4.35	Y
4	0.020	0.020	0.037	0.28	4.45	Y
5	0.020	0.022	0.041	0.28	4.50	Y
6	0.020	0.020	0.086	0.28	4.43	Y
7	0.023	0.026	0.049	0.28	4.41	Y
8	0.042	0.029	0.037	0.27	4.41	Y
9	0.021	0.043	0.043	0.27	4.41	Y
10	0.021	0.057	0.037	0.27	4.41	Y
11	0.020	0.024	0.037	0.29	4.39	Y
12	0.020	0.020	0.043	0.32	4.39	Y
13	0.020	0.020	0.039	0.26	4.38	Y
14	0.020	0.020	0.037	0.26	4.40	Y
15	0.020	0.020	0.039	0.27	4.38	Y
16	0.020	0.020	0.053	0.27	4.41	Y
17	0.020	0.030	0.054	0.26	4.39	Y
18	0.020	0.020	0.039	0.26	4.35	Y
19	0.020	0.020	0.039	0.25	4.35	Y
20	0.020	0.020	0.045	0.25	4.35	Y
21	0.020	0.022	0.039	0.26	4.31	Y
22	0.020	0.020	0.041	0.26	4.29	Y
23	0.020	0.022	0.039	0.28	4.30	Y
24	0.020	0.022	0.039	0.28	4.26	Y
25	0.020	0.022	0.041	0.27	4.30	Y
26	0.020	0.020	0.039	0.26	4.31	Y
27	0.021	0.054	0.039	0.29	4.10	Y
28	0.021	0.033	0.065	0.29	4.29	Y
29	0.020	0.022	0.063	0.29	4.28	Y
30	0.021	0.022	0.062	0.29	4.29	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: <u>Chris Germond</u>		DATE: <u>7/3/2024</u>		
SIGNATURE: <u>Chris Germond</u>		WT CERT #: <u>T-28682</u>		
NOTES:		PHONE #: <u>541-704-2309</u>		

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: 6/2024

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	0.03	0.03
8	0.02	0.02	0.02	0.02	0.02	0.00	0.02
9	0.03	0.02	0.02	0.02	0.02	0.04	0.04
10	0.02	0.04	0.02	0.02	0.02	0.02	0.04
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	Plant Off	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 / <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: Chris Germond	
	SIGNATURE: <i>Chris Germond</i>	DATE: 7/3/2024
	PHONE #: 541-704-2309	CERT #: F-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: 6/2024**

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	0.95	181.1	172.0	14.5	8.31	22.7	Y	7,265
2	1.06	179.1	189.8	13.2	8.36	25.5	Y	7,991
3	0.87	179.4	156.1	12.4	8.36	26.1	Y	8,977
4	0.72	165.3	119.0	11.7	8.24	25.8	Y	7,626
5	0.79	157.2	124.2	12.6	8.20	24.4	Y	8,136
6	0.90	151.2	136.1	14.4	8.20	21.8	Y	7,829
7	0.90	147.8	133.0	14.7	8.22	21.7	Y	8,109
8	0.95	144.5	137.3	13.8	8.30	23.7	Y	8,382
9	1.02	124.9	127.4	14.0	8.21	22.8	Y	8,347
10	1.02	159.4	162.6	14.6	8.21	21.9	Y	7,950
11	1.04	148.0	153.9	14.8	8.18	21.5	Y	8,736
12	0.98	138.1	135.3	14.9	8.18	21.3	Y	8,391
13	0.91	152.4	138.7	15.4	8.13	20.0	Y	9,558
14	0.92	162.1	149.1	15.5	8.22	20.5	Y	8,196
15	0.91	157.3	143.1	15.2	8.33	21.7	Y	8,196
16	0.92	169.4	155.8	14.1	8.18	22.1	Y	7,444
17	1.01	167.5	169.2	13.5	8.07	22.3	Y	7,940
18	0.97	138.7	134.5	13.7	8.24	23.4	Y	7,909
19	1.02	170.0	173.4	15.2	8.08	20.1	Y	6,984
20	0.99	152.0	150.5	16.6	8.04	18.0	Y	7,929
21	0.91	155.8	141.8	17.3	8.02	16.9	Y	8,099
22	0.89	175.1	155.8	17.5	8.05	16.8	Y	7,403
23	0.93	146.2	136.0	17.6	8.05	16.8	Y	8,501
24	0.99	125.5	124.2	15.7	8.26	20.7	Y	8,958
25	1.03	126.0	129.8	16.3	8.10	18.8	Y	8,591
26	1.04	144.9	150.7	16.3	8.03	18.4	Y	8,453
27	0.96	136.6	131.1	15.0	8.37	22.5	Y	8,633
28	1.00	136.2	136.2	14.1	8.37	24.0	Y	9,203
29	0.93	149.4	138.9	16.2	8.14	19.1	Y	8,484
30	0.93	139.3	129.5	16.6	8.09	18.1	Y	9,539

Signature: Chris Germond Date: 7/3/2024
 Print Name: Chris Germond Cert #: T-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:

6/ 2024

Albany/Millersburg Water Plant

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

Signature: Chris Germond

Date: 7/3/2024

Print Name: Chris Germond

Cert. #: T-08682