

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: COOS

Conventional or Direct Filtration

Month/Year: Feb-22

System Name: Bandon, City of ID#: 4100074 WTP : TP -

Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day ¹ [NTU]
1	OFF	0.03	0.05	0.07	0.03	0.03	0.07
2	OFF	0.03	0.03	0.03	0.03	OFF	0.03
3	OFF	0.03	0.03	0.03	0.03	OFF	0.03
4	OFF	0.03	0.04	0.03	0.03	OFF	0.04
5	OFF	0.05	0.04	0.03	OFF	OFF	0.05
6	OFF	OFF	0.03	0.03	OFF	OFF	0.03
7	OFF	OFF	0.03	0.03	0.03	OFF	0.03
8	OFF	0.04	0.04	0.05	0.04	0.03	0.05
9	OFF	OFF	0.06	0.06	0.04	OFF	0.06
10	OFF	OFF	0.04	0.03	0.03	OFF	0.04
11	OFF	0.03	0.04	0.04	0.04	0.03	0.04
12	OFF	OFF	0.03	0.03	0.03	OFF	0.03
13	OFF	0.03	0.03	0.03	0.03	OFF	0.03
14	OFF	0.03	0.03	0.03	0.03	OFF	0.03
15	OFF	0.03	0.04	0.03	0.03	OFF	0.04
16	OFF	0.03	0.04	0.03	0.03	0.03	0.04
17	OFF	0.03	0.03	0.03	OFF	OFF	0.03
18	OFF	0.03	0.03	0.03	0.03	OFF	0.03
19	OFF	OFF	0.04	0.03	0.03	OFF	0.04
20	OFF	0.03	0.04	0.03	0.03	OFF	0.04
21	OFF	0.04	0.05	0.04	0.04	OFF	0.05
22	OFF	0.04	0.04	0.04	0.04	0.04	0.04
23	OFF	OFF	0.04	0.04	0.04	OFF	0.04
24	OFF	0.04	0.05	0.04	0.05	OFF	0.05
25	OFF	0.05	0.07	0.06	0.05	OFF	0.07
26	OFF	OFF	0.06	0.05	0.05	OFF	0.06
27	OFF	OFF	0.07	0.06	0.06	OFF	0.07
28	OFF	OFF	0.07	0.05	0.04	OFF	0.07
29							
30							
31							

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No		
All turbidity readings < IFE ² triggers <input checked="" type="radio"/> Yes / <input type="radio"/> No		

Notes:

PRINTED NAME: JAMES J. YOURAVISH

SIGNATURE: *[Signature]* DATE: 3-1-2022

PHONE #: (541)-347-3007 CERT #: T-09155

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² IFE = Individ. Filter Eff. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

System Name: Bandon, City of ID#: 4100074 Month/Year: Feb-22						WTP - : Disinfection <i>Giardia</i> Log Inactiv: 0.5		
Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.94	445	418.3	9.0	7.79	27.1	YES	1630
2	0.96	445	427.2	8.9	7.75	26.9	YES	1790
3	0.95	445	422.8	8.9	7.76	27.0	YES	1065
4	0.93	445	413.9	8.3	7.77	28.1	YES	603
5	0.91	445	405.0	9.0	7.79	27.0	YES	647
6	0.9	445	400.5	8.6	7.82	28.0	YES	503
7	0.87	445	387.2	8.9	7.79	27.0	YES	608
8	0.84	445	373.8	9.5	7.80	26.0	YES	880
9	0.83	445	369.4	9.6	7.78	25.6	YES	1145
10	0.82	445	364.9	9.3	7.76	25.9	YES	736
11	0.8	445	356.0	10.0	7.75	24.5	YES	579
12	0.8	445	356.0	10.1	7.70	24.0	YES	616
13	0.8	445	356.0	10.1	7.66	23.6	YES	577
14	0.8	445	356.0	10.3	7.66	23.3	YES	955
15	0.8	445	356.0	10.1	7.64	23.5	YES	1542
16	0.81	445	360.5	10.0	7.64	23.6	YES	1508
17	0.84	445	373.8	9.9	7.67	24.1	YES	1264
18	0.83	445	369.4	10.0	7.71	24.3	YES	583
19	0.83	445	369.4	10.0	7.75	24.6	YES	583
20	0.8	445	356.0	10.0	7.82	25.2	YES	558
21	0.77	445	342.7	9.9	7.81	25.2	YES	549
22	0.75	445	333.8	9.8	7.80	25.2	YES	1620
23	0.69	445	307.1	9.4	7.73	25.1	YES	1501
24	0.67	445	298.2	9.4	7.74	25.1	YES	733
25	0.64	445	284.8	9.4	7.73	24.9	YES	581
26	0.61	445	271.5	8.7	7.75	26.2	YES	542
27	0.58	445	258.1	8.8	7.72	25.7	YES	626
28	0.56	445	249.2	8.8	7.71	25.5	YES	530
29		445					NO	
30		445					NO	
31		445					NO	

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.