

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: COOS

Conventional or Direct Filtration

Month/Year: May-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	0.05	0.05	0.05	OFF	OFF	0.05
2	OFF	0.05	0.05	0.05	0.04	OFF	0.05
3	OFF	OFF	0.05	0.04	0.04	OFF	0.05
4	OFF	OFF	0.04	0.04	0.04	OFF	0.04
5	OFF	OFF	0.04	0.04	0.04	OFF	0.04
6	OFF	0.04	0.04	0.04	OFF	OFF	0.04
7	OFF	0.05	0.06	0.05	0.04	OFF	0.06
8	OFF	0.04	0.06	0.04	0.04	OFF	0.06
9	OFF	OFF	0.04	0.04	0.04	OFF	0.04
10	OFF	OFF	0.04	0.04	0.04	OFF	0.04
11	OFF	0.05	0.04	0.04	OFF	OFF	0.05
12	OFF	0.05	0.03	0.03	OFF	OFF	0.05
13	OFF	0.04	0.04	0.04	OFF	OFF	0.04
14	OFF	0.08	0.04	0.04	OFF	OFF	0.08
15	OFF	0.08	0.04	0.04	0.04	OFF	0.08
16	OFF	0.09	0.04	0.04	0.04	OFF	0.09
17	OFF	0.12	0.06	0.04	0.04	OFF	0.12
18	OFF	0.04	0.05	0.05	OFF	OFF	0.05
19	OFF	0.06	0.07	0.06	0.06	OFF	0.07
20	OFF	0.07	0.07	0.07	OFF	OFF	0.07
21	OFF	0.07	0.07	0.07	0.05	OFF	0.07
22	OFF	OFF	0.07	0.06	0.05	OFF	0.07
23	OFF	0.06	0.06	0.06	0.05	OFF	0.06
24	OFF	0.06	0.06	0.06	0.05	OFF	0.06
25	OFF	0.07	0.07	0.06	0.05	OFF	0.07
26	OFF	0.08	0.08	0.06	0.06	OFF	0.08
27	OFF	0.06	0.07	0.06	0.05	OFF	0.07
28	OFF	0.06	0.07	0.06	OFF	OFF	0.07
29	OFF	0.06	0.06	0.06	0.05	OFF	0.06
30	OFF	0.06	0.06	0.05	0.04	OFF	0.06
31	OFF	0.05	0.05	0.04	0.04	OFF	0.05

Conventional or Direct Filtration

Monthly Summary (Answer Yes or No)

95% of 4-hour turbidity readings $\leq$ 0.3 NTU?

Yes / No

All 4-hour turbidity readings $\leq$ 1 NTU?

Yes / No

All turbidity readings < IFE² triggers

Yes / No

CT's met everyday?
(see back)

Yes / No

All Cl₂ residual at entry point
 $\geq$ 0.2 mg/l?

Yes / No

Notes:

PRINTED NAME: JAMES J. YOURAVISH

SIGNATURE:

DATE: 6-6-22

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 Effl. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - :

System Name:		Bandon, City of		ID#: 4100074	Month/Year:	May-22	Disinfection <i>Giardia</i> Log Inactiv:	0.5
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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	0.6	424	254.4	12.6	7.39	17.6	YES	616
2	0.62	424	262.9	12.8	7.35	17.2	YES	642
3	0.64	424	271.4	12.8	7.31	17.0	YES	628
4	0.68	424	288.3	12.8	7.48	18.2	YES	617
5	0.7	424	296.8	13.1	7.33	16.9	YES	566
6	0.71	424	301.0	12.8	7.49	18.3	YES	628
7	0.7	424	296.8	12.8	7.47	18.1	YES	896
8	0.71	424	301.0	12.9	7.33	17.1	YES	565
9	0.7	424	296.8	12.8	7.42	17.8	YES	664
10	0.69	424	292.6	12.8	7.44	17.9	YES	698
11	0.62	424	262.9	12.8	7.31	16.9	YES	932
12	0.57	424	241.7	12.7	7.19	16.2	YES	551
13	0.52	424	220.5	12.6	7.22	16.4	YES	547
14	0.49	424	207.8	12.5	7.23	16.5	YES	535
15	0.44	424	186.6	12.6	7.29	16.7	YES	536
16	0.43	424	182.3	12.7	7.26	16.4	YES	612
17	0.41	424	173.8	13.0	7.87	20.1	YES	822
18	0.41	424	173.8	13.1	7.89	20.1	YES	598
19	0.39	424	165.4	13.2	7.83	19.5	YES	611
20	0.4	424	169.6	13.3	7.83	19.4	YES	700
21	0.37	424	156.9	13.5	7.83	19.0	YES	636
22	0.35	424	148.4	13.8	7.80	18.4	YES	600
23	0.37	424	156.9	13.9	7.80	18.3	YES	841
24	0.4	424	169.6	14.1	7.79	18.1	YES	690
25	0.47	424	199.3	14.4	7.78	17.8	YES	607
26	0.56	424	237.4	14.6	7.77	17.7	YES	587
27	0.61	424	258.6	14.8	7.77	17.6	YES	929
28	0.76	424	322.2	14.9	7.87	18.4	YES	555
29	0.78	424	330.7	14.8	7.88	18.6	YES	549
30	0.82	424	347.7	14.7	7.92	19.1	YES	658
31	0.82	424	347.7	14.7	7.95	19.3	YES	748

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

Revised October 2013