

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: COOS

Conventional or Direct Filtration

Month/Year: Aug-23

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	0.03	0.03	0.03	OFF	0.03	
2	0.03	0.03	0.03	0.03	0.03	OFF	0.03	
3	OFF	0.03	0.03	0.03	0.03	0.03	0.03	
4	OFF	0.03	0.03	0.03	0.03	OFF	0.03	
5	OFF	0.04	0.03	0.03	0.03	0.03	0.04	
6	OFF	0.04	0.04	0.03	0.03	0.03	0.04	
7	OFF	0.03	0.03	0.03	0.03	OFF	0.03	
8	OFF	0.03	0.03	0.03	0.03	OFF	0.03	
9	OFF	0.03	0.03	0.03	0.03	0.03	0.03	
10	OFF	0.03	0.04	0.03	0.03	0.03	0.04	
11	0.03	0.04	0.03	0.03	0.03	0.03	0.04	
12	OFF	0.03	0.03	0.03	0.03	OFF	0.03	
13	OFF	0.03	0.03	0.03	0.03	0.03	0.03	
14	OFF	0.03	0.03	0.03	0.03	OFF	0.03	
15	OFF	0.03	0.03	0.03	0.03	OFF	0.03	
16	0.03	0.03	0.04	0.03	0.03	0.03	0.04	
17	OFF	0.04	0.05	0.03	0.03	0.03	0.05	
18	OFF	0.03	0.03	0.03	0.03	OFF	0.03	
19	0.03	0.03	0.03	0.03	0.03	OFF	0.03	
20	0.03	0.04	0.03	0.03	0.03	OFF	0.04	
21	OFF	0.04	0.03	0.03	0.03	OFF	0.04	
22	OFF	0.05	0.04	0.04	0.03	0.03	0.05	
23	0.03	0.05	0.04	0.04	0.03	OFF	0.05	
24	OFF	0.04	0.04	0.03	0.03	OFF	0.04	
25	OFF	0.04	0.04	0.03	0.03	OFF	0.04	
26	0.04	0.04	0.03	0.03	0.03	OFF	0.04	
27	0.03	0.04	0.03	0.03	0.03	OFF	0.04	
28	0.03	0.04	0.04	0.03	0.03	OFF	0.04	
29	0.03	0.03	0.04	0.03	0.03	0.03	0.04	
30	OFF	0.03	0.03	0.03	0.03	0.03	0.03	
31	OFF	0.03	0.03	0.03	OFF	OFF	0.03	

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

Notes:	PRINTED NAME: JAMES J. YOURAVISH	
	SIGNATURE: <i>[Signature]</i>	9-1-2023
	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

System Name: Bandon, City of				ID#: 4100074	Month/Year: Aug-23	WTP - : Disinfection <i>Giardia</i> Log Inactiv: 0.5	
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
1	0.73	424	309.5	16.6	7.60	14.8	YES	1143
2	0.74	424	313.8	16.3	7.51	14.6	YES	982
3	0.74	424	313.8	16.3	7.62	15.3	YES	1032
4	0.75	424	318.0	16.6	7.41	13.8	YES	1020
5	0.72	424	305.3	16.7	7.39	13.6	YES	1011
6	0.75	424	318.0	16.9	7.51	14.1	YES	733
7	0.73	424	309.5	16.9	7.55	14.3	YES	1107
8	0.71	424	301.0	17.0	7.57	14.2	YES	1021
9	0.74	424	313.8	16.7	7.54	14.4	YES	870
10	0.73	424	309.5	17.0	7.44	13.6	YES	1172
11	0.74	424	313.8	16.8	7.58	14.5	YES	1216
12	0.77	424	326.5	17.4	7.49	13.6	YES	870
13	0.76	424	322.2	17.3	7.44	13.4	YES	889
14	0.76	424	322.2	17.0	7.48	13.9	YES	819
15	0.77	424	326.5	16.9	7.35	13.3	YES	1026
16	0.77	424	326.5	16.9	7.42	13.7	YES	1232
17	0.79	424	335.0	16.6	7.51	14.4	YES	1025
18	0.79	424	335.0	16.6	7.46	14.2	YES	1001
19	0.79	424	335.0	16.8	7.53	14.4	YES	810
20	0.8	424	339.2	16.7	7.47	14.1	YES	803
21	0.79	424	335.0	16.6	7.43	14.0	YES	901
22	0.8	424	339.2	16.5	7.45	14.2	YES	1034
23	0.78	424	330.7	16.3	7.54	14.9	YES	853
24	0.76	424	322.2	16.2	7.54	14.9	YES	1172
25	0.75	424	318.0	16.0	7.51	15.0	YES	837
26	0.74	424	313.8	15.9	7.43	14.6	YES	990
27	0.73	424	309.5	16.3	7.40	14.0	YES	870
28	0.72	424	305.3	15.7	7.47	15.0	YES	1028
29	0.72	424	305.3	15.8	7.44	14.7	YES	834
30	0.71	424	301.0	15.4	7.52	15.6	YES	1077
31	0.69	424	292.6	15.9	7.47	14.7	YES	792

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

Revised October 2013