OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: COOS

Month/Year:

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	0.07	0.04	0.03	0.03	OFF	0.07
2	OFF	0.04	0.03	0.03	OFF	OFF	0.04
3	OFF	0.04	0.07	0.03	0.03	0.03	0.07
4	OFF	0.04	0.04	0.03	0.03	OFF	0.04
5	OFF	0.04	0.03	0.03	OFF	OFF	0.04
6	OFF	0.07	0.03	0.03	0.03	0.03	0.07
7	0.16	0.09	0.03	0.03	OFF	OFF	0.16
8	OFF	0.04	0.03	0.03	OFF	OFF	0.04
9	OFF	0.07	0.03	0.03	0.03	0.02	0.07
10	OFF	0.08	0.03	0.03	0.03	OFF	0.08
11	OFF	0.03	0.03	0.03	OFF	OFF	0.03
12	0.04	0.06	0.03	0.03	0.03	OFF	0.06
13	OFF	0.04	0.07	0.03	0.03	OFF	0.07
14	0.04	OFF	OFF	0.09	0.03	0.03	0.09
15	OFF	0.07	0.03	0.03	0.03	OFF	0.07
16	OFF	0.04	0.06	0.03	0.03	OFF	0.06
17	OFF	0.04	0.03	0.03	OFF	OFF	0.04
18	OFF	0.04	0.03	0.07	0.03	0.03	0.07
19	OFF	0.04	0.07	0.04	0.03	OFF	0.07
20	OFF	0.04	0.03	0.03	OFF	OFF	0.04
21	OFF	0.04	0.03	0.03	0.03	OFF	0.04
22	OFF	0.08	0.03	0.03	0.03	0.03	0.08
23	OFF	0.04	0.13	0.03	0.03	0.03	0.13
24	OFF	0.04	0.03	0.03	0.03	OFF	0.04
25	OFF	0.08	0.04	0.03	0.03	0.03	0.08
26	OFF	0.04	0.13	0.03	0.03	0.03	0.13
27	OFF	0.04	0.03	0.03	0.03	OFF	0.04
28	0.04	0.03	0.03	0.03	0.03	OFF	0.04
29	OFF	0.07	0.04	0.03	0.03	0.03	0.07
30	OFF	0.10	0.05	0.03	0.03	0.03	0.10
31	OFF	0.04	0.03	0.03	OFF	0.04	0.04

Conventional or Direct Filtration

95% of 4-hour turbidity readings ≤ 0.3 NTU? **Yes / No**

All 4-hour turbidity readings ≤ 1 NTU? **Yes / No**

All turbidity readings < IFE[2] triggers **Yes / No**

Monthly Summary (Answer Yes or No)

CT's met everyday? (see back) **Yes / No**

All Cl2 residual at entry point ≥ 0.2 mg/l? **Yes / No**

Notes:

PRINTED NAME: JAMES J. YOURAVISH

SIGNATURE: [signature] 6-2-2025

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:	WTP - :	
				Disinfection *Giardia* 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	0.71	424	301.0	13.0	7.61	18.9	YES	662
2	0.73	424	309.5	13.4	7.63	18.6	YES	520
3	0.72	424	305.3	13.5	7.68	18.8	YES	526
4	0.74	424	313.8	13.5	7.69	18.9	YES	573
5	0.77	424	326.5	13.6	7.76	19.3	YES	800
6	0.77	424	326.5	13.6	7.79	19.5	YES	883
7	0.78	424	330.7	13.7	7.75	19.1	YES	914
8	0.8	424	339.2	13.7	7.68	18.7	YES	698
9	0.81	424	343.4	13.7	7.65	18.5	YES	744
10	0.82	424	347.7	14.0	7.60	17.8	YES	549
11	0.87	424	368.9	13.7	7.60	18.3	YES	505
12	0.84	424	356.2	13.9	7.65	18.3	YES	1404
13	0.81	424	343.4	13.5	7.62	18.5	YES	940
14	0.78	424	330.7	13.7	7.64	18.4	YES	580
15	0.73	424	309.5	13.7	7.65	18.3	YES	1026
16	0.73	424	309.5	13.5	7.64	18.5	YES	757
17	0.71	424	301.0	13.6	7.73	19.0	YES	557
18	0.68	424	288.3	13.6	7.68	18.5	YES	509
19	0.71	424	301.0	13.7	7.63	18.1	YES	1117
20	0.73	424	309.5	13.6	7.63	18.3	YES	594
21	0.76	424	322.2	13.5	7.64	18.6	YES	726
22	0.77	424	326.5	13.7	7.62	18.2	YES	1295
23	0.8	424	339.2	13.5	7.48	17.6	YES	758
24	0.81	424	343.4	13.7	7.46	17.2	YES	597
25	0.8	424	339.2	13.8	7.46	17.1	YES	616
26	0.77	424	326.5	13.9	7.35	16.3	YES	613
27	0.73	424	309.5	13.9	8.30	23.0	YES	834
28	0.69	424	292.6	14.0	8.18	21.7	YES	1001
29	0.69	424	292.6	14.1	8.17	21.5	YES	660
30	0.67	424	284.1	14.1	8.01	20.2	YES	850
31	0.67	424	284.1	14.4	7.98	19.6	YES	568

[3] If Cl_2 at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised October 2013