

OHA - Drinking Water Services - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Washington**
 Month/Year: **May/2025**

System Name: **Banks Water Department** ID#: **41 00076** WTP: **TP - A**

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	0.12	0.15	0.14	0.11	0.11	0.11	0.15
2	0.14	0.16	0.14	0.12	0.11	0.1	0.16
3	0.12	0.14	0.12	0.11	0.09	0.09	0.15
4	0.12	0.14	0.12	0.11	0.09	0.09	0.14
5	0.11	0.14	0.11	0.11	0.09	0.09	0.14
6	0.11	0.12	0.11	0.11	0.09	0.09	0.12
7	0.11	0.12	0.11	0.11	0.09	0.09	0.12
8	0.11	0.11	0.11	0.09	0.09	0.09	0.11
9	0.09	0.11	0.11	0.1	0.09	0.09	0.11
10	0.11	0.11	0.11	0.11	0.11	0.11	0.11
11	0.11	0.11	0.11	0.11	0.11	0.11	0.12
12	0.11	0.11	0.11	0.11	0.11	0.11	0.11
13	0.11	0.11	0.11	0.11	0.11	0.11	0.12
14	0.11	0.11	0.11	0.11	0.09	0.11	0.12
15	0.11	0.11	0.11	0.11	0.1	0.11	0.11
16	0.11	0.09	0.09	0.09	0.09	0.09	0.11
17	0.09	0.09	0.09	0.09	0.09	0.09	0.09
18	0.09	0.11	0.09	0.09	0.09	0.09	0.11
19	0.09	0.09	0.09	0.09	0.09	0.09	0.09
20	0.09	0.09	0.09	0.09	0.09	0.09	0.11
21	0.09	0.09	0.09	0.09	0.09	0.09	0.11
22	0.09	0.11	0.11	0.11	0.09	0.09	0.11
23	0.09	0.11	0.11	0.09	0.09	0.09	0.14
24	0.09	0.11	0.11	0.11	0.09	0.11	0.11
25	0.11	0.12	0.12	0.11	0.11	0.11	0.12
26	0.11	0.11	0.11	0.11	0.09	0.1	0.11
27	0.11	0.11	0.11	0.1	0.1	0.1	0.11
28	0.11	0.11	0.11	0.1	0.1	0.09	0.11
29	0.11	0.11	0.11	0.1	0.09	0.1	0.11
30	0.1	0.1	0.1	0.1	0.09	0.11	0.11
31	0.11	0.12	0.12	0.11	0.11	0.11	0.13

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? 2	<input checked="" type="radio"/> Yes <input type="radio"/> No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Notes:	PRINTED NAME: Troy Van Roekel	
	SIGNATURE: <i>Troy Van Roekel</i>	DATE: <i>6-3-25</i>
	PHONE #: 503-809-1349	T-9282 D-3805

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 Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP-:	A
Disinfection Giardia Log	
Inactiv:	1.0

System Name: Banks Water Department ID#: 41 00076 Month/Year:

Date / Time	Minimum Cl2 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	0.79	201	158.8	12.00	7.43	38.1	YES	124
2	0.78	201	156.8	12.56	7.44	36.8	YES	133
3	0.79	201	158.8	12.44	7.46	37.4	YES	126
4	0.85	201	170.9	11.83	7.49	39.6	YES	129
5	0.78	201	156.8	11.89	7.49	39.2	YES	128
6	0.77	201	154.8	12.50	7.49	37.6	YES	134
7	0.77	201	154.8	13.17	7.5	36.1	YES	136
8	0.78	201	156.8	12.56	7.52	37.9	YES	135
9	0.77	201	154.8	12.56	7.51	37.7	YES	159
10	0.77	201	154.8	12.94	7.53	37.0	YES	173
11	0.74	201	148.7	13.11	7.52	36.4	YES	173
12	0.74	201	148.7	12.94	7.51	36.6	YES	171
13	0.70	201	140.7	12.78	7.49	36.6	YES	150
14	0.67	201	134.7	12.89	7.43	35.4	YES	119
15	0.67	201	134.7	12.72	7.4	35.4	YES	121
16	0.71	201	142.7	12.67	7.38	35.4	YES	133
17	0.73	201	146.7	13.06	7.4	34.9	YES	120
18	0.74	201	148.7	12.83	7.39	35.3	YES	127
19	0.78	201	156.8	12.72	7.4	35.9	YES	126
20	0.79	201	158.8	12.78	7.42	36.0	YES	128
21	0.83	201	166.8	12.61	7.42	36.6	YES	130
22	0.82	201	164.8	13.00	7.43	35.8	YES	128
23	0.82	201	164.8	13.11	7.43	35.5	YES	141
24	0.80	201	160.8	13.17	7.43	35.3	YES	136
25	0.74	201	148.7	13.50	7.44	34.4	YES	146
26	0.80	201	160.8	13.83	7.45	34.0	YES	174
27	0.80	201	160.8	13.67	7.44	34.2	YES	167
28	0.83	201	166.8	14.39	7.4	32.3	YES	88
29	0.81	201	162.8	14.50	7.43	32.3	YES	57
30	0.75	201	150.8	14.33	7.43	32.5	YES	131
31	0.78	201	156.8	14.78	7.43	31.6	YES	136

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

Revised November 2022

Return by 10th of following month by email, fax, or mail to:
 dwp.dmce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350