

OHA - Drinking Water Program – Turbidity Monitoring Report Form . County: Washington  
 Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

System Name: BANKS WATER DEPARTMENT ID #: OR4100076 WTP: WTP-A Month/Year:   

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1	.069						
2	.090						
3	.127						
4	.168						
5	.186						
6	.157						
7	.132						
8	.118						
9	.110						
10	.101						
11	.096						
12	.087						
13	.088						
14	.089						
15	.085						
16	.090						
17	.100						
18	.100						
19	.165						
20	.108						
21	.109						
22	.101						
23	.098						
24	.100						
25	.100						
26	.060						
27	.060						
28	.063						
29							
30							
31							

low Sand/Membrane/DE Filtration/Unfiltered

Monthly Summary (Answer Yes or No)

5% of daily turbidity readings  $\leq$  1 NTU? <sup>2</sup> Yes / No  
 All daily turbidity readings  $\leq$  5 NTU? Yes / No

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

All Cl<sub>2</sub> residual at entry point  $\geq$  0.2 mg/l?  
Yes / No

Notes:

PRINTED NAME: **Thomas Tuski**

SIGNATURE: *Thomas Tuski*

DATE: 3-1-21

PHONE #: (503) 324-5112

CERT #: T-08847

Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous readings' maximum. <sup>2</sup> Filtered systems only.

FEBRUARY 2021

Date / Time	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp.	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
1/	.73	201	146	10.0	7.03	44	yes	240
2/	.85	170	170	10.1	7.41	44	yes	
3/	.86		172	11.3	7.20	44	yes	
4/	.85		170	10.3	7.21	44	yes	
5/	.90		180	10.8	7.53	37	yes	
6/	.90		180	8.4	7.20	58	yes	
7/	.76		152	8.5	6.96	49	yes	
8/	.91		182	8.8	7.22	70	yes	
9/	.97		194	9.8	7.26	45	yes	
10/	1.00		200	10.1	7.30	45	yes	
11/	1.03		206	9.7	7.33	72	yes	
12/	.94		198	9.3	7.58	70	yes	
13/	.99		198	7.7	7.35	60	yes	
14/	1.05		210	7.7	7.35	60	yes	
15/	1.00		210	7.3	7.65	72	yes	
16/	1.02		204	7.7	7.34	58	yes	
17/	.97		194	7.6	7.25	58	yes	
18/	.98		196	8.1	7.66	72	yes	
19/	.96		192	7.9	7.51	70	yes	
20/	.94		188	7.7	7.47	58	yes	
21/	.82		164	8.5	7.39	58	yes	
22/	.89		178	9.6	7.61	70	yes	
23/	.97		194	9.2	7.70	72	yes	
24/	.94		188	10.7	7.56	53	yes	
25/	1.04		208	9.6	7.55	72	yes	
26/	1.01		202	10.5	7.57	53	yes	
27/	1.05		210	9.5	7.61	70	yes	
28/	.99		198	9.2	7.52	70	yes	
29/								
30/								
31/								

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l OR CT not met, notify DWP by end of next business day.