

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

County: **Washington**  
 Month/Year: **September/2023**

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	0.08	0.09	0.09	0.1	0.09	0.11	0.11
2	0.1	0.11	0.09	0.09	0.09	0.09	0.11
3	0.11	0.11	0.1	0.09	0.09	0.09	0.12
4	0.09	0.09	0.09	0.1	0.09	0.09	0.11
5	0.09	0.09	0.09	0.09	0.08	0.09	0.12
6	0.08	0.08	0.09	0.08	0.08	0.08	0.09
7	0.08	0.09	0.08	0.08	0.08	0.08	0.11
8	0.09	0.09	0.09	0.08	0.08	0.08	0.09
9	0.08	0.09	0.09	0.09	0.09	0.08	0.1
10	0.09	0.09	0.09	0.09	0.09	0.08	0.09
11	0.09	0.09	0.09	0.09	0.09	0.09	0.12
12	0.14	0.09	0.09	0.09	0.09	0.09	0.14
13	0.09	0.09	0.09	0.09	0.09	0.09	0.11
14	0.09	0.11	0.11	0.1	0.09	0.09	0.11
15	0.11	0.11	0.11	0.11	0.05	0.05	0.13
16	0.05	0.05	0.05	0.05	0.04	0.05	0.06
17	0.05	0.05	0.05	0.05	0.04	0.05	0.06
18	0.05	0.05	0.05	0.05	0.04	0.05	0.06
19	0.05	0.05	0.05	0.05	0.05	0.04	0.07
20	0.05	0.05	0.05	0.05	0.05	0.05	0.05
21	0.05	0.05	0.05	0.05	0.05	0.05	0.06
22	0.05	0.05	0.05	0.05	0.05	0.05	0.15
23	0.05	0.06	0.05	0.07	0.07	0.05	0.07
24	0.05	0.05	0.05	0.06	0.05	0.05	0.07
25	0.05	0.05	0.05	0.05	0.06	0.05	0.07
26	0.05	0.05	0.05	0.05	0.05	0.05	0.05
27	0.05	0.05	0.05	0.04	0.04	0.05	0.06
28	0.05	0.04	0.04	0.04	0.04	0.04	0.05
29	0.04	0.04	0.04	0.04	0.04	0.04	0.05
30	0.04	0.04	0.04	0.04	0.04	0.04	0.05
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<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU? 2	<input checked="" type="radio"/> Yes / 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 / No	<input checked="" type="radio"/> Yes / No	<input checked="" type="radio"/> Yes / No
<b>Notes:</b>	<b>PRINTED NAME: Jeffrey Olson</b>		
	<b>SIGNATURE: <i>Jeffrey Olson</i></b>		<b>DATE: 10/09/2023</b>
	<b>PHONE #: (503)-554-8333 ex. 109</b>		<b>CERT #: T-766039</b>

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

System Name: Banks Water Department ID#: 41 00076 Month/Year: Disinfection Giardia Log Inactiv: 1.0

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	0.76	201	152.8	17.17	7.38	26.4	YES	215
2	0.72	201	144.7	17.44	7.38	25.8	YES	215
3	0.67	201	134.7	17.56	7.4	25.6	YES	215
4	0.70	201	140.7	17.56	7.38	25.5	YES	215
5	0.82	201	164.8	16.28	7.4	28.4	YES	215
6	0.77	201	154.8	16.06	7.41	28.8	YES	215
7	0.83	201	166.8	15.78	7.46	30.1	YES	215
8	0.83	201	166.8	16.06	7.48	29.7	YES	215
9	0.83	201	166.8	15.50	7.47	30.8	YES	215
10	0.81	201	162.8	15.61	7.47	30.5	YES	215
11	0.87	201	174.9	15.78	7.43	29.9	YES	215
12	0.86	201	172.9	16.50	7.46	28.8	YES	215
13	0.91	201	182.9	16.39	7.49	29.5	YES	215
14	0.86	201	172.9	16.28	7.5	29.6	YES	215
15	0.91	201	182.9	16.00	7.5	30.4	YES	215
16	0.86	201	172.9	16.39	7.52	29.6	YES	215
17	0.94	201	188.9	16.61	7.55	29.8	YES	215
18	0.89	201	178.9	15.89	7.55	31.1	YES	215
19	0.90	201	180.9	15.61	7.58	32.1	YES	215
20	0.85	201	170.9	15.17	7.58	32.8	YES	215
21	0.87	201	174.9	14.00	7.58	35.6	YES	215
22	0.82	201	164.8	14.50	7.6	34.5	YES	215
23	0.95	201	191.0	14.44	7.62	35.4	YES	215
24	0.96	201	193.0	14.06	7.61	36.2	YES	215
25	0.97	201	195.0	14.33	7.58	35.2	YES	215
26	0.96	201	193.0	14.44	7.58	34.9	YES	215
27	1.03	201	207.0	14.11	7.53	35.3	YES	215
28	1.01	201	203.0	14.44	7.53	34.5	YES	215
29	1.10	201	221.1	14.22	7.52	35.2	YES	215
30	1.08	201	217.1	14.28	7.49	34.6	YES	215
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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