

Skid 1 (R265)

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

County: Marion
 Month/Year: Jan/24

System Name: [] ID#: 41 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		0.01	0.01			0.01	0.01
2	0.01	0.01	0.01	0.01	0.01		0.01
3	0.01	0.01	0.01	0.01	0.01	0.01	0.01
4	0.01	0.01	0.01	0.01	0.01	0.01	0.01
5	0.01	0.01	0.01	0.01	0.01	0.01	0.01
6	0.01	0.01	0.01	0.01	0.01	0.01	0.01
7	0.01	0.01	0.01	0.01	0.01	0.01	0.01
8	~~~~~						not Reading
9	~~~~~						not Reading
10	~~~~~			0.01	0.01	0.01	0.01
11	0.01	0.01	0.01	0.01	0.01	0.01	0.01
12	0.01	0.01	0.01	0.01	0.01	0.01	0.01
13	0.01	0.01	0.01	0.01	0.01	0.01	0.01
14	0.01	0.01	0.01	0.01	0.01	0.01	0.01
15	0.01	0.01	0.01	0.01	0.01	0.01	0.01
16	0.01	0.01	0.01	0.01	0.01	0.01	0.01
17	0.01	0.01	0.01			0.01	0.01
18	0.01	0.01	0.01	0.01	0.01	0.01	0.01
19	0.01	0.01	0.01	0.01	0.01	0.01	0.01
20	0.01	0.01	0.01	0.01	0.01	0.01	0.01
21	0.01	0.01	0.01	0.01	0.01	0.01	0.01
22	0.01	0.01	0.01	0.01		0.01	0.01
23	0.01	0.01	0.01	0.01	0.01		0.01
24	0.01	0.01	0.01	0.01	0.01	0.01	0.01
25	0.01	0.01	0.01	0.01	0.01		0.01
26	0.01	0.01	0.01	0.01	0.01	0.01	0.01
27	0.01	0.01	0.01	0.01	0.01	0.01	0.01
28	0.01				0.01	0.01	0.01
29		0.01	0.01	0.01	0.01	0.01	0.01
30	0.01					0.01	0.01
31					0.01		0.01

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? ²	<u>Yes</u> / No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<u>Yes</u> / No	<u>Yes</u> / No	<u>Yes</u> / No
Notes:	PRINTED NAME: <u>Robert Bruce</u>		
	SIGNATURE: <u>[Signature]</u>		DATE: <u>2-8-24</u>
	PHONE #: ()		CERT #: <u>7186</u>

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.

Sub 2 (RS88)

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

County: Marion
 Month/Year: Jan 24

System Name: _____ ID#: 41 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							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18				0.01	0.01	0.01	0.01
19	0.01	0.01	0.01	0.01	0.01	0.01	0.01
20	0.01	0.01	0.01	0.01	0.01	0.01	0.01
21							
22					0.01		0.01
23	0.01				0.01		0.01
24			0.01				0.01
25							
26				0.01		0.01	0.01
27	0.01		0.01	0.01	0.01	0.01	0.01
28	0.01	0.01	0.01	0.01	0.01	0.01	0.01
29	0.01	0.01	0.01	0.01	0.01	0.01	0.01
30	0.01		0.01	0.01	0.01	0.01	0.01
31	0.01		0.01	0.01	0.01		0.01

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

Notes: _____

PRINTED NAME: Robert Bruce

SIGNATURE: Robert Bruce DATE: 2-0-24

PHONE #: (503) 854-3496 CERT #: 7136

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- :

System Name: CITY OF DETROIT ID#: 41 00257

Month/Year: JANUARY 2024

Disinfection Giardia Log

Inactiv:

1.0

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	1.1	66	72	7.8	8.0	36	yes	150
2	1.2	66	79	7.2	8.1	36	yes	210
3	1.2	66	79	7.2	8.0	36	yes	75
4	1.1	66	72	7.2	8.0	36	yes	70
5	1.1	66	72	7.1	8.2	36	yes	65
6	1.0	66	66	6.5	8.0	36	yes	70
7	1.0	66	66	6.3	7.9	36	yes	70
8	1.2	66	79	6.5	8.0	36	yes	75
9	1.2	66	79	7.2	7.8	36	yes	75
10	1.2	66	79	7.2	7.5	36	yes	60
11	1.3	66	79	7.5	7.5	36	yes	65
12	1.1	66	72	7.8	7.5	36	yes	50
13	1.2	66	66	7.8	7.8	36	yes	50
14	1.96	66	66	7.7	7.61	36	yes	100
15	1.04	66	66	7.8	7.62	36	yes	200
16	1.03	66	66	7.7	7.65	36	yes	200
17	1.1	66	72	7.6	7.6	36	yes	110
18	1.3	66	79	8.0	7.6	36	yes	400
19	1.3	66	79	7.9	7.1	31	yes	150
20	1.3	66	79	7.3	7.2	31	yes	200
21	1.3	66	79	7.3	7.3	31	yes	200
22	1.2	66	79	7.7	7.3	34	yes	400
23	1.3	66	79	7.8	7.1	31	yes	400
24	1.3	66	79	7.3	7.5	31	yes	400
25	1.3	66	79	6.3	7.5	31	yes	400
26	1.3	66	79	7.3	7.4	31	yes	400
27	1.3	66	79	7.5	7.4	31	yes	150
28	1.3	66	79	7.2	7.3	31	yes	325
29	1.3	66	79	7.1	7.5	31	yes	400
30	1.3	66	79	7.5	7.6	37	yes	75
31	1.4	66	92	7.5	7.7	38	yes	75

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.dmcce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350