

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

County:
 Month/Year: 6-2024
 WTP: TP-

System Name: Detroit water ID#: ~~21~~ 00257

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	0.01
2		0.01		0.01		0.01	0.01
3		0.01		0.01		0.01	0.01
4	0.01		0.01	0.01		0.01	0.01
5		0.01		0.01		0.01	0.01
6	0.01		0.01	0.01		0.01	0.01
7	0.01			0.01	0.01	0.01	0.01
8		0.01	0.01	0.01	0.01	0.01	0.01
9		0.01		0.01	0.01	0.01	0.01
10	0.01	0.01	0.01	0.01	0.01	0.01	0.01
11	0.01	0.01	0.01	0.01		0.01	0.01
12		0.01	0.01	0.01	0.01		0.01
13	0.01			0.01	0.01		0.01
14				0.01	0.01	0.01	0.01
15	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	0.01	0.01
18	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
23	0.01	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
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
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
30			0.01	0.01	0.01	0.01	0.01
31	0.01	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="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No	
All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	Notes:		
PRINTED NAME: <u>Robert Bruce</u>		SIGNATURE: <u>Robert Bruce</u>	
PHONE #: <u>(533) 854-3496</u>		DATE: <u>7-9-24</u>	
		CERT #: <u>7136</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.

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County:
 Month/Year: **6-2024**
 WTP: TP -

System Name: **Detroit water** ID#: **41 00257**

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			0.01	0.01			0.01
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21			0.01				0.01
22							
23							
24							
25					0.01	0.01	0.01
26							
27							
28					0.01		
29				0.01	0.01	0.01	0.01
30		0.01	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	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	CT's met everyday? (see back)	All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
Notes:		PRINTED NAME: Robert Bruce	
		SIGNATURE: <i>Robert Bruce</i>	DATE: 7-9-24
		PHONE #: (586) 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: Detroit Water

ID#: 45 00257

Month/Year: 6-2024

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		
1	1.2	66	79	13.5	7.7	28	yes	150
2	1.2	66	79	13.7	7.7	28	yes	150
3	1.2	66	79	13.2	7.8	28	yes	110
4	1.2	66	79	12.6	7.8	28	yes	100
5	1.2	66	79	12.4	7.7	28	yes	125
6	1.2	66	79	12.6	7.8	28	yes	140
7	1.1	66	72	14.4	7.8	27	yes	260
8	1.1	66	72	15.0	7.7	27	yes	240
9	1.2	66	79	15.8	7.8	28	yes	260
10	1.2	66	79	15.9	7.8	28	yes	250
11	1.2	66	79	16.0	7.8	28	yes	240
12	1.1	66	72	15.6	7.9	27	yes	220
13	1.1	66	72	14.4	7.9	27	yes	170
14	1.2	66	79	14.3	7.9	28	yes	130
15	1.1	66	72	13.8	8.0	27	yes	175
16	1.0	66	66	12.8	8.0	27	yes	170
17	1.1	66	72	12.8	7.9	27	yes	150
18	1.1	66	72	12.9	7.9	27	yes	165
19	1.2	66	79	13.2	7.7	28	yes	180
20	1.2	66	79	14.5	7.5	28	yes	200
21	1.3	64	85	15.1	6.7	28	yes	200
22	1.3	66	85	16.8	6.8	28	yes	250
23	1.2	66	79	17.1	6.9	28	yes	230
24	1.2	66	79	15.0	6.9	28	yes	250
25	1.2	66	79	15.0	6.9	28	yes	225
26	1.2	66	79	17.0	6.9	28	yes	180
27	1.2	66	79	16.3	7.4	28	yes	150
28	1.2	66	79	15.0	7.6	28	yes	180
29	1.2	66	79	16.9	7.1	28	yes	300
30	1.0	66	66	17.2	7.1	27	yes	170
31	1.0	66	66	15.8	7.1	27	yes	200

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