

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

County: Macomb
 Month/Year: April 2025
 WTP: TP -

System Name: Detroit

ID#: 41

SWD 2

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	0.01	0.01
2	0.01		0.01	0.01		0.01	0.01
3	0.01		0.01	0.01	0.01		0.01
4	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
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	0.01
10	0.01	0.01	0.01	0.01	0.01		0.01
11				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		0.01
14	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
19					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				
22							
23							
24							
25							
26							
27							
28							
29							
30							
31							

Slow Sand/Membrane/DE Filtration/Unfiltered

95% of daily turbidity readings ≤ 1 NTU? ²

Yes / No

All daily turbidity readings ≤ 5 NTU?

Yes / No

Monthly Summary (Answer Yes or No)

CT's met everyday? (see back)

Yes / No

All Cl₂ residual at entry point ≥ 0.2 mg/l?

Yes / No

Notes:

PRINTED NAME: Robert Bruce

SIGNATURE: Robert Bruce

DATE: 5.5.25

PHONE #: (563) 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.

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1							
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7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18					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	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	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	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	0.01			0.01
31							

Slow Sand/Membrane/DE Filtration/Unfiltered

95% of daily turbidity readings $\leq$ 1 NTU? ²

☒ Yes / ☐ No

All daily turbidity readings $\leq$ 5 NTU?

☒ Yes / ☐ No

Monthly Summary (Answer Yes or No)

CT's met everyday? (see back)

☒ Yes / ☐ No

All Cl₂ residual at entry point $\geq$ 0.2 mg/l?

☒ Yes / ☐ No

Notes:

PRINTED NAME: Robert Bruce

SIGNATURE: Robert Bruce

DATE: 5.5.25

PHONE #: (503) 854-3496

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OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- :

System Name:

ID#: 41

Month/Year: April - 2023

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	Yes / No	[GPM]
1	1.2	66	79	18.0	8.1	22	Yes	80
2	1.2	66	79	18.0	8.1	22	Yes	80
3	1.1	66	72	18.0	8.2	20	Yes	80
4	1.0	66	66	15.3	7.9	18	Yes	90
5	1.0	66	66	12.2	7.8	18	Yes	90
6	1.0	66	66	18.1	8.1	18	Yes	95
7	1.2	66	79	18.2	8.2	22	Yes	80
8	1.2	66	79	18.0	8.2	22	Yes	80
9	1.2	66	79	18.0	8.2	22	Yes	70
10	1.2	66	79	15.3	8.1	22	Yes	70
11	1.0	66	66	15.1	7.9	18	Yes	70
12	1.0	66	66	13.4	7.8	18	Yes	105
13	1.3	66	86	20.0	8.2	37	Yes	95
14	1.3	66	86	17.2	8.2	37	Yes	130
15	1.3	66	79	17.2	8.3	22	Yes	100
16	1.0	66	66	11.7	8.3	18	Yes	120
17	1.0	66	66	10.3	8.3	18	Yes	180
18	1.0	66	66	9.8	8.2	18	Yes	195
19	1.0	66	66	10.2	8.3	18	Yes	160
20	1.3	66	86	13.0	7.7	37	Yes	135
21	1.2	66	79	10.3	7.8	19	Yes	160
22	1.2	66	79	10.1	8.0	19	Yes	160
23	1.2	66	79	10.1	8.0	19	Yes	160
24	1.1	66	72	10.9	8.2	22	Yes	110
25	1.1	66	72	11.0	8.1	22	Yes	180
26	1.1	66	72	11.4	7.9	22	Yes	200
27	1.1	66	72	10.8	7.6	22	Yes	200
28	1.2	66	79	10.6	7.5	22	Yes	200
29	1.2	66	79	11.5	7.5	22	Yes	150
30	1.2	66	79	10.9	7.5	22	Yes	150
31								

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

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