

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

System Name: **ROCK CREEK WATER DISTRICT** ID #: **OR4700337** WTP: **WTP-A** Month/Year: **11-24**

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day [NTU]
1			0.25	0.25			0.25
2				0.25			0.25
3				0.21			0.21
4				0.15			0.15
5				0.17			0.17
6				0.16			0.16
7				0.17			0.17
8				0.19			0.19
9				0.19			0.18
10				0.20			0.20
11				0.21			0.21
12				0.25			0.25
13				0.28			0.28
14			0.31				0.31
15			0.22				0.22
16				0.23			0.23
17				0.26			0.26
18				0.29			0.29
19				0.27			0.27
20				0.25			0.25
21				0.23			0.23
22			0.22				0.22
23				0.21			0.21
24				0.20			0.20
25				0.15			0.15
26				0.23			0.23
27				0.28			0.28
28				0.27			0.27
29				0.23			0.23
30			0.18				0.18
31							

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

Notes:

PRINTED NAME: Leonard A. Fischer
SIGNATURE: <i>Leonard A. Fischer</i> DATE: 12-9-24
PHONE #: (503) 879-5497 CERT #: 6302

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. ² Filtered systems only.

OHA - Drinking Water Program - Surface Water Quality Data Form

ROCK CREEK WATER DISTRICT ID #: OR4109337 WTP: WTP-A Month/Year: 11-24

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ³⁻	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CT	[°C]		Use tables	Yes/No	[GPM]
11/0900	0.3	226	68	9	7.5	55	Yes	30
21/030	0.3		68	9	7.5	55		32
31/115	0.3		68	9	7.5	55		29
41/015	0.3		68	9	7.5	55		31
51/100	0.4		90	9	7.4	55		33
61/030	0.4		90	9	7.4	55		35
71/100	0.5		113	9	7.4	57		32
81/115	0.6		136	9	7.5	57		31
91/045	0.6		136	9	7.4	57		29
101/100	0.8		181	9	7.4	58		28
111/030	0.7		158	9	7.5	58		27
121/015	0.9		203	9	7.5	60		29
131/115	0.4		90	9	7.5	55		31
141/030	0.9		203	9	7.5	60		33
151/945	1.1		249	9	7.5	61		29
161/000	0.7		158	9	7.5	58		31
171/130	0.6		136	9	7.5	57		32
181/000	0.3		68	9	7.5	55		30
191/200	0.3		68	9	7.5	55		29
201/130	0.5		113	9	7.4	57		32
211/100	0.4		90	9	7.4	55		34
221/0700	0.4		90	9	7.4	55		32
231/100	0.3		68	9	7.4	55		30
241/145	0.3		68	9	7.5	55		32
251/100	0.4		90	9	7.5	55		33
261/000	0.3		68	9	7.5	55		29
271/030	0.3		68	9	7.5	55		30
281/100	0.6		136	9	7.5	57		32
291/130	0.7		158	9	7.5	58		33
301/0930	0.8		181	9	7.5	58		30
31/10930								

*If Cl₂ at entry point < 0.2 mg/l OR CT not met, notify DWIP by end of next business day.

Download form at: www.public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/furb-af-unfiltered.pdf