

OHA - Drinking Water Services - Surface Water Quality Data Form

County: COOS

Slow Sand, Membrane, Diatomaceous Earth, or Unfiltered

Month/Year: 5-22

System Name: Bridge Water District ID#: 41 00552 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]	Min. Cl ₂ Residual at 1st User [ppm or mg/L]
1							0.3	0.3
2							0.3	0.2
3							0.4	0.2
4							0.4	0.2
5							0.4	0.2
6							0.6	0.2
7							0.7	0.3
8							0.9	0.2
9							0.8	0.2
10							0.9	0.2
11							0.8	0.2
12							0.8	0.2
13							0.8	0.3
14							0.8	0.2
15							0.8	0.3
16							0.7	0.3
17							0.7	0.2
18							0.5	0.2
19							0.5	0.2
20							0.4	0.2
21							0.4	0.3
22							0.4	0.3
23							0.4	0.2
24							0.3	0.2
25							0.3	0.2
26							0.3	0.3
27							0.4	0.2
28							0.5	0.2
29							0.3	0.2
30							0.3	0.3
31							0.2	0.2

Slow Sand/Membrane/DE Filtration/Unfiltered

Monthly Summary (Answer Yes or No)

95% of daily turbidity readings ≤ 1 NTU? Yes / No
 All daily turbidity readings ≤ 5 NTU? Yes / No

All Cl₂ residual measurements at entry point ≥ 0.2 mg/l? Yes / No

Monthly UV Summary (circle Yes or No)

Was the volume of off-spec water reduced less than 5% for the month? Yes / No

PRINTED NAME: ERNIE NEWTON

SIGNATURE: *[Signature]*

DATE: 6-10-22

PHONE #: (541) 572-5871

CERT #: 2674

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM correspond to continuous readings' maximum. ² Filtered systems only.

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County: Coos

Slow Sand Filtration with UV *Giardia/Crypto* Disinfection

Month/Year: 5-22

System Name: Bridge Water District

ID# 41- 00552

WTP ID: A

Minimum Dose requirement: 186 mJ/cm²

Date	Minimum Dose Indicator Light	All Lamps On?	Daily Water Produced {A}	Water outside Validated Conditions {B}	Cumulative % Off-Spec Water Produced
	[green or red]	[Y or N]	[gal]	[gal]	(Mo. Sum {B}) ÷ (Mo. Sum {A}) * [%]
1			12108		
2			10628		
3			8009		
4			11567		
5			9657		
6			11289		
7			8400		
8			10244		
9			8211		
10			10145		
11			6181		
12			7221		
13			6266		
14			5122		
15			6119		
16			10654		
17			9014		
18			11221		
19			8799		
20			11586		
21			12670		
22			10501		
23			9662		
24			11338		
25			9141		
26			10069		
27			11251		
28			8744		
29			7121		
30			8523		
31			9696		
Monthly Cumulative % Off-Spec Water Produced ³					

³ If ≥ 5% of total water produced is off-spec., notify DWS within 24 hours.

Return by 10th of following month by email, fax or mail to:

dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350