

OHA - Drinking Water Services - Surface Water Quality Data Form

County: COOS

Slow Sand, Membrane, Diatomaceous Earth, or Unfiltered

Month/Year: 11-22

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							0.1	0.2
2							0.1	0.3
3							0.1	0.3
4							0.1	0.2
5							0.3	0.2
6							0.2	0.2
7							0.4	0.3
8							0.3	0.2
9							0.2	0.4
10							0.1	0.3
11							0.1	0.4
12							0.1	0.3
13							0.1	0.3
14							0.1	0.2
15							0.2	0.2
16							0.2	0.2
17							0.2	0.3
18							0.2	0.3
19							0.1	0.4
20							0.1	0.4
21							0.2	0.4
22							0.2	0.4
23							0.2	0.4
24							0.2	0.3
25							0.2	0.3
26							0.1	0.3
27							0.2	0.3
28							0.1	0.3
29							0.2	0.2
30							0.2	0.2
31							0.2	0.2

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)
 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 produced less than 5% for the month? Yes / No

PRINTED NAME: EDNA L. NEWTON
 SIGNATURE: [Signature] DATE: 12-9-22
 PHONE #: (541) 572-5077 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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Slow Sand Filtration with UV Giardia/Crypto Disinfection

System Name: Bridge Water District

ID# 41- 00552

County: Coos

Month/Year: 11-22

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			11808		
2			9840		
3			13776		
4			12300		
5			11598		
6			12265		
7			9026		
8			11255		
9			12365		
10			13501		
11			9611		
12			12265		
13			14603		
14			9495		
15			11222		
16			12099		
17			9544		
18			11661		
19			12022		
20			9144		
21			13777		
22			12629		
23			13345		
24			10541		
25			7332		
26			14911		
27			10003		
28			12674		
29			14033		
30			9021		
31			13215		
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