

DHA - Drinking Water Services - Surface Water Quality Data Form

Slow Sand, Membrane, Diatomaceous Earth, or Unfiltered

County:

COOS

Month/Year:

6-23

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

Slow Sand/Membrane/DE Filtration/Unfiltered

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

Monthly Summary (Answer Yes or No)

All Cl₂ residual measurements at entry point \geq 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: ERNIE NEWTON

SIGNATURE: *Ernie Newton*

DATE: 7-10-23

PHONE #: (541) 572-5877

CERT #: 2624

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.

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Coos

Slow Sand Filtration with UV *Giardia/Crypto* Disinfection

Month/Year: 6/23

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			12921		
2			8577		
3			10365		
4			9054		
5			12222		
6			13932		
7			14627		
8			15901		
9			12899		
10			13766		
11			11449		
12			14951		
13			11993		
14			13003		
15			9679		
16			10001		
17			11576		
18			9877		
19			14202		
20			12623		
21			11944		
22			10331		
23			12651		
24			13222		
25			9642		
26			10299		
27			14877		
28			12592		
29			10344		
30			13750		
31					
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