

OHA - Drinking Water Services - Surface Water Quality Data Form

County: **COOS**

Slow Sand, Membrane, Diatomaceous Earth, or Unfiltered

Month/Year: **Jan-25**

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. Cl2 Residual at 1st User [ppm or mg/L]
1							No Production	
2							No Production	
3							No Production	
4							0.90	0.20
5							0.90	0.20
6							0.90	0.20
7							0.90	0.20
8							0.80	0.30
9							0.80	0.30
10							0.90	0.30
11							0.80	0.30
12							0.80	0.30
13							0.80	0.30
14							0.70	0.20
15							0.70	0.30
16							0.60	0.30
17							0.50	0.30
18							0.50	0.30
19							0.40	0.30
20							0.40	0.30
21							0.40	0.30
22							0.40	0.30
23							0.40	0.30
24							0.40	0.30
25							0.40	0.30
26							0.40	0.20
27							0.40	0.20
28							0.40	0.20
29							0.30	0.20
30							0.40	0.20
31							0.40	0.30

Slow Sand/Membrane/DE Filtration/Unfiltered 95% of daily turbidity readings ≤ 1 NTU? ² Yes All daily turbidity readings ≤ 5 NTU? Yes		Monthly Summary (Answer Yes or No) All Cl2 residual measurements at entry point ≥ 0.2 mg/l? Yes	
Monthly UV Summary (circle Yes or No) Was the volume of off-spec water produced less than 5% for the month? Yes		PRINTED NAME: Ernie Newton SIGNATURE: <i>Ernie Newton</i> PHONE #: (541) 572-5877	
		DATE: 2/10/2025 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.

OHA - Drinking Water Services - Surface Water Quality Data Form	County:	Coos
Slow Sand Filtration with UV <i>Giardia</i>/<i>Crypto</i> Disinfection	Month/Year:	Jan-25
System Name: <u>Bridge Water District</u>	ID# 41- <u>00552</u>	WTP ID: <u>A</u>

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			No Production		
2			No Production		
3			No Production		
4			18600		
5			18000		
6			10800		
7			13200		
8			12000		
9			10560		
10			13440		
11			12960		
12			11040		
13			11520		
14			14400		
15			8640		
16			11520		
17			9384		
18			11016		
19			8976		
20			8976		
21			7344		
22			14280		
23			8976		
24			9792		
25			6528		
26			11178		
27			11178		
28			10350		
29			10764		
30			9072		
31			9936		
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