

OHA - Drinking Water Services - Surface Water Quality Data Form

County:

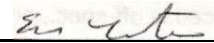
COOS

Slow Sand, Membrane, Diatomaceous Earth, or Unfiltered

Month/Year:

Jun-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. Cl ₂ Residual at 1st User [ppm or mg/L]
1							0.20	0.20
2							0.20	0.20
3							0.20	0.20
4							0.20	0.20
5							0.10	0.20
6							0.10	0.20
7							0.10	0.20
8							0.10	0.30
9							0.10	0.30
10							0.10	0.30
11							0.10	0.20
12							0.10	0.20
13							0.10	0.20
14							0.10	0.20
15							0.10	0.20
16							0.10	0.20
17							0.20	0.20
18							0.10	0.20
19							0.10	0.20
20							0.10	0.20
21							0.10	0.20
22							0.10	0.30
23							0.10	0.30
24							0.10	0.30
25							0.10	0.30
26							0.10	0.30
27							0.10	0.20
28							0.10	0.20
29							0.10	0.20
30							0.10	0.20
31								

Slow Sand/Membrane/DE Filtration/Unfiltered				Monthly Summary (Answer Yes or No)			
95% of daily turbidity readings $\leq$ 1 NTU? ² Yes				All Cl ₂ residual measurements at entry point $\geq$ 0.2 mg/l? Yes			
All daily turbidity readings $\leq$ 5 NTU? Yes							
Monthly UV Summary (circle Yes or No)				PRINTED NAME: Ernie Newton			
Was the volume of off-spec water produced less than 5% for the month? Yes				SIGNATURE: 		DATE: 7/10/2025	
				PHONE #: 541-572-5877		CERT #: 2674	

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

OHA - Drinking Water Services - Surface Water Quality Data Form		County: Coos
Slow Sand Filtration <u>with</u> UV <i>Giardia</i>/<i>Crypto</i> Disinfection		Month/Year: Jun-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			11808	0	
2			12792	0	
3			9348	0	
4			15252	0	
5			14760	0	
6			8856	0	
7			10824	0	
8			9840	0	
9			11088	0	
10			14112	0	
11			13608	0	
12			11592	0	
13			12096	0	
14			15120	0	
15			9072	0	
16			12096	0	
17			11040	0	
18			12960	0	
19			10560	0	
20			10560	0	
21			8640	0	
22			16800	0	
23			10560	0	
24			11520	0	
25			7680	0	
26			12798	0	
27			12798	0	
28			11850	0	
29			12324	0	
30			13244	0	
31			0	0	
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