

OHA - Drinking Water Program – Turbidity Monitoring Report Form County: Tillamook Cartridge or Bag Filtration

System Name: NEHALEM, CITY OF ID #: OR4100554 WTP: WTP-A Month/Year: March 2022

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day ¹ [NTU]
1	50	43	7	20	.12	.18
2	50	43	7	20	.10	.14
3	50	43	7	20	.09	.12
4	50	43	7	20	.08	.10
5	50	43	7	20	.08	.11
6	50	43	7	20	.07	.10
7						OFF
8	50	43	7	20	.07	.09
9						OFF
10	50	43	7	20	.07	.09
11						OFF
12	50	43	7	20	.07	.09
13						OFF
14	50	43	7	20	.07	.10
15						OFF
16	50	43	7	20	.06	.09
17						OFF
18	50	43	7	20	.08	.10
19						OFF
20	50	43	7	20	.08	.11
21						OFF
22	50	43	7	20	.12	.16
23						OFF
24	50	43	7	20	.09	.11
25						OFF
26	50	43	7	20	.08	.10
27						OFF
28	50	43	7	20	.07	.09
29						OFF
30	50	43	7	20	.06	.09
31						OFF

Cartridge Filtration 95% of daily turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / No All daily turbidity readings ≤ 5 NTU? <input checked="" type="checkbox"/> Yes / No	Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / No All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / No
Notes: PSI = pounds per square inch PSID = pounds per square inch difference (before filter – after filter) PSID When to Change Filter = Manufacturer's recommendation; may need to look in manual for manufacturer's specifications when to change the filter, at what PSID.	PRINTED NAME: <u>Brian Moore</u>
	SIGNATURE: <u>[Signature]</u>
	DATE: <u>4-1-2022</u>
PHONE #: <u>(503) 801-5001</u>	Both Level 2 CERT #: <u>D-09185</u> <u>T-09363</u>

¹ Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in "Daily Turbidity Reading" Column may not correspond to continuous readings' maximum.

OHA - Drinking Water Program – Surface Water Quality Data Form

NEHALEM, CITY OF ID #: OR4100554 WTP-: WTP-A Month/Year: *March 2022*

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ²	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
1:15:00	.4	309	123	8	7.2	43	Yes	486
2:15:00	.3	288	86	8	7.1	41	Yes	521
3:15:00	.28	309	86	8	7.2	43	Yes	486
4:15:00	.3	309	86	8	7.2	43	Yes	486
5:15:00	.35	309	108	8	7.3	44	Yes	486
6:15:00	.4	270	108	8	7.4	46	Yes	556
7:15:00	off							
8:15:00	.3	309	86	8	7.2	43	Yes	486
9:15:00	off							
10:15:00	.4	288	115	8	7.3	44	Yes	521
11:15:00	off							
12:15:00	.3	332	100	8	7.4	46	Yes	451
13:15:00	off							
14:15:00	.5	270	135	8	7.4	46	Yes	556
15:15:00	off							
16:15:00	.4	309	123	8	7.3	44	Yes	486
17:15:00	off							
18:15:00	.32	332	106	8	7.3	44	Yes	451
19:15:00	off							
20:15:00	.3	288	86	8	7.2	43	Yes	521
21:15:00	off							
22:15:00	.3	288	86	8	7.2	43	Yes	521
23:15:00	OFF							
24:15:00	.32	288	92	9	7.2	40	Yes	521
25:15:00	off							
26:15:00	.28	288	81	9	7.3	42	Yes	521
27:15:00	off							
28:15:00	.45	270	121	9	7.4	43	Yes	556
29:15:00	off							
30:15:00	.5	309	154	9	7.4	46	Yes	486
31:15:00	off							

² If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.