

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County:

Lincoln

Conventional or Direct Filtration

Month/Year:

Dec-21

System Name: Beverly Beach Water District		ID#: 41 00568					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]	
1	OFF	OFF	OFF	0.02	0.02	0.02	0.02	
2	0.02	0.02	0.02	0.02	0.02	OFF	0.02	
3	OFF	OFF	OFF	OFF	0.03	0.02	0.03	
4	0.02	0.02	0.02	0.02	0.04	OFF	0.04	
5	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
6	OFF	OFF	OFF	OFF	0.03	OFF	0.03	
7	0.02	0.02	0.02	0.02	0.02	0.05	0.05	
8	OFF	OFF	OFF	0.02	0.02	0.02	0.02	
9	0.02	0.05	OFF	OFF	OFF	OFF	0.05	
10	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
11	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
12	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
13	OFF	OFF	OFF	OFF	OFF	0.03	0.03	
14	OFF	OFF	OFF	OFF	0.04	0.02	0.04	
15	OFF	OFF	OFF	OFF	0.04	0.06	0.06	
16	0.02	0.02	0.02	0.11	0.02	0.02	0.11	
17	0.02	0.02	0.02	0.02	0.02	OFF	0.02	
18	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
19	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
20	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
21	OFF	OFF	OFF	OFF	0.08	0.13	0.13	
22	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
23	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
24	OFF	OFF	OFF	OFF	0.13	0.02	0.13	
25	0.02	0.02	0.02	0.02	0.02	0.02	0.02	
26	0.02	0.02	0.02	0.02	0.02	0.02	0.02	
27	0.02	0.02	0.02	0.02	0.02	0.02	0.02	
28	0.02	0.02	0.02	0.02	0.02	0.02	0.02	
29	0.02	0.02	0.02	0.02	0.02	0.02	0.02	
30	0.02	0.02	0.02	0.02	0.02	0.02	0.02	
31	0.02	0.02	0.02	OFF	OFF	OFF	0.02	

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes <input type="radio"/> No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No
All 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No		
All turbidity readings < IFE ² triggers <input checked="" type="radio"/> Yes <input type="radio"/> No		

Notes:	PRINTED NAME: Aaron Olson
	SIGNATURE:  DATE: 01-07-22
	PHONE #: (503) 487-7591 CERT #: T-09128

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² IFE = Individ. Filter Effl. (333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form						WTP - : A	Inactivation
System Name:	Beverly Beach Water District	ID#: 41 00568	Month/Year:	Dec-21	Disinfection <i>Giardia</i> Log Inactive:		1

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1-Dec	1.1	70	77.0	13.0	7.0	31.5	Yes	50
2-Dec	1.2	70	84.0	13.0	7.1	33.1	Yes	50
3-Dec	0.7	70	49.0	12.0	7.0	32.8	Yes	50
4-Dec	1.2	70	84.0	11.0	7.2	39.6	Yes	50
5-Dec	OFF	70						
6-Dec	1.2	70	84.0	11.0	7.6	45.6	Yes	50
7-Dec	1.2	70	84.0	11.0	6.4	30.2	Yes	50
8-Dec	0.9	70	63.0	12.0	6.4	27.5	Yes	50
9-Dec	0.8	70	56.0	12.0	6.7	30.0	Yes	50
10-Dec	OFF	70						
11-Dec	OFF	70						
12-Dec	OFF	70						
13-Dec	OFF	70						
14-Dec	0.4	70	28.0	11.0	6.4	27.7	Yes	50
15-Dec	0.9	70	63.0	11.0	6.7	32.3	Yes	50
16-Dec	1.4	70	98.0	11.0	6.3	29.8	Yes	50
17-Dec	1.1	70	77.0	11.0	6.9	35.3	Yes	50
18-Dec	1.2	70	84.0	11.0	7.2	39.6	Yes	50
19-Dec	OFF	70						
20-Dec	OFF	70						
21-Dec	1.2	70	84.0	12.0	6.8	32.4	Yes	50
22-Dec	OFF	70						
23-Dec	OFF	70						
24-Dec	0.4	70	28.0	11.0	6.4	27.7	Yes	50
25-Dec	1.4	70	98.0	10.0	6.9	39.0	Yes	50
26-Dec	1.3	70	91.0	9.0	7.2	45.7	Yes	50
27-Dec	1.4	70	98.0	9.0	7.0	43.1	Yes	50
28-Dec	1.3	70	91.0	9.0	7.0	42.6	Yes	50
29-Dec	1.3	70	91.0	9.0	6.9	41.1	Yes	50
30-Dec	1.4	70	98.0	9.0	6.7	38.8	Yes	50
31-Dec	1.4	70	98.0	10.0	6.5	34.0	Yes	50

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised July 2018

Oregon DHS - Drinking Water Services – Surface Water Quality DataSystem Name: Beverly Beach WDID# 41 00568Month/Year: Dec / 2021Minimum UVT [%] during month: LAB

Duty sensor variation from reference sensor %: _____

Reference Sensor test in
manual

Minimum Validated UVT : {Insert Req'd Value} 88%

Date	Peak Hourly Demand Flow	Minimum Intensity	All Lamps On?	Daily Water Produced {A}	Water outside Validated Conditions {B}	Cumulative % Off-Spec Water Produced
	[gpm/unit]	[^{mW} / _{cm²}]	[Y or N]	[gal]	[gal]	(Mo. Sum {B}) ÷ (Mo. Sum {A}) * 100 [%]
1	50	1.00	Y	37207	7.35	0.84%
2	50	0.82	Y	57363	11.55	0.96%
3	50	0.77	Y	29498	3.25	0.84%
4	50	0.82	Y	49680	8.4	0.81%
5	OFF					
6	50	2.13	Y	13872	2.2	0.72%
7	50	0.78	Y	66328	12.6	0.90%
8	50	0.75	Y	38830	7.35	
9	50	1.08	Y	19960	4.2	
10	OFF					
11	OFF					
12	OFF					
13	OFF					
14	50	3.67	Y	2630	0	0.00%
15	50	1.03	Y	31940	5.25	0.78%
16	50	0.74	Y	42440	7.35	1.00%
17	50	0.75	Y	71122	11.55	0.77%
18	50	0.95	Y	50665	11.55	1.10%
19	OFF					
20	OFF					
21	50	0.92	Y	28510	4.2	0.70%
22	OFF					
23	OFF					
24	50	0.83	Y	24704	5.25	1.00%
25	50	0.87	Y	70826	9.45	0.64%
26	50	0.77	Y	73656	15.75	1.00%
27	50	0.73	Y	73638	9.45	0.61%
28	50	0.61	Y	69660	18.9	1.30%
29	50	0.64	Y	70958	16.8	1.10%
30	50	0.54	Y	73872	25.125	1.70%
31	50	0.57	Y	26156	9.45	1.70%
Monthly Cumulative % Off-Spec Water Produced						18.47%

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Signature: Op Cert #: T-09128Date: 01/07/2022