

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Lincoln

Conventional or Direct Filtration

Month/Year: Oct-23

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-Oct	0.03	0.20	OFF	OFF	OFF	OFF	0.20
2-Oct	OFF	OFF	OFF	OFF	0.02	0.03	0.03
3-Oct	0.03	0.07	0.12	OFF	OFF	OFF	0.12
4-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
5-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
6-Oct	OFF	OFF	0.03	OFF	0.03	0.03	0.03
7-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
8-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
9-Oct	OFF	OFF	OFF	OFF	0.03	0.03	0.03
10-Oct	0.04	OFF	OFF	OFF	OFF	OFF	0.04
11-Oct	OFF	OFF	OFF	OFF	0.11	0.04	0.11
12-Oct	0.04	0.03	0.03	0.14	OFF	OFF	0.14
13-Oct	OFF	0.03	0.03	0.03	0.03	0.03	0.03
14-Oct	0.05	OFF	OFF	OFF	OFF	OFF	0.05
15-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
16-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
17-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
18-Oct	OFF	OFF	OFF	OFF	0.06	OFF	0.06
19-Oct	OFF	OFF	OFF	0.03	0.03	0.03	0.03
20-Oct	OFF	0.03	0.03	0.07	0.03	0.04	0.07
21-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
22-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
23-Oct	0.06	0.04	0.04	0.04	0.03	0.05	0.06
24-Oct	0.18	OFF	OFF	OFF	OFF	OFF	0.18
25-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
26-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
27-Oct	OFF	0.03	0.03	0.19	OFF	OFF	0.19
28-Oct	OFF	0.03	0.03	0.07	OFF	OFF	0.07
29-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
30-Oct	OFF	0.04	0.04	0.04	OFF	OFF	0.04
31-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF

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: JJ Olson
	SIGNATURE: <i>Jeffrey Olson</i> DATE: 11-07-23
	PHONE #: (503) 554-8333 CERT #: T766039

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:	Oct-23	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-Oct	1.2	70	84.0	16.0	7.4	30.2	Yes	50
2-Oct	1.1	70	77.0	15.0	7.4	32.0	Yes	50
3-Oct	1.2	70	84.0	14.0	7.3	33.3	Yes	50
4-Oct	OFF							
5-Oct	OFF							
6-Oct	1.3	70	91.0	14.0	7.5	36.3	Yes	50
7-Oct	OFF							
8-Oct	OFF							
9-Oct	1.5	70	105.0	17.0	7.3	28.2	Yes	50
10-Oct	1.0	70	70.0	16.0	7.8	34.3	Yes	50
11-Oct	0.9	70	63.0	16.0	7.2	27.1	Yes	50
12-Oct	1.2	70	84.0	15.0	7.8	37.5	Yes	50
13-Oct	1.5	70	105.0	15.0	7.7	37.4	Yes	50
14-Oct	1.4	70	98.0	15.0	7.8	38.3	Yes	50
15-Oct	OFF							
16-Oct	OFF							
17-Oct	OFF							
18-Oct	1.3	70	91.0	14.0	7.6	37.6	Yes	50
19-Oct	1.1	70	77.0	14.0	7.3	32.9	Yes	50
20-Oct	1.2	70	84.0	14.0	7.3	33.3	Yes	50
21-Oct	OFF							
22-Oct	OFF							
23-Oct	1.0	70	70.0	14.0	7.1	30.2	Yes	50
24-Oct	1.1	70	77.0	15.0	7.9	38.4	Yes	50
25-Oct	OFF							
26-Oct	OFF							
27-Oct	1.3	70	91.0	13.0	7.8	43.3	Yes	50
28-Oct	1.5	70	105.0	11.0	8.0	54.4	Yes	50
29-Oct	OFF							
30-Oct	1.6	70	112.0	11.0	7.7	49.4	Yes	50
31-Oct	OFF							

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 Data

System Name: Beverly Beach WD **ID#** 41 00568 **Month/Year:** Oct / 2023
 Minimum UVT [%] during month: 89.9 Duty sensor variation from reference sensor %: 0.00%
 Minimum Validated UVT : 92% <20% required, <10% recommended

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} /cm ²]	[Y or N]	[gal]	[gal]	(Mo. Sum {B}) ÷ (Mo. Sum {A}) * 100 [%]
1	50	1.04	Y	12,672	50	0.39%
2	50	0.97	Y	32,247	300	0.93%
3	50	0.93	Y	31,460	250	0.79%
4	OFF	OFF	OFF	OFF	OFF	OFF
5	OFF	OFF	OFF	OFF	OFF	OFF
6	50	0.91	Y	49,865	200	0.40%
7	OFF	OFF	OFF	OFF	OFF	OFF
8	OFF	OFF	OFF	OFF	OFF	OFF
9	50	1.94	Y	33,150	0	0.00%
10	50	1.05	Y	9,041	50	0.55%
11	50	1.14	Y	22,733	100	0.44%
12	50	1.30	Y	44,707	250	0.56%
13	50	1.36	Y	20,467	300	1.47%
14	50	5.89	Y	2,273	150	6.60%
15	OFF	OFF	OFF	OFF	OFF	OFF
16	OFF	OFF	OFF	OFF	OFF	OFF
17	OFF	OFF	OFF	OFF	OFF	OFF
18	50	3.69	Y	6,012	0	0.00%
19	50	1.47	Y	33,066	100	0.30%
20	50	1.18	Y	63,126	350	0.55%
21	OFF	OFF	OFF	OFF	OFF	OFF
22	OFF	OFF	OFF	OFF	OFF	OFF
23	50	0.94	Y	72,118	450	0.62%
24	50	4.19	Y	1,502	0	0.00%
25	OFF	OFF	OFF	OFF	OFF	OFF
26	OFF	OFF	OFF	OFF	OFF	OFF
27	50	1.25	Y	35,300	100	0.28%
28	50	1.26	Y	44,870	150	0.33%
29	OFF	OFF	OFF	OFF	OFF	OFF
30	50	1.44	Y	57,070	150	0.26%
31	OFF	OFF	OFF	OFF	OFF	OFF

Monthly Cumulative % Off-Spec Water Produced **0.52%**

Must be less than 5%

Signature: Jeffrey Olson

Op Cert #: T766039

Date: 11/7/2023