

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Lincoln

Conventional or Direct Filtration

Month/Year: Oct-25

System Name: Beverly Beach Water District		ID#: 41 00568		WTP : TP - A				
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	12 PM [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day ¹ [NTU]	
1-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
2-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
3-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
4-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
5-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
6-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
7-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
8-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
9-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
10-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
11-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
12-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
13-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
14-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
15-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
16-Oct	OFF	OFF	OFF	OFF	OFF	0.03	0.028	
17-Oct	0.03	OFF	OFF	OFF	0.25	OFF	0.25	
18-Oct	0.02	0.02	0.02	0.03	0.17	0.28	0.28	
19-Oct	OFF	OFF	0.16	OFF	OFF	OFF	0.16	
20-Oct	OFF	OFF	OFF	OFF	OFF	0.08	0.083	
21-Oct	0.04	0.03	0.13	0.27	OFF	OFF	0.267	
22-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
23-Oct	0.02	0.08	0.15	0.24	OFF	OFF	0.24	
24-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
25-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
26-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
27-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
28-Oct	OFF	OFF	OFF	OFF	OFF	0.09	0.09	
29-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
30-Oct	OFF	OFF	OFF	OFF	0.02	0.03	0.03	
31-Oct	0.03	0.02	0.21	OFF	OFF	OFF	0.21	
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)		All Cl2 residual at entry point ≥ 0.2 mg/l?		
All 4-hour turbidity readings ≤ 1 NTU?			<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No		<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: Curtis Olson				
				SIGNATURE: <i>Curtis Olson</i>			11/10/2025	
				PHONE #: (503) 554-8333			CERT #: T216644	

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-25	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	OFF							
2-Oct	OFF							
3-Oct	OFF							
4-Oct	OFF							
5-Oct	OFF							
6-Oct	OFF							
7-Oct	OFF							
8-Oct	OFF							
9-Oct	OFF							
10-Oct	OFF							
11-Oct	OFF							
12-Oct	OFF							
13-Oct	OFF							
14-Oct	OFF							
15-Oct	OFF							
16-Oct	0.9	70	63.0	15.0	7.6	33.6	Yes	50
17-Oct	1.7	70	119.0	15.0	7.8	39.7	Yes	50
18-Oct	1.3	70	91.0	14.0	7.7	39.0	Yes	50
19-Oct	1.2	71	85.2	14.0	7.8	40.0	Yes	50
20-Oct	1.1	72	79.2	13.0	7.7	40.8	Yes	50
21-Oct	1.0	73	73.0	13.0	7.7	40.3	Yes	50
22-Oct	OFF							
23-Oct	1.1	70	77.0	13.0	7.7	40.8	Yes	50
24-Oct	OFF							
25-Oct	OFF							
26-Oct	OFF							
27-Oct	OFF							
28-Oct	1.5	70	105.0	14.0	7.7	39.9	Yes	50
29-Oct	OFF							
30-Oct	1.5	70	105.0	13.0	7.7	42.7	Yes	50
31-Oct	1.4	70	98.0	13.0	7.5	39.2	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 Data

System Name: Beverly Beach WD **ID#** 41 00568 **Month/Year:** Oct / 2025
Minimum UVT [%] during month: 93.1 **Duty sensor variation from reference sensor %:** 1.00%
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	OFF					
2	OFF					
3	OFF					
4	OFF					
5	OFF					
6	OFF					
7	OFF					
8	OFF					
9	OFF					
10	OFF					
11	OFF					
12	OFF					
13	OFF					
14	OFF					
15	OFF					
16	50	2.56	Y	12,800	100	0.78%
17	50	2.54	Y	16,355	0	0.00%
18	50	2.43	Y	59,020	0	0.00%
19	50	2.83	Y	1,422	0	0.00%
20	50	2.54	Y	13,511	0	0.00%
21	50	2.53	Y	35,554	0	0.00%
22	OFF					
23	50	2.29	Y	48,288	0	0.00%
24	OFF					
25	OFF					
26	OFF					
27	OFF					
28	50	2.44	Y	361	0	0.00%
29	OFF					
30	50	2.05	Y	26,501	0	0.00%
31	50	2.56	Y	35,778	0	0.00%

Monthly Cumulative % Off-Spec Water Produced	0.02%
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Must be less than 5%

Signature: Curtis Olson

Op Cert #: T216644

Date: 11/10/2025