

OHA - Drinking Water Services – Turbidity Monitoring Report Form County: **APR 14/2022**
 Slow Sand, Membrane, Diatomaceous Earth Filtration or Unfiltered Systems

System Name: **CHL District Improvement Co.** ID #: **4100600** WTP-: Month/Year: **04/2022**

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	.FF	↳	.041	.FF	↳	↳	.041
2	↳	↳	↳	↳	↳	↳	
3	↳	↳	↳	↳	↳	↳	
4	↳	↳	.098	.FF	↳	↳	.098
5	↳	↳	↳	↳	↳	↳	
6	↳	↳	.049	.FF	↳	↳	.049
7	↳	↳	↳	↳	↳	↳	
8	↳	↳	.046	.FF	↳	↳	.046
9	↳	↳	↳	↳	↳	↳	
10	↳	↳	↳	↳	↳	↳	
11	↳	↳	.053	.FF	↳	↳	.053
12	↳	↳	↳	↳	↳	↳	
13	↳	↳	.075	.FF	↳	↳	.075
14	↳	↳	↳	↳	↳	↳	
15	↳	↳	.039	.FF	↳	↳	.039
16	↳	↳	↳	↳	↳	↳	
17	↳	↳	↳	↳	↳	↳	
18	↳	↳	.065	.FF	↳	↳	.065
19	↳	↳	↳	↳	↳	↳	
20	↳	↳	↳	↳	↳	↳	
21	↳	↳	.078	.FF	↳	↳	.078
22	↳	↳	.057	.FF	↳	↳	.057
23	↳	↳	↳	↳	↳	↳	
24	↳	↳	↳	↳	↳	↳	
25	↳	↳	.073	.FF	↳	↳	.073
26	↳	↳	↳	↳	↳	↳	
27	↳	↳	.040	.FF	↳	↳	.040
28	↳	↳	↳	↳	↳	↳	
29	↳	↳	.046	.FF	↳	↳	.046
30	↳	↳	↳	↳	↳	↳	

Slow Sand/Membrane/DE Filtration/Unfiltered Monthly Summary 95% of daily turbidity readings ≤ 1 NTU? ² Yes/No All daily turbidity readings ≤ 5 NTU? Yes/No	Monthly Summary (Answer Yes or No)	
	CT's met everyday? (see back) Yes/No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? Yes/No
Notes:	PRINTED NAME: TREVOR SCHNABER	
	SIGNATURE: Tm SA.	DATE: 5/9/2022
	PHONE #: (541) 992-1090	CERT #: J-43661

¹ Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous readings' maximum. ² Filtered systems only.

OHA - Drinking Water Services – Surface Water Quality Data Form

APRIL 2022

System Name: CLAR-District Improvement Co ID #: 4100600 WTP-: _____ Month/Year: 04/2022

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT	[° C]		Use tables	Yes / No	[GPM]
0945	1.4	47	65	11°	7.5	23	Yes	50
1045	1.2		56	↓	7.6	28	Yes	GPM
1300	1.2		56	↓	↓	28	Yes	
1000	1.2		56	↓	↓	28	Yes	
1155	1.1		51	↓	↓	28	Yes	
1000	1.3		61	↓	↓	28	Yes	
0830	1.0		47	↓	↓	27	Yes	
1015	.9		42	↓	7.7	27	Yes	
0900	.9		42	↓	7.6	27	Yes	
1200	.8		37	↓	7.5	22	Yes	
1030	.8		37	↓	7.5	22	Yes	
1000	1.6		75	↓	7.5	24	Yes	
1030	1.6		75	↓	7.5	24	Yes	
1200	1.6		75	↓	7.7	29	Yes	
1100	1.5		70	↓	7.5	24	Yes	
0900	1.4		65	↓	↓	23	Yes	
1300	1.5		70	↓	7.6	29	Yes	
1135	1.5		70	↓	↓	29	Yes	
1020	1.6		75	11°	↓	29	Yes	
1000	1.6		75	↓	7.5	24	Yes	
1000	1.5		70	↓	↓	24	Yes	
1230	1.5		70	↓	↓	24	Yes	
1200	1.5		70	↓	7.6	29	Yes	
1200	1.5		70	↓	7.5	24	Yes	
1245	1.5		70	↓	↓	24	Yes	
0900	1.3		61	↓	↓	23	Yes	
1000	1.4		65	↓	↓	23	Yes	
0900	1.4		65	↓	7.6	28	Yes	
1240	1.4		65	↓	↓	28	Yes	
0900	1.4		65	↓	↓	28	Yes	

³ If Cl₂ at entry point < 0.2 mg/l OR CT not met, notify DWS within 24 hours. Revised September 2016
 Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-alt-unfiltered.pdf

Return by 10th of following month by email, fax, or mail to:
dwp.dmcce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350