

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Tillamook**

System Name: Pacific City Joint Water-Sanitary Authority

Month/Year: **Mar-2026**

PWS ID#: 41 - 00609

Minimum test pressure applied: 29.955 psi

Plant ID: WTP - C
(e.g., "A")

Minimum test pressure req'd: 17.47 psi

DIT = Direct Integrity Test on filter(s) [Yes, No, or "off" if all filters are offline] ⇄

PDR = Pressure Decay Rate

LRC = Log Removal Credit

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU] (>15 minutes)	PDR _{Max} [^{psi} / _{min}]		LRC [log removal]	DIT Daily
				0.090			
				Highest PDR of day [^{psi} / _{min}]		Lowest LRV _{ambient} of day [log removal]	[Y/N] or "off"
1	0.016	0.019	0.019	0.013		5.015	Y
2	0.016	0.019	0.019	0.013		5.039	Y
3	0.019	0.021	0.021	0.013		4.890	Y
4	0.019	0.023	0.023	0.013		5.027	Y
5	0.026	0.026	0.026	0.019		4.922	Y
6	0.016	0.019	0.019	0.019		4.892	Y
7	0.014	0.018	0.018	0.013		4.897	Y
8	0.023	0.023	0.023	0.013		4.896	Y
9	0.014	0.018	0.018	0.019		4.853	Y
10	0.014	0.016	0.016	0.013		4.892	Y
11							Off
12							Off
13							Off
14							Off
15							Off
16							Off
17							Off
18							Off
19	0.026	0.062	0.062	0.013		5.096	Y
20	0.016	0.018	0.018	0.019		4.941	Y
21	0.016	0.016	0.016	0.013		4.718	Y
22	0.016	0.016	0.016	0.006		5.070	Y
23	0.014	0.016	0.016	0.013		5.082	Y
24	0.014	0.019	0.019	0.013		5.057	Y
25	0.018	0.030	0.030	0.019		4.906	Y
26	0.016	0.016	0.016	0.013		4.890	Y
27	0.014	0.030	0.030	0.013		5.077	Y
28	0.014	0.018	0.018	0.013		4.936	Y
29	0.018	0.019	0.019	0.013		4.899	Y
30	0.016	0.018	0.018	0.019		4.919	Y
31	0.014	0.016	0.016	0.013		4.881	Y

Compliance summary (operator to complete any blank fields)

95% of daily turbidity readings ≤ 1 NTU? [Y/N]	All turbidity readings ≤ 5 NTU? [Y/N]	All IFE turbidity readings ≤ 0.15 NTU? [Y/N]	Performance std met? [Y/N] (PDR ≤ PDR _{Max} , LRV ≥ LRC)	DIT Daily?
Yes	Yes	Yes	Yes	Yes
CT's met daily? (p. 2)	All Cl ₂ residual at EP ≥ 0.2 mg/L?	PDR ≤ PDR _{Max} ?	LRV _{ambient} ≥ LRC?	
Yes	Yes	Yes	Yes	

PRINTED NAME: **Leonard Whiteman** DATE: **4/8/2026**

SIGNATURE:  WT CERT #: **T-09364**

Notes: PHONE #: **503-965-6636**

◆ Used for optimization purposes only.

OHA-DWS

Disinfection Monthly Operating Report

System Name: Pacific City Joint Water-Sanitary Authority

PWS ID#: 41 - 00609

Plant ID: WTP - C

0.5

↩ Log
Inactivation
Required via
Disinfection

Day	Minimum Cl ₂ Residual at 1 st User (C) * [mg/L = ppm]	Contact Time (T) [minutes]	Actual CT C x T (Formula)	Temp [° C]	pH	Required CT (Formula)	CT Met? * [Yes / No] (Formula)	Peak Hourly Demand Flow [GPM]	Notes (e.g. "Plant Off")
1	1.286	36	46.3	10.3	6.68	17.5	YES	700	
2	1.275	36	45.9	11.6	6.66	16.0	YES	700	
3	1.604	36	57.8	11.9	6.99	18.2	YES	700	
4	1.570	36	56.5	18.0	6.92	11.6	YES	700	
5	1.147	36	41.3	10.8	6.74	17.1	YES	700	
6	1.228	36	44.2	10.4	6.80	18.0	YES	700	
7	1.333	36	48.0	11.3	6.78	17.0	YES	700	
8	1.055	36	38.0	9.7	6.80	18.5	YES	700	
9	1.045	36	37.6	9.2	6.73	18.6	YES	700	
10	1.144	36	41.2	10.4	6.82	17.9	YES	700	
11									Plant Off
12									Plant Off
13									Plant Off
14									Plant Off
15									Plant Off
16									Plant Off
17									Plant Off
18									Plant Off
19	1.423	36	51.2	10.2	6.69	17.9	YES	700	
20	1.415	36	50.9	10.6	6.76	17.9	YES	700	
21	1.327	36	47.8	10.8	6.74	17.4	YES	700	
22	1.166	36	42.0	11.0	6.89	17.7	YES	700	
23	1.185	36	42.7	11.0	6.82	17.4	YES	700	
24	1.244	36	44.8	11.4	6.78	16.8	YES	700	
25	1.346	36	48.4	10.7	6.73	17.5	YES	700	
26	1.337	36	48.1	11.5	6.87	17.4	YES	700	
27	1.351	36	48.6	9.9	6.87	19.2	YES	700	
28	1.428	36	51.4	9.6	6.93	20.2	YES	700	
29	1.449	36	52.1	9.7	6.79	19.3	YES	700	
30	1.399	36	50.4	9.8	6.99	20.3	YES	700	
31	1.664	36	59.9	8.2	6.85	22.2	YES	700	

* If chlorine concentration at entry point < 0.2 mg/L, or CT not met, notify DWS within 24 hours.

Submit this monthly report by the 10th of following month by

mail: Drinking Water Services
PO Box 14350
Portland, OR 97293-0350

email: dwp.dmce@odhsoha.oregon.gov

fax: 971-673-0458