State of Oregon Drinking Water Program Monthly Disinfection Report for small Surface Water Systems

Month/Year Jan 2021 Entry Point: A Required Minimum Residual 0.5 mg/L Date Time Source(s) in use Lowest free chlorine distribution system (mg/L) If below minimum -(in hours) Notes 1 City of Sandy .50	System Name Alder Creek Barlow Water District PWS ID# 4 1 00630							
Date Time Source(s) in use distribution system (mg/L) - how long? (in hours) Notes 1 City of Sandy .50	Month/Year Jan/2021 Entry Point: A Required Minimum Residual 0.5 mg/L							
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1 City of Sandy 50 2 .64	Date	lime	Source(s) in use				Notes	
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Return by 10th of following month by either email <u>dwp.dmce@state.or.us;</u> fax 971-673-0694; or mail to Drinking Water Services, PO Box 14350, Portland, OR 97293-0350.