

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: **Curry**

Conventional or Direct Filtration

Month/Year: **Nov-22**

System Name: **City of Port Orford** **4100670** **WTP-A: WTP-A:**

Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1			PLANT	OFF			
2			0.02	0.03			0.03
3					0.07	0.03	0.07
4	0.02	0.02	0.02	0.02	0.02	0.02	0.02
5	0.02		PLANT	OFF			0.02
6			0.02				0.02
7			0.02	0.04	0.02	0.02	0.04
8			0.02	0.10	0.07	0.03	0.10
9	0.02	0.02	0.02	0.02	0.02	0.02	0.02
10	0.02	0.02	0.02	0.02	0.02	0.02	0.02
11			0.02	0.02	0.02		0.02
12			0.02	0.02	0.02	0.02	0.02
13			0.02	0.02	0.02	0.02	0.02
14			0.02	0.02	0.02	0.03	0.03
15	0.02	0.02	0.02	0.02	0.02	0.02	0.02
16			0.02	0.02	0.02	0.02	0.02
17			0.02	0.02	0.02	0.02	0.02
18			0.02	0.02	0.02	0.02	0.02
19			0.02	0.02	0.02		0.02
20			0.02	0.02	0.02		0.02
21			0.02	0.02	0.02	0.02	0.02
22			0.02	0.02	0.02	0.02	0.02
23			0.02	0.02	0.02	0.02	0.02
24			0.02	0.02	0.02		0.02
25			0.02	0.02	0.02	0.02	0.02
26			0.03	0.03	0.03		0.03
27			0.02	0.02	0.02		0.02
28			0.02	0.02	0.02		0.02
29			0.02	0.02	0.02		0.02
30			0.02				0.02
31							

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? Yes / No	CT's met everyday? (see back) Yes / No	All Cl2 residual at entry point ≥ 0.2 mg/l? Yes / No
All 4-hour turbidity readings ≤ 1 NTU? Yes / No		
All turbidity readings < IFE <sup>2</sup> triggers Yes / No		

Notes:	David Terrusa	
	SIGNATURE: Digitally signed	
	541-253-7556	CERT# 6930

<sup>1</sup> 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. <sup>2</sup> IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

**OHA - Drinking Water Program - Surface Water Quality Data Form**

<b>System Name:</b>	City of Port Orford	ID# 4100670	Month/Year:	Nov-22	<b>WTP-A:</b>	Disinfection <i>Giardia</i> Log Inactive:	1
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Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm ormg/l]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1@1pm				PLANT	OFF			
2@1pm	1.2	37.5	45.0	11.0	7.20	39.6	YES	255
3@6pm	1.2	37.5	45.0	11.0	7.20	39.6	YES	255
4@1pm	1.3	37.5	48.8	11.0	7.20	40.1	YES	255
5@1pm				PLANT	OFF			
6@9am	1.2	37.5	45.0	12.0	7.30	38.4	YES	255
7@1pm	1.3	37.5	48.8	11.0	7.30	41.5	YES	255
8@1pm	1.2	37.5	45.0	11.0	7.20	39.6	YES	255
9@1pm	1.3	37.5	48.8	10.0	7.20	42.8	YES	255
10@1pm	1.3	37.5	48.8	9.0	7.30	47.4	YES	255
11@1pm	1.2	37.5	45.0	10.0	7.20	42.3	YES	255
12@1pm	1.2	37.5	45.0	10.0	7.20	42.3	YES	255
13@1pm	1.3	37.5	48.8	9.0	7.30	47.4	YES	255
14@1pm	1.3	37.5	48.8	9.0	7.20	45.7	YES	255
15@1pm	1.3	37.5	48.8	9.0	7.20	45.7	YES	255
16@1pm	1.3	37.5	48.8	9.0	7.20	45.7	YES	255
17@1pm	1.4	37.5	52.5	8.0	7.20	49.4	YES	255
18@1pm	1.3	37.5	48.8	9.0	7.20	45.7	YES	255
19@1pm	1.4	37.5	52.5	8.0	7.20	49.4	YES	255
20@1pm	1.4	37.5	52.5	8.0	7.20	49.4	YES	255
21@1pm	1.4	37.5	52.5	8.0	7.20	49.4	YES	255
22@1pm	1.3	37.5	48.8	9.0	7.20	45.7	YES	255
23@1pm	1.3	37.5	48.8	9.0	7.20	45.7	YES	255
24@2pm	1.3	37.5	48.8	9.0	7.20	45.7	YES	255
25@2pm	1.3	37.5	48.8	9.0	7.20	45.7	YES	255
26@1pm	1.3	37.5	48.8	9.0	7.20	45.7	YES	255
27@1pm	1.3	37.5	48.8	9.0	7.20	45.7	YES	255
28@1pm	1.3	37.5	48.8	9.0	7.30	47.4	YES	255
29@1pm	1.4	37.5	52.5	8.0	7.30	51.2	YES	255
30@10am	1.3	37.5	48.8	9.0	7.20	45.7	YES	255
31@1pm								

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised July 2018

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