

OHA - Drinking Water Services -Turbidity Monitoring Report Form
Conventional or Direct Filtration

County: Lincoln
Month/Year: Aug-22

System Name:	Siletz		ID#: 41 00821				WTP : TP -
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	Off	Off	0.02	0.02	Off	Off	0.02
2	Off	Off	0.02	0.02	Off	Off	0.02
3	Off	Off	0.02	0.02	0.02	Off	0.02
4	Off	Off	0.02	0.02	Off	Off	0.02
5	Off	Off	0.02	0.02	0.02	Off	0.02
6	Off	Off	0.02	0.02	0.02	Off	0.02
7	Off	Off	0.02	0.02	Off	Off	0.02
8	Off	Off	0.02	0.02	Off	Off	0.02
9	Off	Off	0.02	0.02	0.02	Off	0.02
10	Off	Off	0.02	0.02	Off	Off	0.02
11	Off	Off	0.02	0.02	Off	Off	0.02
12	Off	Off	0.02	0.02	0.02	Off	0.02
13	Off	Off	0.02	0.02	Off	Off	0.02
14	Off	Off	0.02	0.02	0.02	Off	0.00
15	Off	Off	0.02	0.02	0.02	Off	0.02
16	Off	Off	0.02	0.02	0.02	Off	0.02
17	Off	Off	0.02	0.02	0.02	Off	0.02
18	Off	Off	0.02	0.02	Off	Off	0.02
19	Off	Off	0.02	0.02	Off	Off	0.02
20	Off	Off	0.02	0.02	Off	Off	0.02
21	Off	Off	0.02	0.02	Off	Off	0.02
22	Off	Off	0.02	0.02	Off	Off	0.02
23	Off	Off	0.02	0.02	Off	Off	0.02
24	Off	Off	0.02	0.02	0.02	Off	0.02
25	Off	Off	0.02	0.02	Off	Off	0.02
26	Off	Off	0.02	0.02	0.02	Off	0.02
27	Off	Off	0.02	0.02	Off	Off	0.02
28	Off	Off	0.02	0.02	0.02	Off	0.02
29	Off	Off	0.02	0.02	Off	Off	0.02
30	Off	Off	0.02	0.02	Off	Off	0.02
31	Off	Off	0.02	0.02	Off	Off	0.02

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 All 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No All turbidity readings < IFE ² triggers <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> yes	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> yes

Notes:	PRINTED NAME: Allen Middaugh	DATE: 9-7-22
	SIGNATURE: <i>Allen Middaugh</i>	cert# 5265
	PHONE #: (541) 444-2521	

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 Eff. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

System Name: Siletz				ID#: 41 00821	Month/Year: Jul-22	WTP - : Disinfection <i>Giardia</i> Log Inactive: 0.5	
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
1	0.92	179	164.7	21.0	7.00	9.0	YES	350
2	0.91	179	162.9	21.1	7.06	9.1	YES	350
3	0.92	179	164.7	21.0	7.05	9.2	YES	350
4	0.94	179	168.3	21.4	7.07	9.0	YES	350
5	0.95	179	170.1	21.0	7.12	9.5	YES	350
6	0.93	179	166.5	22.9	7.19	8.5	YES	350
7	0.94	179	168.3	21.7	7.08	8.9	YES	350
8	0.94	179	168.3	21.9	7.05	8.7	YES	350
9	0.89	179	159.3	21.5	7.23	9.5	YES	350
10	0.92	179	164.7	21.4	7.19	9.4	YES	350
11	0.89	179	159.3	21.0	7.16	9.5	YES	350
12	0.93	179	166.5	21.2	7.13	9.3	YES	350
13	0.93	179	166.5	21.3	7.16	9.4	YES	350
14	0.91	179	162.9	20.9	7.18	9.7	YES	350
15	0.91	179	162.9	21.1	7.04	9.1	YES	350
16	0.92	179	164.7	21.3	7.05	9.0	YES	350
17	0.93	179	166.5	21.2	7.09	9.2	YES	350
18	0.91	179	162.9	21.5	7.08	9.0	YES	350
19	0.95	179	170.1	21.9	7.04	8.6	YES	350
20	0.94	179	168.3	21.8	7.05	8.7	YES	350
21	0.93	179	166.5	21.7	7.03	8.7	YES	350
22	0.94	179	168.3	21.9	7.05	8.7	YES	350
23	0.98	179	175.4	21.6	7.08	9.0	YES	350
24	0.97	179	173.6	21.9	7.07	8.7	YES	350
25	0.97	179	173.6	22.0	7.06	8.7	YES	350
26	0.98	179	175.4	22.2	7.08	8.6	YES	350
27	1.01	179	180.8	21.6	7.09	9.0	YES	350
28	1.03	179	184.4	21.3	7.13	9.4	YES	350
29	1.06	179	189.7	21.2	7.02	9.1	YES	350
30	0.96	179	171.8	21.7	7.04	8.8	YES	350
31	0.9	179	161.1	21.6	7.01	8.7	YES	350

³ If Cl₂ 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:

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