

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

System Name: *City of Sumpter* **ID #:** *41100845* **WTP-:** **Month/Year:** *Sept. 2021*

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							0.05
2							0.05
3							0.05
4							0.05
5							0.05
6							0.05
7							0.05
8							0.05
9							0.05
10							0.05
11							0.05
12							0.05
13							0.05
14							0.05
15							0.05
16							0.05
17							0.05
18							0.05
19							0.05
20							0.05
21							0.05
22							0.05
23							0.05
24							0.05
25							0.05
26							0.05
27							0.05
28							0.05
29							0.05
30							0.05
31							0.05

Slow Sand/Membrane/DE Filtration/Unfiltered Monthly Summary 95% of daily turbidity readings ≤ 1 NTU? ² <input checked="" type="radio"/> Yes / <input type="radio"/> No All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No		All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
	Notes:		PRINTED NAME: <i>Leri Tickner</i> SIGNATURE: <i>[Signature]</i> DATE: <i>10/7/21</i> PHONE #: <i>(541) 398-1804</i> CERT #: <i>T-008780</i>

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

WTP- :
 Disinfection *Giardia* Log
 Inactiv: 1.0

System Name: City of Sumpter 4100845 Month/Year: Sep-21

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/l]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.8	165	132.0	18.2	7.10	22.3	YES	485
2	0.8	171	136.8	17.7	7.30	24.8	YES	468
3	0.8	142	113.6	16.7	7.00	23.8	YES	564
4	0.8	172	137.6	17.1	6.80	21.5	YES	466
5	0.8	158	126.4	18.1	7.10	22.4	YES	507
6	0.8	158	126.4	19.2	7.00	20.1	YES	507
7	0.8	149	119.2	18.2	6.70	19.2	YES	541
8	0.6	137	82.2	19.3	7.20	21.0	YES	582
9	0.8	166	132.8	17.4	7.40	26.3	YES	481
10	0.8	158	126.4	18.6	7.30	23.4	YES	506
11	1	271	271.0	17.4	7.30	25.9	YES	295
12	1	131	131.0	18.0	7.40	25.9	YES	609
13	1	142	142.0	17.5	7.40	26.7	YES	562
14	0.8	219	175.2	16.8	7.30	26.4	YES	366
15	0.7	216	151.2	17.2	7.30	25.4	YES	371
16	0.6	160	96.0	16.9	7.40	26.6	YES	501
17	0.6	186	111.6	16.5	7.30	26.3	YES	430
18	0.8	181	144.8	16.3	7.20	26.3	YES	443
19	0.7	202	141.4	16.2	7.30	27.2	YES	397
20	0.8	171	136.8	15.0	7.30	29.8	YES	469
21	0.8	174	139.2	15.4	7.30	29.0	YES	460
22	0.8	175	140.0	15.9	7.20	27.0	YES	458
23	0.8	184	147.2	15.9	7.30	28.0	YES	435
24	1	171	171.0	15.0	7.40	31.6	YES	467
25	0.7	190	133.0	15.9	7.50	29.8	YES	420
26	0.7	181	126.7	17.2	7.40	26.4	YES	443
27	0.7	196	137.2	15.3	7.40	29.9	YES	408
28	0.7	174	121.8	15.5	7.40	29.5	YES	460
29	0.7	149	104.3	14.9	7.30	29.6	YES	537
30	0.8	249	199.2	14.8	7.40	31.3	YES	321
31								

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:
dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350