

OHA - DWS

Membrane Filter Monthly Operating Report

County: WASHINGTONSystem Name: TWAMonth/Year: MAY-2025PWS ID#: 41 - 00898

Minimum test pressure applied || req'd: _____ psi || _____ psi

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

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

PDR = Pressure Decay Rate

LRC = Log Removal Credit

PDR_{Max} [$\frac{\text{psi}}{\text{min}}$]

LRC [log removal]

4.00

DIT
Daily

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU] (>15 min duration)	Highest PDR of day [$\frac{\text{psi}}{\text{min}}$]	Lowest LRV _{ambient} of day [log removal]	[Y/N] or "off"
1			.04		.02	
2			.06		.02	
3			.04		.02	
4			.03		.02	
5			.04		.04	
6			.04		.04	
7			.04		.04	
8			.05		.04	
9			.04		.04	
10			.04		.04	
11			.04		.04	
12			.05		.04	
13			.05		.04	
14			.06		.04	
15			.06		.04	
16			.07		.05	
17			.08		.05	
18			.11		.04	
19			.04		.04	
20			.04		.04	
21			.04		.04	
22			.04		.04	
23			.04		.04	
24			.04		.04	
25			.05		.04	
26			.05		.04	
27			.05		.05	
28			.06		.05	
29			.06		.05	
30			.05		.05	
31			.05		.05	

Compliance summary (operator to complete any blank fields)

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

PRINTED NAME: Jess BushSIGNATURE: Jess Bush

Notes:

DATE: 6-10-25WT CERT #: 6091PHONE #: 503-816-0958

OHA-DWS

Disinfection Monthly Operating Report

System Name: TWAPWS ID# 41 - 00898Plant ID: WTP -
☐ Log
 Inactivation
 Required via
 Disinfection

Day	Minimum Cl ₂ Residual at 1" 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	.60	72	43.2	13.4	7.80	26	Yes	10	in production
2	.63		45.36	13.0	7.80	26	Yes	10	in production
3	.69		49.96	13.1	7.80	26	Yes	10	in production
4	.77		55.44	12.8	7.80	26	Yes	10	in production
5	.79		56.88	13.1	7.80	26	Yes	10	in production
6	.80		57.6	13.8	7.80	27	Yes	10	in production
7	.76		54.72	13.5	7.80	27	Yes	10	in production
8	.72		51.84	13.4	7.80	27	Yes	10	in production
9	.75		54	13.1	7.80	26	Yes	10	in production
10	.78		56.16	12.8	7.80	27	Yes	10	in production
11	.83		59.76	12.0	7.80	26	Yes	10	in production
12	.85		61.8	12.1	7.80	26	Yes	10	in production
13	.78		50.4	12.5	7.80	26	Yes	10	in production
14	.94		67.68	12.5	7.80	26	Yes	10	in production
15	.90		64.8	13.0	7.80	27	Yes	10	in production
16	.98		63.36	13.1	7.80	26	Yes	10	in production
17	.83		59.76	13.5	7.80	26	Yes	10	in production
18	.80		57.6	13.3	7.80	27	Yes	10	in production
19	.91		65.52	13.2	7.80	27	Yes	10	in production
20	.87		62.64	13.4	7.80	26	Yes	10	in production
21	.80		57.6	13.4	7.80	26	Yes	10	in production
22	.76		54.72	13.6	7.80	26	Yes	10	in production
23	.72		51.84	13.6	7.80	26	Yes	10	in production
24	.99		71.28	13.8	7.80	27	Yes	10	in production
25	1.00		72	13.8	7.80	27	Yes	10	in production
26	.98		70.56	14.1	7.80	27	Yes	10	in production
27	.93		66.96	14.3	7.80	27	Yes	10	in production
28	.88		63.36	14.3	7.80	26	Yes	10	in production
29	.79		56.88	14.5	7.80	26	Yes	10	in production
30	.73		52.56	14.6	7.80	26	Yes	10	in production
31	.69		49.68	14.6	7.80	26	Yes	10	in production

* 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@ohadws.org

fax: 971-673-0458

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