OHA - Drinking Water Program – Turbidity Monitoring Report Form County: Lincoln
Conventional or Direct Filtration

System Name: SW LINCOLN CO WATER DIST **ID #:** OR4100925 **WTP-:WTP** B **Month/Year:** NOV 2024

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							
2							
3							
4							
5				.046			.067
6							
7				.053			.069
8							
9							
10							
11							
12				.062			.071
13							
14				.051			.068
15							
16							
17							
18							
19				.049			.070
20							
21				.037			.061
22							
23							
24							
25							
26				.035			.062
27							
28				.041			.073
29							
30							
31							

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of the 4-hour turbidity readings ≤ 0.3 NTU? Yes / No All the 4-hour turbidity readings ≤ 1 NTU? Yes / No All turbidity readings < IFE[2] triggers? Yes / No[2]	CT's met everyday? (see back) Yes / No	All Cl_2 residuals at entry point ≥ 0.2 mg/l? Yes / No
Notes:	**PRINTED NAME:** Zach Forcier	
	SIGNATURE:	**DATE:** 12/10/24
	PHONE #: (541) 547-3315	**CERT #:** T 9253

[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] IFE = Individ. Filter Effl. (OAR 333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program – Surface Water Quality Data Form

SW LINCOLN CO WATER DIST ID #: OR4100925 WTP: WTP B Month/Year: Nov 2024 **Required Log Inactivation:** .5

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]		Use tables	Yes / No	[GPM]
1 /								24
2 /								24
3 /								24
4 /								24
5 / 1:00	1.1	105	116	11	7.6	22.5	Yes	24
6 /								24
7 / 1:30	1.1	105	116	11	7.6	22.5	YES	24
8 /								24
9 /								24
10 /								24
11 /								28
12 / 1:30	1.2	105	126	11	7.6	22.8	YES	28
13 /								28
14 / 2:00	1.1	105	116	11	7.7	23.3	YES	28
15 /								28
16 /								28
17 /								28
18 /								31
19 / 1:00	1.2	105	126	11	7.7	23.6	Yes	31
20 /								31
21 / 2:00	1.1	105	116	11	7.7	23.3	YES	31
22 /								31
23 /								31
24 /								26
25 /								26
26 / 1:30	1.1	105	116	11	7.6	22.5	Yes	26
27 /								26
28 / 1:00	1.2	105	126	11	7.6	22.8	YES	26
29 /								26
30 /								26
31 /								

[3] If Cl_2 at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.

Download form at: www.public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-conv-direct.pdf