

Oregon DHS - Drinking Water Program -- Turbidity Monitoring Report Form

System Name: City of Waldport

ID #: 41 00926

Month/Year: 05/21

DAY	12 AM (NTU)	4 AM (NTU)	8 AM (NTU)	NOON (NTU)	4 PM (NTU)	8 PM (NTU)	Highest Reading (NTU)	Peak Hourly Flow (GPM)
1	off	off	.05	.05	.05	.05	0.05	< 350
2	.05	.05	.05	.05	.05	off	0.05	< 350
3	off	off	off	off	off	off	0	< 350
4	off	off	.05	.05	.05	.05	0.05	< 350
5	.05	.05	.05	.05	.05	.05	0.05	< 350
6	.05	.05	.05	.05	.05	.05	0.05	< 350
7	.05	.05	.05	off	off	off	0.05	< 350
8	off	off	.05	.05	.05	.05	0.05	< 350
9	.05	.06	.05	.05	.05	.05	0.06	< 350
10	.05	.05	.05	.05	.05	off	0.05	< 350
11	off	off	.05	.05	.05	.05	0.05	< 350
12	.05	off	.05	.05	.06	.05	0.06	< 350
13	off	off	.05	.05	.05	.05	0.05	< 350
14	.05	.05	.06	.05	.05	off	0.06	< 350
15	off	off	off	off	off	off	0	< 350
16	off	off	off	off	off	off	0	< 350
17	off	off	.05	.05	.05	.05	0.05	< 350
18	.05	off	.05	.05	.06	.10	0.10	< 350
19	.11	.20	.18	.06	.07	.06	0.20	< 350
20	.05	.05	.06	.06	.07	.07	0.07	< 350
21	.05	.05	.05	.05	.05	.05	0.05	< 350
22	off	off	.05	.06	.05	.05	0.06	< 350
23	off	off	.05	.05	.05	off	0.05	< 350
24	off	off	.06	.05	.05	off	0.06	< 350
25	off	off	.05	.05	.05	.05	0.05	< 350
26	.05	.06	.07	.08	.08	.05	0.08	< 350
27	.05	.05	.06	.07	.05	.05	0.07	< 350
28	.05	off	.05	.05	.05	.05	0.05	< 350
29	.05	.05	.05	.05	.05	.05	0.05	< 350
30	.05	.05	.05	.05	.05	.05	0.05	< 350
31	.05	.05	.05	.05	.06	.08	0.08	< 350

Conventional or Direct Filtration 95% of turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No All turbidity readings < 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No All turbidity readings < IFE triggers? <input checked="" type="radio"/> Yes / <input type="radio"/> No ¹		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 Cl ₂ residual measured in 95% of distribution samples? <input checked="" type="radio"/> Yes / <input type="radio"/> No		
- OR -		PRINTED NAME: <u>Lyle T. Arrant</u>		
Slow Sand/Cartridge/Membrane/DE Filtration 95% of turbidity readings ≤ 1 NTU? <input type="radio"/> Yes / <input type="radio"/> No All turbidity readings < 5 NTU? <input type="radio"/> Yes / <input type="radio"/> No		SIGNATURE: <u>Lyle T. Arrant</u>		DATE: <u>06/07/21</u>
		PHONE #: <u>(541) 563-2929</u>		CERT #: <u>5292</u>

¹ IFE = Individual Filter Effluent

Oregon DHS - Drinking Water Program - Surface Water Quality Data Form

System Name:

City of Waldport

ID #: 41 00926

Month/Year: 05/20

Date / Time	Minimum Cl ₂ Residual at 1 st User (C)	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT M
	ppm or mg/L	minutes	CXT	°C		Use tables	Yes /
11/0945	0.8	360	288	16	7.4	15	Yes
21/0930	0.9	360	324	17	7.4	15	Yes
31/045	0.9	360	324	15	7.5	15	Yes
41/1300	0.9	360	324	15	7.5	15	Yes
51/1800	1.0	360	360	16	7.5	15	Yes
61/1600	0.9	360	324	15	7.5	15	Yes
71/0930	0.9	360	324	16	7.4	15	Yes
81/0900	1.0	360	360	15	7.4	15	Yes
91/0900	1.0	360	360	15	7.6	15	Yes
101/500	1.0	360	360	15	7.5	15	Yes
111/800	1.1	360	396	16	7.5	15	Yes
121/300	1.0	360	360	15	7.5	15	Yes
131/730	1.0	360	360	16	7.5	15	Yes
141/900	1.0	360	360	14	7.5	15	Yes
151/800	0.9	360	324	15	7.4	15	Yes
161/845	1.0	360	360	16	7.4	15	Yes
171/800	1.0	360	360	16	7.5	15	Yes
181/600	1.0	360	360	15	7.5	15	Yes
191/730	1.0	360	360	15	7.6	15	Yes
201/600	1.0	360	360	15	7.5	15	Yes
211/0930	1.0	360	360	15	7.5	15	Yes
221/0830	0.9	360	324	14	7.5	15	Yes
231/0900	1.0	360	360	17	7.6	15	Yes
241/1800	1.0	360	360	16	7.5	15	Yes
251/1730	0.9	360	324	16	7.6	15	Yes
261/1400	0.9	360	324	16	7.6	15	Yes
271/1600	0.9	360	324	15	7.6	15	Yes
281/1800	0.9	360	324	15	7.5	15	Yes
291/0900	0.9	360	324	15	7.5	15	Yes
301/1200	0.9	360	324	16	7.5	15	Yes
311/1600	0.9	360	324	15	7.5	15	Yes