

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

System Name: City of Waldport ID #: 41 00926 Month/Year: 05/24

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	.03	.03	.03	.04	.04	.03	0.04	≤ 350
2	off	off	.03	.04	.03	.03	0.04	≤ 350
3	.03	.03	.03	off	off	off	0.03	≤ 350
4	off	off	off	off	off	off	0	≤ 350
5	off	off	.05	.04	.04	.04	0.05	≤ 350
6	off	off	.03	.03	.03	.03	0.03	≤ 350
7	.03	.03	.03	.03	.03	.03	0.03	≤ 350
8	.03	.03	.03	.03	.03	.03	0.03	≤ 350
9	.03	.03	.03	.04	.03	.03	0.04	≤ 350
10	.03	.03	.03	.03	.03	.03	0.03	≤ 350
11	.03	.03	.03	.03	.03	.03	0.03	≤ 350
12	.03	.03	.03	.03	.03	.03	0.03	≤ 350
13	off	off	off	off	off	off	0	≤ 350
14	off	off	off	off	off	off	0	≤ 350
15	off	off	.03	.03	.03	.03	0.03	≤ 350
16	.03	.03	.03	.03	.03	.03	0.03	≤ 350
17	.03	.03	.03	.03	.03	.03	0.03	≤ 350
18	.03	.03	.03	.03	.03	.03	0.03	≤ 350
19	.03	.03	.03	.03	.03	.03	0.03	≤ 350
20	.03	.03	.03	.03	.03	.03	0.03	≤ 350
21	.03	.03	.03	.03	.04	off	0.04	≤ 350
22	off	off	.03	.03	.03	.03	0.03	≤ 350
23	.03	.03	.03	off	off	off	0.03	≤ 350
24	off	off	.05	.05	.05	off	0.05	≤ 350
25	off	off	.04	.03	.03	off	0.04	≤ 350
26	off	off	.03	.03	.03	off	0.03	≤ 350
27	off	off	.04	.04	.03	.03	0.04	≤ 350
28	off	off	.03	.03	.03	.03	0.03	≤ 350
29	.03	.03	.03	.03	.03	.03	0.03	≤ 350
30	.03	.03	.03	.03	.03	.03	0.03	≤ 350
31	.03	.03	.03	.03	.03	.03	0.03	≤ 350

### Conventional or Direct Filtration

### Monthly Summary (Answer Yes or No)

95% of turbidity readings ≤ 0.3 NTU? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
All turbidity readings < 1 NTU? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Cl <sub>2</sub> residual measured in 95% of distribution samples? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
All turbidity readings < IFE triggers? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

- OR -

PRINTED NAME: Lyle T. Arrant

### Slow Sand/Cartridge/Membrane/DE Filtration

SIGNATURE: Lyle T. Arrant DATE: 06/04/24

95% of turbidity readings ≤ 1 NTU?  Yes  No  
 All turbidity readings < 5 NTU?  Yes  No

PHONE #: (541) 563-2929 CERT #: 5292

<sup>1</sup> IFE = Individual Filter Effluent

Date / Time	Minimum Residual at 1 <sup>st</sup> User (C)	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met?
	ppm or mg/L	minutes	C X T	°C		Use tables	Yes / No
11/800	1.0	360	360	16	7.5	15	yes
21/1500	0.9	360	324	15	7.5	15	yes
310930	0.9	360	324	13	7.4	15	yes
410850	0.9	360	324	13	7.4	15	yes
511550	0.9	360	324	16	7.4	15	yes
610825	0.8	360	288	14	7.5	15	yes
710840	0.8	360	288	14	7.4	15	yes
810835	0.8	360	288	13	7.4	15	yes
910850	1.0	360	360	14	7.5	15	yes
1010835	0.9	360	324	14	7.5	15	yes
1110930	0.9	360	288	14	7.5	15	yes
1210915	0.8	360	288	14	7.4	15	yes
1319:50	0.8	360	288	14	7.5	15	yes
1419:25	0.8	360	288	14	7.5	15	yes
1510915	0.9	360	324	16	7.4	15	yes
1610850	0.9	360	324	17	7.4	15	yes
1710940	0.9	360	324	16	7.5	15	yes
1810850	1.0	360	360	15	7.5	15	yes
1910950	0.9	360	324	15	7.4	15	yes
2010945	1.0	360	360	14	7.3	15	yes
2110845	1.0	360	360	16	7.5	15	yes
2210830	0.9	360	324	14	7.5	15	yes
2310830	1.0	360	360	15	7.5	15	yes
2410915	0.9	360	324	16	7.5	15	yes
2510900	0.8	360	288	18	7.5	11	yes
2610930	0.9	360	324	14	7.6	15	yes
2710840	1.0	360	360	15	7.5	15	yes
2811600	1.0	360	360	15	7.5	15	yes
2911800	1.0	360	360	16	7.6	15	yes
3011500	0.9	360	324	16	7.6	15	yes
3111600	0.9	360	324	15	7.5	15	yes