

Oregon DHS - Drinking Water Program - Turbidity Monitoring Report Form

System Name: City of Waldport ID #: 41 00926 Month/Year: 12/25

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	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
2	0.02	0.03	0.02	0.02	0.02	0.03	0.03	≤ 350
3	0.02	0.02	0.03	0.02	0.02	0.02	0.03	≤ 350
4	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
5	0.02	0.02	0.02	0.02	0.02	0.03	0.03	≤ 350
6	0.03	0.02	0.03	0.02	0.02	0.02	0.03	≤ 350
7	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
8	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
9	0.02	0.03	0.03	0.02	0.02	0.02	0.03	≤ 350
10	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
11	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
12	0.02	0.02	0.02	0.03	0.02	0.02	0.03	≤ 350
13	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
14	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
15	0.03	0.03	0.02	0.02	0.02	0.02	0.03	≤ 350
16	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
17	0.02	0.02	0.03	0.03	0.02	0.02	0.03	≤ 350
18	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
19	0.02	0.03	0.02	0.03	0.02	0.02	0.03	≤ 350
20	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
21	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
22	0.03	0.02	0.02	0.02	0.02	0.03	0.03	≤ 350
23	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
24	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
25	0.02	0.02	0.02	0.02	0.02	0.03	0.03	≤ 350
26	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
27	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
28	0.03	0.02	0.02	0.02	0.02	0.02	0.03	≤ 350
29	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
30	0.02	0.03	0.02	0.02	0.03	0.02	0.03	≤ 350
31	0.03	0.02	0.02	0.03	0.02	0.02	0.03	≤ 350

Conventional or Direct Filtration 95% of turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes / No All turbidity readings < 1 NTU? <input checked="" type="radio"/> Yes / No All turbidity readings < IFE triggers? <input checked="" type="radio"/> Yes / No ¹		Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <input checked="" type="radio"/> Yes / No All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / No Cl ₂ residual measured in 95% of distribution samples? <input checked="" type="radio"/> Yes / No		
- OR -		PRINTED NAME: <u>Lyle T. Arvant</u>		
Slow Sand/Cartridge/Membrane/DE Filtration 95% of turbidity readings ≤ 1 NTU? Yes / No All turbidity readings < 5 NTU? Yes / No		SIGNATURE: <u>[Signature]</u>		DATE: <u>1/03/25</u>
PHONE #: <u>(541) 563-2929</u>		CERT #: <u>5292</u>		

¹ IFE = Individual Filter Effluent

Date / Time	Minimum Cl ₂ Residual at 1 st User (C)	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met?
	ppm or mg/L	minutes	CXT	°C		Use tables	Yes / No
1 08:30	0.9	325	293	11	7.6	23	yes
2 108:30	1.1	325	358	11	7.6	23	yes
3 108:30	1.0	325	325	15	7.5	15	yes
4 14:00	1.0	325	325	15	7.6	15	yes
5 10:30	1.0	325	325	14	7.5	15	yes
6 18:30	1.0	325	325	13	7.6	15	yes
7 18:30	1.0	325	325	14	7.6	15	yes
8 19:00	0.9	325	293	14	7.6	15	yes
9 18:30	1.0	325	325	12	7.6	22	yes
10 13:00	1.0	325	325	14	7.5	15	yes
11 19:30	1.0	325	325	13	7.5	15	yes
12 8:30	1.0	325	325	12	7.5	22	yes
13 8:30	1.0	325	325	12	7.5	22	yes
14 14:00	1.0	325	325	13	7.5	15	yes
15 15:20	1.0	325	325	14	7.4	15	yes
16 19:30	1.1	325	358	13	7.5	15	yes
17 13:00	1.1	325	358	13	7.5	15	yes
18 13:00	1.0	325	325	16	7.7	15	yes
19 10:00	1.0	325	325	12	7.5	22	yes
20 18:00	1.0	325	325	15	7.5	15	yes
21 18:55	0.9	325	293	12	7.5	22	yes
22 109:00	1.0	325	325	12	7.5	22	yes
23 108:00	1.0	325	325	12	7.4	22	yes
24 108:30	1.0	325	325	14	7.5	15	yes
25 11:00	1.1	325	358	13	7.5	15	yes
26 11:00	1.1	325	358	13	7.5	15	yes
27 108:00	1.0	325	325	13	7.5	15	yes
28 109:30	0.9	325	293	13	7.5	15	yes
29 109:00	0.8	325	260	16	7.5	15	yes
30 108:00	1.0	325	325	13	7.6	15	yes
31 09:00	1.0	325	325	12	7.5	22	yes