

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

System Name: City of Waldport

ID #: 4100926

Month/Year: Jan 2025

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	0.03	0.02	0.02	0.02	0.02	0.03	≤ 350
2	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
3	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
4	off	off	off	off	off	off	0	≤ 350
5	off	off	off	off	off	off	0	≤ 350
6	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
7	0.02	0.03	0.02	0.02	0.02	0.02	0.03	≤ 350
8	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
9	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
10	0.02	0.02	0.03	0.02	0.02	0.02	0.03	≤ 350
11	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
12	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
13	off	off	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	0.02	0.02	0.02	0.02	off	off	0.02	≤ 350
16	off	off	off	0.04	0.03	0.02	0.04	≤ 350
17	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
18	0.02	0.02	0.02	off	off	off	0.02	≤ 350
19	off	off	0.02	0.02	0.02	0.02	0.02	≤ 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	off	0.02	≤ 350
22	off	off	off	0.03	0.03	0.02	0.03	≤ 350
23	0.02	off	0.02	0.02	0.02	0.02	0.02	≤ 350
24	0.02	0.03	0.02	0.02	0.02	0.02	0.03	≤ 350
25	0.02	0.02	0.02	0.03	off	off	0.03	≤ 350
26	off	off	off	off	off	off	0	≤ 350
27	off	off	0.02	0.02	0.02	0.02	0.02	≤ 350
28	0.02	0.02	0.02	0.02	0.02	0.02	0.02	≤ 350
29	off	off	0.02	0.02	0.02	0.02	0.02	≤ 350
30	0.02	0.02	0.03	0.02	0.02	off	0.03	≤ 350
31	off	off	off	off	off	off	0	≤ 350

**Conventional or Direct Filtration**

95% of turbidity readings ≤ 0.3 NTU?  Yes /  No  
 All turbidity readings < 1 NTU?  Yes /  No  
 All turbidity readings < IFE triggers?  Yes /  No<sup>1</sup>

**Monthly Summary (Answer Yes or No)**

CT's met everyday? (see back)  Yes /  No  
 All Cl<sub>2</sub> residual at entry point ≥ 0.2 mg/l?  Yes /  No  
 Cl<sub>2</sub> residual measured in 95% of distribution samples?  Yes /  No

- OR -

**Slow Sand/Cartridge/Membrane/DE Filtration**

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

PRINTED NAME: Lyle T. Arrant

SIGNATURE: Lyle T. Arrant

DATE: 02/05/25

PHONE #: (541) 563-2929

CERT #: 5292

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

Date / Time	Minimum Cl <sub>2</sub> 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
1 10910	1.1	325	358	11	7.5	22	yes
2 109:00	1.0	325	325	13	7.6	15	yes
3 108:30	1.0	325	325	14	7.6	15	yes
4 109:45	1.1	325	358	12	7.5	22	yes
5 111030	0.9	325	293	13	7.5	15	yes
6 110:00	1.0	325	325	12	7.5	22	yes
7 109:00	1.0	325	325	12	7.5	22	yes
8 108:00	1.0	325	325	12	7.5	22	yes
9 108:30	1.0	325	325	11	7.5	22	yes
10 108:00	1.1	325	358	11	7.4	22	yes
11 10815	0.9	325	293	12	7.4	22	yes
12 10900	1.1	325	358	12	7.3	22	yes
13 108:30	1.0	325	325	11	7.5	22	yes
14 108:00	1.0	325	325	12	7.5	22	yes
15 110:30	1.0	325	325	13	7.4	15	yes
16 108:30	1.0	325	325	12	7.4	22	yes
17 108:30	1.0	325	325	10	7.6	22	yes
18 10900	1.0	325	325	11	7.5	22	yes
19 10830	1.0	325	325	11	7.4	22	yes
20 107:30	1.0	325	325	9	7.5	22	yes
21 108:30	1.0	325	325	9	7.6	22	yes
22 108:30	1.0	325	325	11	7.4	22	yes
23 108:00	1.1	325	358	12	7.5	22	yes
24 108:30	1.0	325	325	12	7.4	22	yes
25 10900	1.1	325	358	12	7.4	22	yes
26 10830	1.1	325	358	10	7.3	22	yes
27 108:30	1.1	325	358	12	7.5	22	yes
28 108:00	1.1	325	358	10	7.5	22	yes
29 109:00	1.0	325	325	13	7.4	15	yes
30 108:30	1.1	325	358	11	7.4	22	yes
31 108:00	1.0	325	325	15	7.4	15	yes