

Oregon DHS - Drinking Water Program – Turbidity Monitoring Report Form

System Name: City of Waldport ID #: 41 00926 Month/Year: 02/25

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	off	off	.03	.02	.02	.02	Ø.03	≤ 350
2	.02	.02	.02	.02	.02	.02	Ø.02	≤ 350
3	.02	.02	.02	.02	.02	.03	Ø.03	≤ 350
4	off	off	.02	.02	.02	.02	Ø.02	≤ 350
5	.02	off	off	off	.02	.02	Ø.02	≤ 350
6	.02	.03	.02	.02	.02	.02	Ø.03	≤ 350
7	.02	.02	.02	off	off	off	Ø.02	≤ 350
8	off	off	.03	.02	.02	off	Ø.03	≤ 350
9	off	off	.03	.02	.02	.02	Ø.03	≤ 350
10	.02	.02	.02	.02	.02	.02	Ø.02	≤ 350
11	.02	.02	.02	.03	.04	off	Ø.04	≤ 350
12	off	off	.03	.02	.03	.02	Ø.03	≤ 350
13	off	off	.02	.02	.02	off	Ø.02	≤ 350
14	off	off	.03	.02	.02	.02	Ø.03	≤ 350
15	.02	.02	.02	.02	.02	off	Ø.02	≤ 350
16	off	off	off	off	off	off	Ø	≤ 350
17	off	off	off	.04	.03	.02	Ø.04	≤ 350
18	.02	.02	.02	.02	.02	off	Ø.02	≤ 350
19	off	off	.03	.02	.02	.02	Ø.03	≤ 350
20	.02	.02	.02	.02	.02	.02	Ø.02	≤ 350
21	.02	.02	.02	.02	.02	.02	Ø.02	≤ 350
22	.02	.02	.02	off	off	off	Ø.02	≤ 350
23	off	off	off	off	off	off	Ø	≤ 350
24	off	off	.03	.03	off	off	Ø.03	≤ 350
25	off	off	.02	.02	.02	.02	Ø.02	≤ 350
26	.02	.02	.02	.02	.02	.02	Ø.02	≤ 350
27	.02	.02	.02	.02	.02	.02	Ø.02	≤ 350
28	.02	.02	.02	.02	.02	.02	Ø.02	≤ 350
29								
30								
31								

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>03/04/25</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
1/0900	1.0	325	325	12	7.4	22	yes
2/0900	0.8	325	260	11	7.4	22	yes
3/08:30	1.0	325	325	11	7.3	22	yes
4/600	1.0	325	325	12	7.4	22	yes
5/1800	1.0	325	325	12	7.4	22	yes
6/08:15	1.0	325	325	11	7.4	22	yes
7/0915	0.8	325	260	14	7.4	15	yes
8/0930	0.8	325	260	10	7.5	22	yes
9/0900	0.9	325	293	12	7.4	22	yes
10/08:15	1.0	325	325	11	7.4	22	yes
11/08:15	1.0	325	325	10	7.4	22	yes
12/08:15	0.8	325	260	11	7.4	22	yes
13/09:15	1.0	325	325	12	7.4	22	yes
14/08:00	1.0	325	325	10	7.4	22	yes
15/0900	1.1	325	358	10	7.5	22	yes
16/0820	1.0	325	325	14	7.4	15	yes
17/0845	0.8	325	260	15	7.5	15	yes
18/08:30	1.0	325	325	10	7.5	22	yes
19/08:15	1.0	325	325	15	7.4	15	yes
20/08:15	0.8	325	260	13	7.4	15	yes
21/08:15	1.0	325	325	10	7.5	22	yes
22/0900	0.9	325	293	15	7.4	15	yes
23/0830	0.9	325	293	11	7.3	22	yes
24/1600	1.0	325	325	13	7.4	22	yes
25/1500	0.9	325	293	14	7.5	15	yes
26/08:00	1.0	325	325	11	7.5	22	yes
27/08:15	1.0	325	325	13	7.3	22	yes
28/08:15	1.0	325	325	12	7.5	22	yes
29/							
30/							
31/							