

Oregon DHS - Drinking Water Program - Turbidity Reporting Form

System Name: City of Waldport ID #: 41 00926 Month/Year: 03/23

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

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)		
95% of turbidity readings ≤ 0.3 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back)	All Cl ₂ residual at entry point ≥ 0.2 mg/l?	Cl ₂ residual measured in of distribution sample
All turbidity readings < 1 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No
All turbidity readings < IFE triggers?	<input checked="" type="radio"/> Yes / <input type="radio"/> No			
- OR -		PRINTED NAME: <u>Lyle T. Arrant</u>		
Slow Sand/Cartridge/Membrane/DE Filtration		SIGNATURE: <u>Lyle T. Arrant</u>	DATE: <u>04/06/23</u>	
95% of turbidity readings ≤ 1 NTU?		PHONE #: <u>(541) 563-2929</u>	CERT #: <u>5292</u>	
All turbidity readings < 5 NTU?				

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	C X T	°C		Use tables	Yes
11/1700	1.0	360	360	9	7.4	22	Yes
21/1630	1.0	360	360	12	7.4	22	Yes
3/10900	0.9	360	324	10	7.4	22	Yes
4/10945	0.9	360	324	10	7.4	22	Yes
5/11000	0.8	360	288	9	7.3	22	Yes
6/11700	0.9	360	324	10	7.4	22	Yes
7/10800	1.0	360	360	10	7.4	22	Yes
8/11800	1.0	360	360	12	7.4	22	Yes
9/1330	1.0	360	360	11	7.4	22	Yes
10/10900	1.0	360	360	8	7.4	22	Yes
11/10900	1.0	360	360	8	7.4	22	Yes
12/11000	0.9	360	324	9	7.4	22	Yes
13/11830	1.0	360	360	11	7.5	22	Yes
14/11800	1.0	360	360	11	7.5	22	Yes
15/11700	1.0	360	360	11	7.5	22	Yes
16/11400	0.9	360	324	11	7.5	22	Yes
17/1130	1.0	360	360	11	7.5	22	Yes
18/10930	1.0	360	360	10	7.4	22	Yes
19/10900	1.0	360	360	10	7.5	22	Yes
20/11800	1.0	360	360	12	7.5	22	Yes
21/1200	1.0	360	360	12	7.6	22	Yes
22/11830	1.0	360	360	12	7.7	22	Yes
23/11800	1.0	360	360	12	7.7	22	Yes
24/10830	0.9	360	324	15	7.5	15	Yes
25/10930	1.0	360	360	11	7.5	22	Yes
26/10900	1.0	360	360	10	7.5	22	Yes
27/11800	1.0	360	360	11	7.7	22	Yes
28/11630	1.0	360	360	12	7.6	22	Yes
29/11700	1.0	360	360	12	7.6	22	Yes
30/11530	1.1	360	396	12	7.6	22	Yes
31/10850	1.2	360	432	13	7.6	15	Yes