OHA - Drinking Water Services – Turbidity Monitoring Report Form

Cartridge or Bag Filtration

County: LANE

Month/Year: JULY 2022

System Name: LAKESHORE RV PARK ID# 41 0100 WTP ID:

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day [1] [NTU]
1	27	17	10	15	.31	
2					.32	
3					.32	
4					.35	
5					.35	
6					.34	
7					.32	
8					.32	
9					.32	
10					.34	
11					.33	
12					.31	
13					.33	
14					.33	
15					.34	
16					.35	
17					.32	
18					.30	
19					.35	
20					.34	
21					.31	
22					.34	
23					.31	
24					.32	
25					.32	
26					.34	
27					.33	
28					.33	
29					.32	
30					.32	
31	27	17	10	15	.33	

Cartridge Filtration Monthly Summary

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

Monthly Summary (Answer Yes or No)

CT's met everyday? (see back) Yes / No

All Cl_2 residual at entry point ≥ 0.2 mg/l? Yes / No

Notes: PSI = pounds per square inch
PSID = pounds per square inch difference (before filter – after filter)
PSID When to Change Filter = Manufacturer's recommendation; may need to look in manual for manufacturer's specifications when to change the filter, at what PSID.

PRINTED NAME: EARL J LUPTON

SIGNATURE: Earl J Lupton DATE: 7/8/2022

PHONE #: (541) 997-2741 CERT #:

[1] Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in "Daily Turbidity Reading" Column may not correspond to continuous readings' maximum.

OHA - Drinking Water Services – Surface Water Quality Data Form

Month/Year: JULY 2022

System Name: LAKESHORE RV PARK ID# 41 01001 WTP

Date / Time	Minimum Cl_2 Residual at 1st User (C) [2]	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? [2]	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
1 / 10:00	1.0	12	12	20	7.0	21	NO	5
2 /	1.0	12	12	20	7.0	21	NO	5
3 /	1.0	12	12	20	6.9	21	NO	5
4 /	1.0	12	12	20	6.9	21	NO	5
5 /	1.0	12	12	20	6.9	21	NO	5
6 /	1.0	12	12	20	6.9	21	NO	5
7 /	1.0	12	12	20	6.9	21	NO	5
8 /	2.0	12	24	20	7.0	21	YES	5
9 /	2.0	12	24	20	7.0	21	YES	5
10 /	2.0	12	24	20	6.9	21	YES	5
11 /	2.0	12	24	20	6.9	21	YES	5
12 /	2.0	12	24	20	7.0	21	YES	5
13 /	2.0	12	24	20	7.0	21	YES	5
14 /	2.0	12	24	20	7.0	21	YES	5
15 /	2.0	12	24	20	7.0	21	YES	5
16 /	2.0	12	24	20	6.8	21	YES	5
17 /	2.0	12	24	20	6.9	21	YES	5
18 /	2.0	12	24	20	7.0	21	YES	5
19 /	2.0	12	24	20	6.9	21	YES	5
20 /	2.0	12	24	20	6.8	21	YES	5
21 /	2.0	12	24	20	6.8	21	YES	5
22 /	2.0	12	24	20	6.9	21	YES	5
23 /	2.0	12	24	20	6.8	21	YES	5
24 /	2.0	12	24	20	7.0	21	YES	5
25 /	2.0	12	24	20	7.0	21	YES	5
26 /	2.0	12	24	20	6.9	21	YES	5
27 /	2.0	12	24	20	6.9	21	YES	5
28 /	2.0	12	24	20	7.0	21	YES	5
29 /	2.0	12	24	20	7.0	21	YES	5
30 /	2.0	12	24	20	6.9	21	YES	5
31 / 10:00	2.0	12	24	20	6.9	21	YES	5

[2] If Cl_2 at entry point < 0.2 mg/l, OR CT not met, notify DWS within 24 hours.

Revised August 2016

Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf

Return by 10th of following month by email, fax or mail to:

dwp.dmce@state.or.us; Fax 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350