

OHA - Drinking Water Services – Turbidity Monitoring Report Form
 Cartridge or Bag Filtration

County: Lane
 Month/Year: March 2023

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	31	19	12	15	.34	Same
2					.35	
3					.35	
4					.35	
5					.36	
6					.36	
7					.36	
8					.34	
9					.35	
10					.35	
11					.34	
12					.34	
13					.35	
14					.34	
15					.33	
16					.33	
17					.33	
18					.35	
19					.35	
20					.36	
21					.37	
22					.38	
23					.38	
24					.36	
25					.36	
26					.34	
27					.33	
28					.33	
29					.33	
30					.33	
31	31	19	12	15	.34	Same

Cartridge Filtration Monthly Summary 95% of daily turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	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
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: <u>mike J Blankenship</u>	
	SIGNATURE: <u>[Signature]</u>	DATE: <u>3/8/2023</u>
	PHONE #: <u>(541) 997-2741</u>	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: March 2023

System Name: <u>Lakeshore RU Park</u>		ID# <u>41 01001</u>		WTP <u>2023</u>				
Date / Time	Minimum Cl ₂ Residual at 1 st 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]
1/1000	.8	65	52	10	6.9	37	Y	5
2/	.8	65	52	10	7.0	37	Y	
3/	.8	65	52	10	6.9	37	Y	
4/	.8	65	53	10	7.0	37	Y	
5/	.8	65	52	10	6.8	37	Y	
6/	.8	65	52	10	6.9	37	Y	
7/	.8	65	52	10	7.0	37	Y	
8/	.8	65	52	10	7.0	37	Y	
9/	.8	65	52	10	7.0	37	Y	
10/	.8	65	52	10	7.0	37	Y	
11/	.8	65	52	10	6.9	37	Y	
12/	.8	65	52	10	6.9	37	Y	
13/	.8	65	52	10	6.9	37	Y	
14/	.8	65	52	10	7.0	37	Y	
15/	.8	65	52	10	6.8	37	Y	
16/	.8	65	52	10	6.8	37	Y	
17/	.8	65	52	10	7.0	37	Y	
18/	.8	65	52	10	7.0	37	Y	
19/	.8	65	52	10	6.9	37	Y	
20/	.8	65	52	10	6.9	37	Y	
21/	.8	65	52	10	7.0	37	Y	
22/	.8	65	52	10	7.0	37	Y	
23/	.8	65	52	10	6.9	37	Y	
24/	.8	65	52	10	6.9	37	Y	
25/	.8	65	52	10	7.0	37	Y	
26/	.8	65	52	10	7.0	37	Y	
27/	.8	65	52	10	6.9	37	Y	
28/	.8	65	52	10	6.9	37	Y	
29/	.8	65	52	10	6.9	37	Y	
30/	.8	65	52	10	7.0	37	Y	
31/	.8	65	52	10	7.0	37	Y	5

² If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWS within 24 hours. Revised November 2022
 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@oha.oregon.gov; Fax 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350