

## OHA - Drinking Water Services - Surface Water Quality Data Form

### Cartridge or Bag Filtration

System Name:		Lakeshore RV Park		ID#: 4101001	
Day	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]
1	28.00	22.00	6.00	15.00	0.24
2	28.00	22.00	6.00	15.00	0.25
3	28.00	22.00	6.00	15.00	0.26
4	28.00	22.00	6.00	15.00	0.23
5	28.00	22.00	6.00	15.00	0.28
6	28.00	22.00	6.00	15.00	0.27
7	28.00	22.00	6.00	15.00	0.26
8	28.00	22.00	6.00	15.00	0.27
9	28.00	22.00	6.00	15.00	0.25
10	28.00	22.00	6.00	15.00	0.22
11	28.00	22.00	6.00	15.00	0.26
12	28.00	22.00	6.00	15.00	0.23
13	28.00	22.00	6.00	15.00	0.26
14	28.00	22.00	6.00	15.00	0.25
15	28.00	22.00	6.00	15.00	0.26
16	28.00	22.00	6.00	15.00	0.24
17	28.00	22.00	6.00	15.00	0.22
18	28.00	22.00	6.00	15.00	0.23
19	28.00	22.00	6.00	15.00	0.23
20	28.00	22.00	6.00	15.00	0.22
21	28.00	22.00	6.00	15.00	0.21
22	28.00	22.00	6.00	15.00	0.22
23	28.00	22.00	6.00	15.00	0.20
24	28.00	22.00	6.00	15.00	0.22
25	28.00	22.00	6.00	15.00	0.22

26	28.00	22.00	6.00	15.00	0.23
27	28.00	22.00	6.00	15.00	0.23
28	28.00	22.00	6.00	15.00	0.22
29					
30					
31					

<b>Cartridge &amp; Bag Filtration</b>					<b>Monthly</b>
95% of daily turbidity readings $\leq$ 1 NTU?				<b>Yes</b>	CT's met everyday? (see back)
All daily turbidity readings $\leq$ 5 NTU?				<b>Yes</b>	<b>Yes</b>

<b>Notes: PSI = pounds per square inch</b> <b>PSID = pounds per square inch difference (before filter - after filter)</b> <b>PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID.</b>	<b>PRINTED NAME: N:</b>
	<b>SIGNATURE:</b>
	<b>PHONE #: (541) 991</b>

<sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in Daily Turbidity Reading column correspond to continuous readings' maximum.

## OHA - Drinking Water Services - Surface Water Quality Data Form

**System Name:**

**Lakeshore RV Park**

**ID#: 4101001**

**Month/Year:**

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( <b>C</b> ) 2	Contact Time (T)	Actual CT	Temp	pH
	[ppm or mg/L]	[minutes]	<b>C X T</b>	[° C]	
1	0.8	65	52.0	11.7	6.80
2	0.8	65	52.0	11.7	6.80
3	0.8	65	52.0	11.7	6.80
4	0.8	65	52.0	11.7	6.80
5	1	65	65.0	11.7	6.80
6	1	65	65.0	11.7	6.80
7	0.8	65	52.0	11.7	6.80
8	0.8	65	52.0	11.7	6.80
9	0.8	65	52.0	11.7	6.80
10	0.8	65	52.0	11.7	6.80
11	0.8	65	52.0	11.7	6.80
12	0.8	65	52.0	11.7	6.80
13	1.5	65	97.5	11.7	6.80
14	1.5	65	97.5	11.7	6.80
15	1.5	65	97.5	11.7	6.80
16	1.2	65	78.0	11.7	6.80
17	1.1	65	71.5	11.7	6.80
18	1.1	65	71.5	11.7	6.80
19	1	65	65.0	11.7	6.80
20	1	65	65.0	11.7	6.80
21	0.9	65	58.5	11.7	6.80
22	0.9	65	58.5	11.7	6.80

23	0.9	65	58.5	11.7	6.80
24	0.8	65	52.0	11.7	6.80
25	0.8	65	52.0	11.7	6.80
26	0.8	65	52.0	11.7	6.80
27	1	65	65.0	11.7	6.80
28	1	65	65.0	11.7	6.80
29					
30					
31					

2 If Cl2 at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

**Return by 10th of following month by email, fax, or mail to**  
[dwp.dmce@oha.oregon.gov](mailto:dwp.dmce@oha.oregon.gov); 971-673-0694; or Drinking Water Services, PO Box 14350,



same
same
same

**Summary (Answer Yes or No)**  
 All Cl2 residual at entry point  $\geq$  0.2 mg/l?  
**Yes**

<b>atalie Blankenship</b>	
	<b>DATE: 3.9.26</b>
<b>.7821</b>	<b>CERT #:</b>

imn may not

---

	<b>WTP- :</b>	
<b>February 2026</b>	<b>Disinfection <i>Giardia</i> Log Inactiv:</b>	<b>1</b>

Required CT	CT Met? 2	Peak Hourly Demand Flow
formula	Yes / No	[GPM]
31.6	YES	5
32.3	YES	5
32.3	YES	5
31.6	YES	5
34.1	YES	5
34.1	YES	5
34.1	YES	5
33.0	YES	5
32.7	YES	5
32.7	YES	5
32.3	YES	5
32.3	YES	5
32.0	YES	5
32.0	YES	5

32.0	YES	5
31.6	YES	5
31.6	YES	5
31.6	YES	5
32.3	YES	5
32.3	YES	5

Revised November 2022

:  
Portland, OR 97293-0350