OHA - Drinking Water Services – Turbidity Monitoring Report Form County:
Slow Sand, Membrane, Diatomaceous Earth Filtration or Unfiltered Systems

System Name: Osprey **ID #:** 90186 **WTP-:** **Month/Year:** Aug 2022

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day [1] [NTU]
1				.082			
2				.091			
3				.172			
4				.047			
5				.054			
6				.051			
7				.042			
8				.130			
9				.131			
10				.091			
11				.124			
12				.117			
13				.111			
14				.139			
15				.103			
16				.127			
17				.213			
18				.654			
19				.232			
20				.045			
21				.045			
22				.033			
23				.091			
24				.056			
25				.047			
26				.060			
27				.054			
28				.037			
29				.218			
30				.582			
31				.064			

Slow Sand/Membrane/DE Filtration/Unfiltered
Monthly Summary

95% of daily turbidity readings ≤ 1 NTU? [2] (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:

PRINTED NAME:

SIGNATURE: **DATE:**

PHONE #: ( ) **CERT #:** 2374

[1] Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous readings' maximum. [2] Filtered systems only.

OHA - Drinking Water Services – Surface Water Quality Data Form

System Name: Lake Stevens / Osprey **ID #:** 90186 **WTP-:** **Month/Year:** Aug 2022

Date / Time	Minimum Cl_2 Residual at 1st User (**C**) [3]	Contact Time (**T**)	Actual CT	Temp	pH	Required CT	CT Met? [3]	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	**C X T**	[° C]		Use tables	Yes / No	[GPM]
1 /	1.3	150	195	24.4	7.4	19	Yes	
2 /	1.3	150	195	24.4	7.4	19	Yes	
3 /	1.3	150	195	24.4	7.4	19	Yes	
4 /	1.5	150	225	24.4	7.4	20	Yes	
5 /	1.5	150	225	24.4	7.5	20	Yes	
6 /	1.5	150	225	24.4	7.5	20	Yes	
7 /	1.2	150	180	24.4	7.4	19	Yes	
8 /	1.7	150	255	24.4	7.5	20	Yes	
9 /	2.0	150	300	23.9	7.4	21	Yes	
10 /	2.0	150	300	23.9	7.4	21	Yes	
11 /	2.0	150	300	23.9	7.4	21	Yes	
12 /	2.0	150	300	23.9	7.5	21	Yes	
13 /	2.2	150	330	23.9	7.4	21	Yes	
14 /	2.1	150	315	23.4	7.5	21	Yes	
15 /	2.2	150	330	22.2	7.4	21	Yes	
16 /	2.1	150	315	22.2	7.4	21	Yes	
17 /	2.1	150	315	22.2	7.5	21	Yes	
18 /	2.0	150	300	23.3	7.5	21	Yes	
19 /	1.7	150	255	23.3	7.4	20	Yes	
20 /	1.5	150	225	23.3	7.4	20	Yes	
21 /	1.5	150	225	23.4	7.5	20	Yes	
22 /	1.5	150	225	23.9	7.5	20	Yes	
23 /	1.5	150	225	23.4	7.4	20	Yes	
24 /	1.6	150	240	23.9	7.4	20	Yes	
25 /	1.6	150	240	23.4	7.5	20	Yes	
26 /	1.6	150	240	23.9	7.5	20	Yes	
27 /	1.7	150	255	23.4	7.5	20	Yes	
28 /	1.8	150	270	23.3	7.5	20	Yes	
29 /	1.4	150	285	23.3	7.4	21	Yes	
30 /	1.9	150	285	23.3	7.2	21	Yes	
31 /	1.9	150	285	23.3	7.3	21	Yes	

[3] If Cl_2 at entry point < 0.2 mg/l OR CT not met, notify DWS within 24 hours. *Revised September 2016*

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

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

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