

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Jackson


Conventional or Direct Filtration

Month/Year: Jan-21

System Name: Emigrant Lake Park ID#: 41 90730 WTP: TP - A

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	off	off	off	off	off	off	N/A
2	off	off	off	off	off	off	N/A
3	off	off	off	off	off	off	N/A
4	off	off	off	off	off	off	N/A
5	off	off	off	off	off	off	N/A
6	off	off	off	off	off	off	N/A
7	off	off	off	off	off	off	N/A
8	off	off	off	off	off	off	N/A
9	off	off	off	off	off	off	N/A
10	off	off	off	off	off	off	N/A
11	off	off	off	off	off	off	N/A
12	off	off	off	off	off	off	N/A
13	off	off	off	off	off	off	N/A
14	off	off	off	off	off	off	N/A
15	off	off	off	off	off	off	N/A
16	off	off	off	off	off	off	N/A
17	off	off	off	off	off	off	N/A
18	off	off	off	off	off	off	N/A
19	off	off	off	off	off	off	N/A
20	off	off	off	off	off	off	N/A
21	off	off	off	off	off	off	N/A
22	off	off	off	off	off	off	N/A
23	off	off	off	off	off	off	N/A
24	off	off	off	off	off	off	N/A
25	off	off	off	off	off	off	N/A
26	off	off	off	off	off	off	N/A
27	off	off	off	off	off	off	N/A
28	off	off	off	off	off	off	N/A
29	off	off	off	off	off	off	N/A
30	off	off	off	off	off	off	N/A
31	off	off	off	off	off	off	N/A

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings \leq 0.3 NTU? Yes/No	CT's met everyday? (see back) Yes/No	All Cl ₂ residual at entry point \geq 0.2 mg/l? Yes/No
All 4-hour turbidity readings \leq 1 NTU? Yes/No		
All turbidity readings < IFE ² triggers Yes/No		

plant off due to drought, purchasing potable water from licensed supplier	PRINTED NAME: Steve Lambert	
	SIGNATURE: 	2/10/21
	PHONE #: (541) 774-6303	CERT #: N/A

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : A

System Name:	Emigrant Lake Park	ID#: 41	90730	Month/Year:	Jan-21	Disinfection <i>Giardia</i> Log Inactiv:	1
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
1	0.8	192	153.6	8.5	7.10	43.1	YES	3
2	0.8	192	153.6	8.7	7.10	42.5	YES	2
3	0.8	192	153.6	8.8	7.10	42.3	YES	1.1
4	0.8	192	153.6	9.2	7.10	41.2	YES	2.5
5	0.8	192	153.6	9.0	7.10	41.7	YES	1.5
6	0.8	192	153.6	9.0	7.10	41.7	YES	5.3
7	0.8	192	153.6	8.8	7.10	42.3	YES	2.6
8	0.9	192	172.8	9.0	7.10	42.2	YES	1.8
9	0.9	192	172.8	9.4	7.10	41.1	YES	1.3
10	0.9	192	172.8	9.3	7.10	41.4	YES	0.8
11	0.9	192	172.8	9.0	7.10	42.2	YES	1.8
12	0.8	192	153.6	8.9	7.10	42.0	YES	1.6
13	0.8	192	153.6	9.0	7.10	41.7	YES	3
14	0.9	192	172.8	9.4	7.10	41.1	YES	1.8
15	0.9	192	172.8	9.5	7.10	40.8	YES	2.5
16	0.9	192	172.8	9.7	7.10	40.3	YES	3.5
17	0.8	192	153.6	9.5	7.10	40.4	YES	2.3
18	0.8	192	153.6	9.7	7.10	39.8	YES	1.8
19	0.8	192	153.6	9.5	7.10	40.4	YES	1.6
20	0.9	192	172.8	9.6	7.10	40.6	YES	1.6
21	0.9	192	172.8	9.8	7.10	40.0	YES	1.6
22	0.9	192	172.8	9.6	7.10	40.6	YES	1.6
23	0.8	192	153.6	9.6	7.10	40.1	YES	0.6
24	0.8	192	153.6	9.4	7.10	40.6	YES	1.2
25	0.7	192	134.4	9.1	7.10	41.0	YES	1.8
26	0.7	192	134.4	9.0	7.10	41.2	YES	2.3
27	0.9	192	172.8	8.7	7.10	43.0	YES	2.1
28	0.9	192	172.8	8.6	7.10	43.3	YES	1.5
29	0.8	192	153.6	8.6	7.10	42.8	YES	5
30	0.8	192	153.6	8.4	7.10	43.4	YES	3
31	0.8	192	153.6	8.2	7.10	44.0	YES	2.8

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

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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