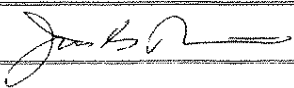


OHA - Drinking Water Services – Turbidity Monitoring Report Form County: Slow Sand, Membrane, Diatomaceous Earth Filtration or Unfiltered Systems

System Name: OPRD BEVERLY BEACH STATE PARK ID #: 4191052 WTP-: _____ Month/Year: MARCH 2024

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	0.102	OFF	OFF	1200/0.102
2	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3	OFF	OFF	OFF	OFF	OFF	OFF	OFF
4	OFF	OFF	OFF	OFF	OFF	OFF	OFF
5	OFF	OFF	OFF	OFF	OFF	OFF	OFF
6	OFF	OFF	OFF	OFF	OFF	OFF	OFF
7	OFF	OFF	OFF	OFF	OFF	OFF	OFF
8	OFF	OFF	OFF	OFF	OFF	OFF	OFF
9	OFF	OFF	OFF	OFF	OFF	OFF	OFF
10	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12	OFF	OFF	OFF	OFF	OFF	OFF	OFF
13	OFF	OFF	OFF	OFF	OFF	OFF	OFF
14	OFF	OFF	OFF	OFF	OFF	OFF	OFF
15	OFF	OFF	OFF	OFF	OFF	OFF	OFF
16	OFF	OFF	OFF	OFF	OFF	OFF	OFF
17	OFF	OFF	OFF	OFF	OFF	OFF	OFF
18	OFF	OFF	OFF	OFF	0.048	0.046	1600/0.048
19	0.047	0.048	0.048	0.049	0.049	0.049	1200, 1600, 2000/0.049
20	0.049	0.049	0.050	0.058	OFF	OFF	1200/0.058
21	OFF	OFF	OFF	OFF	OFF	OFF	OFF
22	OFF	OFF	OFF	OFF	OFF	OFF	OFF
23	OFF	OFF	OFF	OFF	OFF	OFF	OFF
24	OFF	OFF	OFF	OFF	OFF	OFF	OFF
25	OFF	OFF	OFF	0.047	0.047	0.050	2000/0.050
26	0.052	0.054	0.054	0.054	0.054	OFF	2000, 2500, 1200, 1600/0.054
27	OFF	OFF	OFF	OFF	OFF	OFF	OFF
28	OFF	OFF	OFF	OFF	OFF	OFF	OFF
29	OFF	OFF	OFF	OFF	OFF	OFF	OFF
30	OFF	OFF	OFF	OFF	OFF	OFF	OFF
31	OFF	OFF	OFF	OFF	OFF	OFF	OFF

Slow Sand/Membrane/DE Filtration/Unfiltered	Monthly Summary (Answer Yes or No)	
	Monthly Summary 95% of daily turbidity readings ≤ 1 NTU? ² <input checked="" type="checkbox"/> Yes / No All daily turbidity readings ≤ 5 NTU? <input checked="" type="checkbox"/> Yes / No	
Notes:	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / No
	PRINTED NAME: <u>JAMES G PICCOLOTTI</u>	
	SIGNATURE: 	DATE: <u>4-1-2023</u>
PHONE #: <u>(541) 2654560</u>	CERT #: <u>D.05535-1</u> <u>T.05560-1</u>	

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: OPRD BEVERLY BEACH STATE PARK

ID #: 4191052 WTP-:

Month/Year: MARCH
2024

Date / Time	Minimum Cl ₂ Residual at 1 st 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]
1/100	1.43	2856	4084	9.0	7.1	39	YES	10.7
2/0913	1.21	2547	3081	8.6	7.1	39	YES	12.0
3/0910	1.15	2612	3004	8.0	7.1	39	YES	11.7
4/1013	1.09	2612	2847	7.9	7.1	39	YES	11.7
5/1023	0.92	2634	2424	7.7	7.1	39	YES	11.6
6/1025	0.98	3026	2965	7.5	7.1	39	YES	10.1
7/1026	1.17	3118	3648	7.5	7.1	39	YES	9.8
8/1026	1.16	3251	3771	7.5	7.1	39	YES	9.4
9/1024	1.08	3396	3667	7.6	7.1	39	YES	9.0
10/1015	1.04	3118	3243	7.9	7.1	39	YES	9.8
11/1013	1.19	3322	3953	7.9	7.1	39	YES	9.2
12/1024	1.20	3286	3943	8.0	7.1	39	YES	9.3
13/1024	1.26	3286	4190	7.9	7.1	39	YES	9.3
14/1021	0.96	3473	3334	8.3	7.1	39	YES	8.8
15/1025	1.01	3473	3507	8.2	7.1	39	YES	8.8
16/1020	1.01	3553	3589	8.5	7.1	39	YES	8.6
17/1027	0.96	3553	3411	8.8	7.1	39	YES	8.6
18/1020	0.93	3595	3344	8.9	7.1	39	YES	8.5
19/1021	1.03	3087	3179	8.9	7.1	39	YES	9.9
20/1028	0.89	3434	3056	9.1	7.1	39	YES	8.9
21/1022	0.99	3251	3219	9.2	7.1	39	YES	9.4
22/1027	0.92	3473	3195	9.4	7.1	39	YES	8.8
23/1024	0.87	3553	3092	9.3	7.1	39	YES	8.6
24/1018	0.80	3396	2716	9.3	7.1	39	YES	9.0
25/1020	0.76	3151	2394	9.3	7.1	39	YES	9.7
26/1023	0.63	3251	2048	9.4	7.1	39	YES	9.4
27/1027	0.68	1370	932	9.6	7.1	39	YES	22.3
28/1027	0.52	1415	736	9.7	7.1	39	YES	21.6
29/1001	0.27	3358	772	9.6	7.1	39	YES	9.1
30/1021	0.23	2024	465	9.5	7.1	39	YES	15.1
31/1023	0.23	3396	781	9.5	7.2	39	YES	9.0

³ If Cl₂ 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.pdfReturn by 10th of following month by email, fax, or mail to:

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