

OHA - DWS

Membrane Filter Monthly Operating Report

County: LINCOLNSystem Name: BEVERLY BEACH STATE PARKMonth/Year: AUGUST-2025PWS ID#: 41 - 91052Minimum test pressure applied: 15.91 psiPlant ID: WTP - AMinimum test pressure req'd: 14.0 psi

(e.g., "A")

DIT = Direct Integrity Test on filter(s) [Yes, No, or "off" if all filters are offline] ⇌

PDR = Pressure Decay Rate

LRC = Log Removal Credit

DIT = Direct Integrity Test on filter(s) [Yes, No, or "off" if all filters are offline] ⇄						DIT Daily
PDR = Pressure Decay Rate			PDR _{Max} [psi/min]	LRC [log removal]		
LRC = Log Removal Credit			0.390	4.00		
Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU] (>15 minutes)	Highest PDR of day [psi/min]	Lowest LRV _{ambient} of day [log removal]	[Y/N] or "off"
1	0.091	0.109		0.010	5.646	YES
2	0.096	0.098		0.027	5.251	YES
3	0.090	0.096		0.026	5.326	YES
4	0.088	1.000		0.010	5.356	YES
5	0.087	0.100		0.011	5.679	YES
6	0.086	0.091		0.022	5.373	YES
7	0.084	0.094		0.043	5.004	YES
8	0.095	0.097		0.029	4.986	YES
9	0.098	0.111		0.033	5.124	YES
10	0.089	0.091		0.027	5.148	YES
11	0.085	0.086		0.028	5.201	YES
12	0.086	0.087		0.010	5.177	YES
13	0.086	0.088		0.010	5.595	YES
14	0.088	0.089		0.026	5.642	YES
15	0.081	0.081		0.015	5.446	YES
16	0.091	0.097		0.025	5.215	YES
17	0.089	0.097		0.031	5.086	YES
18	0.093	0.093		0.025	5.075	YES
19	0.092	0.096		0.028	5.202	YES
20	0.092	0.093		0.047	4.956	YES
21	0.081	0.095		0.012	4.461	YES
22	0.086	0.086		0.025	5.197	YES
23	0.083	0.090		0.010	5.181	YES
24	0.093	0.095		0.030	5.158	YES
25	0.091	0.094		0.023	5.194	YES
26	0.090	0.092		0.027	5.166	YES
27	0.090	0.092		0.027	5.136	YES
28	0.084	0.084		0.043	4.927	YES
29	0.090	0.102		0.016	4.925	YES
30	0.094	0.096		0.102	4.573	YES
31	0.095	0.097		0.043	4.642	

Compliance summary (operator to complete any blank fields)

95% of daily turbidity readings ≤ 1 NTU? (Y/N)	All turbidity readings ≤ 5 NTU? (Y/N)	All IFE turbidity readings ≤ 0.15 NTU? [Y/N]	Performance std met? (PDR ≤ PDR _{Max} , LRV ≥ LRC) (Y/N)	DIT Daily?
				YES
CT's met daily? (p. 2)	All Cl ₂ residual at EP ≥ 0.2 mg/L?	PDR ≤ PDR _{Max} ?	LRV _{ambient} ≥ LRC?	
YES	YES	YES	YES	

PRINTED NAME: JAMES PICCOLLOTTISIGNATURE: [Signature]

Notes:

DATE: 9-1-25WT CERT #: 08560-1PHONE #: 541-265 4560

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OHA-DWS

Disinfection Monthly Operating ReportSystem Name: BEVERLY BEACH STATE PARKPWS ID#: 41 - 91052Plant ID : WTP - A

4.00

Log
Inactivation
Required via
Disinfection

Day	Minimum Cl ₂ Residual at 1 st User (C) * [mg/L = ppm]	Contact Time (T) [minutes]	Actual CT C x T (Formula)	Temp [° C]	pH	Required CT (Formula)	CT Met? * [Yes / No] (Formula)	Peak Hourly Demand Flow [GPM]	Notes (e.g. "Plant Off")
1	1.22	970	1184	16.3	7.1	39	YES	31.5	
2	1.19	819	975	16.5	7.1	39	YES	37.3	
3	1.22	888	1084	16.3	7.1	39	YES	34.4	
4	1.19	731	870	16.3	7.1	39	YES	41.8	
5	1.17	819	959	16.3	7.0	39	YES	37.3	
6	1.01	881	889	16.6	7.0	39	YES	34.7	
7	0.96	833	749	16.6	7.0	39	YES	36.7	
8	0.44	740	696	16.3	7.1	39	YES	41.3	
9	1.01	764	772	16.5	7.1	39	YES	40.0	
10	1.01	768	776	16.5	7.0	39	YES	39.8	
11	0.95	842	800	16.8	7.0	39	YES	36.3	
12	0.99	849	840	16.8	7.1	39	YES	36.0	
13	1.04	866	900	16.8	7.1	39	YES	35.3	
14	1.14	974	1117	16.9	7.1	39	YES	31.2	
15	1.15	1145	1316	17.0	7.1	39	YES	26.7	
16	1.14	808	922	16.9	7.0	39	YES	37.8	
17	1.34	776	1039	17.1	7.1	39	YES	39.4	
18	1.42	886	1258	17.1	7.0	39	YES	34.5	
19	1.30	776	1008	17.1	7.1	39	YES	39.4	
20	1.17	792	926	17.0	7.0	39	YES	38.6	
21	1.24	1002	1242	16.9	7.0	39	YES	30.5	
22	1.19	983	1161	16.6	7.1	39	YES	31.1	
23	1.20	824	988	16.6	6.9	39	YES	37.1	
24	1.19	856	1019	16.8	7.0	39	YES	35.7	
25	0.91	866	788	16.8	7.1	39	YES	35.3	
26	1.18	940	1110	16.8	7.0	39	YES	32.5	
27	1.05	912	958	16.8	7.1	39	YES	33.6	
28	1.18	946	1116	16.6	7.1	39	YES	32.3	
29	1.24	886	1098	16.6	7.1	39	YES	34.5	
30	1.25	758	948	16.3	6.9	39	YES	40.3	
31	1.27	758	963	16.3	7.0	39	YES	40.3	

* If chlorine concentration at entry point < 0.2 mg/L, or CT not met, notify DWS within 24 hours.

Submit this monthly report by the 10th of following month by

mail: Drinking Water Services
PO Box 14350
Portland, OR 97293-0350
email: dwp.dmce@odhsoha.oregon.gov
fax: 971-673-0458

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Nature
HISTORY
Discovery

BEVERLY BEACH STATE PARK

198 NE 123rd STREET
NEWPORT, OR 97365
(541) 265-4560
FAX: (541) 265-8917

FAX TRANSMISSION COVER SHEET

DATE: 9-1-25

TO: OHA/DWS

FAX: 971-6730458

RE: AUGUST REPORT

SENDER: JIM PICCOLOTTI- BEVERLY BEACH STATE PARK

YOU SHOULD RECEIVE 3 PAGE(S), INCLUDING THIS COVER SHEET. IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE CALL (541) 265-4560.

Comments: _____
