OHA - Drinking Water Program -Turbidity Monitoring Report Form  Conventional or Direct Filtration							County:	
System N	OPRD D	etroit Lake S		ID#: 41			/lonth/Year:	Oct-22
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	91059 4 PM [NTU]	8 PM [NTU]	WTP: TP - Highest Reading of the Day	
1	Off	Off	Off	Off	Off	Off	[NTU]	
2	Off	Off	Off	Off	Off	Off	OFF OFF	
3	Off	Off	Off	Off	Off	Off	OFF OFF	
4	Off	Off	Off	Off	Off	Off	OFF	
5	Off	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		
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 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	Off	Off	OFF	
19	Off	Off	Off	Off	Off	Off	OFF	
20	Off	Off	Off	Off	Off	Off	OFF	
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	Off	Off	Off	OFF	
26	Off	Off	Off	Off	Off	Off	OFF	
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	
	Conventi	onal or Direc	t Filtration		Mont	hly Summa	ry (Answer Yes	
95% of 4-hour turbidity readings ≤ 0.3 NTU? Yes					CT's met everyday? (see back)		All Cl2 residual at entry point ≥ 0.2 mg/l?	
All 4-	nour turbidity	readings ≤ 1	NTU?	Yes	**			
All t	urbidity readi	ngs < IFE² tri	ggers	Yes				
nstallation	tem is shut ( n. Only rupr	down for nev ning Non-pot	v storage ta	ink	PRINTED NAME: Dan Faulkner			
Restroom	toilets and s	sink. No wat	able water er service a	it RV	SIGNATURE: 12/1/20			
ookup ca	mpsites.				PHONE #: ( 5	503 ) 854-34	.06	CERT #:T6666

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OH	IA - Drinkin	Water Pro	gram - Surf	PAGE ace Water	1 of 2 Quality Data	Form	WTP - :	
	OPRD Detroit L		ID#: 41	91059	Month/Year:	Oct-22	Disinfection Giardia Log Inactiv:	. 1
)ate / <mark>T</mark> im	Minimum Cl <sub>2</sub> Residual at 1st User ( <b>C</b> ) <sup>3</sup>	Contact Time ( <b>T</b> )	Actual CT	Temp	На	Required CT	CT Met? 3	Peak Hourly Demand Flow
	ppm or mg/L	[minutes]	CXT	[° C]		formula	Yes / No	[GPM]
1	OFF	90	OFF	OFF	OFF	OFF	OFF	OFF
2	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
3	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
4	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
5	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
6	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
7	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
8	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
9	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
10	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
11	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
12	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
13	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
14	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
15	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
16	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
17	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
18	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
19	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
20	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
21	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
22	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
23	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
24	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
25	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
26	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
27	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
28	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
29	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
30	OFF	90	OFF	OFF	OFF	#VALUE!	OFF	OFF
31	OFF	NA	OFF	OFF	OFF	#VALUE!	OFF	OFF

3 If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, DWP to be notified by end of next business

Revised February 2012