

**OHA - Drinking Water Program - Turbidity Monitoring Report Form County:
Cartridge or Bag Filtration**

System Name: Mad Dog Country Tavern ID #: 084192052 WTP: WTP-A Month/Year: 10-2021

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day ¹ [NTU]
1					.25	
2					.27	
3					.26	
4					.26	
5					.29	
6					.31	
7					.33	
8					.30	
9					.31	
10					.29	
11					.27	
12					.29	
13					.32	
14					.33	
15					.30	
16					.31	
17					.25	
18					.26	
19					.28	
20					.31	
21					.32	
22					.34	
23					.36	
24					.35	
25					.30	
26					.32	
27					.29	
28					.25	
29					.23	
30					.26	
31					.27	

Cartridge Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? All daily turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
Notes: PSI = pounds per square inch PSID = pounds per square inch difference (before filter - after filter) PSID When to Change Filter = Manufacturer's recommendation; may need to look in manual for manufacturer's specifications when to change the filter, at what PSID.		PRINTED NAME: <u>T.J. WISKY</u>	DATE: <u>11-1-2021</u>
Data Mgmt & Compliance Drinking Water Program		SIGNATURE: <u>[Signature]</u>	CERT #:
		PHONE #: <u>(541) 265-8761</u>	

Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in "Daily Turbidity Reading" Column may not correspond to continuous readings' maximum.

OHA - Drinking Water Program – Surface Water Quality Data Form

System Name: Mad Dog Country Tavern

ID #: CR4192052

WTP: WTP-A Month/Year: October 2021

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ²	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[°C]		Use tables	Yes / No	[GPM]
1/	1.10	71	110	18.1	72	23	yes	5
2/	1.37	71	137	18.3	72	24	yes	5
3/	1.62	71	162	17.1	72	26	yes	5
4/	1.59	71	159	17.5	72	26	yes	5
5/	1.36	71	136	18.4	72	24	yes	5
6/	1.04	71	104	17.9	72	25	yes	5
7/	.98	71	98	17.1	72	24	yes	5
8/	.82	71	82	16.2	72	26	yes	5
9/	.88	71	88	17.8	72	25	yes	5
10/	.72	71	72	18.16	72	22	yes	5
11/	.80	71	80	17.0	72	24	yes	5
12/	1.03	71	103	16.9	72	26	yes	5
13/	1.53	71	153	17.1	72	26	yes	5
14/	2.20	71	220	18.0	72	26	yes	5
15/	2.20	71	220	18.5	72	26	yes	5
16/	2.20	71	220	20.0	72	23	yes	5
17/	2.20	71	220	19.4	72	24	yes	5
18/	2.20	71	220	17.8	72	27	yes	5
19/	2.13	71	213	18.4	72	26	yes	5
20/	1.47	71	147	18.2	72	24	yes	5
21/	.67	71	67	18.8	72	22	yes	5
22/	.56	71	56	18.4	72	22	yes	5
23/	1.11	71	111	18.3	72	23	yes	5
24/	1.14	71	114	18.4	72	23	yes	5
25/	2.03	71	203	17.7	72	27	yes	5
26/	2.20	71	220	18.0	72	26	yes	5
27/	2.20	71	220	17.9	72	27	yes	5
28/	1.81	71	181	18.7	72	26	yes	5
29/	.84	71	84	19.3	72	22	yes	5
30/	1.47	71	147	17.4	72	26	yes	5
31/	2.20	71	220	18.0	72	26	yes	5

² If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.

Revised February 2012

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