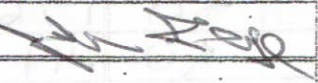


OHA - Drinking Water Program - Turbidity Monitoring Report Form County: Lincoln
Cartridge or Bag Filtration

System Name: SAWYERS LANDING RV PARK ID #: OR4192061 **WTP:** WTP-A **Month/Year:**

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	53	43	10	25		.17
2	54	43	11	25		.09
3	54	43	11	25		.10
4	54	43	11	25		.19
5	54	43	11	25		.11
6	55	44	11	25		.10
7	55	44	11	25		.16
8	55	44	11	25		.16
9	55	44	11	25		.15
10	55	44	11	25		.17
11	55	44	11	25		.15
12	55	44	11	25		.18
13	55	45	10	25		.16
14	55	45	10	25		.09
15	55	45	10	25		.10
16	55	45	10	25		.09
17	55	45	10	25		.17
18	55	45	10	25		.14
19	55	45	10	25		.15
20	55	45	10	25		.13
21	56	45	11	25		.14
22	56	45	11	25		.14
23	57	46	11	25		.19
24	57	46	11	25		.11
25	57	46	11	25		.07
26	57	46	11	25		.09
27	58	47	11	25		.11
28	58	47	11	25		.14
29	58	48	10	25		.18
30	58	48	10	25		.11
31						

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: John Gage	DATE: 5-1-21
		SIGNATURE: 	CERT #:
		PHONE #: (541) 265-3907	

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

SAWYERS LANDING RV PARK ID #: OR4192061 WTP: WTP-A Month/Year: April 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/	1.4	80	144	9.7	7.5	79	Y	600
2/	2.1	80	168	10.1	7.5	51	Y	810
3/	2.2	80	176	11.6	7.5	51	Y	910
4/	2.3	80	184	11.8	7.5	51	Y	720
5/	2.2	80	176	11.6	7.5	51	Y	880
6/	2.4	80	192	11.7	7.5	52	Y	720
7/	2.2	80	176	11.3	7.5	51	Y	600
8/	2.1	80	168	11.6	7.5	51	Y	1350
9/	1.9	80	152	11.2	7.5	50	X	880
10/	1.8	80	144	11.3	7.5	49	Y	1410
11/	2.0	80	160	11.7	7.5	50	Y	910
12/	1.8	80	144	12.3	7.5	49	Y	850
13/	1.9	80	152	12.4	7.5	50	Y	1080
14/	2.0	80	160	12.3	7.5	49	Y	1180
15/	1.7	80	136	13.6	7.5	49	Y	1050
16/	1.8	80	144	13.5	7.5	49	Y	880
17/	1.6	80	128	14.1	7.5	48	Y	1870
18/	1.7	80	136	13.7	7.5	49	Y	1580
19/	1.5	80	120	14.0	7.5	48	X	900
20/	1.6	80	128	13.7	7.5	48	Y	1560
21/	1.6	80	128	13.4	7.5	48	Y	1160
22/	1.8	80	144	13.6	7.5	49	Y	830
23/	2.0	80	160	13.3	7.5	50	Y	1000
24/	1.9	80	152	13.6	7.5	50	Y	980
25/	2.2	80	176	13.8	7.5	51	Y	1060
26/	2.3	80	184	13.5	7.5	52	Y	850
27/	2.4	80	192	13.3	7.5	52	Y	690
28/	2.2	80	176	13.5	7.5	51	Y	1300
29/	1.8	80	144	14.1	7.6	60	Y	860
30/	1.7	80	136	13.9	7.6	60	Y	1080
31/								

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

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