

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: 8 Year: 2021

Aug 2021

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day [NTU]
1	57	46	11	25		.13
2	58	47	11	25		.109
3	58	47	11	25		.13
4	59	49	11	25		.19
5	61	51	10	25		.11
6	61	51	10	25		.109
7	65	55	10	25		.19
8	66	55	11	25		.19
9	67	57	10	25		.11
10	21	19	2	25		.09
11	21	19	2	25		.12
12	22	19	3	25		.19
13	22	19	3	25		.17
14	22	19	3	25		.11
15	23	20	3	25		.14
16	28	22	6	25		.17
17	28	22	6	25		.109
18	29	22	7	25		.13
19	33	26	7	25		.20
20	33	26	7	25		.14
21	33	27	7	25		.18
22	33	27	8	25		.17
23	35	27	8	25		.11
24	37	29	8	25		.109
25	39	30	9	25		.12
26	39	30	9	25		.16
27	39	30	9	25		.14
28	40	31	9	25		.16
29	44	33	11	25		.109
30	44	33	11	25		.11
31	44	33	11	25		.109

Cartridge Filtration	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? All daily turbidity readings ≤ 5 NTU?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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

SIGNATURE: \_\_\_\_\_ DATE: 9-1-21

PHONE #: (541) 265-3907 CERT #:

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 LAND LING RV PARK ID #: OR4192061 WTP: WTP-A Month/Year: Aug 2021

Date / Time	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> User (C) <sup>2</sup>	Contact Time (T)	Actual CT	Temp ↓	pH ↑	Required CT	CT Met? <sup>2</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
1/	1.9	90	152	18.9	7.4	41	Y	2320
2/	2.0	80	160	19.8	7.4	41	Y	1640
3/	2.0	80	160	19.2	7.4	41	Y	1560
4/	2.2	80	176	19.1	7.4	41	Y	640
5/	2.3	80	184	18.5	7.4	42	Y	2440
6/	2.1	80	168	18.7	7.4	41	Y	1360
7/	2.3	80	184	18.4	7.4	42	Y	2910
8/	1.9	80	144	18.8	7.4	40	Y	2320
9/	1.6	80	128	18.7	7.4	39	Y	1830
10/	1.8	80	144	18.8	7.4	40	X	630
11/	1.8	80	144	18.8	7.4	40	Y	2160
12/	1.7	80	136	19.4	7.4	40	Y	1680
13/	1.9	80	152	19.1	7.4	41	Y	2340
14/	1.6	80	128	19.0	7.4	39	Y	1420
15/	1.5	80	120	19.2	7.4	39	Y	1860
16/	1.6	80	128	19.0	7.4	39	Y	1200
17/	1.7	80	136	19.3	7.4	40	Y	980
18/	1.6	80	128	19.1	7.4	39	Y	770
19/	1.4	80	112	19.4	7.4	38	Y	1190
20/	1.5	80	120	19.2	7.4	39	Y	1380
21/	1.7	80	136	19.3	7.4	40	Y	1490
22/	1.6	80	128	19.5	7.4	39	Y	1740
23/	1.8	80	128	19.3	7.4	39	Y	1200
24/	1.7	80	136	19.6	7.4	40	Y	1500
25/	1.8	80	144	19.9	7.4	40	Y	1800
26/	1.9	80	152	19.7	7.4	40	Y	910
27/	1.7	80	136	19.9	7.4	40	Y	1490
28/	1.6	80	128	19.3	7.4	39	Y	1870
29/	1.9	40	144	18.7	7.4	40	Y	1490
30/	1.8	80	144	18.5	7.4	40	Y	850
31/	1.9	80	152	18.6	7.4	41	Y	1190

<sup>2</sup> If Cl<sub>2</sub> 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/Health/Environments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf](http://www.public.health.oregon.gov/Health/Environments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf)