

**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: **June 2022**

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day [NTU]
1	68	60	8	25		.11
2	68	60	8	25		.09
3	68	60	8	25		.15
4	68	61	7	25		.14
5	68	61	7	25		.17
6	69	62	7	25		.12
7	69	62	7	25		.16
8	69	62	7	25		.11
9	70	62	8	25		.16
10	70	64	6	25		.09
11	70	64	6	25		.10
12	71	64	7	25		.16
13	71	64	7	25		.13
14	71	64	7	25		.14
15	71	64	7	25		.08
16	72	64	6	25		.09
17	72	64	6	25		.14
18	72	65	6	25		.17
19	72	65	6	25		.14
20	74	66	8	25		.11
21	74	67	7	25		.19
22	75	68	7	25		.10
23	75	68	7	25		.17
24	76	70	6	25		.14
25	76	70	6	25		.08
26	76	70	6	25		.11
27	77	70	7	25		.18
28	77	70	7	25		.13
29	78	70	8	25		.15
30	78	71	7	25		.11
31						

Cartridge Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / No	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / No	
All daily turbidity readings ≤ 5 NTU? <input checked="" type="checkbox"/> Yes / No	PRINTED NAME: John Gayle		DATE: 7-1-22
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.	SIGNATURE: <i>[Signature]</i>		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:

June 2022

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/	1.6	80	129	15.2	7.6	39	Y	540
2/	1.7	80	136	15.1	7.6	40	Y	450
3/	1.5	80	120	15.3	7.6	39	Y	970
4/	1.6	80	129	15.1	7.6	39	Y	700
5/	1.7	80	136	15.2	7.6	40	Y	450
6/	1.4	80	144	15.5	7.6	40	Y	440
7/	1.6	80	129	15.4	7.6	39	Y	210
8/	1.9	80	152	15.3	7.6	41	Y	560
9/	1.6	80	129	15.4	7.6	39	Y	330
10/	2.0	80	160	15.8	7.6	41	Y	290
11/	1.8	80	144	15.5	7.6	40	Y	350
12/	1.6	80	129	15.6	7.6	39	Y	1000
13/	1.5	80	120	15.4	7.6	39	Y	390
14/	1.7	80	136	15.7	7.6	40	Y	820
15/	1.9	80	112	15.8	7.6	39	Y	870
16/	1.5	80	120	16.2	7.6	39	X	390
17/	1.7	80	136	16.1	7.6	40	Y	650
18/	1.8	80	144	15.9	7.6	40	Y	890
19/	1.9	80	152	15.9	7.6	41	Y	950
20/	1.6	80	129	16.2	7.6	39	Y	530
21/	1.5	80	120	16.5	7.6	39	Y	870
22/	1.7	80	136	16.3	7.6	40	Y	570
23/	1.8	80	144	16.2	7.6	40	Y	840
24/	1.9	80	152	16.7	7.6	41	Y	1250
25/	1.7	80	136	17.4	7.6	40	Y	1310
26/	1.6	80	129	17.1	7.6	39	Y	900
27/	1.7	80	136	17.2	7.6	40	Y	3600
28/	1.9	80	152	16.7	7.6	41	Y	350
29/	1.5	80	120	17.9	7.6	39	Y	910
30/	1.7	80	136	16.7	7.6	40	Y	580
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