

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 [NTU]
1	79	71	8	25		.17
2	81	75	6	25		.14
3	81	75	6	25		.17
4	82	76	6	25		.18
5	82	77	5	25		.09
6	83	80	5	25		.16
7	85	80	5	25		.11
8	85	80	5	25		.09
9	86	80	6	25		.15
10	86	80	6	25		.14
11	86	80	6	25		.13
12	87	81	6	25		.09
13	87	81	6	25		.14
14	87	81	6	25		.12
15	88	81	7	25		.18
16	88	81	7	25		.11
17	88	81	7	25		.09
18	89	81	8	25		.16
19	89	81	8	25		.14
20	19	18	1	25		.13
21	19	18	1	25		.10
22	20	18	2	25		.08
23	20	19	1	25		.16
24	20	19	1	25		.11
25	20	19	1	25		.12
26	20	19	1	25		.09
27	20	19	1	25		.13
28	20	19	1	25		.17
29	21	19	2	25		.11
30	21	19	2	25		.16
31	21	19	2	25		.14

Cartridge Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings \leq 1 NTU? All daily turbidity readings \leq 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 \geq 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: 8-1-22
		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: July 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/	1.9	80	144	16.8	7.6	40	Y	1110
2/	2.1	80	168	17.1	7.6	41	Y	1090
3/	2.2	80	176	17.8	7.7	41	Y	1790
4/	2.3	80	184	18.1	7.7	42	Y	3230
5/	2.3	80	184	17.8	7.7	42	Y	1610
6/	2.2	80	176	18.2	7.7	41	Y	920
7/	2.3	80	184	18.1	7.7	42	Y	820
8/	2.1	80	168	18.4	7.7	41	Y	1140
9/	1.9	80	144	19.3	7.7	40	Y	1690
10/	1.7	80	136	19.6	7.7	40	Y	1840
11/	1.6	80	128	19.8	7.6	39	Y	1170
12/	1.5	80	120	19.2	7.6	39	Y	990
13/	1.5	80	120	18.7	7.6	39	Y	640
14/	1.3	80	104	18.3	7.6	38	Y	1400
15/	1.5	80	120	17.9	7.6	39	Y	1700
16/	1.6	80	128	18.1	7.6	39	Y	1510
17/	2.0	80	160	18.4	7.6	41	Y	3500
18/	1.9	80	152	18.9	7.6	40	Y	620
19/	2.0	80	160	14.4	7.7	41	Y	2170
20/	2.1	80	168	14.1	7.7	41	Y	950
21/	2.2	80	176	14.8	7.7	41	Y	350
22/	1.9	80	152	19.5	7.7	40	Y	1920
23/	2.0	80	160	19.2	7.7	40	Y	1380
24/	2.1	80	168	19.6	7.7	41	Y	920
25/	2.2	80	176	19.4	7.7	41	Y	650
26/	2.0	80	160	19.7	7.7	41	Y	1380
27/	1.8	80	144	19.8	7.7	40	Y	1390
28/	1.7	80	136	19.9	7.6	40	Y	800
29/	1.6	80	128	19.7	7.6	39	Y	1490
30/	1.6	80	128	19.4	7.6	39	Y	1960
31/	1.7	80	136	19.1	7.6	40	Y	1480

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