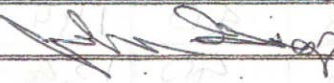


**OHA - Drinking Water Program – Turbidity Monitoring Report Form County: Lincoln
Cartridge or Bag Filtration**

System Name: **SAWYERS LANDING RV PARK** ID #: **OR4192061** WTP: **WTP-A** Month/Year: **Jan 2023**

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	31	29	2	29		11
2	31	29	2	29		109
3	31	29	2	29		17
4	31	29	2	29		13
5	31	29	2	29		10
6	31	29	2	29		16
7	32	29	3	29		114
8	32	29	3	29		11
9	32	29	3	29		109
10	32	29	3	29		18
11	32	29	3	29		12
12	32	29	3	29		14
13	32	29	3	29		12
14	32	29	3	29		16
15	32	29	3	29		11
16	32	29	3	29		17
17	32	29	3	29		109
18	32	29	3	29		11
19	33	29	4	29		12
20	33	29	4	29		16
21	33	30	3	29		11
22	33	30	3	29		17
23	33	30	3	29		12
24	33	30	3	29		109
25	33	30	3	29		16
26	33	30	3	29		12
27	33	30	3	29		14
28	33	30	3	29		10
29	33	30	3	29		109
30	33	31	2	29		14
31	33	31	2	29		11

Cartridge Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? All daily turbidity readings ≤ 5 NTU?	Yes/No Yes/No	CT's met everyday? (see back) Yes/No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? Yes/No
<p>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.</p>		PRINTED NAME: John Gage	DATE: 2-1-23
		SIGNATURE: 	
		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 LANDING RV PARK ID #: OR4192061 WTP-: WTP-A Month/Year: Jan 2023

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]	CXT	[°C]		Use tables	Yes / No	[GPM]
1/	1.6	80	144	6.7	7.7	79	Y	740
2/	1.7	80	136	7.4	7.7	79	Y	640
3/	1.9	80	144	8.1	7.7	79	Y	840
4/	2.0	80	160	8.2	7.7	81	Y	770
5/	2.1	80	160	8.5	7.7	81	Y	790
6/	2.2	80	176	8.6	7.7	83	Y	490
7/	2.2	80	176	8.5	7.7	83	Y	690
8/	2.3	80	184	8.3	7.7	83	Y	570
9/	2.2	80	176	8.8	7.7	83	Y	540
10/	2.3	80	184	8.7	7.7	83	Y	600
11/	2.4	80	192	8.3	7.7	84	Y	650
12/	2.2	80	176	8.6	7.7	83	Y	500
13/	2.1	80	160	8.9	7.7	81	Y	670
14/	2.0	80	160	8.7	7.7	81	Y	840
15/	2.1	80	160	8.1	7.7	81	Y	490
16/	1.9	80	152	7.9	7.7	81	Y	370
17/	1.8	80	144	7.8	7.7	79	Y	280
18/	1.6	80	128	8.1	7.7	77	Y	720
19/	1.7	80	136	8.0	7.7	79	Y	370
20/	1.9	80	152	8.7	7.8	81	Y	440
21/	1.7	80	136	8.4	7.8	79	Y	680
22/	1.6	80	128	8.5	7.6	77	Y	550
23/	1.5	80	120	8.2	7.6	77	Y	950
24/	1.5	80	120	8.1	7.6	77	Y	350
25/	1.6	80	128	7.7	7.6	77	Y	860
26/	1.5	80	120	8.4	7.6	77	Y	710
27/	1.7	80	136	8.3	7.6	79	Y	220
28/	1.8	80	144	8.5	7.6	79	Y	590
29/	1.6	80	128	8.1	7.6	77	Y	520
30/	1.7	80	136	7.4	7.6	79	Y	780
31/	1.9	80	152	7.6	7.6	81	Y	590

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