

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: **March 2023**

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day [NTU]
1	35	33	2	25		11
2	33	33	2	25		109
3	35	33	2	25		14
4	35	33	2	25		10
5	35	33	2	25		17
6	35	33	2	25		16
7	36	33	3	25		14
8	36	33	3	25		11
9	36	33	3	25		14
10	36	33	3	25		10
11	36	33	3	25		16
12	36	33	3	25		18
13	36	33	3	25		12
14	36	33	3	25		16
15	36	33	3	25		17
16	36	33	3	25		12
17	36	34	2	25		109
18	36	34	2	25		15
19	36	34	2	25		11
20	36	34	2	25		109
21	36	34	2	25		16
22	36	34	2	25		12
23	36	33	3	25		11
24	36	33	3	25		108
25	36	33	3	25		13
26	36	34	2	25		16
27	36	34	2	25		17
28	37	34	3	25		11
29	37	34	3	25		14
30	37	34	3	25		16
31	37	34	3	25		11

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 Gago	DATE: 4-1-23
		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: March 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	128	6.2	7.7	77	Y	910
2/	1.7	80	136	7.0	7.7	79	Y	1960
3/	1.7	80	136	7.4	7.7	79	Y	720
4/	1.9	80	152	7.3	7.7	79	Y	1060
5/	2.0	80	160	7.9	7.7	81	Y	900
6/	2.2	80	176	8.2	7.7	83	Y	190
7/	2.1	80	168	6.9	7.7	79	Y	860
8/	2.0	80	160	7.4	7.7	79	Y	260
9/	1.9	80	152	7.7	7.7	79	Y	720
10/	1.8	80	144	7.3	7.7	79	Y	620
11/	1.6	80	128	7.1	7.7	77	Y	520
12/	1.7	80	136	8.2	7.7	79	Y	680
13/	1.9	80	152	8.3	7.7	79	Y	830
14/	1.8	80	144	8.6	7.7	79	Y	1120
15/	1.9	80	152	8.4	7.7	79	Y	990
16/	2.0	80	160	8.5	7.7	81	Y	520
17/	2.0	80	160	8.9	7.7	81	Y	1340
18/	1.9	80	152	9.2	7.7	79	Y	1390
19/	2.1	80	168	9.7	7.7	79	Y	1070
20/	2.2	80	176	9.0	7.7	83	Y	620
21/	1.9	80	152	9.6	7.7	79	Y	900
22/	2.0	80	160	9.8	7.7	81	Y	360
23/	2.1	80	168	8.5	7.7	79	Y	370
24/	2.0	80	160	8.2	7.7	81	Y	910
25/	1.8	80	144	8.0	7.7	79	Y	920
26/	1.9	80	152	8.3	7.7	79	Y	750
27/	2.1	80	168	8.1	7.7	81	Y	1330
28/	2.2	80	176	8.0	7.7	83	Y	400
29/	2.1	80	168	7.7	7.7	81	Y	1690
30/	2.2	80	176	8.3	7.7	83	Y	440
31/	2.2	80	176	8.4	7.7	83	Y	420

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/Health/Environments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf