

OHA - Drinking Water Services – Turbidity Monitoring Report Form County: Douglas Slow Sand, Membrane, Diatomaceous Earth Filtration or Unfiltered Systems

System Name: Fir Point Bible Conference ID #:OR4192108 WTP:-WTP-A Month/Year: 4-22

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1			SYSTEM off				
2							
3							
4							
5	off	off	.02	off	off	off	.02
6	off	off	.01	off	off	off	.01
7	off	off	.01	off	off	off	.01
8	off	off	.01	off	off	off	.01
9			SYSTEM off				
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25	off	off	.01	off	off	off	.01
26	off	off	.01	off	off	off	.01
27	off	off	.01	off	off	off	.01
28	off	off	.01	off	off	off	.01
29				SYSTEM off	off		
30				SYSTEM off			
31							

Slow Sand/Membrane/DE Filtration/Unfiltered	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup> <input checked="" type="radio"/> Yes <input type="radio"/> No All daily turbidity readings ≤ 5 NTU? <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 <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No
Notes:  <b>RECEIVED</b> MAY 04 2022 Data Mgmt. Drinking	PRINTED NAME: Fred Jensen	
	SIGNATURE: <i>[Signature]</i>	DATE: 5-2-22
	PHONE #: (541) 832-2202	CERT #: <i>[Symbol]</i>

<sup>1</sup>Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous readings' maximum. <sup>2</sup>Filtered systems only.

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT	[°C]		Use tables	Yes / No	[GPM]
1/			System off					
2/								
3/								
4/								
5/	.45	210	94.5	10.5	7.50	44	yes	
6/	.41	210	86.1	12.9	7.55	38	yes	
7/	.44	210	92.4	12.8	7.52	38	yes	
8/	.58	210	121.8	13.2	7.42	34	yes	
9/			System off					
10/								
11/								
12/								
13/								
14/								
15/								
16/								
17/								
18/								
19/								
20/								
21/								
22/								
23/								
24/								
25/	.39	210	81.9	11.2	7.62	42	yes	
26/	.35	210	73.5	12.6	7.62	39	yes	
27/	.36	210	75.6	11.8	7.56	41	yes	
28/	.48	210	100.8	12.5	7.52	38	yes	
29/			System off					
30/								
31/								

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l OR CT not met, notify DWS within 24 hours. Revised October 2013. Download form at: [public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-alt-unfiltered.pdf](http://public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-alt-unfiltered.pdf)

REPORT  
MAY 04 2022

Data Mgmt & Compliance  
Drinking Water Program