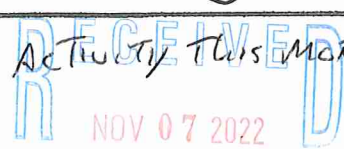


OHA - Drinking Water Services – Turbidity Monitoring Report Form County: Douglas Slow Sand, Membrane, Diatomaceous Earth Filtration or Unfiltered Systems

System Name: Fir Point Bible Conference ID #:OR4192108 WTP:-WTP-A Month/Year: 10-22

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							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27	off	off	.01	off	off	off	.01
28	off	off	.01	off	off	off	.01
29	off	off	.01	off	off	off	.01
30			System off				
31			System off				

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="checkbox"/> Yes / No	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / No	All Cl <sub>2</sub> 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			
Notes: Minimal Activity this month		PRINTED NAME: Fred Jensen	
		SIGNATURE: <i>[Signature]</i>	DATE: 11-2-22
		PHONE #: (541) 832-2202	CERT #: <i>[Signature]</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.

Fir Point Bible Conference

ID #: OR4192108

WTP:- WTP-A

Month/year: 10-22

Date / Time	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> 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/								
6/								
7/								
8/								
9/								
10/								
11/								
12/								
13/								
14/								
15/								
16/								
17/								
18/								
19/								
20/								
21/								
22/								
23/								
24/								
25/								
26/								
27/	.40	210	84	15.8	7.7	31	yes	
28/	.40	210	84	16.8	7.2	27	yes	
29/	.42	210	88.2	15.9	7.40	28	yes	
30/			System off					
31/			System off					

<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)