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Certificate of Compliance for Drinking Water Services

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: 2-25

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	off	off	.02	off	off	off	.02
12	off	off	.02	off	off	off	.02
13			System off				
14	↓	↓	↓	↓	↓	↓	↓
15	↓	↓	↓	↓	↓	↓	↓
16	↓	↓	↓	↓	↓	↓	↓
17	↓	↓	↓	↓	↓	↓	↓
18	↓	↓	↓	↓	↓	↓	↓
19	↓	↓	↓	↓	↓	↓	↓
20	↓	↓	↓	↓	↓	↓	↓
21	↓	↓	↓	↓	↓	↓	↓
22	↓	↓	↓	↓	↓	↓	↓
23	↓	↓	↓	↓	↓	↓	↓
24	↓	↓	↓	↓	↓	↓	↓
25	↓	↓	↓	↓	↓	↓	↓
26	↓	↓	↓	↓	↓	↓	↓
27	↓	↓	↓	↓	↓	↓	↓
28	↓	↓	↓	↓	↓	↓	↓
29	↓	↓	↓	↓	↓	↓	↓
30	↓	↓	↓	↓	↓	↓	↓
31	↓	↓	↓	↓	↓	↓	↓

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup>	Yes/No <input checked="" type="radio"/> Yes <input type="radio"/> No	CT's met everyday? (see back)	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	Yes/No <input checked="" type="radio"/> Yes <input type="radio"/> No	Yes/No <input checked="" type="radio"/> Yes <input type="radio"/> No	Yes/No <input checked="" type="radio"/> Yes <input type="radio"/> No
Notes:		PRINTED NAME: Fred Jensen	DATE: 3-1-25
		SIGNATURE: <i>Fred Jensen</i>	CERT #: 0
		PHONE #: (541) 832-2202	

<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.



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Certification Drinking Water Services

Fir Point Bible Conference ID #: OR4192108 WTP-: WTP-A Month/year: 2-25

Date / Time	Minimum Chlorine Residual at 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/	.47	210	98.7	9.2	7.54	46	Yes	
12/	.47	210	98.7	9.4	7.54	46	Yes	
13/			System off					
14/								
15/								
16/								
17/								
18/								
19/								
20/								
21/								
22/								
23/								
24/								
25/								
26/								
27/								
28/								
29/								
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-elt-unfiltered.pdf](http://public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-elt-unfiltered.pdf)