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OCT 06 2025
Certification 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: 9-25

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day [NTU]
1			System off				
2	off	off	off	off	off	off	off
3	off	off	.01	off	off	off	.01
4	off	off	.01	off	off	off	.01
5	off	off	.01	off	off	off	.01
6			System off				
7							
8							
9							
10							
11							
12							
13							
14							
15	off	off	.01	off	off	off	.01
16	off	off	.01	off	off	off	.01
17	off	off	.01	off	off	off	.01
18	off	off	.01	off	off	off	.01
19			System off				
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							

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? ²	Yes / No	CT's met everyday? (see back)	All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	Yes / No	Yes / No	Yes / No
Notes:		PRINTED NAME: Fred Jensen	
		SIGNATURE: [Signature]	DATE: 10-1-25
		PHONE #: (541) 832-2202	CERT #: [Signature]

¹Including 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. ²Filtered systems only.

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Fir Point Bible Conference			ID #: OR4192108	WTP: WTP-A		Month/year: 9-25		
Date / Time	Minimum Cl ₂ Residual at User (C)	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT	[°C]		Use tables	Yes / No	[GPM]
1/		System off						
2/		1	1	1	1	1	1	
3/	.45	210	94.5	24.5	7.48	15	yes	
4/	.54	210	113.4	25.2	7.63	15	yes	
5/	.54	210	113.4	25.2	7.62	15	yes	
6/		System off						
7/								
8/								
9/								
10/								
11/								
12/								
13/								
14/								
15/	.30	210	63	23.2	7.65	18	yes	
16/	.30	210	63	22.3	7.64	20	yes	
17/	.54	210	113.4	21.6	7.54	20	yes	
18/	.54	210	113.4	22.1	7.56	20	yes	
19/		System off						
20/								
21/								
22/								
23/								
24/								
25/								
26/								
27/	.34	210	71.4	20.1	7.54	22	yes	
28/	.34	210	71.4	21.5	7.56	20	yes	
29/	.44	210	92.4	21.5	7.56	20	yes	
30/		System off						
31/								

³ If Cl₂ 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-att-unfiltered.pdf