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 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:** 11-25

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

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b> 95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup> <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All daily turbidity readings ≤ 5 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<b>Monthly Summary (Answer Yes or No)</b>	
	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
<b>Notes:</b>	<b>PRINTED NAME:</b> Fred Jensen	<b>DATE:</b> 12-1-25
	<b>SIGNATURE:</b> <i>[Signature]</i>	<b>CERT #:</b> 0
	<b>PHONE #:</b> (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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Fir Point Bible Conference ID #: OR4192106 WTP: WTP-A Month/year: 11-2025

Date / Time	Minimum Cl <sub>2</sub> Residual at User (C) [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT CXT	Temp [°C]	pH	Required CT Use tables	CT Met? <sup>s</sup> Yes / No	Peak Hourly Demand Flow [GPM]
1/			System off					
2/								
3/								
4/								
5/								
6/								
7/								
8/								
9/								
10/								
11/								
12/								
13/								
14/								
15/								
16/								
17/								
18/								
19/								
20/								
21/	.34	210	71.4	13.3	7.28	31	yes	
22/	.50	210	105.	12.8	7.26	31	yes	
23/	.50	210	105.	12.7	7.26	31	yes	
24/		TANK	full - system		off			
25/								
26/								
27/								
28/								
29/								
30/								
31/								

<sup>s</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)