OHA - Drinking Water Program – Turbidity Monitoring Report Form County:

Cartridge or Bag Filtration

System Name: Hamlet Quick Stop ID #: 91157 WTP: A Month/Year: Jul. 25

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day [NTU]
1	26	22	4	12	.25	
2	26	22	4		.24	
3	28	24	4		.24	
4	28	24	4		.28	
5	28	24	4		.26	
6	28	24	4		.26	
7	28	24	4		.23	
8	28	24	4		.24	
9	28	24	4		.23	
10	28	24	4		.25	
11	28	24	4		.26	
12	28	24	4		.26	
13	28	24	4		.25	
14	28	24	4		.24	
15	28	24	4		.24	
16	28	24	4		.23	
17	28	24	4		.25	
18	28	24	4		.23	
19	28	24	4		.24	
20	28	24	4		.25	
21	28	24	4		.23	
22	28	24	4		.23	
23	28	24	4		.24	
24	28	24	4		.25	
25	28	24	4		.26	
26	28	24	4		.25	
27	28	24	4		.24	
28	28	24	4		.23	
29	28	24	4		.24	
30	28	24	4		.24	
31	28	24	4		.23	

Cartridge Filtration

95% of daily turbidity readings ≤ 1 NTU? Yes / No
All daily turbidity readings ≤ 5 NTU? Yes / No

Monthly Summary (Answer Yes or No)

Cl2's met everyday? (see back) Yes / No

All Cl_2 residual sanitary point ≥ 0.2 mg/l? Yes / No

Notes: PSI = pounds per square inch
PSID = pounds per square inch difference (before filter – after filter)
PSID When to Change Filter = Manufacturer's recommendation; may want to look in manual for manufacturer's specifications when to change the filter, at what PSID.

PRINTED NAME: Ludek Winkler

SIGNATURE: [signature] DATE: 7-31-25

PHONE #: (503) 728-0302 CERT #:

Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in "Daily Turbidity Reading" Column may not correspond to continuous readings' maximum.

OHA - Drinking Water Program – Surface Water Quality Data Form

System Name: Hamlet Quick Stop ID#: 94157 WTP: A Month/Year: Jul. 25

Date / Time	Minimum Cl_2 Residual at 1st User (C) [2]	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? [2]	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT	[° C]		Use tables	Yes / No	[GPM]
1 /	0.5	15	7.5			6		5 (Flow restricted)
2 /	0.5		7.5					
3 /	0.5		7.5		5.3			
4 /	0.5		7.5					
5 /	0.5		7.5					
6 /	0.5		7.5					
7 /	0.6		9					
8 /	0.6		9					
9 /	0.6		9		5.4			
10 /	0.6		9					
11 /	0.6		9					
12 /	0.6		9					
13 /	0.6		9					
14 /	0.6		9		5.3			
15 /	0.6		9					
16 /	0.6		9					
17 /	0.6		9					
18 /	0.6		9					
19 /	0.6		9					
20 /	0.6		9		5.2			
21 /	0.6		9					
22 /	0.6		9					
23 /	0.6		9					
24 /	0.6		9					
25 /	0.6		9					
26 /	0.6		9		5.3			
27 /	0.6		9					
28 /	0.6		9					
29 /	0.6		9					
30 /	0.6		9					
31 /	0.6		9					

[2] If Cl_2 at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day. Revised February 2012

Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/surb-cartridge.pdf