

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

System Name: Lake Simms/Kellers Landing ID #: 94645 WTP-: _____ Month/Year: Aug 2020

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day ¹ [NTU]
1				.285			
2				.288			
3				.271			
4				.312			
5				.261			
6				.287			
7				.361			
8				.230			
9				.218			
10				.134			
11				.163			
12				.111			
13				.131			
14				.117			
15				.128			
16				.197			
17				.252			
18				.282			
19				.333			
20				.123			
21				.102			
22				.142			
23				.171			
24				.124			
25				.170			
26				.067			
27				.083			
28				.122			
29				.095			
30				.131			
31				.281			

Slow Sand/Membrane/DE Filtration/Unfiltered Monthly Summary 95% of daily turbidity readings ≤ 1 NTU? ² <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All daily turbidity readings ≤ 5 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	
	Notes: PRINTED NAME: _____ SIGNATURE: _____ DATE: _____ PHONE #: () _____ CERT #: <u>2379</u>	

¹ 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. ² Filtered systems only.

OHA - Drinking Water Services – Surface Water Quality Data Form

System Name: Lake Sereno / Wellers Landing ID #: 94645 WTP-: _____ Month/Year: Aug 2022

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
1/	1.1	84	92	25.0	7.4	19	Yes	
2/	1.1	84	92	25.0	7.4	19	Yes	
3/	1.0	84	84	25.0	7.4	19	Yes	
4/	1.1	84	92	25.0	7.5	19	Yes	
5/	.9	84	75	25.0	7.5	19	Yes	
6/	.9	84	75	25.0	7.4	19	Yes	
7/	1.0	84	84	25.0	7.4	19	Yes	
8/	.9	84	75	25.0	7.4	19	Yes	
9/	1.0	84	84	25.0	7.4	19	Yes	
10/	1.1	84	92	25.0	7.4	19	Yes	
11/	1.1	84	92	25.0	7.2	19	Yes	
12/	1.0	84	84	23.9	7.4	19	Yes	
13/	1.3	84	109	23.9	7.4	19	Yes	
14/	1.3	84	109	23.9	7.4	19	Yes	
15/	1.0	84	84	23.9	7.5	19	Yes	
16/	.9	84	75	23.9	7.4	19	Yes	
17/	1.0	84	84	23.9	7.4	19	Yes	
18/	1.3	84	109	23.9	7.4	19	Yes	
19/	1.2	84	100	23.9	7.5	19	Yes	
20/	1.2	84	100	25.0	7.5	19	Yes	
21/	1.2	84	100	25.0	7.4	19	Yes	
22/	1.1	84	92	25.0	7.4	19	Yes	
23/	1.2	84	100	25.0	7.4	19	Yes	
24/	1.2	84	100	25.0	7.5	19	Yes	
25/	.9	84	75	25.0	7.4	19	Yes	
26/	1.2	84	100	25.0	7.4	19	Yes	
27/	1.4	84	117	25.0	7.4	19	Yes	
28/	1.3	84	109	23.9	7.5	19	Yes	
29/	1.1	84	92	23.9	7.5	19	Yes	
30/	.9	84	75	23.9	7.2	19	Yes	
31/	1.1	84	92	23.9	7.2	19	Yes	

³ If Cl₂ at entry point < 0.2 mg/l OR CT not met, notify DWS within 24 hours.

Revised September 2016

Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-alt-unfiltered.pdf

Return by 10th of following month by email, fax, or mail to:

dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350