

OHA - Drinking Water Services – Turbidity Monitoring Report Form  
 Cartridge or Bag Filtration

County: DOUGLAS

System Name: ON THE RIVER GOLF + RV RESORT ID #41: 1417 WTP-: \_\_\_\_\_ Month/Year: 1/2021

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1	62	62	∅	20	.019	.019
2	62	62	∅	20	.019	.019
3	62	62	∅	20	.019	.019
4	62	62	∅	20	.019	.019
5	62	62	∅	20	.019	.019
6	62	62	∅	20	.019	.019
7	62	62	∅	20	.019	.019
8	62	62	∅	20	.019	.019
9	62	62	∅	20	.019	.019
10	62	62	∅	20	.019	.019
11	62	62	∅	20	.019	.019
12	62	62	∅	20	.019	.019
13	62	62	∅	20	.019	.019
14	62	62	∅	20	.019	.019
15	62	62	∅	20	.019	.019
16	62	62	∅	20	.019	.019
17	62	62	∅	20	.019	.019
18	62	62	∅	20	.019	.019
19	62	62	∅	20	.019	.019
20	62	62	∅	20	.019	.019
21	62	62	∅	20	.019	.019
22	62	62	∅	20	.019	.019
23	62	62	∅	20	.019	.019
24	62	62	∅	20	.019	.019
25	62	62	∅	20	.019	.019
26	62	62	∅	20	.019	.019
27	62	62	∅	20	.019	.019
28	62	62	∅	20	.019	.019
29	62	62	∅	20	.019	.019
30	62	62	∅	20	.019	.019
31	62	62	∅	20	.019	.019

<b>Cartridge Filtration</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No	All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes <input type="radio"/> No	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> 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 need to look in manual for manufacturer's specifications when to change the filter, at what PSID.		PRINTED NAME: <u>STEVE SUMNER</u>	DATE: <u>2/3/2021</u>
RECEIVED FEB 11 2021		SIGNATURE: <u>[Signature]</u>	CERT #: <u>N/A</u>
		PHONE #: <u>(541) 679-3505</u>	

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: ON THE RIVER GOLF + RV ID #41: 94929 WTP-: Month/Year: 1/2021

Date / Time	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> User (C) <sup>2</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>2</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[°C]		Use tables	Yes / No	[GPM]
1/19A	.6	58	34.8	16	7.5	29	YES	30
2/19A	.6	58	34.8	16	7.5	29	YES	30
3/19A	.6	58	34.8	16	7.5	29	YES	30
4/19A	.6	58	34.8	16	7.5	29	YES	30
5/19A	.6	58	34.8	16	7.5	29	YES	30
6/19A	.6	58	34.8	16	7.5	29	YES	30
7/19A	.6	58	34.8	16	7.5	29	YES	30
8/19A	.6	58	34.8	16	7.5	29	YES	30
9/19A	.6	58	34.8	16	7.5	29	YES	30
10/19A	.6	58	34.8	16	7.5	29	YES	30
11/19A	.6	58	34.8	16	7.5	29	YES	30
12/19A	.6	58	34.8	16	7.5	29	YES	30
13/19A	.6	58	34.8	16	7.5	29	YES	30
14/19A	.6	58	34.8	16	7.5	29	YES	30
15/19A	.6	58	34.8	16	7.5	29	YES	30
16/19A	.6	58	34.8	16	7.5	29	YES	30
17/19A	.6	58	34.8	16	7.5	29	YES	30
18/19A	.6	58	34.8	16	7.5	29	YES	30
19/19A	.6	58	34.8	16	7.5	29	YES	30
20/19A	.6	58	34.8	16	7.5	29	YES	30
21/19A	.6	58	34.8	16	7.5	29	YES	30
22/19A	.6	58	34.8	16	7.5	29	YES	30
23/19A	.6	58	34.8	16	7.5	29	YES	30
24/19A	.6	58	34.8	16	7.5	29	YES	30
25/19A	.6	58	34.8	16	7.5	29	YES	30
26/19A	.6	58	34.8	16	7.5	29	YES	30
27/19A	.6	58	34.8	16	7.5	29	YES	30
28/19A	.6	58	34.8	16	7.5	29	YES	30
29/19A	.6	58	34.8	16	7.5	29	YES	30
30/19A	.6	58	34.8	16	7.5	29	YES	30
31/19A	.6	58	34.8	16	7.5	29	YES	30

<sup>2</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-cartridge.pdf](http://public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf)

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**FEB 11 2021**  
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 Drinking Water Program