

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

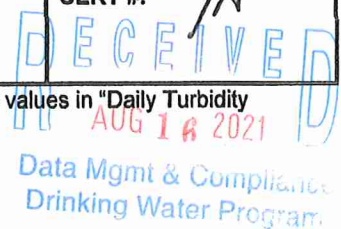
County: DOUGLAS

System Name: ON THE RIVER GOLF & RV RESORT ID #41: 99929 WTP-: _____ Month/Year: 7/2021

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day ¹ [NTU]
1	62	60	2	20	.019	.019
2	62	60	2	20	.019	.019
3	62	60	2	20	.019	.019
4	62	60	2	20	.019	.019
5	62	60	2	20	.019	.019
6	62	60	2	20	.019	.019
7	62	60	2	20	.019	.019
8	62	60	2	20	.019	.019
9	62	60	2	20	.019	.019
10	62	60	2	20	.019	.019
11	62	60	2	20	.019	.019
12	62	60	2	20	.019	.019
13	62	60	2	20	.019	.019
14	62	60	2	20	.019	.019
15	62	60	2	20	.019	.019
16	62	60	2	20	.019	.019
17	62	60	2	20	.019	.019
18	62	60	2	20	.019	.019
19	62	60	2	20	.019	.019
20	62	60	2	20	.019	.019
21	62	60	2	20	.019	.019
22	62	60	2	20	.019	.019
23	62	60	2	20	.019	.019
24	62	60	2	20	.019	.019
25	62	60	2	20	.019	.019
26	62	60	2	20	.019	.019
27	62	60	2	20	.019	.019
28	62	60	2	20	.019	.019
29	62	60	2	20	.019	.019
30	62	60	2	20	.019	.019
31	62	60	2	20	.019	.019

Cartridge Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? All daily turbidity readings ≤ 5 NTU?	<u>Yes/No</u> Yes / No	CT's met everyday? (see back) Yes / No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <u>Yes/No</u> 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 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>8/3/2021</u>
	SIGNATURE: <u>[Signature]</u>		CERT #: <u>N/A</u>
	PHONE #: <u>(541) 679-3505</u>		

¹ Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in "Daily Turbidity Reading" Column may not correspond to continuous readings' maximum.



OHÁ - Drinking Water Program – Surface Water Quality Data Form

System Name: ON THE RIVER GOLF + RV ID #41: 94929 WTP: _____ Month/Year: 7/2021

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ²	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[°C]		Use tables	Yes / No	[GPM]
11 9A	.6	58	34.8	20	7.5	21	YES	30
21 9A	.6	58	34.8	21	7.5	21	YES	30
31 9A	.6	58	34.8	21	7.5	21	YES	30
41 9A	.6	58	34.8	22	7.5	21	YES	30
51 9A	.6	58	34.8	21	7.5	21	YES	30
61 9A	.6	58	34.8	22	7.5	21	YES	30
71 9A	.6	58	34.8	22	7.5	21	YES	30
81 9A	.6	58	34.8	22	7.5	21	YES	30
91 9A	.6	58	34.8	22	7.5	21	YES	30
101 9A	.6	58	34.8	22	7.5	21	YES	30
111 9A	.6	58	34.8	22	7.5	21	YES	30
121 9A	.6	58	34.8	22	7.5	21	YES	30
131 9A	.6	58	34.8	22	7.5	21	YES	30
141 9A	.6	58	34.8	22	7.5	21	YES	30
151 9A	.6	58	34.8	22	7.5	21	YES	30
161 9A	.6	58	34.8	22	7.5	21	YES	30
171 9A	.6	58	34.8	22	7.5	21	YES	30
181 9A	.6	58	34.8	22	7.5	21	YES	30
191 9A	.6	58	34.8	22	7.5	21	YES	30
201 9A	.6	58	34.8	22	7.5	21	YES	30
211 9A	.6	58	34.8	22	7.5	21	YES	30
221 9A	.6	58	34.8	22	7.5	21	YES	30
231 9A	.6	58	34.8	22	7.5	21	YES	30
241 9A	.6	58	34.8	22	7.5	21	YES	30
251 9A	.6	58	34.8	22	7.5	21	YES	30
261 9A	.6	58	34.8	22	7.5	21	YES	30
271 9A	.6	58	34.8	22	7.5	21	YES	30
281 9A	.6	58	34.8	22	7.5	21	YES	30
291 9A	.6	58	34.8	22	7.5	21	YES	30
301 9A	.6	58	34.8	22	7.5	21	YES	30
311 9A	.6	58	34.8	22	7.5	21	YES	30

² 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-cartridge.pdf

