

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

County: DOUGLAS

System Name: ON THE RIVER GOLF + RV RESORT ID #41: 94929WTP-- Month/Year: 1/2024

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day [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

<b>Cartridge Filtration</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU? <u>Yes</u> / No All daily turbidity readings ≤ 5 NTU? <u>Yes</u> / No		CT's met everyday? (see back) <u>Yes</u> / No	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <u>Yes</u> / No
<b>Notes:</b> 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>	
		SIGNATURE: <u>[Signature]</u>	DATE: <u>2/4/2024</u>
		PHONE #: <u>(541) 679-3505</u>	CERT #: <u>N/A</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.

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 Drinking Water Services

**OHA - Drinking Water Program - Surface Water Quality Data Form**

System Name: ON THE RIVER GOLF + RV ID #41: 94929 WTP-: \_\_\_\_\_ Month/Year: 1/2024

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]
119A	.6	58	34.8	17	7.5	29	YES	30
219A	.6	58	34.8	17	7.5	29	YES	30
319A	.6	58	34.8	17	7.5	29	YES	30
419A	.6	58	34.8	17	7.5	29	YES	30
519A	.6	58	34.8	17	7.5	29	YES	30
619A	.6	58	34.8	17	7.5	29	YES	30
719A	.6	58	34.8	17	7.5	29	YES	30
819A	.6	58	34.8	17	7.5	29	YES	30
919A	.6	58	34.8	17	7.5	29	YES	30
1019A	.6	58	34.8	17	7.5	29	YES	30
1119A	.6	58	34.8	17	7.5	29	YES	30
1219A	.6	58	34.8	17	7.5	29	YES	30
1319A	.6	58	34.8	17	7.5	29	YES	30
1419A	.6	58	34.8	17	7.5	29	YES	30
1519A	.6	58	34.8	17	7.5	29	YES	30
1619A	.6	58	34.8	17	7.5	29	YES	30
1719A	.6	58	34.8	17	7.5	29	YES	30
1819A	.6	58	34.8	17	7.5	29	YES	30
1919A	.6	58	34.8	17	7.5	29	YES	30
2019A	.6	58	34.8	17	7.5	29	YES	30
2119A	.6	58	34.8	17	7.5	29	YES	30
2219A	.6	58	34.8	17	7.5	29	YES	30
2319A	.6	58	34.8	17	7.5	29	YES	30
2419A	.6	58	34.8	17	7.5	29	YES	30
2519A	.6	58	34.8	17	7.5	29	YES	30
2619A	.6	58	34.8	17	7.5	29	YES	30
2719A	.6	58	34.8	17	7.5	29	YES	30
2819A	.6	58	34.8	17	7.5	29	YES	30
2919A	.6	58	34.8	17	7.5	29	YES	30
3019A	.6	58	34.8	17	7.5	29	YES	30
3119A	.6	58	34.8	17	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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