

**MONTHLY TURBIDITY MONITORING REPORT
(Portable Instrument)**



Water Stewardship

WATER SYSTEM: _____

WATER SYSTEM CODE: _____

MONTH: Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

YEAR: 20_____

OPERATOR-IN-CHARGE: _____

Date	Time	Operator Initials	TURBIDITY, NTU				
			Raw Water	Filter #1	Filter #2	Entering Reservoir	Leaving Reservoir
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
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16.							
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18.							
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20.							
21.							
22.							
23.							
24.							
25.							
26.							
27.							
28.							
29.							
30.							
31.							

Total Number of Measurements Taken, A:

A:	A:	A:
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Turbidity Standard for Monitoring Location (NTU):

Number of Measurements Meeting Standard, B:

B:	B:	B:
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Compliance with Turbidity Standard, C = B/A X 100%:

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Total Number of Days in this Month, D:

D:	D:	D:
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Compliance with Monitoring Frequency, E = A/D X 100%:

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Submitted by (Print): _____

Signature: _____

DISTRIBUTION:

FORWARD THE ORIGINAL TO YOUR DRINKING WATER OFFICER
RETAIN A COPY FOR YOUR RECORDS

PLEASE CONTACT YOUR DRINKING WATER OFFICER WITH ANY
COMMENTS, QUESTIONS OR CONCERNS