

Monthly Turbidity Report

Water System Name: _____ Water System Code: _____

Month: _____ Year: _____ Type of Measurement Device: _____

Operator-in-charge (Print): _____ Other Operators (Print): _____

Date	Time	Initials	Turbidity (NTU)		
			Raw	Final Stage	
				Filter #1	Filter #2
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					

Date	Time	Initials	Turbidity (NTU)		
			Raw	Final Stage	
				Filter #1	Filter #2
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
Total Numbers of Measurements Taken					
# of Measurements Meeting Standard					
Compliance with Turbidity Standard			%	%	

Measurements at Distribution Sample Locations

Date	Time	Initials	Location	Turbidity (NTU)

Submitted by (Print): _____ Signature: _____

