



Environmental Protection Agency

Division of Drinking and Ground Waters



# Addendum for Presedimentation

Ohio EPA  
DDAGW-Central Office  
50 West Town Street, Suite 700  
Columbus, Ohio 43215  
(614) 644-2752 FAX (614) 644-2909

## PUBLIC WATER SYSTEM INFORMATION:

PWS Name: \_\_\_\_\_

PWSID: OH \_\_\_\_\_

STU Name: \_\_\_\_\_

STU ID: OH \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

County: \_\_\_\_\_

Reporting Month and Year: \_\_\_\_\_

Yes \_\_\_ No \_\_\_ Was the basin operated continuously during the month?

Yes \_\_\_ No \_\_\_ Was 100% of flow treated by the presedimentation basin?

Yes \_\_\_ No \_\_\_ Was a coagulant added continuously?

\_\_\_\_\_ What was the average turbidity at the influent of the basin for this month?

\_\_\_\_\_ What was the average turbidity at the effluent of the basin for this month?

Yes \_\_\_ No \_\_\_ Was the average log reduction of influent turbidity at least 0.5 log this month?

## COMMENTS:

### Notes:

- Change our rule to say presedimentation basin turbidity samples must be collected while the plant is operating under normal operating conditions.
- Talk to Todd about a possible definition for normal operating conditions.
- Need instructions.
- Need to show an example and include rounding.

I certify under penalty of law that I have personally examined and am familiar with the data submitted in this MOR; that the data in this report is true, accurate and complete; and I am aware that falsification thereof could result in the imposition of fines and penalties including revocation of my certification as a public water system operator.

Name of Certified Operator and Certification Number

Signature of Responsible Official

Date