

**MONTHLY OPERATING REPORT (Population =<3,300)**

PWS ID: \_\_\_\_\_ PWS Name: \_\_\_\_\_ Month/Year: \_\_\_\_\_

Entry Point: \_\_\_\_\_ Required Minimum Cl (mg/l): \_\_\_\_\_

<u>Date</u>	<u>Lowest measured free &amp; total chlorine concentration (mg/l) with pump running</u>	<u>Duration of low chlorine (hrs)</u>	<u>COMMENTS</u>
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Was the chlorine residual ever less than the required minimum \_\_\_\_\_  
 If so, were grab samples collected every four hours until the continuous monitoring equipment was returned to service \_\_\_\_\_  
 (Attach grab sample results to this form)

**Operator Certification:** I, being the designated operator of the above named system, do hereby certify the above operating report to be a true and accurate recording for the noted reporting month.

\_\_\_\_\_  
 Certified Operator Signature \_\_\_\_\_  
 Date

**How to Submit MORs:** You must submit the monthly operating report by the **5th of the month following the reporting month** to GWR compliance: 601-576-7800 (fax), water.gwr@msdh.ms.gov (email), PO Box 1700 Water Supply Jackson, MS 39215 (mail).

## Compliance Monitoring Points to Remember:

**Note:** If the "lowest measured free chlorine concentration (mg/l) with pump running" is less than the Required Minimum, the minimum must be restored within 4 hours.

**Note:** If the chlorine monitor fails, but the well is still running, then manual grab samples must be collected every 4 hours, AND the monitor must be repaired or replaced within 14 days. (Monitors are not required for populations less than 3300.)