



MEMBRANE TREATMENT TECHNOLOGY - INDIVIDUAL UNIT MONITORING DATA

(Transfer data from this page to: LT1-ESWTR Summary Section A, Subsection 2-SFN 59082)

North Dakota Department of Health

Division of Municipal Facilities

SFN 59084 (4/2009)

Public Water System (PWS) Name	PWS Number: ND _____
Were Individual Turbidimeters Calibrated Weekly? (1)	Summary Prepared By (2)

Year Month	Transmembrane Pressure ⁽³⁾		Flux Rate ⁽⁴⁾		Direct Integrity Test ⁽⁵⁾	Filter to Waste ⁽⁶⁾
	Max Allowable TMP	Reported	Critical Flux Rate	Reported	Successful at start up?	Capabilities used during the day?
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For each filter, attach additional information identifying the every 15 minute readings that caused the exceedance(s).

Membrane Unit Monthly Summary Report

For each membrane unit that either exceeded maximum trans-membrane pressure, critical flux or a direct integrity test, fill out the diagnostic testing summary report for each event.

Direct Integrity Test ⁽⁷⁾		
Date	Serial Number of module	Event that triggered DIT

Diagnostic Test ⁽⁸⁾		
Date	Serial Number of module	Type of Diagnostic Test Used

Module Repairs/Replacement ⁽⁹⁾		
Date	Serial Number of module	Type of Repair

Submit this report to the Division of Municipal Facilities within 10 days after the end of each month that the system provides water to the public.

**Division of Municipal Facilities
918 E. Divide Ave., 3rd Floor
Bismarck, ND 58501-1947**