



# ROM #626

## Daily Customer Chlorination Report Form

Thurston PUD 1230 Ruddell Rd SE Lacey, WA 98503 (360) 357-8783	Month of: _____ 20__
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<b>System Name:</b> ROM 626	<b>ID#:</b> 719307	<b>County:</b> Lewis	<b>Report to:</b> SWDOH
<b>If residual gets below 0.7 ppm or above 2.0 ppm please contact the office at (360)357-8783 <u>ASAP</u>.</b>			
<i>If taking a vacation please contact our Customer Service Department two weeks in advance so we can get the residual done while you are gone.</i>			

Day	Time of Day	Free Cl <sub>2</sub> Residual	Initials	Called PUD	Comments
1					
2					
3					
4					
5					
6					
7					
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31					

**Please mail, email or fax into the PUD office by the 2nd of the following month.** Form needs to be submitted to the State by the 10<sup>th</sup> of each month or the PUD may receive a violation for the system. Email [PUDCustomerService@thurstonpud.org](mailto:PUDCustomerService@thurstonpud.org) Fax # 360-357-1172