

# MOR compliance: Improving common problems

Enter the report date as the relevant monitoring period for the data as MM/YYYY, not the current month (if submitting in March, the monitoring period would be February)

Revised 01/04/07

## MONTHLY OPERATIONS REPORT (MOR) FOR ALL WATER SYSTEMS

MONTH & YEAR (mm/yyyy)

Indicate one with "X"

- SURFACE WATER
- GROUNDWATER
- PURCHASE/DISTRIBUTE ONLY

Always enter the PWSID as KY followed by the 7 digit ID number  
**KY1234567**

PWS ID:

PLANT ID:

PLANT NAME:

PWS NAME:

PLANT CLASS:

DIST. CLASS:

CY INTEREST (AI):

SOURCE NAME:

Water producers enter plant ID as A, B, C, etc.  
If only one plant enter A

OPERATOR(S) RESP:

CERTIFICATION NUMBER

WTP SHIFT 1:

WTP SHIFT 2:

WTP SHIFT 3:

DISTRIBUTION:

THIS REPORT MUST BE RECEIVED BY THE DIVISION OF WATER AND APPLICABLE FIELD OFFICE  
NO LATER THAN 10 DAYS AFTER THE END OF THE MONTH.

### TREATMENT PLANTS COMPLETE:

1. DESIGN CAPACITY (gpm):

2. TYPE OF FILTRATION USED:



# MOR Compliance

## MOR page 7 Distribution

### Distribution System Chlorine Residuals

Community Systems: Must report at least one chlorine residual **everyday**

\*Non-Community Systems: Must report at least one chlorine residual **everyday the system is open** and serving water to the public

A system with multiple plants will have the same distribution chlorine residuals for both plants' MORs

If a system purchases both chlorine and chloramine within the same month,

report total chlorine for all samples  
 Ensure the summary numbers are complete and accurate

CHEMICALS ADDED		DISTRIBUTION SYSTEM OPERATION												
DAY	CHLORINE BOOSTER	CHLORINE BOOSTER	TOTAL (T) AND FREE (F) CHLORINE RESIDUAL (ppm)											
	LBS	LBS	NORTH			SOUTH			EAST			WEST		
			T	F	T	F	T	F	T	F	T	F		
1														
2														
3														
4														
5														
6														
7														
8														
...														
23														
24														
25														
26														
27														
28														
29														
30														
31														
AVERAGE														
TOTAL														

  

Total # Chlorine Samples # Less than 0.2 mg/L @ 5 mg/L	Minimum Monthly Free Residual	Minimum Monthly Total Residual
Number of Free Residuals		
Number of Total Residuals		
Total # Less than 0.2 mg/L		
Total # Less than 0.5 mg/L		

  

Disinfectant Chloramines? (Y/N)	Number of days of operation?
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Free chlorine must be reported for all disinfectants except chloramine. For chloramine report total chlorine

Enter at least one chlorine sample everyday.\* Reporting multiple daily samples will ensure full coverage and help avoid instances of missing data. Skipping a day will result in a violation

For months with less than 31 days, write NA

If your system uses chloramines enter Y. Otherwise enter N

Community: Total days of distribution must equal the number of days in the month  
Non-Community: Total days system was open and serving water to the public

# MOR Compliance

**Transfer MOR page 7 data to distribution summary**  
 Compliance is primarily determined based on the summary pages.  
 It is imperative that the summary pages are complete and accurate

Ensure that the data corresponds between distribution chlorine residuals and the summary page

Number of Free Residuals  
 Number of Total Residuals  
 Total # Less than 0.2 mg/L  
 Total # Less than 0.5 mg/L

Minimum Monthly Free Residual  
 Minimum Monthly Total Residual

Disinfectant Chloramines? (Y/N)

Number of days of operation?

**DISTRIBUTION RESIDUAL DISINFECTANT CONCENTRATION**  
**APPLICABLE TO ALL WATER SYSTEMS**

ANALYTE CODE 0999

Number of days of operation \_\_\_\_\_

Were samples taken each day of operation? (Y/N)

Number of samples taken:

FREE \_\_\_\_\_

TOTAL \_\_\_\_\_

Lowest single FREE chlorine reading \_\_\_\_\_

Lowest single TOTAL chlorine reading \_\_\_\_\_

Free Chlorine (for all disinfectants except chloramine)  
 Number of samples under 0.2 mg/L \_\_\_\_\_

Total Chlorine (when disinfectant is chloramine)  
 Number of samples under 0.5 mg/L \_\_\_\_\_

If using excel, cells will auto-populate from preceding data pages, **except** Y/N questions





# MOR compliance: Improving common problems

- Do Not Handwrite
  - Illegible
  - Error prone
- Use Microsoft Excel
  - Calculations are completed automatically
  - Errors easily identified and corrected
- Computer access is available to everyone
  - Administrative offices
  - Public Libraries
- Create redundancy in training
  - Valuable experience and knowledge is lost if a system fails to train replacements before staff leave
  - Ensure multiple individuals are trained to complete compliance obligations
  - If responsible party is absent, retires, or unexpectedly leaves, there should always be another individual trained and readily available to complete required duties



# MOR Compliance: Final reminders

- Review all data before signing and dating the MOR
- Your signature acknowledges that all data within the MOR is true, accurate, and complete
- The MOR must arrive to the DOW within 10 days after the monitoring period
- Mail certified to guarantee delivery. A failure to submit violation will not be rescinded unless the water system has proof of delivery (certified mail receipt)
- Mail to:
  - Division of Water**
  - Drinking Water Branch 3<sup>rd</sup> Floor**
  - 300 Sower Blvd**
  - Frankfort, KY 40601**
  - Attn: MOR DWB**
- If any errors are found after submitting to the state, notify the compliance officer immediately and send a correction

