



COUNTY OF SAN DIEGO – Department of Public Works
**STORMWATER TURBIDITY METER
 CALIBRATION RECORD**
 CE 2058 (Rev. 03/16)

| | |
|-------------------------------------|---|
| PROJECT NAME AND SITE ADDRESS: | CONTRACT NUMBER: |
| | ORACLE NUMBER: |
| | WDID NUMBER: |
| | |
| CONTRACTOR NAME AND ADDRESS: | PROJECT SITE RISK LEVEL: |
| | <input type="checkbox"/> Risk Level 1 <input type="checkbox"/> LUP Type 1 <input type="checkbox"/> Risk Level 2 <input type="checkbox"/> LUP Type 2 <input type="checkbox"/> Risk Level 3 <input type="checkbox"/> LUP Type 3 |
| Submitted by (Print Name and Sign): | Date: |

Turbidity Meter

| | | |
|---|-----------------------|---------------------|
| Meter Manufacturer | Meter Model Number | Meter Serial Number |
| Standard Solution (NTU) (Nephelometric Turbidity Unit) | Control Number | Date |
| 0.02 | | |
| 10.0 | | |
| 1,000 | | |

Turbidity Calibration Date

| Standard Solution (NTU) | Cal Standard Solution Expiration Date | Initial Calibration | | Re-Calibration | | Drift Check | | Notes | Initials |
|-------------------------|---------------------------------------|---------------------|------|----------------|------|-------------|------------------------|-------|----------|
| | | Time: | | Time: | | Time: | | | |
| | | Cal | Read | Cal | Read | Read | Acceptable performance | | |
| 0.02 | | | | | | | | | |
| 10.0 | | | | | | | | | |
| 1,000 | | | | | | | | | |

Turbidity Calibration Date

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|-------------------------|---------------------------------------|---------------------|------|----------------|------|-------------|------------------------|-------|----------|
| | | Time: | | Time: | | Time: | | | |
| | | Cal | Read | Cal | Read | Read | Acceptable performance | | |
| 0.02 | | | | | | | | | |
| 10.0 | | | | | | | | | |
| 1,000 | | | | | | | | | |

Turbidity Calibration Date

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|-------------------------|---------------------------------------|---------------------|------|----------------|------|-------------|------------------------|-------|----------|
| | | Time: | | Time: | | Time: | | | |
| | | Cal | Read | Cal | Read | Read | Acceptable performance | | |
| 0.02 | | | | | | | | | |
| 10.0 | | | | | | | | | |
| 1,000 | | | | | | | | | |



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| PROJECT NAME AND SITE ADDRESS: | CONTRACT NUMBER: |
| | ORACLE NUMBER: |
| | WDID NUMBER: |

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|------------------------------|---|
| CONTRACTOR NAME AND ADDRESS: | PROJECT SITE RISK LEVEL: <input type="checkbox"/> Risk Level 1 <input type="checkbox"/> LUP Type 1 <input type="checkbox"/> Risk Level 2 <input type="checkbox"/> LUP Type 2 <input type="checkbox"/> Risk Level 3 <input type="checkbox"/> LUP Type 3 |
|------------------------------|---|

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|-------------------------------------|-------|
| Submitted by (Print Name and Sign): | Date: |
|-------------------------------------|-------|

| Turbidity Calibration Date _____ | | | | | | | | | |
|----------------------------------|---------------------------------------|---------------------|------|----------------|------|-------------|------------------------|-------|----------|
| Standard Solution (NTU) | Cal Standard Solution Expiration Date | Initial Calibration | | Re-Calibration | | Drift Check | | Notes | Initials |
| | | Time: | | Time: | | Time: | | | |
| | | Cal | Read | Cal | Read | Read | Acceptable performance | | |
| 0.01 | | | | | | | | | |
| 10.0 | | | | | | | | | |
| 1,000 | | | | | | | | | |

| Turbidity Calibration Date _____ | | | | | | | | | |
|----------------------------------|---------------------------------------|---------------------|------|----------------|------|-------------|------------------------|-------|----------|
| Standard Solution (NTU) | Cal Standard Solution Expiration Date | Initial Calibration | | Re-Calibration | | Drift Check | | Notes | Initials |
| | | Time: | | Time: | | Time: | | | |
| | | Cal | Read | Cal | Read | Read | Acceptable performance | | |
| 0.01 | | | | | | | | | |
| 10.0 | | | | | | | | | |
| 1,000 | | | | | | | | | |

| Date | Notes |
|------|-------|
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Review and Record Keeping

I have reviewed this document and, based on my inquiry of the persons who manage the system or those persons directly responsible for gathering information, to the best of my knowledge and belief, the information submitted is true, accurate and complete.

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|---|-------|
| Water Pollution Control Manager (Name): | Date: |
|---|-------|

Water Pollution Control Manager (Signature): _____

| | |
|---------------------------------------|-------|
| Reviewed by Resident Engineer (Name): | Date: |
|---------------------------------------|-------|

Reviewed by Resident Engineer (Signature): _____

Instructions

- GENERAL INFORMATION**
- Projects with Construction Site Monitoring Program require the information on this form as part of the Stormwater Pollution Prevention Plan for stormwater analysis meter calibration.
 - Completed forms must be filed in project file Category 20, Field testing Equipment Maintenance and Calibration Records.