

# OREGON ASSOCIATION OF WATER UTILITIES

935 N. Main St., Independence, OR 97351 ♦ Phone: (503) 837-1212 ♦ Email: office@oawu.net ♦ www.oawu.net

## Trident Products User Group & Technology Workshop

**Date:** November 2, 2021

**Location:** Willamette River Water Treatment Plant  
10350 SW Arrowhead Creek Ln.  
Wilsonville, OR 97070

**Time:** 8:00 a.m. – 4:30 p.m. Lunch from 12:00-1:00 Provided

**Cost:** Free

**CEUs:** 0.7 Total Water CEUs – ESAC #4469

**Course Description:** This workshop is designed for water operators that run package plants. Subjects include: The history of package plants, configuration of the components and process and application guidelines. Features of adsorption clarification, mixed media filtration and various enhancements made since introduction in the late 1970s. Keeping process instrumentation operating properly to optimize the clarifier and filter and minimizing waste and increasing net production. This workshop will also provide information on a preventive maintenance schedule to help provide optimum operation, reduced waste, lessen downtime, and decrease operation costs. The afternoon will include a plant tour, observe a filter backwash, clarifier flush, filter core sample & AC media check and determine the solids removal performance. Jar testing will also be performed as part of this workshop.

**Instructor:** Adrian Williams, Richard Ross, Eric Lawrence, and Dave Lucey, WesTech, Inc

**REGISTRATION POLICY:** OAWU reserves the right to cancel this class within 7 days prior to the class date. Minimum 3-day prior notice for cancellations & refunds please.

**CONFIRMATION POLICY:** Please make a copy of your registration form to keep as confirmation or contact OAWU at (503) 837-1212 to request confirmation.

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**OAWU Registration Form**      **Trident Products User Group & Technology Workshop**      November 2, 2021

Name: \_\_\_\_\_ W Cert. # \_\_\_\_\_ / \_\_\_\_\_ Job Title: \_\_\_\_\_

Name: \_\_\_\_\_ W Cert. # \_\_\_\_\_ / \_\_\_\_\_ Job Title: \_\_\_\_\_

Name: \_\_\_\_\_ W Cert. # \_\_\_\_\_ / \_\_\_\_\_ Job Title: \_\_\_\_\_

Name: \_\_\_\_\_ W Cert. # \_\_\_\_\_ / \_\_\_\_\_ Job Title: \_\_\_\_\_

City/System Name: \_\_\_\_\_

System Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

System Phone: \_\_\_\_\_ System E-mail: \_\_\_\_\_

*Please return to OAWU: email: office@oawu.net or mail: 935 N. Main St., Independence, OR 97351 or Fax: (503) 837-1213*