

OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: Douglas

Month/Year: Apr-24

System Name: City of Roseburg ID#: 41-00720							WTP : TP - A
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day ¹ [NTU]
1	0.03	0.03	0.03	0.03	0.03	0.03	0.03
2	0.03	0.03	0.03	0.03	0.03	0.03	0.03
3	0.03	0.03	0.03	0.03	0.03	0.03	0.10
4	0.03	0.03	0.03	0.03	0.03	0.03	0.03
5	0.03	0.03	0.03	0.03	0.03	0.03	0.03
6	0.03	0.03	0.03	0.03	0.03	0.03	0.03
7	0.03	0.03	0.03	0.03	0.03	0.03	0.07
8	0.03	0.03	0.03	0.03	0.03	0.03	0.03
9	0.03	0.03	0.03	0.03	0.03	0.04	0.04
10	0.03	0.03	0.03	0.03	0.03	0.03	0.03
11	0.03	0.03	0.03	0.03	0.03	0.03	0.03
12	0.03	0.03	0.03	0.03	0.03	0.03	0.03
13	0.03	0.03	0.03	0.03	0.04	0.05	0.05
14	0.03	0.03	0.03	0.03	0.03	0.03	0.03
15	0.03	0.03	0.03	0.03	0.03	0.03	0.03
16	0.03	0.03	0.03	0.03	0.03	0.03	0.03
17	0.03	0.03	0.03	0.03	0.03	0.03	0.03
18	0.03	0.03	0.03	0.03	0.03	0.03	0.03
19	0.03	0.03	0.03	0.03	0.03	0.03	0.03
20	0.03	0.03	0.03	0.03	0.03	0.03	0.03
21	0.03	0.03	0.03	0.03	0.03	0.03	0.03
22	0.03	0.03	0.03	0.03	0.03	0.03	0.03
23	0.03	0.03	0.03	0.03	0.03	0.03	0.03
24	0.03	0.03	0.03	0.03	0.03	0.03	0.04
25	0.03	0.03	.03	0.03	0.05	0.03	0.05
26	0.03	0.03	0.03	0.03	0.03	0.03	0.03
27	0.03	0.03	0.03	0.03	0.03	0.03	0.03
28	0.03	0.03	0.03	0.03	0.03	0.03	0.03
29	0.03	0.03	0.03	0.03	0.03	0.03	0.03
30	0.03	0.03	0.03	0.03	0.03	0.03	0.03
31							
Conventional or Direct Filtration				Monthly Summary (Answer Yes or No)			
95% of 4-hour turbidity readings \leq 0.3 NTU? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No		All Cl ₂ residual at entry point \geq 0.2 mg/l? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
All 4-hour turbidity readings \leq 1 NTU? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
All turbidity readings < IFE ² triggers <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
Notes:				PRINTED NAME: Andrew Albee			
				SIGNATURE: Andrew Albee		DATE: 5/1/2024	
				PHONE #: (541) 492-7032		CERT #: 5221	

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² IFE = Individ. Filter Effl. (333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - :

System Name:	City of Roseburg	ID#: 41-00720	Month/Year:	Apr-22	Disinfection Giardia Log Inactiv:	0.5
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1.13	119.7	135.3	8.9	7.62	26.2	Yes	3350
2	1.17	119.7	140.1	9.4	7.83	27.4	Yes	3350
3	1.15	116.0	133.4	10.6	7.73	24.4	Yes	3350
4	1.17	113.4	132.7	9.4	7.49	24.3	yes	3500
5	1.17	106.2	124.3	8.3	7.70	28.2	yes	3500
6	1.16	112.2	130.2	8.9	7.60	26.1	yes	3500
7	1.15	103.1	118.6	8.9	7.61	26.2	Yes	3400
8	1.13	121.4	137.2	10.0	7.56	23.8	Yes	3200
9	1.13	125.3	141.6	10.6	7.56	22.9	Yes	3100
10	1.13	112.2	126.8	10.6	7.65	23.6	Yes	3500
11	1.13	91.4	103.2	10.6	7.70	24.1	Yes	3750
12	1.13	120.3	135.9	11.1	7.58	22.3	Yes	3300
13	1.03	116.7	120.2	11.1	7.56	21.9	Yes	3400
14	1.11	118.0	130.9	10.6	7.49	22.3	Yes	3400
15	1.07	115.5	123.6	10.0	7.46	22.8	Yes	3400
16	1.12	87.3	97.7	10.0	7.50	23.3	Yes	4500
17	1.12	119.7	134.1	10.0	7.50	23.3	Yes	3350
18	1.18	113.4	133.8	10.0	7.52	23.6	yes	3500
19	1.18	112.2	132.4	10.0	7.59	24.2	yes	3500
20	1.16	116.7	135.4	12.2	7.57	20.7	Yes	3400
21	1.16	124.0	143.8	11.1	7.60	22.5	Yes	3100
22	1.16	114.3	132.6	11.1	7.61	22.6	Yes	3472
23	1.13	104.4	118.0	12.2	7.59	20.8	Yes	3800
24	1.13	92.6	104.7	12.8	7.55	19.6	Yes	4375
25	1.13	110.2	124.6	12.2	7.49	20.1	Yes	3600
26	1.12	115.5	129.4	11.7	7.48	20.7	Yes	3400
27	1.1	118.0	129.8	10.6	7.50	22.3	Yes	3400
28	1.11	116.7	129.6	10.6	7.44	21.9	Yes	3400
29	1.13	115.5	130.5	10.0	7.30	21.7	Yes	3400
30	1.14	115.5	131.7	9.4	7.41	23.5	Yes	3400
31		#DIV/0!						

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised October 2013