

**OHA - Drinking Water Services -Turbidity Monitoring Report Form**  
**Conventional or Direct Filtration**

County: **Yamhill**  
 Month/Year: **Jan-23**

System Name:	City of Amity		ID#: 41 00041				WTP : WTP-D
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1	OFF	OFF	OFF	OFF	OFF	OFF	0.000
2	OFF	OFF	OFF	OFF	0.035	0.056	0.056
3	0.034	0.035	0.046	0.060	0.043	OFF	0.060
4	OFF	OFF	OFF	0.084	0.038	0.036	0.084
5	0.034	0.049	0.040	0.036	0.039	0.036	0.039
6	0.035	0.043	0.041	0.037	0.034	0.037	0.043
7	0.034	0.037	0.042	OFF	OFF	OFF	0.042
8	OFF	OFF	OFF	OFF	OFF	OFF	OFF
9	OFF	OFF	OFF	0.036	0.036	0.036	0.036
10	0.035	0.039	0.043	0.037	0.036	0.035	0.043
11	0.035	0.038	0.048	0.038	0.035	0.035	0.048
12	0.038	OFF	OFF	OFF	OFF	OFF	0.038
13	OFF	OFF	OFF	OFF	OFF	OFF	OFF
14	OFF	OFF	OFF	0.036	0.066	0.038	0.066
15	0.036	0.035	0.035	0.035	0.037	0.038	0.037
16	0.036	0.035	0.035	0.037	0.038	0.037	0.038
17	0.035	0.035	OFF	OFF	OFF	OFF	0.035
18	OFF	OFF	OFF	OFF	OFF	OFF	OFF
19	OFF	OFF	OFF	OFF	0.034	0.036	0.036
20	0.040	0.042	0.039	0.034	0.034	0.036	0.042
21	0.051	0.037	0.035	0.034	0.035	0.034	0.051
22	0.040	0.036	OFF	OFF	OFF	OFF	0.040
23	OFF	OFF	OFF	OFF	OFF	OFF	OFF
24	OFF	OFF	OFF	0.038	0.037	0.037	0.038
25	0.038	0.043	0.039	0.037	0.037	0.041	0.043
26	0.035	0.035	0.035	0.035	0.036	0.034	0.036
27	0.034	0.035	0.036	0.036	0.036	0.036	0.036
28	0.038	0.076	0.040	0.037	OFF	OFF	0.076
29	OFF	OFF	OFF	OFF	OFF	OFF	OFF
30	OFF	OFF	OFF	OFF	OFF	OFF	OFF
31	OFF	0.034	0.035	0.034	0.038	0.037	0.037

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	<input checked="" type="checkbox"/> Yes	No
All 4-hour turbidity readings ≤ 1 NTU?	<input checked="" type="checkbox"/> Yes	No
All turbidity readings < IFE <sup>2</sup> triggers	<input checked="" type="checkbox"/> Yes	No
Notes:	CT's met everyday? (see back)	All Cl <sub>2</sub> residual at entry point > 0.2 mg/l?
	<input checked="" type="checkbox"/> Yes / No	<input checked="" type="checkbox"/> Yes No
	PRINTED NAME: Darrel Lockard	SIGNATURE: <i>Darrel Lockard</i> DATE: 2/10/23
	PHONE #: (541) 222-9997	CERT #: 2853

<sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM correspond to continuous readings' maximum. <sup>2</sup> IFE = Individ. Filter Effl. (333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : WTP-D

System Name: City of Amity	ID#: 41 00041	Month/Year: Jan-23	Disinfection Giardia Log Inactiv:	0.5
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Date	Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
		[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	10:12 AM	1.55	85	131.8	10.0	7.8	27.2	Yes	OFF
2	9:30 AM	1.42	85	120.7	11.1	7.6	23.2	Yes	275
3	9:45 AM	1.8	85	153.0	11.5	8.8	36.4	Yes	275
4	7:00 AM	1.65	85	140.3	9.9	8.5	35.8	Yes	275
5	9:45 AM	1.78	85	151.3	12.9	8.0	24.7	Yes	275
6	8:05 AM	1.81	85	153.9	12.9	8.1	25.8	Yes	275
7	9:02 AM	1.81	85	153.9	10.1	7.7	26.9	Yes	275
8	10:23 AM	1.7	85	144.5	9.1	7.8	29.4	Yes	OFF
9	12:22 PM	1.71	85	145.4	10.4	7.5	24.3	Yes	275
10	11:05 AM	1.81	85	153.9	9.5	8.4	36.1	Yes	275
11	9:20 AM	1.92	85	163.2	12.2	9.5	45.5	Yes	275
12	8:59 AM	1.8	85	153.0	10.8	7.2	21.5	Yes	275
13	9:33 AM	1.61	85	136.9	10.9	7.3	21.6	Yes	OFF
14	9:40 AM	1.54	85	130.9	13.1	7.4	19.1	Yes	275
15	9:45 AM	1.84	85	156.4	12.5	7.6	22.1	Yes	275
16	10:35 AM	1.79	85	152.2	12.0	7.5	22.0	Yes	275
17	10:20 AM	1.66	85	141.1	12.1	7.4	20.8	Yes	275
18	12:41 PM	1.56	85	132.6	10.6	7.2	21.2	Yes	OFF
19	9:07 AM	1.52	85	129.2	11.5	7.6	22.9	Yes	275
20	9:23 AM	1.76	85	149.6	10.8	7.8	26.4	Yes	275
21	9:41 AM	1.98	85	168.3	12.4	7.9	25.2	Yes	275
22	9:30 AM	1.87	85	159.0	12.3	7.8	24.2	Yes	275
23	9:31 AM	1.76	85	149.6	12.1	7.7	23.4	Yes	OFF
24	8:32 AM	1.83	85	155.6	10.1	7.6	26.0	Yes	275
25	9:08 AM	1.97	85	167.5	10.2	7.6	26.3	Yes	275
26	9:01 AM	1.76	85	149.6	9.0	7.5	26.8	Yes	275
27	9:20 AM	1.81	85	153.9	9.8	7.6	26.5	Yes	275
28	9:41 AM	1.97	85	167.5	8.8	7.5	27.8	Yes	275
29	10:13 AM	1.7	85	144.5	10.1	7.3	23.0	Yes	OFF
30	10:25 AM	1.66	85	141.1	11.0	7.2	20.9	Yes	OFF
31	10:30 AM	1.86	85	158.1	10.9	7.5	23.9	Yes	275

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised October 2013