

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

County: **Yamhill**
 Month/Year: **Jun-24**

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 ¹ [NTU]
1	0.033	0.033	0.037	0.037	0.035	0.035	0.037
2	0.034	0.053	0.036	0.036	0.037	0.036	0.053
3	0.036	0.040	0.040	0.039	0.041	0.037	0.041
4	0.063	0.070	OFF	OFF	OFF	OFF	0.070
5	OFF	OFF	0.133	0.045	0.034	0.032	0.133
6	0.031	0.031	0.037	0.033	0.032	0.031	0.037
7	0.031	0.039	0.033	0.032	0.031	0.030	0.039
8	0.035	0.032	0.032	0.031	0.031	0.037	0.037
9	0.032	0.032	0.033	0.031	0.038	0.033	0.038
10	0.036	OFF	OFF	OFF	OFF	OFF	0.036
11	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12	OFF	OFF	0.049	0.050	0.051	0.053	0.053
13	0.054	0.055	0.056	0.031	0.032	0.032	0.056
14	0.032	0.034	0.030	0.032	0.032	0.032	0.034
15	0.030	0.030	0.084	0.031	0.030	0.030	0.084
16	0.032	0.092	OFF	OFF	OFF	OFF	0.092
17	OFF	OFF	OFF	OFF	OFF	OFF	OFF
18	OFF	OFF	OFF	0.030	0.030	0.030	0.030
19	0.031	0.031	0.030	0.030	0.030	0.030	0.031
20	0.031	0.031	0.031	0.030	0.030	0.032	0.032
21	0.032	0.031	0.031	0.031	0.033	0.033	0.033
22	0.032	0.032	OFF	OFF	OFF	OFF	0.032
23	OFF	OFF	OFF	OFF	OFF	OFF	OFF
24	OFF	OFF	OFF	OFF	0.035	0.033	0.035
25	0.033	0.033	0.032	0.036	0.034	0.033	0.036
26	0.033	0.034	0.033	0.035	0.034	0.034	0.035
27	0.034	0.033	0.034	0.035	0.036	0.034	0.035
28	0.034	0.033	0.033	0.032	0.032	0.032	0.034
29	0.031	0.033	0.031	0.032	0.031	0.031	0.033
30	0.031	0.032	0.031	0.033	0.032	0.033	0.033
31							

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CT's met everyday? (see back)	All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 NTU?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<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: Darrel Lockard	
		SIGNATURE: <i>Darrel Lockard</i>	
		DATE: 7/10/24	CERT #: 2853
		PHONE #: (541) 222-9997	

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM 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 - : WTP-D

System Name: City of Amity	ID#: 41 00041	Month/Year: Jun-24	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	7:57 AM	1.68	85	142.8	13.2	7.8	22.3	Yes	275
2	9:47 AM	1.7	85	144.5	13.3	7.9	23.0	Yes	295
3	8:51 AM	1.69	85	143.7	12.3	8.1	26.4	Yes	295
4	8:04 AM	1.42	85	120.7	11.7	8.8	34.3	Yes	275
5	7:57 AM	1.09	85	92.7	12.0	8.3	27.0	Yes	275
6	7:51 AM	1.6	85	136.0	12.7	8.5	29.5	Yes	295
7	7:34 AM	1.63	85	138.6	14.0	8.6	28.2	Yes	296
8	9:02 AM	1.73	85	147.1	14.7	8.2	23.5	Yes	275
9	10:19 AM	1.73	85	147.1	15.1	8.1	22.1	Yes	298
10	8:01 AM	1.6	85	136.0	14.6	8.7	28.0	Yes	275
11	7:36 AM	1.43	85	121.6	14.4	8.3	24.1	Yes	0
12	7:36 AM	1.23	85	104.6	13.9	8.6	27.1	Yes	275
13	8:33 AM	1.73	85	147.1	14.8	8.7	28.1	Yes	297
14	8:00 AM	1.54	85	130.9	13.8	7.8	21.1	Yes	293
15	9:00 AM	1.44	85	122.4	13.8	7.9	21.6	Yes	295
16	8:00 AM	1.81	85	153.9	13.8	7.5	19.5	Yes	275
17	7:56 AM	1.58	85	134.3	13.5	8.5	27.9	Yes	275
18	7:35 AM	1.45	85	123.3	13.5	7.9	22.1	Yes	275
19	9:00 AM	1.31	85	111.4	13.6	8.0	22.4	Yes	275
20	7:31 AM	1.35	85	114.8	14.8	7.6	17.9	Yes	295
21	8:09 AM	1.34	85	113.9	15.8	7.9	18.7	Yes	293
22	10:17 AM	1.39	85	118.2	16.8	7.6	15.8	Yes	275
23	10:31 AM	1.23	85	104.6	15.7	8.4	22.4	Yes	0
24	10:25 AM	1.11	85	94.4	15.5	7.5	16.1	Yes	275
25	8:59 AM	1.85	85	157.3	15.4	7.5	17.6	Yes	275
26	7:55 AM	1.58	85	134.3	16.3	7.8	17.9	Yes	275
27	8:40 AM	1.5	85	127.5	15.9	7.5	16.3	Yes	275
28	7:46 AM	1.3	85	110.5	16.2	9.0	27.2	Yes	275
29	12:02 PM	1.48	85	125.8	17.3	8.9	24.9	Yes	275
30	9:15 AM	1.57	85	133.5	17.0	8.8	24.7	Yes	275
31			85					No	

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

Revised October 2013