

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

County: **Yamhill**  
 Month/Year: **Feb-25**

System Name: <b>City of Amity</b>		ID#: <b>41 00041</b>		WTP : <b>WTP-D</b>			
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	0.033	0.036	0.140	0.135	0.149	0.155	0.155
2	0.156	0.158	0.159	0.038	0.033	0.032	0.159
3	0.031	0.035	0.033	0.032	0.032	0.031	0.035
4	0.034	0.032	0.031	0.031	0.038	0.034	0.034
5	0.033	0.032	0.031	0.038	0.033	0.032	0.038
6	0.031	0.032	0.031	0.035	0.033	0.032	0.035
7	0.032	0.031	0.042	0.034	0.032	0.032	0.042
8	OFF	OFF	OFF	OFF	OFF	OFF	OFF
9	OFF	OFF	OFF	OFF	OFF	OFF	OFF
10	OFF	OFF	OFF	0.032	0.031	0.046	0.046
11	0.034	0.033	0.032	0.031	0.030	0.037	0.037
12	0.033	0.034	0.031	0.030	0.132	0.033	0.132
13	0.035	0.030	0.032	0.032	0.032	0.032	0.035
14	0.033	0.033	0.033	0.103	0.030	0.030	0.103
15	0.031	0.032	0.032	0.159	0.034	0.032	0.159
16	0.032	0.031	0.030	0.040	0.034	0.032	0.040
17	0.032	0.031	0.033	0.033	0.043	0.037	0.043
18	0.159	0.051	0.050	0.065	0.040	0.035	0.159
19	0.032	0.033	0.162	0.057	0.046	0.044	0.162
20	0.043	0.043	0.043	0.039	0.033	0.032	0.043
21	0.031	0.030	0.030	0.033	0.032	0.031	0.033
22	0.030	0.030	0.036	0.032	0.031	0.030	0.036
23	0.043	0.032	0.031	0.031	0.032	0.036	0.043
24	0.034	0.033	OFF	OFF	OFF	OFF	0.034
25	OFF	OFF	OFF	OFF	OFF	OFF	OFF
26	OFF	OFF	OFF	OFF	OFF	OFF	OFF
27	OFF	OFF	OFF	OFF	OFF	OFF	OFF
28	OFF	OFF	OFF	0.049	0.034	0.032	0.049
29							
30							
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 <sub>2</sub> 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 <sup>2</sup> triggers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

<b>Notes:</b>	<b>PRINTED NAME:</b> Darrel Lockard	
	<b>SIGNATURE:</b> <i>Darrel Lockard</i>	<b>DATE:</b> 03/10/25
	<b>PHONE #:</b> ( 541) 222-9997	<b>CERT #:</b> 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: Feb.25	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	4:00 AM	2.03	85	172.6	4.4	8.8	61.3	Yes	275
2	8:30 AM	2.05	85	174.3	6.4	7.5	33.1	Yes	275
3	8:27 AM	2.04	85	173.4	4.5	7.5	37.6	Yes	275
4	8:40 AM	1.9	85	161.5	4.0	7.5	38.3	Yes	275
5	8:27 AM	1.76	85	149.6	2.7	8.1	51.5	Yes	275
6	8:31 AM	1.81	85	153.9	2.4	8.6	63.8	Yes	275
7	8:00 AM	1.72	85	146.2	2.3	8.9	71.2	Yes	275
8			85		4.7	8.9		No	
9			85		5.4	8.9		No	
10	8:00 AM	1.65	85	140.3	2.5	8.1	51.5	Yes	275
11	8:00 AM	2.06	85	175.1	3.3	8.9	69.1	Yes	275
12	7:40 AM	1.91	85	162.4	2.2	9.1	79.1	Yes	275
13	5:30 AM	1.71	85	145.4	1.9	9.4	88.4	Yes	275
14	11:54 AM	1.65	85	140.3	5.2	9.5	72.1	Yes	275
15	11:40 AM	1.81	85	153.9	3.7	9.4	78.7	Yes	275
16	10:53 AM	1.95	85	165.8	2.7	9.4	86.0	Yes	275
17	11:23 AM	1.94	85	164.9	5.0	9.4	72.9	Yes	275
18	9:58 AM	1.95	85	165.8	4.3	9.6	82.7	Yes	275
19	8:59 AM	2.18	85	185.3	4.9	9.1	67.5	Yes	275
20	7:28 AM	1.95	85	165.8	4.3	9.1	68.5	Yes	275
21	8:15 AM	1.9	85	161.5	5.8	8.0	40.7	Yes	275
22	10:36 AM	1.98	85	168.3	4.8	7.6	38.0	Yes	275
23	11:24 AM	1.87	85	159.0	5.6	7.3	31.8	Yes	275
24	8:20 AM	1.77	85	150.5	5.8	7.5	33.3	Yes	275
25			85		6.5	7.5		No	
26			85		6.8	7.5		No	
27			85		7.6	7.5		No	
28	9:18 AM	1.46	85	124.1	7.4	7.5	28.8	Yes	275
29			85					No	
30			85					No	
31			85					No	

<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