

**OHA - Drinking Water Program – Turbidity Monitoring Report Form County:
Yamhill Conventional or Direct Filtration**

System Name: Carlton, City of ID #: 4100171 WTP:- A **Month/Year January 2024**

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	.08	OFF	/	.08	.08	.08	.09
2	.08	/	.08	.08	.10	.08	.10
3	.08	.08	/	.09	/	.08	.09
4	/	.08	/	/	.08	.09	.10
5	.08	/	/	.09	.09	.08	.10
6	/	.09	/	/	.10	.11	.22
7	.10	/	.10	.10	/	.10	.12
8	.11	.10	/	.04	.04	.05	.08
9	/	/	.05	.05	.05	.06	.08
10	.05	/	/	.06	.05	.05	.08
11	.07	/	/	.05	.06	.06	.11
12	/	.06	/	/	.06	.06	.08
13	.07	/	/	.08	.06	.07	.11
14	.10	.07	/	/	.07	.07	.10
15	.07	/	/	.07	.07	.07	.11
16	.08	.07	/	.08	.07	.08	.09
17	.08	.07	.08	/	.08	.08	.10
18	.09	.09	.08	.09	.09	.09	.14
19	.09	.15	.09	.10	.11	.09	.16
20	.10	/	.10	.10	.10	.10	.12
21	.11	.11	/	/	.11	.11	.12
22	.11	.13	/	.05	.06	.05	.06
23	.05	.09	/	.06	.08	.06	.12
24	.06	.06	/	.07	.07	.07	.17
25	.07	/	/	.08	.08	.08	.12
26	.07	/	/	.09	.09	.08	.15
27	.09	/	.09	.09	/	/	.33
28	.10	.20	/	/	.10	.11	.24
29	.10	/	/	.20	.05	.16	.28
30	.05	/	/	.07	.10	.06	.20
31	.06	/	/	.07	.07	.07	.55

Conventional or <u>Direct</u> Filtration		Monthly Summary (Answer Yes or No)	
95% of the 4-hour turbidity readings ≤ 0.3 NTU? <u>Yes</u> / No	CT's met everyday? (see back) <u>Yes</u> / No	All Cl ₂ residuals at entry point ≥ 0.2 m <u>Yes</u> / No	
All the 4-hour turbidity readings ≤ 1 NTU? <u>Yes</u> / No			
All turbidity readings < IFE triggers? <u>Yes</u> / No ²			

Notes:

PRINTED NAME: Bryan W. Burnham

SIGNATURE: *Bryan W. Burnham*

PHONE #: (503) 852-3104

DATE: 2-5-24

CERT #: 6201

¹ Including continuous turbidity 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. (OAR 333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program – Surface Water Quality Data Form - *Giardia* Inactivation

System Name: Carlton, City of ID #: 4100171	WTP:- A	Month/Year: January 2024	Log Requirement (Circle One): 0.5 1.0
---	----------------	---------------------------------	---

Date / Time	Minimum Cl ₂ Residual at 1 st 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]		Use tables	Yes / No	[GPM]
1 /9:00	1.5	72	108	10	7.4	51	YES	366
2 /11:00	1.6	72	115	10	7.3	50	YES	398
3 /9:00	1.4	72	100	10	7.4	51	YES	429
4 /9:00	1.6	72	115	10	7.3	50	YES	298
5 /9:00	1.5	72	108	11	7.4	48	YES	370
6 /10:30	1.5	72	108	11	7.4	48	YES	386
7 /10:30	1.4	72	100	10	7.3	48	YES	365
8 /10:30	1.4	72	100	10	7.3	4	YES	283
9 /12:00	1.6	72	115	11	7.3	47	YES	419
10 /9:30	1.5	72	108	11	7.3	46	YES	371
11 /9:30	1.4	72	100	10	7.3	49	YES	440
12 /9:30	1.5	72	108	10	7.4	51	YES	262
13 /9:30	1.5	72	108	9	7.4	54	YES	392
14 /9:30	1.5	72	108	9	7.4	54	YES	388
15 /9:30	1.5	72	108	9	7.4	54	YES	385
16 /1:00	1.5	72	108	8	7.4	58	YES	373
17 /3:30	1.5	72	108	8	7.5	60	YES	479
18 /3:00	1.0	72	72	9	7.4	52	YES	315
19 /9:00	1.4	72	100	9	7.2	50	YES	372
20 /9:00	1.6	72	115	9	7.2	52	YES	284
21 /9:00	1.6	72	115	10	7.2	49	YES	296
22 /10:00	1.9	72	139	10	7.2	50	YES	365
23 /11:00	1.6	72	115	10	7.3	51	YES	350
24 /10:00	1.4	72	100	10	7.4	51	YES	396
25 /9:00	1.5	72	108	12	7.2	42	YES	306
26 /8:30	1.5	72	108	11	7.3	46	YES	300
27 /8:30	1.5	72	108	11	7.3	46	YES	439
28 /9:00	1.4	72	100	12	7.2	42	YES	354
29 /9:00	1.4	72	100	12	7.2	42	YES	284
30 /11:00	1.4	72	100	12	7.4	45	YES	366
31 /1:00	1.4	72	100	12	7.4	45	YES	436

³ If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.

Revised January 2014

Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-conv-direct.pdf