

**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 April 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	.04	.04	OFF	.04	.03	.05	.78
2	.03	.03	/	.05	.03	.04	.72
3	.03	/	/	.03	.04	.05	.20
4	.03	/	/	.04	.05	/	.07
5	.06	/	/	.06	.05	/	.36
6	.05	/	/	/	.04	.03	.07
7	.03	/	/	/	.04	.05	.08
8	.03	.03	/	/	.07	.12	.12
9	.04	.03	/	.03	.04	.07	.40
10	.03	/	/	.03	.04	.04	.70
11	.03	.03	/	.04	.05	.07	.32
12	.02	.04	/	.05	.08	.07	.45
13	.43	.04	/	.06	.06	.04	.43
14	.04	.04	/	.08	.07	.03	.12
15	.04	.04	/	.03	.02	.03	.04
16	.03	.03	/	.04	.03	.04	.04
17	.02	.03	/	.04	.04	.04	.05
18	.04	.04	/	.05	.04	.04	.07
19	.05	.04	/	.05	/	.05	.11
20	.05	.05	/	/	.05	.05	.06
21	.05	.05	/	/	.05	.05	.06
22	.06	.06	/	.06	.05	.06	.07
23	.05	.05	.07	/	/	.07	.08
24	.07	.07	.07	.08	/	/	.10
25	.09	.08	.08	/	.09	.14	.18
26	.09	.08	/	.10	.09	.04	.11
27	.05	.04	/	/	.04	.04	.07
28	.03	.04	/	.06	.05	.04	.07
29	.04	.03	/	.06	.05	.06	.06
30	.04	.05	/	.06	.05	.05	.06
31							

Conventional or Direct Filtration

Monthly Summary (Answer Yes or No)

95% of the 4-hour turbidity readings ≤ 0.3 NTU? Yes / No
 All the 4-hour turbidity readings ≤ 1 NTU? Yes / No
 All turbidity readings < IFE triggers? Yes / No²

CT's met everyday?
(see back)
 Yes / No

All Cl₂ residuals at entry point ≥ 0.2 m
 Yes / No

Notes:

PRINTED NAME: Bryan W. Burnham

SIGNATURE: *Bryan W Burnham*

DATE: 4/2/24

PHONE #: (503) 852-3104

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: **April 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 /10:30	1.4	72	100	11	7.3	47	YES	431
2 /11:30	1.4	72	100	12	7.5	47	YES	355
3 /2:00	1.5	72	108	12	7.5	47	YES	454
4 /11:30	1.6	72	115	12	7.3	44	YES	422
5 /10:00	1.6	72	115	10	7.6	57	YES	382
6 /2:00	1.4	72	100	11	7.6	52	YES	402
7 /2:00	1.4	72	100	11	7.6	52	YES	356
8 /2:00	1.4	72	100	11	7.6	52	YES	2404
9 /1:30	1.5	72	108	11	7.6	52	YES	496
10 /2:30	1.5	72	108	11	7.6	52	YES	402
11 /9:30	1.5	72	108	11	7.6	52	YES	417
12 /2:00	1.5	72	108	12	7.3	43	YES	426
13 /9:00	1.5	72	108	12	7.3	43	YES	432
14 /9:00	1.4	72	100	12	7.4	45	YES	413
15 /10:30	1.4	72	100	12	7.4	45	YES	414
16 /12:30	1.4	72	100	12	7.4	45	YES	433
17 /9:30	1.5	72	108	11	7.4	48	YES	374
18 /9:00	1.5	72	108	11	7.4	48	YES	427
19 /10:30	1.5	72	108	11	7.4	48	YES	348
20 /9:00	1.5	72	108	11	7.4	48	YES	404
21 /9:00	1.5	72	108	11	7.5	50	YES	372
22 /11:00	1.5	72	108	11	7.5	50	YES	1514
23 /10:00	1.5	72	108	11	7.5	50	YES	359
24 /11:30	1.5	72	108	12	7.5	48	YES	263
25 /1:30	1.5	72	108	12	7.6	49	YES	445
26 /11:30	1.6	72	115	11	7.5	51	YES	415
27 /9:00	1.6	72	115	11	7.4	51	YES	469
28 /9:00	1.5	72	108	12	7.4	45	YES	432
29 /11:00	1.5	72	108	12	7.4	45	YES	382
30 /2:00	1.5	72	108	11	7.5	50	YES	425
31 /								

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