

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

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: 11/5/2024

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: October 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 /11:30	1.9	72	136	16	7.6	36	YES	352
2 /11:30	1.8	72	129	16	7.6	36	YES	315
3 /10:30	1.8	72	129	15	7.6	36	YES	272
4 /2:30	1.8	72	129	15	7.5	38	YES	327
5 /9:00	1.8	72	129	15	7.5	38	YES	354
6 /9:00	1.8	72	129	15	7.5	38	YES	341
7 /10:30	1.8	72	129	15	7.5	38	YES	334
8 /11:30	1.7	72	122	14	7.5	41	YES	359
9 /9:30	1.7	72	122	14	7.5	41	YES	357
10 /10:30	1.8	72	129	15	7.4	36	YES	309
11 / 9:30	1.6	72	115	15	7.5	38	YES	359
12 /9:00	1.6	72	115	15	7.5	36	YES	325
13 /9:00	1.5	72	108	14	7.4	38	YES	308
14 /12:00	1.5	72	108	14	7.4	38	YES	1012
15 /9:30	1.5	72	108	14	7.2	36	YES	297
16 /12:00	1.6	72	115	14	7.5	41	YES	337
17 /9:30	1.6	72	115	14	7.2	37	YES	306
18 /11:00	1.6	72	115	16	7.5	34	YES	299
19 /11:00	1.6	72	115	17	7.5	33	YES	318
20 /11:00	1.6	72	115	18	7.5	31	YES	300
21 /11:00	1.6	72	115	19	7.5	29	YES	319
22 /11:30	1.5	72	108	20	7.5	27	YES	332
23 /9:00	1.4	72	100	19	7.5	28	YES	324
24 /11:00	1.5	72	108	19	7.2	25	YES	313
25 /9:30	1.5	72	108	12	7.2	42	YES	303
26 /8:30	1.5	72	108	12	7.2	42	YES	353
27 /8:30	1.5	72	108	12	7.2	42	YES	358
28 /8:30	1.2	72	86	12	7.5	42	YES	356
29 /8:30	1.5	72	108	12	7.2	42	YES	359
30 /8:30	1.5	72	108	12	7.2	42	YES	366
31 /8:30	1.5	72	108	12	7.2	42	YES	357

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