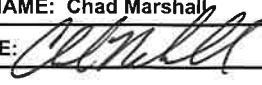


OHA - Drinking Water Program - Turbidity Monitoring Report Form County: Benton
Conventional or Direct Filtration

System Name: Corvallis, City of ID#: OR4100225 WTP:-WTP-A Month/Year: Jan / 2022

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	Off	Off	0.03	0.03	0.03	Off	0.03
2	Off	Off	0.03	0.03	0.03	Off	0.04
3	Off	Off	0.03	0.03	0.03	Off	0.03
4	Off	Off	0.03	0.03	0.03	Off	0.03
5	Off	Off	0.03	0.03	0.03	Off	0.03
6	Off	Off	0.03	0.03	0.03	Off	0.03
7	Off	Off	0.03	0.03	0.03	Off	0.03
8	Off	Off	0.03	0.03	0.03	Off	0.03
9	Off	Off	0.03	0.03	0.03	Off	0.03
10	Off	Off	0.03	0.03	0.03	Off	0.03
11	Off	Off	0.03	0.03	0.03	Off	0.03
12	Off	Off	0.03	0.03	0.03	Off	0.03
13	Off	Off	0.03	0.03	0.03	Off	0.03
14	Off	Off	0.03	0.03	0.03	Off	0.03
15	Off	Off	0.03	0.03	0.03	Off	0.03
16	Off	Off	0.03	0.03	0.03	Off	0.03
17	Off	Off	0.03	0.03	0.03	Off	0.03
18	Off	Off	0.03	0.03	0.03	Off	0.03
19	Off	Off	Off	0.03	0.03	Off	0.03
20	Off	Off	Off	0.03	0.03	Off	0.03
21	Off	Off	0.03	0.03	0.03	Off	0.03
22	Off	Off	0.03	0.03	0.03	Off	0.03
23	Off	Off	0.03	0.02	0.03	Off	0.03
24	Off	Off	Off	0.02	0.03	Off	0.03
25	Off	Off	0.03	0.02	0.03	Off	0.03
26	Off	Off	0.03	0.03	0.03	Off	0.03
27	Off	Off	Off	0.03	0.03	Off	0.03
28	Off	Off	0.03	0.03	Off	Off	0.03
29	Off	Off	0.03	0.03	0.03	Off	0.03
30	Off	Off	0.03	0.03	0.03	Off	0.03
31	Off	Off	0.03	0.03	0.03	Off	0.03

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of the 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes <input type="radio"/> No	All Cl ₂ residuals at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No	
All the 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No			
All turbidity readings < IFE ² triggers? <input checked="" type="radio"/> Yes <input type="radio"/> No			
Notes:	PRINTED NAME: Chad Marshall		
	SIGNATURE: 		DATE: 2/7/2022
	PHONE #: (541) 754-1758		CERT #: T-08843

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 = Individual Filter Effluent (OAR 333-061-0040 (1) (e) (B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

Corvallis, City of **ID#: 41 00225 WTP-: WTP - A** **Month/Year: Jan / 2022** Required Log Inactivation: 0.5

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ^a	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ^a	Peak Hourly Demand Flow
	ppm or mg/L	minutes	C X T	° C		Use tables	Yes / No	[GPM]
01 / 0954	1.29	88.0	114	5	6.9	26	Yes	6500
02 / 1429	1.18	88.0	104	5	7.1	31	Yes	6500
03 / 0902	1.29	59.0	76	5	7.1	31	Yes	9600
04 / 0921	1.15	54.0	62	5	7.0	25	Yes	10600
05 / 0704	1.25	59.0	74	6	7.1	31	Yes	9700
06 / 1122	1.25	68.0	85	7	7.1	31	Yes	8700
07 / 0838	1.24	64.0	79	7	7.0	25	Yes	9000
08 / 1241	1.29	69.0	89	7	7.0	26	Yes	8300
09 / 0918	1.21	69.0	83	7	7.0	25	Yes	8100
10 / 1259	1.21	76.0	92	6	7.0	25	Yes	7600
11 / 1027	1.22	76.0	93	7	7.0	25	Yes	7400
12 / 0801	1.13	59.0	67	7	7.1	31	Yes	9700
13 / 1232	1.21	92.0	111	7	7.0	25	Yes	6200
14 / 1004	1.20	83.0	100	7	6.9	25	Yes	6900
15 / 0903	1.11	59.0	65	7	7.0	25	Yes	9700
16 / 0655	1.21	59.0	71	7	7.1	31	Yes	9700
17 / 1128	1.16	55.0	64	6	7.1	31	Yes	10200
18 / 0800	1.24	54.0	67	6	7.0	25	Yes	10600
19 / 1432	1.22	63.0	77	7	7.0	25	Yes	9100
20 / 1324	1.26	69.0	87	7	7.0	26	Yes	8300
21 / 1121	1.27	64.0	81	7	6.9	26	Yes	8800
22 / 0915	1.29	68.0	88	7	6.9	26	Yes	8500
23 / 1236	1.27	72.0	91	6	7.0	26	Yes	7800
24 / 1101	1.21	69.0	83	6	6.9	25	Yes	8300
25 / 0825	1.25	69.0	86	6	7.0	26	Yes	8000
26 / 1258	1.14	68.0	78	5	7.0	25	Yes	8400
27 / 1206	1.23	68.0	84	5	7.0	25	Yes	8400
28 / 0902	1.29	69.0	89	5	7.0	26	Yes	8100
29 / 0730	1.18	68.0	80	5	7.1	31	Yes	8400
30 / 1157	1.25	83.0	104	5	7.1	31	Yes	6700
31 / 0716	1.39	83.0	115	5	7.1	31	Yes	7100

^a If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWP by next business day.
 Download form at: www.public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-conv-direct.pdf