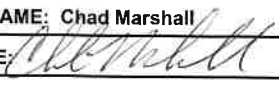


OHA - Drinking Water Program - Turbidity Monitoring Report Form County: Benton
Conventional or Direct Filtration

System Name: Corvallis, City of ID#: OR4100225 WTP--WTP-A Month/Year: Aug / 2023

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	0.02	0.02	0.02	Off	0.03
2	Off	Off	0.02	0.02	0.02	Off	0.03
3	Off	Off	0.02	0.02	0.04	Off	0.04
4	Off	Off	0.02	0.02	0.02	0.02	0.03
5	Off	Off	0.03	0.02	0.02	Off	0.03
6	Off	Off	0.02	0.02	0.02	Off	0.03
7	Off	Off	0.02	0.02	0.02	Off	0.03
8	Off	Off	0.03	0.02	0.02	Off	0.03
9	Off	Off	0.03	0.02	0.02	Off	0.03
10	Off	Off	0.02	0.02	0.02	0.03	0.03
11	Off	Off	0.02	0.02	0.03	0.03	0.03
12	Off	Off	0.03	0.02	0.02	0.03	0.03
13	Off	Off	0.03	0.02	0.03	0.03	0.03
14	Off	Off	0.03	0.02	0.03	0.03	0.03
15	Off	Off	0.03	0.02	0.03	0.03	0.03
16	Off	Off	0.03	0.03	0.03	0.03	0.03
17	Off	Off	0.03	0.03	0.03	0.03	0.03
18	Off	Off	0.03	0.03	0.02	0.02	0.03
19	Off	Off	0.02	0.02	0.02	0.02	0.03
20	Off	Off	0.02	0.02	0.02	0.02	0.02
21	Off	Off	0.02	0.03	0.02	0.02	0.03
22	Off	Off	0.02	0.02	0.02	0.03	0.03
23	Off	Off	0.02	0.02	0.02	0.03	0.03
24	Off	Off	0.02	0.02	0.02	0.02	0.03
25	Off	Off	0.02	0.02	0.02	0.02	0.03
26	Off	Off	0.02	0.03	0.03	0.02	0.03
27	Off	Off	0.02	0.02	0.02	0.02	0.03
28	Off	Off	0.02	0.02	0.02	0.02	0.03
29	Off	Off	0.02	0.02	0.02	0.02	0.04
30	Off	Off	0.02	0.02	0.03	Off	0.04
31	Off	Off	0.02	0.02	0.02	Off	0.05

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? <input 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	(see back)		
All turbidity readings < IFE ² triggers? <input checked="" type="radio"/> Yes / <input type="radio"/> No ²	<input checked="" type="radio"/> Yes / <input type="radio"/> No		
Notes:	PRINTED NAME: Chad Marshall		
	SIGNATURE: 		DATE: 9/5/23
	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: Aug / 2023** Required Log Inactivation: 0.5

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? *	Peak Hourly Demand Flow
	ppm or mg/L	minutes	C X T	° C		Use tables	Yes / No	[GPM]
01 / 1241	1.17	40.0	47	19	6.8	13	Yes	14500
02 / 1407	1.19	39.0	46	20	6.8	10	Yes	14900
03 / 1029	1.12	47.0	53	20	6.8	10	Yes	13900
04 / 1632	1.26	40.0	50	21	6.8	10	Yes	14400
05 / 1155	1.29	44.0	57	20	6.8	10	Yes	13100
06 / 1004	1.24	43.0	53	20	6.7	10	Yes	13400
07 / 1137	1.28	40.0	51	21	6.7	10	Yes	14300
08 / 0734	1.23	45.0	55	22	6.6	10	Yes	12600
09 / 1726	1.19	43.0	51	21	6.7	10	Yes	13500
10 / 1350	1.20	42.0	50	21	6.8	10	Yes	13900
11 / 0857	1.22	42.0	51	21	6.7	10	Yes	13800
12 / 0852	1.25	43.0	54	21	6.7	10	Yes	13400
13 / 1358	1.21	42.0	51	21	6.8	10	Yes	13700
14 / 0820	1.16	41.0	48	22	6.7	10	Yes	14000
15 / 0723	1.19	42.0	50	23	6.7	10	Yes	13800
16 / 1641	1.27	43.0	55	22	6.8	10	Yes	13500
17 / 0639	1.26	41.0	52	23	6.6	10	Yes	14200
18 / 0635	1.22	42.0	51	22	6.6	10	Yes	13700
19 / 0626	1.23	45.0	55	21	6.6	10	Yes	12600
20 / 1642	1.17	41.0	48	20	6.8	10	Yes	14200
21 / 1716	1.30	45.0	59	20	6.8	10	Yes	12700
22 / 1227	1.25	45.0	56	19	6.8	13	Yes	12600
23 / 1718	1.24	48.0	60	20	6.8	10	Yes	12100
24 / 1226	1.33	48.0	64	19	6.8	13	Yes	11900
25 / 0829	1.26	44.0	55	20	6.7	10	Yes	13100
26 / 0823	1.17	49.0	57	20	6.7	10	Yes	11500
27 / 0837	1.20	48.0	58	20	6.7	10	Yes	11900
28 / 0914	1.12	46.0	52	20	6.7	10	Yes	12200
29 / 0625	1.21	48.0	58	20	6.7	10	Yes	11900
30 / 0611	1.32	48.0	63	19	6.8	13	Yes	11900
31 / 1541	1.29	51.0	66	19	6.8	13	Yes	11400

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