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: **Jun / 2025**

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

Conventional or Direct Filtration

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[2] triggers? (Yes) No

Monthly Summary (Answer Yes or No)

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

All Cl2 residuals at entry point >= 0.2 mg/l? (Yes) No

Notes:

PRINTED NAME: Chad Marshall

SIGNATURE: [signature]

Date: 07/01/2025

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: Jun / 2025** Required Log Inactivation: 0.5

Date / Time	Minimum Cl2 Residual at 1st User (C)	Contact Time	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 / 0920	1.24	46.0	57	17	6.5	11	Yes	12,499
02 / 1134	1.27	44.0	56	16	6.6	13	Yes	12,917
03 / 1428	1.26	41.0	52	16	6.6	13	Yes	14,023
04 / 1449	1.26	43.0	54	16	6.6	13	Yes	13,472
05 / 0554	1.18	43.0	51	18	6.6	13	Yes	13,472
06 / 1633	1.26	43.0	54	18	6.6	13	Yes	13,472
07 / 1136	1.28	43.0	55	18	6.5	11	Yes	13,542
08 / 1532	1.26	43.0	54	20	6.5	8	Yes	13,542
09 / 1629	1.26	42.0	53	21	6.5	8	Yes	13,750
10 / 1011	1.22	43.0	52	20	6.5	8	Yes	13,542
11 / 1052	1.27	45.0	57	19	6.5	11	Yes	12,778
12 / 0841	1.28	45.0	58	19	6.7	13	Yes	12,846
13 / 1307	1.30	51.0	66	17	6.9	13	Yes	11,458
14 / 0642	1.36	45.0	61	18	6.9	13	Yes	12,708
15 / 1011	1.34	45.0	60	16	6.8	13	Yes	12,778
16 / 1018	1.29	45.0	58	17	6.8	13	Yes	12,847
17 / 1658	1.33	44.0	59	19	6.8	13	Yes	13,750
18 / 0655	1.29	46.0	59	19	6.7	13	Yes	12,499
19 / 1424	1.31	52.0	68	18	6.8	13	Yes	10,972
20 / 0958	1.33	44.0	59	18	6.8	13	Yes	13,333
21 / 1546	1.24	46.0	57	16	6.9	13	Yes	12,569
22 / 1318	1.26	44.0	55	15	6.9	13	Yes	13,194
23 / 0815	1.31	44.0	58	15	6.8	13	Yes	13,194
24 / 1138	1.25	55.0	69	17	6.8	13	Yes	10,347
25 / 1654	1.28	45.0	58	19	6.8	13	Yes	12,569
26 / 1109	1.31	45.0	59	18	6.8	13	Yes	12,569
27 / 0635	1.22	45.0	55	19	6.8	13	Yes	12,847
28 / 1133	1.37	42.0	58	19	6.8	13	Yes	13,680
29 / 0859	1.29	42.0	54	20	6.6	10	Yes	13,750
30 / 1507	1.29	43.0	55	56	6.8	7	Yes	13,403

" [3] 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"