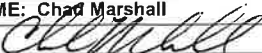


OHA - Drinking Water Program - Turbidity Monitoring Report Form County: Benton
Conventional or Direct Filtration

System Name: Corvallis, City of ID#: OR4100225 WTP-: WTP - A Month/Year: Oct / 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	0.02	0.03	0.03	Off	0.04
2	Off	Off	0.02	0.03	0.03	Off	0.04
3	Off	Off	0.03	0.03	0.03	Off	0.04
4	Off	Off	0.03	0.03	0.03	Off	0.04
5	Off	Off	0.02	0.03	0.03	Off	0.04
6	Off	Off	0.02	0.03	0.03	Off	0.04
7	Off	Off	0.03	0.03	0.03	Off	0.04
8	Off	Off	Off	Off	0.03	Off	0.04
9	Off	Off	0.03	0.03	0.03	Off	0.03
10	Off	Off	0.03	0.03	0.03	Off	0.04
11	Off	Off	0.02	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	0.03	0.04
14	0.03	0.03	0.03	0.03	0.03	0.03	0.04
15	0.03	0.03	0.03	0.03	0.03	0.03	0.04
16	Off	Off	0.03	0.03	0.03	0.03	0.04
17	Off	Off	0.03	0.03	0.03	0.03	0.04
18	Off	Off	0.03	0.03	0.03	0.03	0.04
19	Off	Off	0.03	0.03	0.03	0.03	0.04
20	Off	Off	0.03	0.03	0.03	0.03	0.04
21	Off	Off	0.03	0.03	0.03	0.03	0.04
22	Off	Off	0.03	0.03	0.03	0.03	0.04
23	Off	Off	0.05	0.03	0.03	0.03	0.05
24	Off	Off	0.03	0.03	0.03	0.03	0.04
25	Off	Off	0.02	0.03	0.02	0.03	0.04
26	Off	Off	0.02	0.02	0.03	0.03	0.03
27	Off	Off	0.03	0.02	0.03	0.03	0.03
28	Off	Off	0.03	0.03	0.03	0.03	0.04
29	Off	Off	0.03	0.03	0.03	0.03	0.04
30	Off	Off	0.02	0.02	0.03	Off	0.04
31	Off	Off	0.02	0.04	0.03	Off	0.04

Conventional or Direct Filtration 95% of the 4-hour turbidity readings $\leq$ 0.3 NTU? <u>Yes</u> / No All the 4-hour turbidity readings $\leq$ 1 NTU? <u>Yes</u> / No All turbidity readings < IFE ² triggers? <u>Yes</u> / No		Monthly Summary (Answer Yes or No) CT's met everyday? <u>Yes</u> / No (see back) All Cl2 residuals at entry point $\geq$ 0.2 mg/l? <u>Yes</u> / No	
Notes:		PRINTED NAME: Chad Marshall SIGNATURE:  PHONE #: (541) 754-1758	
		Date: 11/07/2025 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: Oct / 2025

Required Log Inactivation: 0.5

Date / Time	Minimum Cl ₂ 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 / 1506	1.30	51.0	66	16	6.8	13	Yes	11,181
02 / 1151	1.28	63.0	81	16	6.8	13	Yes	9,236
03 / 1417	1.32	55.0	73	16	6.8	13	Yes	10,278
04 / 0718	1.24	51.0	63	17	6.8	13	Yes	11,181
05 / 1201	1.27	63.0	80	17	6.7	13	Yes	9,375
06 / 1013	1.31	58.0	76	17	6.7	13	Yes	9,861
07 / 1822	1.32	58.0	77	17	6.8	13	Yes	10,069
08 / 1609	1.35	46.0	62	17	6.7	13	Yes	12,431
09 / 1341	1.32	55.0	73	15	6.8	13	Yes	10,416
10 / 1106	1.32	59.0	78	15	6.8	13	Yes	9,444
11 / 0853	1.31	58.0	76	15	6.7	13	Yes	10,069
12 / 0731	1.25	63.0	79	15	6.8	13	Yes	9,097
13 / 1237	1.28	104.0	133	14	6.8	19	Yes	5,347
14 / 0455	1.30	110.0	143	14	6.9	19	Yes	5,069
15 / 1200	1.32	63.0	83	13	6.9	19	Yes	9,897
16 / 1649	1.31	55.0	72	14	6.7	19	Yes	10,139
17 / 0816	1.30	59.0	77	14	6.7	19	Yes	9,444
18 / 1155	1.28	63.0	81	14	6.7	19	Yes	9,375
19 / 0641	1.38	63.0	87	15	6.6	13	Yes	9,097
20 / 0914	1.27	58.0	74	14	6.7	19	Yes	10,000
21 / 0741	1.31	58.0	76	14	6.6	19	Yes	10,000
22 / 0605	1.38	55.0	76	14	6.6	19	Yes	10,347
23 / 0731	1.30	69.0	90	14	6.5	16	Yes	8,264
24 / 1622	1.27	69.0	88	14	6.6	19	Yes	8,264
25 / 1735	1.26	54.0	68	14	6.6	19	Yes	10,625
26 / 0822	1.29	59.0	76	14	6.6	19	Yes	9,583
27 / 1603	1.34	64.0	86	12	6.7	19	Yes	8,819
28 / 1819	1.26	59.0	74	12	6.8	19	Yes	9,583
29 / 1706	1.33	59.0	78	13	6.8	19	Yes	9,653
30 / 1354	1.31	63.0	83	13	6.8	19	Yes	9,167
31 / 1314	1.23	51.0	63	12	6.8	19	Yes	11,181

"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