


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

System Name: Corvallis, City of ID#: 41 00225 WTP-: WTP - B Month/Year: Feb / 2021

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	0.03	0.03	0.03	0.03	0.05	0.04	0.06
2	0.03	0.03	0.03	0.03	0.05	0.04	0.06
3	0.03	0.03	0.03	0.03	0.05	0.04	0.07
4	0.03	0.03	0.03	0.03	0.05	0.03	0.06
5	0.03	0.03	0.03	0.02	0.04	0.03	0.06
6	0.03	0.03	0.02	0.02	0.03	0.03	0.07
7	0.03	0.02	0.02	0.02	0.04	0.03	0.05
8	0.03	0.03	0.03	0.02	0.04	0.03	0.05
9	0.03	0.03	0.03	0.02	0.04	0.03	0.06
10	0.03	0.03	0.03	0.02	0.04	0.03	0.06
11	0.03	0.03	0.03	0.02	0.04	0.03	0.07
12	0.03	0.03	0.03	0.03	0.04	0.03	0.06
13	0.03	0.03	0.03	0.03	0.03	0.05	0.07
14	0.04	0.03	0.03	0.03	0.05	0.04	0.07
15	0.03	0.03	0.03	0.03	0.04	0.04	0.06
16	0.03	0.03	0.03	0.03	0.06	0.04	0.08
17	0.03	0.03	0.03	0.03	0.04	0.03	0.07
18	0.03	0.03	0.03	0.03	0.03	0.03	0.07
19	0.03	0.03	0.03	0.03	0.06	0.04	0.07
20	0.03	0.03	0.03	0.03	0.04	0.03	0.06
21	0.03	0.03	0.03	0.03	0.04	0.03	0.06
22	0.03	0.03	0.03	0.03	0.04	0.03	0.06
23	0.03	0.03	0.03	0.03	0.05	0.03	0.06
24	0.03	0.03	0.03	0.03	0.04	0.03	0.07
25	0.03	0.03	0.03	0.03	0.04	0.03	0.07
26	0.03	0.03	0.03	0.03	0.05	0.04	0.07
27	0.03	0.03	0.03	0.03	0.06	0.03	0.06
28	0.03	0.03	0.03	0.03	0.04	0.03	0.06

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of the 4-hour turbidity readings \leq 0.3 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No	<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 \geq 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No
All the 4-hour turbidity readings \leq 1 NTU?			
All turbidity readings < IFE ² triggers?			
Notes:		PRINTED NAME: Tom Hubbard	
		SIGNATURE: 	DATE: 3-5-2021
		PHONE #: (541) 754-1758	CERT #: T-08804

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 - B

Month/Year: Feb / 2021

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? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
01 / 1600	1.12	72	81	8	7.2	31	Yes	1319
02 / 1200	1.17	72	84	8	7.2	31	Yes	1319
03 / 1600	1.10	70	77	8	7.2	31	Yes	1389
04 / 1600	1.01	70	71	8	7.4	30	Yes	1389
05 / 1200	1.13	68	77	8	7.4	31	Yes	1458
06 / 1200	1.15	68	78	8	7.4	31	Yes	1458
07 / 1600	1.13	68	77	8	7.4	31	Yes	1458
08 / 1600	1.08	70	76	8	7.4	31	Yes	1389
09 / 1600	1.02	68	69	8	7.2	30	Yes	1458
10 / 1200	1.15	68	78	7	7.3	31	Yes	1458
11 / 2000	1.18	68	80	7	7.3	31	Yes	1458
12 / 1600	1.09	68	74	7	7.2	31	Yes	1458
13 / 1200	1.11	70	78	7	7.1	31	Yes	1389
14 / 1200	1.07	74	79	7	7.3	31	Yes	1250
15 / 1600	1.05	72	76	9	7.3	31	Yes	1319
16 / 1600	1.07	72	77	8	7.2	31	Yes	1319
17 / 1600	1.12	72	81	8	7.3	31	Yes	1319
18 / 2000	1.20	72	86	8	7.3	31	Yes	1319
19 / 1200	1.07	72	77	8	7.3	31	Yes	1319
20 / 1600	1.05	72	76	8	7.3	31	Yes	1319
21 / 1200	1.16	70	81	8	7.3	31	Yes	1389
22 / 1600	1.01	72	73	9	7.4	30	Yes	1319
23 / 1600	1.06	70	74	9	7.4	31	Yes	1389
24 / 1600	1.07	70	75	9	7.4	31	Yes	1389
25 / 1600	1.05	70	74	8	7.4	31	Yes	1389
26 / 1600	0.99	68	67	8	7.3	30	Yes	1458
27 / 1600	1.02	70	71	8	7.2	30	Yes	1389
28 / 1600	1.07	68	73	8	7.3	31	Yes	1458

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