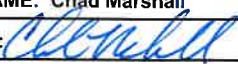


OHA - Drinking Water Program - Turbidity Monitoring Report Form County: Benton
Conventional or Direct Filtration

System Name: Corvallis, City of ID#: 41 00225 WTP-: WTP - B Month/Year: Nov / 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	0.03	0.03	0.03	0.03	0.04	0.03	0.07
2	0.03	0.03	0.03	0.03	0.04	0.03	0.05
3	0.03	0.03	0.03	0.03	0.03	0.03	0.05
4	0.03	0.03	0.03	0.03	0.04	0.03	0.07
5	0.03	0.04	0.04	0.04	0.04	0.04	0.06
6	0.03	0.03	0.03	0.04	0.04	0.04	0.04
7	0.03	0.03	0.03	0.03	0.04	0.03	0.05
8	0.03	0.03	0.03	0.03	0.04	0.03	0.05
9	0.03	0.03	0.03	0.03	0.04	0.03	0.05
10	0.03	0.03	0.03	0.03	0.04	0.03	0.05
11	0.03	0.03	0.03	0.02	0.03	0.03	0.04
12	0.03	0.03	0.03	0.03	0.03	0.03	0.05
13	0.03	0.03	0.03	0.04	0.03	0.03	0.05
14	0.03	0.03	0.03	0.02	0.03	0.03	0.05
15	0.03	0.03	0.03	0.02	0.03	0.03	0.05
16	0.03	0.03	0.03	0.02	0.04	0.03	0.05
17	0.03	0.03	0.03	0.02	0.04	0.03	0.05
18	0.03	0.03	0.03	0.02	0.04	0.03	0.05
19	0.03	0.03	0.03	0.02	0.03	0.03	0.05
20	0.03	0.03	0.03	0.02	0.04	0.03	0.05
21	0.03	0.03	0.02	0.02	0.03	0.03	0.04
22	0.03	0.03	0.03	0.02	0.03	0.03	0.04
23	0.03	0.03	0.03	0.03	0.04	0.03	0.05
24	0.03	0.03	0.03	0.03	0.03	0.03	0.05
25	0.03	0.03	0.03	0.02	0.03	0.03	0.05
26	0.03	0.03	0.03	0.03	0.03	0.03	0.05
27	0.03	0.03	0.02	0.03	0.03	0.03	0.04
28	0.03	0.03	0.03	0.03	0.04	0.03	0.05
29	0.03	0.03	0.03	0.03	0.03	0.03	0.05
30	0.03	0.03	0.03	0.04	0.05	0.04	0.06

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: 12-6-2022
	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 - B

Month/Year: Nov / 2022

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 / 1200	1.01	56	57	13	7.3	22	Yes	1875
02 / 2000	1.19	58	69	13	7.2	23	Yes	1806
03 / 1600	1.12	58	65	12	7.2	23	Yes	1806
04 / 2000	1.16	60	70	11	7.5	23	Yes	1736
05 / 1200	1.14	66	75	12	7.2	23	Yes	1528
06 / 2000	1.12	66	74	12	7.4	23	Yes	1528
07 / 1200	1.16	66	77	11	7.4	23	Yes	1528
08 / 0800	1.16	64	74	10	7.3	23	Yes	1597
09 / 1600	1.10	64	70	9	7.4	31	Yes	1597
10 / 1200	1.16	60	70	9	7.5	31	Yes	1736
11 / 2000	1.19	60	71	9	7.5	31	Yes	1736
12 / 0800	1.10	60	66	9	7.5	31	Yes	1736
13 / 1200	1.13	60	68	9	7.5	31	Yes	1736
14 / 0800	1.15	60	69	9	7.4	31	Yes	1736
15 / 1200	0.76	60	46	8	7.5	29	Yes	1736
16 / 1200	1.09	60	65	8	7.5	31	Yes	1736
17 / 1200	0.87	60	52	8	7.5	30	Yes	1736
18 / 1600	1.09	60	65	7	7.2	31	Yes	1736
19 / 0800	1.16	60	70	7	7.1	31	Yes	1736
20 / 1200	1.14	60	68	6	7.2	31	Yes	1736
21 / 1200	1.06	60	64	6	7.2	31	Yes	1736
22 / 1600	0.98	60	59	7	7.2	30	Yes	1736
23 / 1200	1.08	60	65	7	7.3	31	Yes	1736
24 / 1200	1.16	60	70	7	7.3	31	Yes	1736
25 / 1200	1.13	60	68	7	7.3	31	Yes	1736
26 / 0800	1.08	60	65	7	7.3	31	Yes	1736
27 / 1200	1.13	60	68	8	7.3	31	Yes	1736
28 / 1200	1.12	60	67	8	7.3	31	Yes	1736
29 / 2000	1.23	60	74	7	7.3	31	Yes	1736
30 / 1600	1.15	60	69	7	7.2	31	Yes	1736

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