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

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: Chad Marshall **Date: 06/05/2025**

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 - B **Month/Year: May / 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	0100	1.30	36	47	12	7.4	23	Yes	1,667
02	0900	1.25	36	45	12	7.4	23	Yes	1,667
03	0900	1.23	36	44	12	7.4	23	Yes	1,667
04	0100	1.30	36	47	12	7.4	23	Yes	1,667
05	0900	1.28	36	46	12	7.4	23	Yes	1,667
06	0000	1.32	36	48	12	7.4	23	Yes	1,667
07	0800	1.28	36	46	13	7.4	23	Yes	1,667
08	0900	1.25	36	45	13	7.4	23	Yes	1,667
09	0000	1.27	36	46	12	7.5	23	Yes	1,667
10	0900	1.23	36	44	13	7.4	23	Yes	1,667
11	0000	1.32	36	48	13	7.4	23	Yes	1,667
12	0000	1.28	36	46	13	7.4	23	Yes	1,667
13	2100	1.14	36	41	12	7.3	23	Yes	1,667
14	1600	1.17	36	42	12	7.3	23	Yes	1,736
15	1000	1.30	36	47	12	7.3	23	Yes	1,736
16	0000	1.21	36	44	12	7.3	23	Yes	1,667
17	1700	1.16	36	42	12	7.3	23	Yes	1,736
18	1000	1.29	36	46	12	7.3	23	Yes	1,736
19	1600	1.12	36	40	12	7.2	23	Yes	1,736
20	0400	1.33	36	48	12	7.3	23	Yes	1,667
21	2000	1.28	36	46	12	7.2	23	Yes	1,667
22	0100	1.29	36	46	12	7.2	23	Yes	1,667
23	1700	1.20	36	43	12	7.2	23	Yes	1,736
24	1000	1.22	36	44	12	7.2	23	Yes	1,736
25	0800	1.27	36	46	13	7.2	23	Yes	1,736
26	0900	1.23	36	44	13	7.2	23	Yes	1,736
27	0100	1.38	36	50	13	7.2	23	Yes	1,736
28	0900	1.30	36	47	13	7.2	23	Yes	1,667
29	1700	1.12	36	40	14	7.2	23	Yes	1,736
30	0000	1.34	36	48	14	7.2	23	Yes	1,736
31	0100	1.26	36	45	14	7.2	23	Yes	1,667

" [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"