

**OHA - Drinking Water Services – Turbidity Monitoring Report Form County:  
Slow Sand, Membrane, Diatomaceous Earth Filtration or Unfiltered Systems**

System Name: Detroit Water System ID #: 00257 WTP-: A Month/Year: Oct 2022

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1			0.01	0.01		0.01	0.01
2	0.01		0.01	~	0.01	0.01	0.01
3			0.01	0.01		0.01	0.01
4		0.01		0.01	0.01		0.01
5	0.01	0.01		0.01	0.01		0.01
6		0.01	0.01				0.01
7	0.01	0.01	0.01	0.01	0.01		0.01
8		0.01	<del>0.01</del>	0.01	0.01		0.01
9		0.01	0.01	0.01	0.01		0.01
10	0.01	0.01	0.01				0.01
11	0.01	0.01	0.01	0.01		0.01	0.01
12	0.01	0.01	0.01			0.01	0.01
13	0.01	0.01	0.01		0.01	0.01	0.01
14		0.01	0.01				0.01
15			0.01	0.01	0.01		0.01
16			0.01	0.01	0.01	0.01	0.01
17	0.01		0.01			<del>0.01</del>	0.01
18	0.01		0.01		0.01		0.01
19	0.01		0.01			0.01	0.01
20	0.01		0.01		0.01	0.01	0.01
21	0.01		0.01				0.01
22	0.01	0.01				0.01	0.01
23	0.01	0.01		0.01	0.01		0.01
24	0.01		0.01	0.01		0.01	0.01
25	0.01		0.01	0.01			0.01
26	0.01		0.01	0.01		0.01	0.01
27		0.01		0.01	0.01		0.01
28	0.01	0.01		0.01	0.01		0.01
29		0.01					0.01
30	0.01		0.01	0.01			0.01
31		0.01	0.01			0.01	0.01

Slow Sand <input checked="" type="checkbox"/> Membrane/DE Filtration/Unfiltered	Monthly Summary (Answer Yes or No)	
	95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup> <input checked="" type="checkbox"/> Yes / No All daily turbidity readings ≤ 5 NTU? <input checked="" type="checkbox"/> Yes / No	
Notes:	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / No	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / No
	PRINTED NAME: <u>Robert Bruce</u>	
	SIGNATURE: <u>Robert Bruce</u>	DATE: <u>11-3-22</u>
	PHONE #: <u>(503) 854-3496</u>	CERT #: <u>7136</u>

<sup>1</sup> 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. <sup>2</sup> Filtered systems only.

OHA - Drinking Water Program – Surface Water Quality Data Form - *Giardia* Inactivation

Name: *city of Detroit*

ID #41: *00257*

WTP: *A* Month/Year: *Oct 2022*

Log Requirement (Circle One): 0.5 1.0

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
1/2000	.83	66	54	15.8	7.8	27	yes	90
2/2000	.78	66	51.48	17.0	8.1	27	yes	100
3/08136	.73	66	48.18	16.0	8.1	22	yes	80
4/08.27	.78	66	51.48	16.5	8.1	21	yes	80
5/08.15	.81	66	53.46	16.4	8.12	22	yes	80
6/0837	.84	66	55.4	16.2	8.15	22	yes	80
7/0730	.85	66	56.1	16.5	8.16	22	yes	80
8/1700	.94	66	62.0	16.6	8.20	22	yes	100
9/1630	.94	66	62.0	16.5	8.2	22	yes	90
10/0810	0.95	66	62.7	16.2	8.24	22	yes	82
11/0811	0.95	66	62.7	16.7	8.25	22	yes	100
12/0803	.95	66	62.7	16.1	8.28	22	yes	100
13/0805	.95	66	62.7	16.4	8.3	22	yes	100
14/0759	.95	66	62.7	16.2	8.2	22	yes	100
15/1700	.89	66	58.7	16.3	8.3	22	yes	100
16/0850	.90	66	59.4	17.2	8.3	22	yes	100
17/0850	.90	66	59.4	16.1	8.3	22	yes	90
18/0803	.88	66	58.8	15.7	8.3	22	yes	90
19/0826	.92	66	60.7	15.6	8.30	22	yes	90
20/0829	.95	66	62.7	15.6	8.3	22	yes	90
21/0821	.96	66	63.36	16.9	8.4	22	yes	90
22/0827	.95	66	62.7	15.2	8.2	22	yes	90
23/0857	.92	66	60.7	14.4	8.1	22	yes	90
24/0822	.80	66	52.8	14.7	8.23	21	yes	90
25/0802	.78	66	51.4	17.3	8.3	21	yes	70
26/0805	.81	66	53.46	18.9	8.3	22	yes	70
27/0758	1.0	66	66	14.7	7.9	27	yes	70
28/0800	1.2	66	79.2	14.5	7.7	28	yes	80
29/0811	1.2	66	79.2	15	7.6	22	yes	80
30/12:00	1.2	66	79.2	15	7.7	22	yes	80
31/0805	1.2	66	79.2	15	7.7	22	yes	80

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l, OR CT not met, notify DWS within 24 hours

Revised September 2016

Download form at: [public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-conv-direct.pdf](http://public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-conv-direct.pdf)

Return by 10<sup>th</sup> of following month by email, fax, or mail to:  
 dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350