

OHA - Drinking Water Program - Turbidity Monitoring Report Form County: Washington

Conventional or Direct Filtration

System Name: FOREST GROVE, CITY OF		ID #: 4100305 WTP:-WTP-A			Month/Year:		Sep-21
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	0.02	0.02	0.02	0.02	0.02	0.02	0.02
2	0.02	0.02	0.02	0.02	0.03	0.03	0.04
3	0.02	0.03	0.03	0.03	0.03	0.02	0.03
4	0.02	0.02	0.02	0.02	0.02	0.02	0.02
5	0.02	0.02	0.02	0.02	0.02	0.02	0.02
6	0.02	0.02	0.02	0.03	0.02	0.02	0.04
7	0.02	0.02	0.02	0.03	0.03	0.02	0.05
8	0.02	0.02	0.02	0.02	0.02	0.02	0.02
9	0.02	0.02	0.02	0.02	0.02	0.02	0.04
10	0.02	0.02	0.02	0.03	0.03	0.02	0.04
11	0.02	0.02	0.02	0.02	0.03	0.03	0.05
12	0.02	0.02	0.02	0.02	0.03	0.03	0.03
13	0.02	0.03	0.03	0.02	0.02	0.02	0.03
14	0.02	0.02	0.02	0.04	0.03	0.03	0.06
15	0.02	0.02	0.02	0.04	0.04	0.03	0.05
16	0.02	0.02	0.02	0.02	0.02	0.02	0.03
17	0.02	0.02	0.02	0.02	0.02	0.02	0.03
18	0.01	0.02	0.02	0.03	0.03	0.03	0.03
19	0.03	0.07	0.33	0.09	0.06	off	0.41
20	off	off	off	0.07	0.09	off	0.10
21	off	off	off	0.04	0.02	0.02	0.12
22	0.01	0.01	0.02	0.01	0.02	0.02	0.04
23	0.02	0.02	0.02	0.02	0.02	0.01	0.02
24	0.01	0.02	0.02	0.02	0.02	0.02	0.04
25	0.02	0.02	0.01	0.01	0.01	0.02	0.02
26	0.02	0.02	0.01	0.01	0.02	0.01	0.02
27	0.02	0.02	0.02	0.02	0.02	0.02	0.03
28	0.02	0.02	0.02	0.02	0.05	0.03	0.06
29	0.03	0.03	0.02	0.02	0.02	0.02	0.03
30	0.02	0.01	0.01	0.01	0.01	0.01	0.02
Conventional or Direct Filtration				Monthly Summary (Answer Yes or No)			
95% of turbidity readings \leq 0.3 NTU? <u>Yes</u> /No				CT's met everyday? (see back) <u>Yes</u> /No			
All turbidity readings < 1 NTU? <u>Yes</u> /No				All CL ₂ residuals at entry point \geq 0.2mg/l? <u>Yes</u> /No			
All turbidity readings < IFE triggers? <u>Yes</u> /No ²				Printed Name: <u>ANDREW J. SEWAN</u>			
Notes:				Signature: <u>[Signature]</u>		Date: <u>10/1/21</u>	
				Phone #: (503) 992-3259		CERT #: <u>9171</u>	

¹ Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12 AM" through "8PM" may not correspond to continuous readings' maximum.

² IFE - Individ. Filter Effl. (OAR 333-061-0040(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

FOREST GROVE, CITY OF ID #: OR4100305 WTP-: WTP-A				Month / Year		Sep-21	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	Maximum Reservoir Outflow
	[ppm or mg/l]	minutes	C x T	[C]		Use tables	Yes / No	[GPM]
1 / 8 am	0.91	208	189.5	17.00	7.55	18	YES	2269.00
2 / 8 am	0.95	190	180.5	16.90	7.55	18	YES	2579.00
3 / 8 am	0.94	216	202.9	16.70	7.57	18	YES	2319.00
4 / 8 am	0.93	228	211.9	16.60	7.55	18	YES	2181.00
5 / 8 am	0.82	242	198.2	16.80	7.60	18	YES	2129.00
6 / 8 am	0.86	156	134.5	16.90	7.57	18	YES	3043.00
7 / 8 am	0.82	194	158.7	16.90	7.50	15	YES	2477.00
8 / 8 am	0.83	179	148.2	17.00	7.52	18	YES	2665.00
9 / 8 am	0.68	212	144.4	17.00	7.53	18	YES	2258.00
10 / 8 am	0.87	227	197.5	16.90	7.57	18	YES	2220.00
11 / 8 am	0.84	247	207.2	16.80	7.51	18	YES	2043.00
12 / 8 am	0.87	176	152.9	17.00	7.55	18	YES	2589.00
13 / 8 am	0.89	182	162.2	17.00	7.57	18	YES	2496.00
14 / 8 am	0.86	227	195.5	16.90	7.59	18	YES	2156.00
15 / 8 am	0.82	224	183.5	16.90	7.54	18	YES	2283.00
16 / 8 am	0.91	217	197.8	16.90	7.63	18	YES	2286.00
17 / 8 am	0.90	337	303.6	16.20	7.65	18	YES	1432.00
18 / 8 am	0.87	332	289.3	16.10	7.64	18	YES	1558.00
19 / 8 am	0.76	264	200.9	16.10	7.62	18	YES	1854.00
20 / 8 am	0.67	249	166.7	16.20	7.60	18	YES	1871.00
21 / 8 am	0.66	176	116.4	16.20	7.57	18	YES	2640.00
22 / 8 am	0.54	181	97.6	16.20	7.51	17	YES	2613.00
23 / 8 am	0.71	227	160.8	16.00	7.48	15	YES	2163.00
24 / 8 am	0.79	256	202.1	15.80	7.49	15	YES	1943.00
25 / 8 am	0.71	257	182.6	16.10	7.52	18	YES	1933.00
26 / 8 am	0.63	217	136.6	16.10	7.48	15	YES	2212.00
27 / 8 am	0.73	230	167.9	15.80	7.48	15	YES	2085.00
28 / 8 am	0.74	226	167.3	15.60	7.52	18	YES	2183.00
29 / 8 am	0.78	235	183.0	15.50	7.41	15	YES	2059.00
30 / 8 am	0.70	212	148.5	15.50	7.45	15	YES	2178.00

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