

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:		Feb-22
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	0.10	0.03	0.02	0.02	0.02	0.01	0.18
2	0.01	0.01	0.01	0.05	0.02	0.02	0.06
3	0.02	0.01	0.01	0.01	0.02	0.03	0.08
4	0.08	0.02	0.02	0.01	0.01	0.01	0.14
5	0.01	0.01	0.01	0.01	0.02	0.01	0.03
6	0.01	0.01	0.02	0.01	0.01	0.02	0.02
7	0.02	0.01	0.01	0.01	0.01	0.02	0.02
8	0.01	0.01	0.01	0.01	0.01	0.01	0.02
9	0.01	0.01	0.01	0.01	0.01	0.01	0.02
10	0.01	0.01	0.01	0.01	0.01	0.01	0.02
11	0.01	0.01	0.01	0.01	0.01	0.01	0.02
12	0.01	0.01	0.01	0.01	0.01	0.01	0.02
13	0.02	0.01	0.02	0.01	0.01	0.01	0.02
14	0.01	0.01	0.01	0.02	0.01	0.02	0.02
15	0.02	0.01	0.01	0.02	0.02	0.01	0.02
16	0.01	0.01	0.01	0.01	0.01	0.01	0.02
17	0.02	0.01	0.02	0.01	0.01	0.01	0.02
18	0.01	0.01	0.01	0.01	0.01	0.02	0.02
19	0.01	0.01	0.01	0.01	0.01	0.02	0.02
20	0.01	0.02	0.01	0.01	0.01	0.01	0.02
21	0.02	0.01	0.02	0.01	0.02	0.02	0.03
22	0.02	0.01	0.01	0.01	0.05	0.03	0.10
23	0.02	0.02	0.02	0.02	off	off	0.03
24	off	off	off	off	off	0.02	0.04
25	0.02	0.02	0.01	0.01	0.02	0.01	0.02
26	0.02	0.02	0.01	0.01	0.01	0.01	0.02
27	0.02	0.02	0.02	0.03	off	off	0.03
28	off	off	off	off	off	off	off
<u>Conventional</u> 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? All CL ₂ residuals at entry point \geq 0.2mg/l?			
All turbidity readings < 1 NTU? <u>Yes</u> / No				(see back) <u>Yes</u> / No			
All turbidity readings < IFE triggers? <u>Yes</u> / No ²				<u>Yes</u> / No			
Notes:				Printed Name: <u>ANDREW SENTU</u>			
				Signature: <u>[Signature]</u>			Date: <u>3/2/22</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		Feb-22		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	0.73	189	137.8	6.70	7.20	29	YES	2559.00
2 / 8 am	0.72	194	140.0	6.80	7.22	29	YES	2358.00
3 / 8 am	0.73	183	133.2	7.00	7.24	29	YES	2493.00
4 / 8 am	0.72	200	144.1	7.00	7.21	29	YES	2361.00
5 / 8 am	0.72	195	140.7	7.40	7.19	29	YES	2471.00
6 / 8 am	0.72	226	162.9	7.20	7.25	29	YES	2228.00
7 / 8 am	0.82	208	170.4	7.20	7.35	29	YES	2358.00
8 / 8 am	0.78	192	149.8	7.30	7.36	29	YES	2478.00
9 / 8 am	0.76	190	144.7	7.50	7.30	29	YES	2481.00
10 / 8 am	0.74	204	150.7	7.80	7.35	29	YES	2338.00
11 / 8 am	0.74	240	177.3	7.80	7.32	29	YES	2030.00
12 / 8 am	0.73	273	199.2	8.10	7.34	29	YES	1924.00
13 / 8 am	0.72	210	151.0	8.00	7.35	29	YES	2420.00
14 / 8 am	0.71	172	122.3	7.80	7.20	29	YES	2988.00
15 / 8 am	0.65	250	162.7	7.60	7.29	29	YES	2056.00
16 / 8 am	0.65	197	128.1	7.80	7.35	29	YES	2540.00
17 / 8 am	0.65	213	138.2	7.80	7.28	29	YES	2403.00
18 / 8 am	0.65	218	141.5	8.00	7.49	29	YES	2283.00
19 / 8 am	0.65	266	172.6	7.90	7.38	29	YES	1898.00
20 / 8 am	0.65	216	140.5	8.10	7.41	29	YES	2381.00
21 / 8 am	0.63	189	118.9	8.00	7.33	29	YES	2578.00
22 / 8 am	0.62	182	113.1	7.40	7.32	29	YES	2648.00
23 / 8 am	0.57	204	116.5	7.00	7.40	29	YES	2294.00
24 / 8 am	0.59	173	102.3	7.50	7.62	34	YES	2745.00
25 / 8 am	0.61	204	124.2	6.70	7.41	29	YES	2389.00
26 / 8 am	0.60	250	149.9	6.10	7.43	29	YES	2018.00
27 / 8 am	0.55	235	129.2	5.80	7.40	29	YES	2190.00
28 / 8 am	0.56	387	216.6	6.00	7.36	off	YES	1312.00

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