

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:		Nov-23
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	off	off	0.03
2	off	off	off	0.03	0.03	off	0.06
3	off	off	0.08	0.10	0.14	off	0.33
4	off	off	off	off	off	off	off
5	off	off	off	off	off	off	off
6	off	off	off	off	off	off	off
7	off	off	off	0.04	0.03	0.03	0.05
8	0.03	0.02	0.02	0.02	0.02	off	0.03
9	off	off	off	0.02	0.01	0.01	0.02
10	0.02	0.02	0.01	0.02	0.01	0.02	0.02
11	0.02	0.02	0.02	0.02	0.02	0.01	0.02
12	0.01	0.01	0.01	0.01	0.02	0.04	0.08
13	0.02	0.02	0.02	0.02	0.01	0.02	0.03
14	0.01	0.01	0.04	0.03	0.02	0.02	0.07
15	0.02	0.02	0.01	0.02	0.02	0.02	0.02
16	0.02	0.02	0.02	0.02	0.02	0.01	0.02
17	0.02	0.02	0.02	0.02	0.02	0.01	0.03
18	0.02	0.02	0.02	0.02	0.02	0.02	0.02
19	0.02	0.02	0.02	0.02	0.03	0.02	0.03
20	0.02	0.03	0.12	0.02	0.02	0.04	0.12
21	0.05	0.04	0.06	0.02	0.02	0.02	0.08
22	0.02	0.02	0.02	0.02	0.02	0.02	0.03
23	0.02	0.02	0.02	0.02	0.02	0.02	0.03
24	0.02	0.02	0.02	0.02	0.02	0.02	0.02
25	0.02	0.02	0.02	0.02	0.02	0.02	0.03
26	0.02	0.02	0.02	0.02	0.02	0.02	0.03
27	0.02	0.02	0.02	0.03	0.02	0.03	0.04
28	0.03	0.02	0.02	0.03	0.03	0.02	0.03
29	0.03	0.02	0.03	0.02	0.02	0.02	0.03
30	0.02	0.02	0.02	0.02	0.02	0.02	0.03
<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? <u>Yes</u> / No			
All turbidity readings < 1 NTU? <u>Yes</u> / No				(see back) 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				<u>Yes</u> / No			
Notes:				Printed Name: <u>Andrew Sewell</u>			
				Signature: <u>[Signature]</u>			Date: <u>12/6/23</u>
				Phone #: (503) 992-8259			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	Nov-23	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	0.92	243	223.4	10.90	7.70	27	YES	1903.00	
2 / 8 am	0.91	219	199.6	11.20	7.13	22	YES	2122.00	
3 / 8 am	0.88	263	231.5	10.90	7.25	22	YES	1929.00	
4 / 8 am	0.83	288	239.3	11.20	7.13	off	YES	1675.00	
5 / 8 am	0.80	220	175.9	11.80	7.06	off	YES	1894.00	
6 / 8 am	0.77	1214	935.0	12.00	7.11	off	YES	343.00	
7 / 8 am	0.82	192	157.2	12.20	7.12	22	YES	2538.00	
8 / 8 am	0.77	232	178.5	12.10	7.12	22	YES	2174.00	
9 / 8 am	0.86	192	164.8	12.20	7.06	22	YES	2484.00	
10 / 8 am	0.91	181	164.7	11.80	6.97	19	YES	2591.00	
11 / 8 am	0.95	224	212.9	11.90	6.91	19	YES	2218.00	
12 / 8 am	0.96	215	206.2	11.90	6.76	19	YES	2265.00	
13 / 8 am	0.77	233	179.3	12.00	6.77	18	YES	2074.00	
14 / 8 am	1.00	176	175.6	11.70	6.81	19	YES	2671.00	
15 / 8 am	1.00	189	189.4	11.80	6.64	19	YES	2624.00	
16 / 8 am	1.04	230	239.0	11.50	6.72	19	YES	2224.00	
17 / 8 am	1.08	234	252.7	11.00	6.82	19	YES	2244.00	
18 / 8 am	1.11	180	199.4	10.80	6.86	19	YES	2708.00	
19 / 8 am	1.09	229	249.7	10.80	6.78	19	YES	2200.00	
20 / 8 am	1.44	206	296.1	10.80	6.81	20	YES	2434.00	
21 / 8 am	0.95	171	162.3	10.50	6.84	19	YES	2847.00	
22 / 8 am	0.78	193	150.8	10.00	6.95	18	YES	2552.00	
23 / 8 am	0.69	186	128.6	10.10	6.81	18	YES	2666.00	
24 / 8 am	0.64	310	198.2	10.00	6.82	19	YES	1605.00	
25 / 8 am	0.61	193	117.6	9.80	6.86	24	YES	2360.00	
26 / 8 am	0.61	201	122.8	9.10	6.89	24	YES	2364.00	
27 / 8 am	0.61	168	102.7	8.90	6.93	24	YES	2806.00	
28 / 8 am	0.62	192	119.1	8.10	6.98	24	YES	2350.00	
29 / 8 am	0.64	175	112.0	8.00	7.02	29	YES	2719.00	
30 / 8 am	0.81	161	130.3	7.90	7.15	30	YES	3045.00	

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