

# 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: Dec-23	
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	0.02	0.02	0.02	0.02	0.03	off	0.04
2	off	off	off	off	off	off	off
3	off	off	off	off	off	off	off
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	0.03	0.02	off	0.06
8	off	off	off	0.02	0.02	0.02	0.03
9	0.01	0.02	0.02	0.02	off	off	0.03
10	off	off	off	off	off	off	off
11	off	off	off	0.02	0.02	0.02	0.03
12	0.02	0.02	0.02	0.02	0.02	0.02	0.03
13	0.02	0.02	0.02	0.02	0.02	0.02	0.03
14	0.02	0.02	0.02	0.02	0.02	0.02	0.02
15	0.02	0.02	0.02	0.02	0.02	0.02	0.02
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	0.02
18	0.02	0.02	0.02	0.02	0.02	0.02	0.03
19	0.02	0.02	0.02	0.02	0.02	0.02	0.03
20	0.02	0.02	0.02	0.02	0.02	0.02	0.04
21	0.02	0.02	0.02	0.02	0.02	0.02	0.03
22	0.02	0.02	0.02	0.02	0.02	0.02	0.02
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	0.05	0.08
25	0.07	0.02	0.02	0.02	0.02	0.02	0.10
26	0.02	0.02	0.02	0.02	0.02	0.02	0.02
27	0.02	0.02	0.02	0.02	0.02	0.02	0.04
28	0.02	0.02	0.02	0.02	0.02	0.07	0.07
29	0.05	0.02	0.02	0.02	0.02	0.02	0.09
30	0.02	0.02	0.02	0.02	0.03	0.02	0.04
31	0.03	0.03	0.02	0.02	0.02	0.02	0.12
(Conventional) or Direct Filtration				Monthly Summary (Answer Yes or No)			
95% of turbidity readings $\leq$ 0.3 NTU? <b>Yes/No</b>				CT's met everyday? All CL <sub>2</sub> residuals at entry point $\geq$ 0.2mg/l?			
All turbidity readings < 1 NTU? <b>Yes/No</b>				(see back) <b>Yes/No</b>			
All turbidity readings < IFE triggers? <b>Yes/No</b> <sup>2</sup>				<b>Yes/No</b>			
Notes:				Printed Name: <i>ANDREW SEWALL</i>			
				Signature: <i>[Signature]</i>		Date: <i>1/3/24</i>	
				Phone #: (503) 992-3259		CERT #: <i>9171</i>	

<sup>1</sup> 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.

<sup>2</sup> 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	Dec-23	Required Log Inactivation: 0.5
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>	Maximum Reservoir Outflow	
	[ppm or mg/l]	minutes	C x T	[ C ]		Use tables	Yes / No	[GPM]	
1 / 8 am	0.75	217	162.4	7.20	7.30	29	YES	2279.00	
2 / 8 am	0.76	813	617.8	7.80	7.19	off	YES	620.00	
3 / 8 am	0.72	613	441.3	8.00	7.11	off	YES	828.00	
4 / 8 am	0.65	683	443.7	8.00	7.02	off	YES	723.00	
5 / 8 am	0.80	624	499.1	8.80	7.00	off	YES	819.00	
6 / 8 am	0.81	513	415.2	8.80	7.06	off	YES	997.00	
7 / 8 am	0.79	218	171.9	9.00	7.01	29	YES	2203.00	
8 / 8 am	0.81	221	179.1	9.00	7.11	29	YES	2137.00	
9 / 8 am	0.74	309	228.8	9.70	7.01	29	YES	1528.00	
10 / 8 am	0.77	857	660.2	9.80	6.95	off	YES	596.00	
11 / 8 am	0.81	237	192.1	11.00	7.37	22	YES	2140.00	
12 / 8 am	0.81	182	147.3	10.00	7.01	22	YES	2559.00	
13 / 8 am	0.81	118	95.5	10.00	6.97	19	YES	3798.00	
14 / 8 am	0.83	190	157.9	10.00	6.92	19	YES	2318.00	
15 / 8 am	0.86	176	151.0	10.00	6.83	19	YES	2592.00	
16 / 8 am	0.86	250	215.2	9.80	6.80	25	YES	2098.00	
17 / 8 am	0.84	229	192.7	9.80	6.76	25	YES	2288.00	
18 / 8 am	0.83	212	176.3	9.80	6.79	25	YES	2455.00	
19 / 8 am	0.79	195	154.0	9.80	6.78	24	YES	2496.00	
20 / 8 am	0.77	240	185.2	9.90	6.74	24	YES	2096.00	
21 / 8 am	0.76	208	158.3	9.90	6.75	24	YES	2352.00	
22 / 8 am	0.76	238	181.0	9.80	6.85	24	YES	2057.00	
23 / 8 am	0.77	260	200.2	9.30	6.92	24	YES	1952.00	
24 / 8 am	0.80	281	225.0	9.10	6.89	24	YES	1842.00	
25 / 8 am	0.79	288	227.5	8.90	6.97	24	YES	1908.00	
26 / 8 am	0.74	255	188.9	9.00	6.82	24	YES	1906.00	
27 / 8 am	0.73	209	152.5	9.00	6.81	24	YES	2278.00	
28 / 8 am	0.76	262	199.2	9.20	6.75	24	YES	1896.00	
29 / 8 am	0.80	235	188.0	9.30	6.73	24	YES	2174.00	
30 / 8 am	0.80	193	154.4	9.70	6.72	24	YES	2467.00	
31 / 8 am	0.82	220	180.6	9.90	6.69	25	YES	2209.00	

<sup>3</sup> If Cl<sub>2</sub> at entry point <0.2 mg/l, OR CT not met, notify DWP by end of next business day.