

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: Aug-25	
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	0.01	0.01	0.01	0.01	0.01	0.01	0.02
2	0.01	0.01	0.01	0.01	0.01	0.01	0.02
3	0.01	0.01	0.01	0.01	0.01	0.01	0.01
4	0.01	0.01	0.01	0.01	0.01	0.01	0.01
5	0.01	0.01	0.01	0.01	0.01	0.01	0.01
6	0.01	0.01	0.01	0.01	0.01	0.01	0.02
7	0.01	0.01	0.02	0.01	0.02	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	0.01
10	0.01	0.01	0.01	0.01	0.01	0.01	0.01
11	0.01	0.01	0.01	0.01	0.01	0.01	0.02
12	0.01	0.01	0.01	0.01	0.02	0.02	0.02
13	0.01	0.01	0.01	0.01	0.01	0.01	0.01
14	0.01	0.01	0.01	0.01	0.01	0.01	0.01
15	0.01	0.01	0.01	0.01	0.01	0.01	0.01
16	0.01	0.01	0.01	0.01	0.01	0.02	0.02
17	0.02	0.01	0.01	0.01	0.01	0.01	0.03
18	0.02	0.02	0.01	0.01	0.02	0.02	0.02
19	0.01	0.01	off	0.02	off	off	0.02
20	off	off	off	off	off	off	off
21	off	off	0.02	0.02	0.02	0.01	0.03
22	0.01	0.01	0.01	0.01	0.01	0.01	0.02
23	0.02	0.02	0.02	0.01	0.02	0.01	0.02
24	0.01	0.01	0.02	0.02	0.02	0.01	0.03
25	0.01	0.02	0.02	0.02	0.01	0.02	0.02
26	0.01	0.01	0.01	0.01	0.01	0.01	0.01
27	0.01	0.01	0.01	0.01	0.01	0.01	0.01
28	0.01	0.01	0.01	0.01	0.02	0.01	0.02
29	0.01	0.01	0.01	0.01	0.01	0.01	0.01
30	0.01	0.01	0.01	0.01	0.01	0.01	0.03
31	0.01	0.01	0.02	0.02	0.02	0.01	0.02

<u>Conventional or Direct Filtration</u> 95% of turbidity readings $\leq$ 0.3 NTU? Yes / No All turbidity readings < 1 NTU? Yes / No All turbidity readings < IFE triggers? Yes / No² Notes:	Monthly Summary (Answer Yes or No) CT's met everyday? Yes / No All CL₂ residuals at entry point $\geq$ 0.2mg/l? Yes / No (see back) Printed Name: <i>Andrew Sena</i> Signature: <i>[Signature]</i> Date: <i>9/2/25</i> Phone #: (503) 992-3259 CERT #: <i>9171</i>
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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	Aug-25	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	0.95	182	173.2	17.20	7.16	15	YES	2822.00	
2 / 8 am	0.97	204	197.4	17.50	7.15	15	YES	2511.00	
3 / 8 am	0.96	174	167.0	17.40	7.28	15	YES	2857.00	
4 / 8 am	0.95	201	191.3	17.10	7.35	15	YES	2468.00	
5 / 8 am	0.94	169	158.9	17.00	7.32	14	YES	2775.00	
6 / 8 am	0.93	153	142.2	17.00	7.24	15	YES	3158.00	
7 / 8 am	0.92	170	156.2	17.00	7.24	15	YES	2824.00	
8 / 8 am	0.90	187	168.2	16.90	7.15	15	YES	2547.00	
9 / 8 am	0.90	183	164.8	16.90	7.26	15	YES	2714.00	
10 / 8 am	0.89	149	132.2	17.00	7.34	15	YES	3134.00	
11 / 8 am	0.88	167	147.1	17.10	7.33	15	YES	2911.00	
12 / 8 am	0.87	156	135.3	17.20	7.22	15	YES	3128.00	
13 / 8 am	0.87	180	156.5	18.00	7.32	15	YES	2705.00	
14 / 8 am	0.80	116	93.1	18.10	7.36	15	YES	4032.00	
15 / 8 am	0.85	181	153.6	18.10	7.18	15	YES	2595.00	
16 / 8 am	0.83	208	172.7	18.10	7.21	15	YES	2288.00	
17 / 8 am	0.82	146	119.9	18.00	7.36	15	YES	3256.00	
18 / 8 am	0.82	114	93.3	18.00	7.42	15	YES	4091.00	
19 / 8 am	0.80	120	95.9	18.00	7.36	15	YES	3883.00	
20 / 8 am	0.68	132	90.1	18.00	7.27	off	YES	3435.00	
21 / 8 am	0.74	111	82.3	18.00	7.28	15	YES	4027.00	
22 / 8 am	0.80	124	99.5	18.10	7.30	15	YES	3715.00	
23 / 8 am	0.80	122	97.4	18.10	7.31	15	YES	3737.00	
24 / 8 am	0.79	119	94.4	18.10	7.36	15	YES	3955.00	
25 / 8 am	0.79	109	86.3	18.10	7.37	15	YES	4260.00	
26 / 8 am	0.78	110	85.5	18.20	7.37	15	YES	4215.00	
27 / 8 am	0.69	122	84.4	18.60	7.38	15	YES	3805.00	
28 / 8 am	0.68	118	80.2	18.80	7.32	15	YES	3858.00	
29 / 8 am	0.67	102	68.5	19.00	7.29	15	YES	4345.00	
30 / 8 am	0.76	152	115.8	18.90	7.16	15	YES	3169.00	
31 / 8 am	0.69	160	110.4	18.50	7.39	15	YES	2954.00	

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

Download form at: www.public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-conv-direct.pdf