


OHA - Drinking Water Program -Turbidity Monitoring Report Form

County: Douglas

Conventional or Direct Filtration

Month/Year: Dec-22

System Name:	City of Glendale		ID#: 41 00323				WTP : TP - A	
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	off	off	0.05	0.04	0.04	0.04	0.05	
2	off	off	0.03	0.04	0.04	off	0.04	
3	off	off	0.05	0.05	0.03	0.04	0.05	
4	off	off	0.04	0.05	0.04	off	0.05	
5	off	off	0.04	0.06	0.06	0.04	0.06	
6	off	off	0.04	0.04	0.05	0.04	0.05	
7	off	off	0.05	0.07	0.06	off	0.07	
8	off	off	0.05	0.05	0.06	0.04	0.06	
9	0.04	off	0.06	0.07	0.03	off	0.07	
10	off	off	0.04	0.04	0.03	0.04	0.04	
11	0.05	0.04	0.03	0.03	off	0.04	0.05	
12	0.04	off	0.03	0.03	off	0.04	0.04	
13	0.04	off	0.03	0.04	0.03	0.04	0.04	
14	off	off	0.03	0.03	0.03	off	0.03	
15	off	off	0.04	0.03	0.03	0.04	0.04	
16	off	off	0.03	0.03	0.04	off	0.04	
17	off	off	0.03	0.03	0.04	0.03	0.04	
18	0.04	off	0.04	0.05	0.03	off	0.05	
19	off	off	0.03	0.03	0.03	0.03	0.03	
20	0.03	off	0.03	0.03	0.05	0.04	0.05	
21	off	off	0.06	0.04	0.04	0.03	0.06	
22	0.04	off	0.04	0.04	off	off	0.04	
23	0.04	0.03	off	0.05	0.05	0.04	0.05	
24	off	off	0.04	0.03	0.04	0.04	0.04	
25	0.04	off	0.04	0.04	0.05	0.04	0.05	
26	off	off	0.04	0.03	0.04	0.04	0.04	
27	off	off	0.04	0.03	0.05	0.04	0.05	
28	off	off	0.03	0.03	0.04	0.03	0.04	
29	0.04	off	0.02	0.02	0.03	0.03	0.04	
30	0.05	off	0.03	0.04	off	0.04	0.05	

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	Yes / No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 NTU?	Yes / No	Yes / No	Yes / No
All turbidity readings < IFE ² triggers	Yes / No		
Notes:	PRINTED NAME: SEAN, NEGHERSON		
	SIGNATURE: 		DATE: 12/4/22
	PHONE #: (541) 863 1453		CERT #: 6111

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² IFE = Individ. Filter Eff. (333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : A

System Name:	City of Glendale	ID#: 41 00323	Month/Year:	Dec-22	Disinfection Giardia Log Inactiv:	0.5
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Date	Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³
		[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No
1	9:12	1.17	1100	1287.0	13.0	7.80	21.3	YES
2	9:14	1.04	1100	1144.0	12.00	7.90	23.3	YES
3	9:08	0.87	1100	957.0	11.00	7.90	24.4	YES
4	9:14	1.23	1100	1353.0	11.00	7.90	25.4	YES
5	15:44	1.25	1100	1375.0	12.0	7.80	23.0	YES
6	9:30	1.07	1100	1177.0	12.0	7.90	23.4	YES
7	9:04	0.89	1100	979.0	11.0	7.80	23.6	YES
8	9:07	1.20	1100	1320.0	10.0	7.80	26.2	YES
9	15:47	1.24	1100	1364.0	10.0	7.80	26.3	YES
10	9:08	1.10	1100	1210.0	10.0	7.90	26.8	YES
11	11:49	1.25	1100	1375.0	10.0	7.80	26.3	YES
12	12:15	1.39	1100	1529.0	10.0	7.80	26.7	YES
13	9:17	1.20	1100	1320.0	10.0	7.90	27.1	YES
14	8:18	0.91	1100	1001.0	9.0	8.20	31.3	YES
15	8:58	1.17	1100	1287.0	9.0	8.00	30.0	YES
16	15:52	0.88	1100	968.0	8.0	8.00	31.0	YES
17	9:50	1.07	1100	1177.0	8.0	7.90	30.6	YES
18	9:17	1.01	1100	1111.0	8.0	7.90	30.4	YES
19	12:26	1.42	1100	1562.0	8.0	7.90	31.8	YES
20	9:26	1.18	1100	1298.0	7.00	8.00	34.4	YES
21	8:55	1.28	1100	1408.0	7.00	8.00	34.8	YES
22	9:41	1.13	1100	1243.0	7.00	7.80	31.8	YES
23	15:27	0.88	1100	968.0	9.0	7.90	28.0	YES
24	15:39	1.36	1100	1496.0	9.0	8.00	30.6	YES
25	15:53	0.95	1100	1045.0	9.0	7.80	27.2	YES
26	15:55	1.14	1100	1254.0	9.0	7.90	28.8	YES
27	8:13	1.10	1100	1210.0	9.0	7.90	28.7	YES
28	15:32	0.93	1100	1023.0	11.0	8.00	25.5	YES
29	8:47	0.62	1100	682.0	9.0	8.00	28.1	YES
30	8:10	1.62	1100	1782.0	9.0	8.00	31.6	YES

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, DWP to be notified by end of next business day.

Revised February 2012