

OHA - Drinking Water Program -Turbidity Monitoring Report Form
 Conventional or Direct Filtration

County: **Douglas**
 Month/Year: **Apr-23**

System Name:	City of Glendale		ID#: 41	4100323			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	0.04	0.07	0.08	0.04	0.08	
2	0.06	0.04	0.06	0.08	0.07	0.08	0.08	
3	0.05	0.04	0.08	0.06	0.08	0.05	0.08	
4	0.04	off	0.06	0.04	0.03	0.07	0.07	
5	0.05	0.07	0.07	0.05	0.08	0.07	0.08	
6	0.04	0.04	0.06	0.05	0.05	0.05	0.06	
7	0.04	off	0.06	0.04	0.04	0.05	0.06	
8	0.04	0.04	0.03	0.03	0.04	0.07	0.07	
9	0.04	off	0.05	0.05	0.04	0.06	0.06	
10	0.04	0.04	off	0.06	0.05	0.03	0.06	
11	off	off	0.04	0.05	0.04	0.04	0.05	
12	0.04	0.05	0.04	0.06	0.05	0.05	0.06	
13	off	off	0.06	0.07	0.06	0.04	0.07	
14	0.04	0.04	0.06	0.04	0.05	0.04	0.06	
15	0.11	off	0.04	0.04	0.04	0.04	0.11	
16	0.04	off	0.04	0.05	0.05	0.04	0.05	
17	0.04	0.04	0.05	0.05	0.05	off	0.05	
18	0.04	0.04	0.04	0.05	0.05	0.03	0.05	
19	off	off	0.05	0.06	0.04	0.04	0.06	
20	0.04	0.04	0.04	0.04	0.04	0.03	0.04	
21	off	off	0.04	0.04	0.04	0.04	0.04	
22	0.03	0.03	0.05	0.03	0.03	off	0.05	
23	off	off	0.03	0.03	0.03	0.03	0.03	
24	0.03	0.04	0.03	0.04	0.05	off	0.05	
25	off	off	off	0.05	0.03	0.03	0.05	
26	0.03	0.03	0.04	0.03	0.03	0.03	0.04	
27	off	off	0.03	0.05	0.03	0.04	0.05	
28	0.03	off	0.03	0.04	0.03	off	0.04	
29	off	off	0.05	0.04	0.05	0.03	0.05	
30	0.04	0.03	0.06	0.05	0.06	off	0.06	

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back)
All 4-hour turbidity readings ≤ 1 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All turbidity readings < IFE ² triggers	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No

Notes:	PRINTED NAME: SEAN NECHERSON	
	SIGNATURE: 	DATE: 5/5/23
	PHONE #: (841) 865 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 Effl. (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	4100323	Month/Year:	Apr-23	Disinfection Giardia Log Inactiv:	0.5
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Date	Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No
1	15:40	0.79	1100	869.0	9.0	7.60	24.8	YES
2	9:04	0.61	1100	671.0	9.00	7.60	24.3	YES
3	16:16	0.65	1100	715.0	8.00	7.70	27.1	YES
4	8:50	0.74	1100	814.0	8.00	7.80	28.4	YES
5	9:20	0.76	1100	836.0	8.0	7.60	26.5	YES
6	15:42	0.78	1100	858.0	9.0	7.70	25.7	YES
7	12:05	0.99	1100	1089.0	9.0	7.80	27.3	YES
8	10:02	0.90	1100	990.0	9.0	7.80	27.0	YES
9	9:50	0.68	1100	748.0	10.0	7.70	23.8	YES
10	15:40	0.76	1100	836.0	10.0	7.70	24.0	YES
11	12:10	0.79	1100	869.0	10.0	7.90	25.9	YES
12	15:36	0.99	1100	1089.0	9.0	7.60	25.4	YES
13	15:42	0.81	1100	891.0	9.0	7.70	25.8	YES
14	9:55	0.95	1100	1045.0	9.0	7.90	28.2	YES
15	9:20	0.92	1100	1012.0	10.0	7.90	26.3	YES
16	12:29	0.87	1100	957.0	10.0	8.00	27.1	YES
17	12:34	0.59	1100	649.0	10.0	7.80	24.4	YES
18	9:16	1.05	1100	1155.0	9.0	8.00	29.6	YES
19	11:56	0.78	1100	858.0	9.0	7.90	27.6	YES
20	10:00	0.94	1100	1034.0	9.00	7.60	25.3	YES
21	13:16	0.69	1100	759.0	10.00	7.80	24.7	YES
22	12:37	0.84	1100	924.0	11.00	7.60	21.9	YES
23	15:25	0.91	1100	1001.0	11.0	7.80	23.7	YES
24	15:53	0.70	1100	770.0	11.0	7.70	22.3	YES
25	11:45	1.17	1100	1287.0	12.0	7.80	22.8	YES
26	11:43	1.03	1100	1133.0	11.0	7.80	24.0	YES
27	12:00	1.13	1100	1243.0	12.0	8.00	24.4	YES
28	12:10	0.72	1100	792.0	13.0	7.90	21.0	YES
29	15:40	0.72	1100	792.0	13.0	8.00	21.8	YES
30	11:00	0.73	1100	803.0	14.0	7.70	18.3	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