

OHA - Drinking Water Program -Turbidity Monitoring Report Form

County: **Douglas**

Conventional or Direct Filtration

Month/Year: **Jun-23**

System Name:	City of Glendale			ID#: 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 <sup>1</sup> [NTU]
1	0.03	0.03	0.03	0.04	0.05	off	0.05
2	off	off	off	off	0.06	0.03	0.06
3	0.04	0.03	0.04	0.05	0.04	off	0.05
4	off	off	0.03	0.04	0.03	0.03	0.04
5	0.03	off	0.03	0.05	0.05	off	0.05
6	off	off	0.05	0.04	0.06	0.03	0.06
7	0.03	0.03	0.03	0.04	0.05	off	0.05
8	off	off	0.05	0.05	0.06	off	0.06
9	off	off	off	0.05	0.05	off	0.05
10	off	off	0.05	0.04	0.05	0.03	0.05
11	off	off	0.05	0.06	0.05	off	0.06
12	0.03	off	0.04	0.05	0.05	0.04	0.05
13	off	off	0.06	0.05	0.06	0.04	0.06
14	0.03	off	0.05	0.06	0.06	off	0.06
15	off	off	0.06	0.06	0.04	0.03	0.06
16	0.03	off	0.05	0.05	0.04	off	0.05
17	off	off	0.04	0.06	0.03	0.05	0.06
18	off	off	0.05	0.05	off	off	0.05
19	off	off	0.04	0.03	0.04	0.04	0.04
20	off	off	0.05	0.05	0.06	off	0.06
21	off	off	0.05	0.06	0.06	0.07	0.07
22	0.03	off	0.06	0.05	0.08	off	0.08
23	off	off	0.04	0.04	0.05	0.05	0.05
24	0.04	off	0.06	0.03	0.03	off	0.06
25	off	off	0.05	0.04	0.04	0.06	0.06
26	off	off	0.05	0.04	0.05	off	0.05
27	off	off	0.06	0.06	0.05	0.04	0.06
28	0.07	off	0.04	0.04	off	off	0.07
29	0.03	0.03	0.04	0.05	off	0.03	0.05
30	0.04	0.04	0.04	0.04	off	off	0.04

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

Notes:	PRINTED NAME: <b>SEAN NEGERBON</b>	
	SIGNATURE: <b>[Signature]</b>	DATE: <b>7/7/23</b>
	PHONE #: <b>(541) 863 01453</b>	CERT #: <b>6111</b>

<sup>1</sup> 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. <sup>2</sup> 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#: 4100323	Month/Year:	Jun-23	Disinfection Giardia Log Inactive:	0.5
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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>
		[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No
1	9:54	0.83	1100	913.0	16.0	7.80	16.8	YES
2	15:30	0.92	1100	1012.0	16.00	7.80	17.0	YES
3	11:45	0.84	1100	924.0	15.00	7.50	16.1	YES
4	12:15	0.86	1100	946.0	16.00	7.80	16.9	YES
5	15:43	0.71	1100	781.0	17.0	7.60	14.4	YES
6	11:30	0.49	1100	539.0	17.0	7.70	14.6	YES
7	12:35	0.84	1100	924.0	17.0	7.40	13.6	YES
8	15:45	0.62	1100	682.0	18.0	7.60	13.3	YES
9	12:25	0.77	1100	847.0	18.0	7.60	13.6	YES
10	12:35	0.82	1100	902.0	18.0	7.70	14.2	YES
11	8:46	0.85	1100	935.0	18.0	7.70	14.2	YES
12	9:05	0.74	1100	814.0	18.0	7.70	14.0	YES
13	8:55	0.61	1100	671.0	19.0	7.70	12.9	YES
14	12:00	0.99	1100	1089.0	18.0	7.80	15.0	YES
15	15:49	0.67	1100	737.0	18.0	8.00	15.6	YES
16	12:15	0.67	1100	737.0	18.0	8.00	15.6	YES
17	8:31	0.81	1100	891.0	18.0	7.90	15.2	YES
18	12:00	0.50	1100	550.0	18.0	7.90	14.7	YES
19	15:50	0.72	1100	792.0	17.0	8.00	16.7	YES
20	9:06	0.64	1100	704.0	16.00	8.10	18.4	YES
21	12:05	0.68	1100	748.0	16.00	8.10	18.5	YES
22	12:01	0.96	1100	1056.0	16.00	7.90	17.7	YES
23	8:50	0.97	1100	1067.0	18.0	7.80	14.9	YES
24	9:57	0.95	1100	1045.0	18.0	7.70	14.4	YES
25	8:55	0.82	1100	902.0	18.0	7.80	14.7	YES
26	9:55	1.01	1100	1111.0	18.0	7.60	13.9	YES
27	8:47	0.81	1100	891.0	18.0	7.70	14.1	YES
28	8:50	1.04	1100	1144.0	18.0	7.60	14.0	YES
29	9:47	0.70	1100	770.0	18.0	7.50	13.0	YES
30	9:15	0.57	1100	627.0	19.0	7.60	12.4	YES

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