

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

County: **Douglas**
 Month/Year: **Aug-23**
 WTP : TP - **A**

System Name: **City of Glendale** id# **4100323**

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	0.04	0.04	0.04	off	0.06	0.04	0.06
2	0.04	off	0.04	0.04	off	0.04	0.04
3	0.05	off	0.05	0.04	0.05	off	0.05
4	0.06	off	0.04	off	off	0.04	0.06
5	0.04	off	0.04	0.04	0.06	off	0.06
6	off	off	0.04	0.06	0.06	0.04	0.06
7	0.08	off	off	0.05	0.05	0.05	0.08
8	0.04	0.04	0.05	0.06	0.06	0.04	0.06
9	off	off	0.06	0.04	0.05	0.08	0.08
10	0.04	0.04	0.05	0.05	0.04	0.05	0.05
11	off	off	0.05	0.05	0.05	0.07	0.07
12	0.04	off	0.06	0.06	0.05	0.05	0.06
13	off	off	0.05	0.06	0.05	0.05	0.06
14	0.04	off	0.06	0.05	0.06	0.04	0.06
15	0.04	off	0.05	0.05	0.07	0.05	0.07
16	0.04	off	0.07	0.06	0.06	0.04	0.07
17	0.05	off	0.07	0.06	0.07	0.06	0.07
18	0.04	off	0.05	0.07	0.07	0.04	0.07
19	off	off	0.06	0.08	0.05	0.05	0.08
20	off	off	0.06	0.06	0.08	0.05	0.08
21	0.03	off	0.07	0.08	0.08	0.03	0.08
22	0.05	off	0.07	0.07	0.08	0.07	0.08
23	off	off	0.06	0.09	0.06	0.04	0.09
24	0.05	off	0.08	0.05	0.06	0.05	0.08
25	off	off	0.06	0.06	0.07	0.06	0.07
26	0.04	off	0.04	0.06	0.06	0.04	0.06
27	off	off	0.06	0.05	0.05	0.05	0.06
28	0.05	off	0.06	0.08	0.08	0.06	0.08
29	off	off	0.07	0.07	0.07	0.04	0.07
30	off	off	0.08	0.08	0.08	0.05	0.08
31	off	off	0.07	0.05	0.06	0.06	0.07

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 Cl2 residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No
All turbidity readings < IFE ² triggers	<input checked="" type="radio"/> Yes / <input type="radio"/> No		

Notes:

PRINTED NAME: **SEAN NEHERSON**
 SIGNATURE: *[Signature]* DATE: **9/6/23**
 PHONE #: **(541) 863 1453** CERT #: **611**

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
Disinfection Giardia Log Inactiv:	0.5

System Name: City of Glendale id# 4100323 Month/Year: Aug-23

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	8:44	0.60	1100	660.0	19.0	7.70	12.9	YES
2	8:43	0.91	1100	1001.0	19.00	7.80	13.9	YES
3	9:14	0.98	1100	1078.0	18.00	7.70	14.4	YES
4	8:26	0.96	1100	1056.0	19.00	7.90	14.5	YES
5	9:47	0.96	1100	1056.0	19.0	7.80	14.0	YES
6	15:40	0.54	1100	594.0	19.0	7.80	13.3	YES
7	12:00	0.70	1100	770.0	19.0	7.70	13.1	YES
8	11:50	0.80	1100	880.0	19.0	7.90	14.2	YES
9	9:47	0.64	1100	704.0	19.0	8.00	14.5	YES
10	11:55	0.70	1100	770.0	19.0	7.90	14.1	YES
11	9:08	0.70	1100	770.0	19.0	8.00	14.6	YES
12	9:58	0.80	1100	880.0	19.0	7.80	13.7	YES
13	12:48	0.41	1100	451.0	19.0	8.00	14.1	YES
14	9:35	0.45	1100	495.0	19.0	7.90	13.7	YES
15	10:08	0.69	1100	759.0	20.0	7.70	12.2	YES
16	9:58	1.34	1100	1474.0	20.0	8.00	14.7	YES
17	9:35	0.52	1100	572.0	20.0	8.00	13.4	YES
18	15:47	0.99	1100	1089.0	19.0	7.80	14.0	YES
19	9:50	1.09	1100	1199.0	19.0	7.90	14.7	YES
20	9:55	0.55	1100	605.0	19.00	8.10	14.9	YES
21	15:40	0.66	1100	726.0	18.00	8.00	15.5	YES
22	12:25	1.00	1100	1100.0	17.00	7.80	16.0	YES
23	9:38	0.73	1100	803.0	17.0	7.90	16.1	YES
24	12:55	0.73	1100	803.0	17.0	7.90	16.1	YES
25	9:20	1.04	1100	1144.0	18.0	7.80	15.1	YES
26	12:24	0.84	1100	924.0	18.0	8.00	15.9	YES
27	9:45	0.61	1100	671.0	18.0	8.10	16.0	YES
28	9:45	0.90	1100	990.0	17.0	7.90	16.4	YES
29	12:35	0.87	1100	957.0	17.0	8.10	17.7	YES
30	8:50	0.90	1100	990.0	17.0	7.90	16.4	YES
31	15:40	1.03	1100	1133.0	17.0	8.00	17.3	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.