

OHA - Drinking Water Program -Turbidity Monitoring Report Form

County: **Douglas**

Conventional or Direct Filtration

Month/Year: **Feb-25**

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 ¹ [NTU]
1	0.03	off	0.04	0.03	0.04	0.04	0.04
2	0.03	off	0.04	0.05	0.04	0.03	0.05
3	0.03	off	0.04	0.05	0.04	0.03	0.05
4	off	off	0.05	0.09	0.04	0.03	0.09
5	0.03	0.04	0.05	0.10	0.08	off	0.10
6	off	off	0.04	0.06	0.05	0.04	0.06
7	0.05	0.11	0.05	0.07	0.06	off	0.11
8	off	off	0.04	0.06	0.04	0.10	0.10
9	0.03	0.04	0.08	0.03	0.04	0.04	0.08
10	off	off	0.04	0.04	0.04	0.06	0.06
11	0.04	off	0.07	0.05	0.03	0.06	0.07
12	0.04	off	0.03	0.05	0.05	0.05	0.05
13	off	off	0.05	0.05	0.03	0.04	0.05
14	0.04	0.03	0.03	off	0.03	0.04	0.04
15	off	off	0.03	0.04	0.04	0.04	0.04
16	0.05	0.05	0.04	0.06	0.05	off	0.06
17	off	off	0.04	0.06	0.08	0.03	0.08
18	0.04	0.04	0.04	0.04	off	0.04	0.04
19	0.10	off	0.03	0.04	0.04	0.03	0.10
20	off	off	0.04	0.04	0.04	0.03	0.04
21	0.03	0.04	0.04	off	0.05	0.04	0.05
22	0.03	off	0.03	0.05	0.04	0.04	0.05
23	off	off	0.03	0.04	0.03	0.03	0.04
24	0.03	off	0.04	0.04	0.04	0.05	0.05
25	0.04	off	0.03	0.04	0.05	0.03	0.05
26	off	off	0.04	0.04	0.04	0.06	0.06
27	off	off	0.04	0.05	0.04	0.09	0.09
28	off	off	0.05	0.05	0.05	0.03	0.05
29							
30							

Conventional or Direct Filtration

Monthly Summary (Answer Yes or No)

95% of 4-hour turbidity readings $\leq$ 0.3 NTU?

Yes / No

All 4-hour turbidity readings $\leq$ 1 NTU?

Yes / No

All turbidity readings < IFE² triggers

Yes / No

CT's met everyday?
(see back)

Yes / No

All Cl₂ residual at entry point
 $\geq$ 0.2 mg/l?

Yes / No

Notes:

PRINTED NAME: SEAN NEGERON

SIGNATURE: 

DATE: 3/4/25

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 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#: 4100323

Month/Year:

Feb-25

Disinfection
Giardia Log
Inactiv:

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
	:	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No
1	15:20	0.88	1100	968.0	8.0	7.90	29.9	YES
2	9:31	0.65	1100	715.0	9.00	8.20	30.3	YES
3	15:40	0.63	1100	693.0	8.00	8.10	31.2	YES
4	9:03	0.75	1100	825.0	7.00	7.80	30.4	YES
5	12:02	0.91	1100	1001.0	7.0	7.80	31.0	YES
6	12:32	0.76	1100	836.0	7.0	7.70	29.4	YES
7	15:38	0.86	1100	946.0	7.0	7.70	29.7	YES
8	8:51	0.96	1100	1056.0	7.0	7.50	28.0	YES
9	12:24	1.01	1100	1111.0	7.0	7.70	30.2	YES
10	11:58	0.79	1100	869.0	7.0	7.80	30.6	YES
11	9:37	0.87	1100	957.0	7.0	7.70	29.7	YES
12	9:05	0.81	1100	891.0	6.0	7.60	30.5	YES
13	9:20	0.82	1100	902.0	7.0	7.70	29.6	YES
14	15:53	0.90	1100	990.0	8.0	7.60	26.9	YES
15	12:17	0.84	1100	924.0	8.0	7.90	29.8	YES
16	9:15	0.90	1100	990.0	8.0	7.70	27.9	YES
17	12:08	0.90	1100	990.0	9.0	7.80	27.0	YES
18	8:53	0.75	1100	825.0	9.0	7.90	27.5	YES
19	9:43	0.88	1100	968.0	9.0	7.80	27.0	YES
20	9:21	0.85	1100	935.0	9.00	7.80	26.9	YES
21	15:59	0.88	1100	968.0	9.00	7.70	26.0	YES
22	15:42	0.91	1100	1001.0	9.00	7.70	26.1	YES
23	12:22	0.78	1100	858.0	10.0	7.60	23.2	YES
24	9:02	0.71	1100	781.0	10.0	7.30	20.7	YES
25	12:33	1.12	1100	1232.0	10.0	7.60	24.1	YES
26	16:03	0.95	1100	1045.0	9.0	7.50	24.4	YES
27	12:01	0.75	1100	825.0	10.0	7.50	22.3	YES
28	9:19	0.82	1100	902.0	10.0	7.60	23.3	YES
29								NO
30								NO

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