OHA - Drinking Water Program – Turbidity Monitoring Report Form County: Douglas
Conventional or Direct Filtration

System Name: TRI-CITY JW&SA ID #: OR4100549 WTP-:WTP-A Month/Year: APR 25

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	.035	.034	OFF	OFF	OFF	OFF	.035
2	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3	OFF	.053	.036	.035	.034	.034	.056
4	OFF	OFF	OFF	OFF	OFF	OFF	OFF
5	OFF	OFF	OFF	OFF	OFF	.037	.047
6	.034	.033	.033	OFF	OFF	OFF	.034
7	OFF	OFF	OFF	OFF	OFF	OFF	OFF
8	OFF	OFF	OFF	.038	.036	.033	.054
9	.033	.033	.033	OFF	OFF	OFF	.033
10	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11	OFF	.046	.041	.041	.040	.040	.076
12	OFF	OFF	OFF	OFF	OFF	OFF	OFF
13	OFF	OFF	OFF	OFF	OFF	.034	.042
14	.038	.028	OFF	OFF	OFF	OFF	.038
15	OFF	OFF	OFF	.044	.043	.040	.058
16	.042	.042	OFF	OFF	OFF	OFF	.042
17	OFF	OFF	OFF	OFF	OFF	.042	.045
18	.030	.036	.038	.037	OFF	OFF	.038
19	OFF	OFF	OFF	OFF	OFF	OFF	OFF
20	OFF	OFF	.049	.044	.044	.044	.064
21	.042	OFF	OFF	OFF	OFF	OFF	.042
22	OFF	OFF	OFF	OFF	.045	.043	.050
23	.043	.044	OFF	OFF	OFF	OFF	.044
24	OFF	OFF	OFF	OFF	.044	.043	.050
25	.044	.037	.044	OFF	OFF	OFF	.044
26	OFF	OFF	OFF	OFF	OFF	OFF	OFF
27	.039	.038	.037	.037	.038	OFF	.038
28	OFF	OFF	OFF	OFF	OFF	OFF	OFF
29	OFF	OFF	.046	.044	.042	.042	.058
30	.042	OFF	OFF	OFF	OFF	OFF	.042
31							

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of the 4-hour turbidity readings ≤ 0.3 NTU? (Yes) / No All the 4-hour turbidity readings ≤ 1 NTU? (Yes) / No All turbidity readings < IFE[2] triggers? (Yes) / No[2]	CT's met everyday? (see back) (Yes) / No	All Cl_2 residuals at entry point ≥ 0.2 mg/l? (Yes) / No

Notes:

PRINTED NAME: BRIAN KELLY

SIGNATURE: [signature] DATE: 5-1-25

PHONE #: (541) 580-2581 CERT #: D-8441 T-8301

[1] Including continuous turbidity 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. (OAR 333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program – Surface Water Quality Data Form

TRI-CITY JW&SA ID #: OR4100549 WTP-: WTP-A Month/Year: APR 25 Required Log Inactivation: .5

Date / Time	Minimum Cl_2 Residual at 1st User (C) [3]	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? [3]	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
1 / 5:35 AM	1.24	60	74	9.1	7.3	31	YES	773
2 / OFF	-	-	-	-	-	-	-	-
3 / 4:39 AM	.77	60	46	9.5	7.3	29	YES	772
4 / OFF	-	-	-	-	-	-	-	-
5 / 7:30 PM	1.44	60	86	10.4	7.4	23	Yes	767
6 / 8:00 AM	1.36	60	81	10.6	7.4	23	Yes	767
7 / OFF	-	-	-	-	-	-	-	-
8 / 12:59 PM	1.10	60	66	10.8	7.3	23	YES	764
9 / 3:00 AM	1.16	60	69	10.4	7.4	23	YES	764
10 / OFF	-	-	-	-	-	-	-	-
11 / 3:03 AM	1.88	60	52	10.5	7.3	22	YES	792
12 / OFF	-	-	-	-	-	-	-	-
13 / 5:55 PM	1.11	60	66	12.1	7.4	23	YES	770
14 / 6:53 AM	1.35	60	81	11.4	7.4	23	YES	770
15 / 11:52 AM	1.23	60	73	11.6	7.4	23	YES	793
16 / 2:58 AM	1.11	60	66	13.0	7.5	23	YES	793
17 / 7:16 PM	1.17	60	70	13.3	7.4	23	YES	791
18 / 1:02 AM	1.26	60	75	13.4	7.4	23	YES	791
19 / OFF	-	-	-	-	-	-	-	-
20 / 4:31 AM	1.15	60	69	12.4	7.3	23	YES	788
21 / 3:00 AM	1.23	60	73	13.1	7.6	28	YES	788
22 / 2:31 PM	1.14	60	68	13.3	7.5	23	YES	789
23 / 6:00 AM	1.23	60	73	12.8	7.6	28	YES	789
24 / 3:52 PM	1.15	60	69	13.1	7.5	23	YES	795
25 / 7:00 AM	1.25	60	75	13.6	7.6	28	YES	795
26 / OFF	-	-	-	-	-	-	-	-
27 / 1:10 AM	1.23	60	73	13.3	7.5	23	YES	788
28 / OFF	-	-	-	-	-	-	-	-
29 / 9:15 AM	1.31	60	78	12.4	7.5	23	YES	788
30 / 2:49 AM	1.19	60	71	14.2	7.7	23	YES	788
31 /								

[3] If Cl_2 at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.

Download form at: www.public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-conv-direct.pdf