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: OCT 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	OFF	OFF	OFF	OFF	.039	.032	.046
2	.032	.031	.031	OFF	OFF	OFF	.032
3	OFF	OFF	OFF	OFF	.039	.035	.041
4	.038	.040	.041	OFF	OFF	OFF	.041
5	OFF	OFF	OFF	OFF	.034	.031	.045
6	.033	.032	.031	OFF	OFF	OFF	.033
7	OFF	OFF	.062	.032	.033	.032	.120
8	.035	OFF	OFF	OFF	OFF	OFF	.035
9	OFF	.042	.032	.030	.030	.030	.052
10	OFF	OFF	OFF	.031	.031	OFF	.039
11	OFF	OFF	OFF	OFF	OFF	.036	.039
12	.031	.030	OFF	OFF	OFF	OFF	.092
13	OFF	OFF	.032	.031	.034	OFF	.063
14	OFF	OFF	OFF	.032	.031	.031	.050
15	.061	OFF	OFF	OFF	OFF	OFF	.075
16	OFF	.036	.032	.031	.031	OFF	.093
17	OFF	OFF	OFF	OFF	OFF	OFF	.037
18	.036	.039	.053	.039	OFF	OFF	.039
19	OFF	OFF	OFF	OFF	OFF	.043	.043
20	.040	.052	OFF	OFF	OFF	OFF	.054
21	OFF	OFF	OFF	.046	.031	.031	.046
22	OFF	OFF	OFF	.034	.029	.028	.041
23	OFF	OFF	OFF	.031	.030	.051	.096
24	OFF	OFF	OFF	.035	.031	OFF	.035
25	OFF	OFF	OFF	OFF	OFF	OFF	OFF
26	OFF	OFF	.038	.031	.032	OFF	.039
27	OFF	OFF	OFF	.033	.034	.033	.037
28	OFF	OFF	OFF	.034	.033	.158	.181
29	OFF	OFF	OFF	.034	OFF	OFF	.037
30	OFF	OFF	OFF	OFF	OFF	OFF	OFF
31	OFF	.039	.061	.034	.042	0.220	0.220

Conventional or Direct Filtration

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]

Monthly Summary (Answer Yes or No)

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: 11-3-25

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 Eff. (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: OCT 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 / 5:16 PM	1.29	60	77	17.4	7.1	15	YES	803
2 / 9:46 AM	1.33	60	79	16.4	7.1	16	YES	803
3 / 3:57 PM	1.28	60	76	16.9	7.2	15	YES	804
4 / 2:50 AM	1.33	60	80	16.7	7.3	16	YES	804
5 / 2:42 PM	1.25	60	75	17.0	7.2	15	Yes	805
6 / 8:00 AM	1.26	60	75	16.6	7.2	15	Yes	805
7 / 9:39 AM	1.20	60	72	16.7	7.2	15	Yes	806
8 / 1:00 AM	1.22	60	73	16.6	7.4	15	Yes	806
9 / 4:36 AM	1.23	60	73	16.6	7.3	15	Yes	804
10 / 11:12 AM	1.00	60	60	15.2	7.3	15	Yes	797
11 / 9:05 PM	1.12	60	67	14.9	7.3	23	Yes	802
12 / 7:30 AM	1.20	60	72	13.9	7.2	23	Yes	802
13 / 6:53 AM	1.13	60	67	14.2	7.2	23	Yes	812
14 / 10:46 AM	1.07	60	64	13.6	7.7	22	Yes	803
15 / 12:30 AM	1.23	60	73	13.7	7.2	23	Yes	803
16 / 4:28 AM	1.19	60	71	14.0	7.2	23	Yes	806
17 / 11:50 PM	1.15	60	69	13.8	7.3	23	YES	808
18 / 1:15 AM	1.25	60	75	13.7	7.3	23	YES	808
19 / 7:11 PM	1.12	60	67	14.0	7.2	23	YES	800
20 / 6:20 AM	1.14	60	68	14.1	7.3	23	YES	800
21 / 10:55 AM	1.01	60	60	14.2	7.3	22	YES	794
22 / 12:59 PM	1.10	60	66	13.9	7.3	23	YES	806
23 / 10:52 AM	1.13	60	67	13.5	7.3	23	YES	808
24 / 10:21 AM	1.15	60	69	13.5	7.3	23	YES	807
25 / OFF	–	–	–	–	–	–	–	–
26 / 9:35 AM	1.15	60	69	13.3	7.3	23	YES	801
27 / 10:11 AM	1.14	60	68	12.5	7.2	23	YES	794
28 / 11:30 AM	1.15	60	69	12.1	7.4	23	YES	782
29 / 10:44 AM	1.06	60	63	12.1	7.4	22	YES	789
30 / OFF	–	–	–	–	–	–	–	–
31 / 12:24 AM	1.09	60	65	12.5	7.3	22	YES	789

[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