

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

County: **Columbia**

**Jan-2023**

System Name: City of Rainier		ID#: 4100689		WTP : TP -			
Day	12 AM 00:00 [NTU]	4 AM 04:00 [NTU]	8 AM 08:00 [NTU]	NOON 12:00 [NTU]	4 PM 16:00 [NTU]	8 PM 20:00 [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1	OFF	OFF	0.09	0.06	OFF	OFF	0.09
2	0.07	0.08	0.05	OFF	0.07	OFF	0.08
3	0.08	0.08	OFF	0.06	0.05	0.05	0.08
4	0.05	0.06	0.05	0.10	0.05	0.06	0.10
5	0.05	0.06	0.05	0.05	0.12	0.06	0.12
6	OFF	0.05	0.05	0.06	0.05	OFF	0.06
7	0.09	OFF	0.06	OFF	0.05	0.05	0.09
8	0.06	OFF	0.05	OFF	0.05	0.05	0.06
9	0.05	0.05	0.05	0.04	0.06	0.05	0.06
10	0.06	0.05	0.05	0.06	0.07	OFF	0.07
11	0.05	OFF	0.05	0.06	OFF	0.08	0.08
12	0.05	0.06	0.06	0.06	0.06	0.05	0.06
13	0.07	0.07	OFF	0.70	0.09	OFF	0.70
14	0.06	0.06	OFF	0.10	OFF	0.08	0.10
15	0.10	0.09	OFF	0.49	0.24	0.08	0.49
16	OFF	0.07	0.06	0.10	0.13	0.07	0.13
17	0.08	0.09	0.07	0.12	0.10	0.07	0.12
18	0.09	0.09	0.07	0.13	0.11	0.08	0.13
19	0.12	0.10	0.06	0.12	0.07	OFF	0.12
20	0.09	OFF	0.11	0.09	0.08	0.07	0.11
21	0.08	OFF	0.07	0.11	0.09	OFF	0.11
22	0.09	OFF	0.07	0.10	0.08	OFF	0.10
23	0.09	OFF	0.09	0.11	0.07	0.07	0.11
24	0.09	0.06	0.07	0.09	0.07	0.09	0.09
25	0.10	0.08	0.06	0.08	0.07	OFF	0.10
26	0.11	OFF	0.06	0.11	0.07	0.09	0.11
27	0.12	0.07	0.08	OFF	0.08	0.07	0.12
28	0.11	0.09	OFF	0.08	OFF	0.09	0.11
29	OFF	0.07	OFF	0.11	0.07	OFF	0.11
30	0.10	0.07	0.08	OFF	0.13	0.09	0.13
31	0.16	0.14	OFF	0.12	0.08	0.07	0.16

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	<b>YES</b>	CT's met everyday?	All Cl2 residual at entry point
All 4-hour turbidity readings ≤ 1 NTU?	<b>YES</b>	See page 2	≥ 0.2 mg/l? <b>YES</b>
All turbidity readings < IFE <sup>2</sup> triggers	<b>YES</b>		

Notes: 1/14/23 -0:00 and 4:00 - Effluent turbidimeter failed, no flow to turbidimeter. Used highest filter turbidity.	PRINTED NAME: Elizabeth Lawrence	
	SIGNATURE: <i>Elizabeth Lawrence</i>	DATE: 1/3/23
	PHONE #: (360) 281-5613	CERT #: T004530

OHA - Drinking Water Program - Surface Water Quality Data Form							WTP - :	
System Name: CITY OF RAINIER			ID#: 4100689		Jan-2023		Disinfection <i>Giardia</i> Log Inactive:	0.5
Day	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>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.7	160.0	115.2	13.0	7.2	16.2	YES	1000
2	0.7	160.0	118.4	12.0	7.2	17.7	YES	1000
3	0.8	160.0	123.2	12.0	7.2	17.7	YES	1000
4	0.8	160.0	127.8	12.1	7.2	17.8	YES	1000
5	0.8	160.0	130.7	12.8	7.3	17.1	YES	1000
6	0.8	160.0	123.0	13.3	7.3	16.7	YES	1000
7	0.8	160.0	120.8	13.6	7.4	16.7	YES	1000
8	0.7	160.0	119.0	13.6	7.4	16.8	YES	1000
9	0.8	160.0	128.8	13.5	7.4	17.2	YES	1000
10	0.8	160.0	123.2	13.5	7.4	17.2	YES	1000
11	0.7	160.0	113.6	13.1	7.5	17.6	YES	1000
12	0.7	160.0	113.9	13.2	7.5	17.6	YES	1000
13	0.7	160.0	116.6	14.2	7.5	16.5	YES	1000
14	0.6	160.0	94.4	16.9	7.4	13.3	YES	1000
15	0.6	160.0	91.2	13.8	7.4	16.3	YES	1000
16	0.6	160.0	100.8	13.0	7.6	18.6	YES	1000
17	0.7	160.0	104.8	13.2	7.6	18.2	YES	1000
18	0.7	160.0	113.0	12.8	7.6	18.8	YES	1000
19	0.7	160.0	114.7	12.1	7.6	19.8	YES	1000
20	0.7	160.0	110.4	12.4	7.6	19.6	YES	1000
21	0.7	160.0	104.0	12.0	7.6	20.1	YES	1000
22	0.6	160.0	102.4	11.9	7.6	20.2	YES	1000
23	0.7	160.0	108.8	12.7	7.6	18.9	YES	1000
24	0.7	160.0	104.0	12.6	7.6	19.3	YES	1000
25	0.6	160.0	102.4	12.5	7.6	19.6	YES	1000
26	0.7	160.0	106.6	12.6	7.6	19.4	YES	1000
27	0.6	160.0	103.0	12.7	7.6	19.2	YES	1000
28	0.6	160.0	90.2	13.1	7.6	18.5	YES	1000
29	0.6	160.0	89.4	12.5	7.6	19.2	YES	1000
30	0.6	160.0	93.6	11.1	7.6	21.4	YES	1000
31	0.6	160.0	103.5	11.7	7.6	20.6	YES	1000