

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

County: **Jackson**  
 Month/Year: **April-22**

System Name:	City of Rogue River		ID#: 41-00712				WTP : TP -	WTP-A
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]	
1	---	---	0.04	0.04	0.04	0.04	0.04	
2	---	---	0.04	0.04	0.04	---	0.04	
3	0.04	0.05	0.04	0.05	0.04	---	0.05	
4	---	---	---	---	---	---	0.00	
5	---	---	0.04	0.04	0.06	0.10	0.10	
6	---	---	---	---	---	---	0.00	
7	---	---	---	0.05	0.03	0.07	0.07	
8	0.04	0.04	0.04	0.03	0.04	0.04	0.04	
9	0.04	0.06	0.04	0.05	0.03	0.04	0.06	
10	0.05	0.04	0.03	---	---	---	0.05	
11	---	---	0.03	0.03	0.04	0.04	0.04	
12	0.04	0.07	0.05	0.03	---	0.04	0.07	
13	---	---	---	---	---	---	0.00	
14	---	---	0.06	---	---	---	0.06	
15	---	---	---	---	---	---	0.00	
16	---	---	---	---	---	---	0.00	
17	---	---	---	---	---	---	0.00	
18	---	---	---	---	---	---	0.00	
19	---	---	---	---	---	---	0.00	
20	---	---	---	---	---	---	0.00	
21	---	---	---	---	---	---	0.00	
22	---	---	---	---	---	---	0.00	
23	---	---	---	---	---	---	0.00	
24	---	---	---	---	---	---	0.00	
25	---	---	---	0.07	---	0.05	0.07	
26	0.08	0.20	0.06	---	0.06	0.05	0.20	
27	---	---	---	0.05	0.05	0.05	0.05	
28	0.04	0.05	0.04	0.04	0.05	0.04	0.05	
29	0.04	---	0.05	0.05	0.03	0.03	0.05	
30	0.04	0.10	---	---	---	---	0.10	

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <span style="float:right">Yes / No</span>	CT's met everyday? (see back) <span style="float:right">Yes / No</span>	All Cl2 residual at entry point ≥ 0.2 mg/l? <span style="float:right">Yes / No</span>
All 4-hour turbidity readings ≤ 1 NTU? <span style="float:right">Yes / No</span>		
All turbidity readings < IFE <sup>2</sup> triggers <span style="float:right">Yes / No</span>		

	<b>PRINTED NAME: Michael Bollweg</b>	
	<b>SIGNATURE: Michael Bollweg</b>	<b>DATE: 5.9.22</b>
	<b>PHONE #: ( 541 ) 415-1117</b>	<b>CERT #: 5296</b>

<sup>1</sup> 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. <sup>2</sup> IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - :	WTP-A
Disinfection <i>Giardia</i> Log Inactive:	0.50

System Name: City of Rogue River ID#: 41-00712 Month/Year: April-22

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup> [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? <sup>3</sup> Yes / No	Peak Hourly Demand Flow [GPM]
1	1.56	76	119	11.5	7.2	20	YES	759
2	1.54	76	117	14.3	7.1	16	YES	745
3	1.42	76	108	12.9	7.1	17	YES	765
4								
5	0.92	76	70	11.1	7.5	21	YES	774
6								
7	1.34	76	102	13.6	7.2	17	YES	765
8	1.30	76	99	14.1	7.1	16	YES	763
9	1.36	76	103	12.4	7.1	18	YES	759
10	1.60	76	122	12.9	7.3	19	YES	757
11	1.20	76	91	11.3	7.3	20	YES	772
12	1.15	76	87	10.2	7.4	22	YES	765
13								
14	1.62	76	123	10.5	7.2	21	YES	756
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25	1.56	76	119	13.4	7.6	20	YES	751
26	1.27	76	97	12.6	7.8	22	YES	759
27	1.60	76	122	13.1	7.8	22	YES	764
28	1.49	76	113	13.4	7.9	22	YES	756
29	1.00	76	76	12.8	7.8	21	YES	753
30	1.53	76	116	13.6	7.9	22	YES	735

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

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Return by 10th of following month by email, fax, or mail to:  
 dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350