

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Douglas

Conventional or Direct Filtration

Month/Year: Jan-26

System Name:	City of Roseburg		ID#: 41-00720				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 <sup>1</sup> [NTU]	
1	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
2	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
3	0.03	0.03	0.03	0.03	0.03	0.03	0.04	
4	0.03	0.03	0.03	0.03	0.03	0.03	0.04	
5	0.03	0.03	0.03	0.03	0.03	0.03	0.04	
6	0.03	0.03	0.03	0.03	0.03	0.03	0.04	
7	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
8	0.03	0.03	0.03	0.03	3.00	3.00	0.03	
9	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
10	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
11	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
12	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
13	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
14	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
15	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
16	0.03	0.03	0.03	0.03	0.03	0.03	0.04	
17	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
18	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
19	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
20	0.03	0.03	0.03	0.03	0.03	0.02	0.03	
21	0.03	0.03	0.03	0.02	0.03	0.03	0.03	
22	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
23	0.03	0.03	0.02	0.02	0.02	0.02	0.02	
24	0.02	0.03	0.03	0.03	0.03	0.03	0.03	
25	0.02	0.02	0.02	0.02	0.02	0.03	0.03	
26	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
27	0.03	0.02	0.03	0.02	0.03	0.02	0.03	
28	0.02	0.03	0.02	0.02	0.03	0.03	0.03	
29	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
30	0.03	0.03	0.03	0.03	0.03	0.03	0.03	
31	0.03	0.03	0.03	0.03	0.03	0.03	0.11	

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings $\leq$ 0.3 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl2 residual at entry point $\geq$ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All 4-hour turbidity readings $\leq$ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No		
All turbidity readings < IFE <sup>2</sup> triggers <input checked="" type="radio"/> Yes / <input type="radio"/> No		

Notes:	PRINTED NAME: Jason Anderson	
	SIGNATURE: <i>Jason Anderson</i>	DATE: 2/3/2026
	PHONE #: (541) 492-7030	CERT # 7030

<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)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

<b>System Name:</b> City of Roseburg				<b>ID#:</b> 41-00720	<b>Month/Year:</b> Jan-26	<b>WTP - :</b>	
						<b>Disinfection Giardia Log Inactiv:</b>	0.5

Date / Time	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	1.18	130.9	154.5	6.1	7.63	32.0	Yes	3000
2	1.2	141.7	170.1	6.7	7.68	31.3	Yes	2800
3	1.17	139.1	162.7	8.3	7.63	27.5	Yes	2800
4	1.23	139.7	171.8	8.3	7.65	27.9	Yes	2800
5	1.15	127.8	146.9	8.3	7.64	27.5	Yes	3100
6	1.12	145.2	162.7	7.8	7.58	27.8	Yes	2750
7	1.22	143.7	175.3	7.8	7.60	28.3	Yes	2750
8	1.15	105.6	121.4	7.2	7.61	29.3	Yes	3600
9	1.11	110.2	122.4	6.1	7.57	31.0	Yes	3600
10	1.04	138.8	144.3	6.1	7.28	27.7	Yes	2800
11	1.13	140.2	158.5	6.1	7.56	31.0	yes	2800
12	1.17	113.4	132.7	6.1	7.51	30.6	yes	3500
13	1.22	122.7	149.7	5.6	7.51	31.8	yes	3200
14	1.2	126.7	152.0	5.6	7.48	31.4	yes	3100
15	1.22	127.9	156.0	5.0	7.59	34.1	Yes	3100
16	1.16	129.0	149.6	5.0	7.65	34.6	Yes	3100
17	1.11	141.7	157.3	5.0	7.65	34.4	Yes	2800
18	1.11	151.0	167.7	5.0	7.61	33.9	Yes	2600
19	1.06	116.2	123.2	5.0	7.64	34.1	Yes	3450
20	1.11	116.2	129.0	5.0	7.66	34.5	Yes	3450
21	1.01	131.7	133.1	5.0	7.69	34.5	Yes	3000
22	1.11	119.0	132.1	5.0	7.36	31.0	yes	3300
23	1.12	120.3	134.7	5.0	7.69	35.0	Yes	3300
24	1.07	140.2	150.1	5.0	7.55	33.0	Yes	2800
25	1.11	152.6	169.4	3.9	7.52	35.4	Yes	2600
26	1.11	126.7	140.6	3.9	7.55	35.8	Yes	3100
27	1.17	126.7	148.2	3.9	7.62	37.0	Yes	3100
28	1.17	120.3	140.7	3.9	7.67	37.7	Yes	3300
29	1.18	121.5	143.4	5.0	7.77	36.3	Yes	3300
30	1.15	125.3	144.1	6.1	7.78	33.6	Yes	3200
31	1.08	141.6	152.9	6.1	7.75	33.0	Yes	2750

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

Revised October 2013