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

County: Douglas

Syste	m Name: S	Sutherlin, C	ity of ID# C	R4100847	WTP: WTP-A	MONTH/YEAR	May,2022			
Nonpariel										
Day	12 AM NTU	4 AM NTU	8 AM NTU	Noon NTU	4 PM NTU	8 PM NTU	Highest Reading o			
1	OFF	OFF	OFF	OFF	OFF	OFF	NTU OFF			
2	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
3	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
4	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
5	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
6	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
7	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
8	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
9	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
10	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
11	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
12	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
13	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
14	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
15	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
16	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
17	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
18	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
19	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
20	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
21	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
22	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
23	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
24	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
25	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
26	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
27	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
28	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
29	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
30	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
31	OFF	OFF	OFF	OFF	OFF	OFF	OFF			
	Convention	al or Direct Filtra								
95% of the 4-hour turbidity reading ≤ 0.3 NTU Yes No All the 4-hour turbidity readings ≤ 1 NTU? All turbidity readings < IFE² triggers? Notes:				CT's met everyday? (see back) (Yes)No		mmary (Answer Yes or No) All Cl₂ residual at entry point ≥ 0.2mg/l? Yes No				
oles:				Printed Name	John John	Baghman				
				Phone #: (Ally		ate: 6/2/22 ert#: 6900			

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 = Individual Filter Effluent. (OAR 333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

Sutherli	n, City of	ID# OR4100	0847	WTP: WTP-A	MONTH/YEA	R May,2022		Required Log Inactivation: 1.0
				Nonpariel				
Date/ Time	Minimum CL ₂ Residual at 1st user (C) ³	Contact Time (T)	Actual CT	Temp.	pН	Required CT	CT Met ³	Peak Hourly Demand Flow
	PPM or MG/L	Minutes	CxT	°C		Use Tables	Y/N	[GPM]
1/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
2/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
3/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
4/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
5/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
6/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
7/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
8/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
9/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
10/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
11/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
12/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
13/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
14/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
15/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
16/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
17/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
18/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
19/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
20/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
21/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
22/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
23/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
24/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
25/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
26/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
27/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
28/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
29/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
30/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF
31/ OFF	OFF	50.9	OFF	OFF	OFF	OFF	OFF	OFF

³ If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.