

OHA - Drinking Water Services – Turbidity Monitoring Report Form County:
Slow Sand, Membrane, Diatomaceous Earth Filtration or Unfiltered Systems

System Name: TWA ID #: _____ WTP: _____ Month/Year: December/2024

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				.05			.05
2				.05			.05
3				.05			.06
4				.05			.06
5				.06			.08
6				.06			.06
7				.06			.06
8				.06			.06
9				.06			.06
10				.06			.06
11				.07			.07
12				.07			.07
13				.07			.07
14				.07			.07
15				.08			.08
16				.09			.10
17				.10			.12
18				.15			.15
19				.16			.16
20				.18			.20
21				.16			.18
22				.17			.18
23				.18			.18
24				.18			.18
25				.20			.20
26	power out				plant down		
27	power out				plant down		
28	power out				plant down		
29				.25			.25
30				.30			.30
31	plant down				maintenance		

Slow Sand/Membrane/DE Filtration/Unfiltered Monthly Summary 95% of daily turbidity readings ≤ 1 NTU? ² <u>Yes / No</u> All daily turbidity readings ≤ 5 NTU? <u>Yes / No</u>	Monthly Summary (Answer Yes or No)	
	CT's met everyday? (see back) <u>Yes / No</u>	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <u>Yes / No</u>
Notes:	PRINTED NAME: <u>Jeff Burch</u>	
	SIGNATURE: <u>Jeff Burch</u>	DATE: <u>609/1</u>
	PHONE #: <u>(503) 816-0958</u>	CERT #: <u>1-10-25</u>

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 Filtered systems only.

OHA - Drinking Water Services – Surface Water Quality Data Form

System Name: Twa ID #: _____ WTP: _____ Month/Year: December/2024

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT	[°C]		Use tables	Yes / No	[GPM]
1 13:30	.91	7.2	65.52	13.8	7.80	26	Yes	10
2 14:05	.95		68.4	10.2	7.80	26	Yes	10
3 14:20	.97		69.84	10.0	7.60	27	Yes	10
4 14:20	.92		66.24	10.0	7.60	26	Yes	10
5 14:45	.90		64.8	9.8	7.40	29	Yes	10
6 14:55	.94		67.68	9.8	7.40	29	Yes	10
7 15:35	.93		66.96	9.6	7.20	24	Yes	10
8 15:15	.91		65.52	9.6	7.20	24	Yes	10
9 17:30	.99		71.28	9.5	7.60	24	Yes	10
10 15:00	1.02		73.44	9.9	7.80	24	Yes	10
11 15:00	1.05		75.6	9.3	7.80	24	Yes	10
12 16:00	1.11		79.92	9.1	7.80	24	Yes	10
13 19:00	1.10		79.2	9.0	7.80	24	Yes	10
14 14:30	1.01		72.72	9.5	7.80	24	Yes	10
15 16:00	.83		59.76	9.6	7.80	24	Yes	10
16 16:55	.98		70.56	10.3	7.80	27	Yes	10
17 15:45	.96		69.12	10.6	7.80	27	Yes	10
18 16:05	.93		66.96	10.6	7.80	26	Yes	10
19 20:45	.86		61.92	10.9	7.80	26	Yes	10
20 16:00	.89		64.08	10.9	7.80	26	Yes	10
21 15:05	.96		69.12	11.3	7.80	27	Yes	10
22 15:00	.94		67.68	11.2	7.80	26	Yes	10
23 15:00	.98		70.56	11.3	7.80	26	Yes	10
24 18:00	.82		59.64	11.9	7.80	27	Yes	10
25 13:00	.89		64.08	11.8	7.80	27	Yes	10
26 /	Plant	Down			power		outage	10
27 /	plant	Down			power		outage	10
28 /	plant	Down			power		outage	10
29 17:30	.78		56.16	11.3	7.80	27	Yes	10
30 14:00	.80		57.6	11.9	7.80	27	Yes	10
31 /	Plant	Down			mainline			10

³ If Cl₂ at entry point < 0.2 mg/l OR CT not met, notify DWS within 24 hours.

Revised November 2022

Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-ait-unfiltered.pdf

Return by 10th of following month by email, fax, or mail to:

dwp_dmce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350