

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

System Name: VERNONIA, CITY OF ID #: OR4100922 WTP:-WTP-A Month/Year: NOV, 2021

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day [NTU]
1	off	off	off	.03	off	off	.19
2	↓	↓	.03	.03	off	↓	.20
3	↓	↓	off	.03	off	↓	.15
4	↓	↓	.03	.05	off	↓	.25
5	↓	↓	.03	.05	.06	↓	.19
6	↓	↓	.03	.03	.08	↓	.17
7	↓	↓	.03	.05	.03	↓	.20
8	↓	↓	.03	.05	off	↓	.17
9	↓	↓	.04	.04	.09	↓	.18
10	↓	↓	.03	.04	.15	↓	.20
11	↓	↓	.03	.03	.18	↓	.18
12	↓	↓	.03	.04	.04	↓	.22
13	↓	↓	off	.03	.05	↓	.15
14	↓	↓	off	.07	.05	.06	.15
15	↓	↓	.05	.04	off	off	.12
16	↓	↓	.15	.03	.07	↓	.15
17	↓	↓	.03	.03	off	↓	.13
18	↓	↓	.03	.03	off	↓	.15
19	↓	↓	.05	.03	off	↓	.19
20	↓	↓	.05	.03	.07	↓	.20
21	↓	↓	.03	.03	.05	↓	.20
22	↓	↓	.06	.03	.03	↓	.21
23	↓	↓	.03	.03	off	↓	.20
24	↓	↓	.03	.04	.03	↓	.20
25	↓	↓	.03	.03	.03	.08	.25
26	↓	↓	.03	.03	.04	off	.25
27	↓	↓	.03	.03	.06	.05	.15
28	↓	↓	.04	.03	.09	off	.20
29	↓	↓	.02	.05	.05	off	.15
30	↓	↓	.02	.03	off	off	.15
31							

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of the 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	All Cl ₂ residuals at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	
All the 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No			
All turbidity readings < IFE ² triggers? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No			
Notes: Highest NTU of Day is Right Before a BxV	PRINTED NAME: Jeff Buch		
	SIGNATURE: Jeff Buch	DATE: 12-2-21	
	PHONE #: 503 1429-6921	CERT #: 6091	

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 = Individ. Filter Eff. (OAR 333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

VERNONIA, CITY OF ID #: OR4100922 WTP.: WTP-A Month/Year: **NOV. 2021**

Required Log Inactivation: **0.5**

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/	2.3	26	60	10	7.3	48	Yes	720
2/	2.1		55	10	7.3	47	Yes	
3/	2.1		55	10	7.3	47	Yes	
4/	2.1		55	11	7.3	44	Yes	
5/	2.0		52	12	7.3	40	Yes	
6/	2.2		57	11	7.3	44	Yes	
7/	2.1		55	11	7.3	44	Yes	
8/	2.2		57	10	7.3	47	Yes	
9/	2.0		52	10	7.3	46	Yes	
10/	2.0		52	11	7.3	43	Yes	
11/	2.4		62	12	7.3	42	Yes	
12/	1.9		49	11	7.3	43	Yes	
13/	1.9		49	10	7.3	46	Yes	
14/	2.0		52	10	7.3	46	Yes	
15/	1.9		49	10	7.3	46	Yes	
16/	2.3		60	10	7.3	48	Yes	
17/	2.2		57	10	7.3	47	Yes	
18/	2.2		57	10	7.3	47	Yes	
19/	2.1		55	10	7.4	50	Yes	
20/	2.1		55	10	7.3	47	Yes	
21/	2.1		55	10	7.3	47	Yes	
22/	2.0		52	10	7.3	46	Yes	
23/	2.1		55	10	7.3	47	Yes	
24/	2.1		55	10	7.3	47	Yes	
25/	2.4		62	9	7.3	48	Yes	
26/	2.1		55	10	7.3	47	Yes	
27/	2.0		52	10	7.3	46	Yes	
28/	1.9		49	10	7.3	46	Yes	
29/	2.0		52	10	7.3	46	Yes	
30/	2.0		52	10	7.3	46	Yes	
31/								

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