

September 2025

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

Name: Vernonia, City of ID# OR4100922 WTP:WTP-A Month/Year:

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	OFF	.05	OFF	.04	.04	OFF	.17
2	↓	OFF	.05	OFF	.05	.05	.15
3	↓	↓	.04	.07	OFF	OFF	.13
4	↓	.06	.04	.04	↓	↓	.15
5	.06	OFF	OFF	.07	↓	↓	.14
6	OFF	↓	↓	.06	.06	.06	.17
7	↓	↓	↓	.06	.06	OFF	.19
8	↓	↓	↓	OFF	.05	.06	.15
9	↓	↓	↓	.05	.08	OFF	.13
10	↓	↓	.05	.05	OFF	↓	.07
11	↓	.06	.05	OFF	.08	↓	.18
12	↓	OFF	.05	.05	OFF	↓	.10
13	↓	.04	OFF	OFF	.08	↓	.12
14	↓	OFF	.05	.05	.05	↓	.14
15	↓	↓	.05	OFF	.05	.06	.16
16	↓	↓	OFF	.04	.06	OFF	.14
17	↓	↓	.05	.06	OFF	↓	.13
18	.06	↓	OFF	OFF	.09	↓	.12
19	OFF	↓	↓	.05	.07	↓	.16
20	↓	↓	.05	.05	.05	↓	.13
21	↓	↓	.05	.05	.05	↓	.14
22	↓	↓	.05	OFF	OFF	↓	.14
23	.05	↓	OFF	.05	.07	↓	.15
24	OFF	↓	.05	.05	OFF	↓	.10
25	↓	.05	.05	OFF	↓	.05	.15
26	↓	OFF	OFF	.05	.06	OFF	.20
27	↓	↓	.06	.08	.06	↓	.14
28	↓	↓	.06	.07	OFF	↓	.13
29	↓	.06	.07	OFF	↓	↓	.15
30	↓	OFF	.05	.09	↓	↓	.15
31							

Conventional or Direct Filtration Monthly Summary		Monthly Summary (Answer Yes or No)	
95% of the 4-hour turbidity readings < 0.3 NTU? ☒ Yes / ☐ No All the 4-hour turbidity readings < NTU? ☒ Yes / ☐ No All turbidity reading < IFE ² triggers? ☒ Yes / ☐ No ²		CT's met everyday? (see back) ☒ Yes / ☐ No All Cl ² residuals at entry point > 0.2 mg/l? ☒ Yes / ☐ No	
Notes:		PRINTED NAME: Jeff Berch SIGNATURE: <i>[Signature]</i> Date: 10-10-25 Phone # 503-429-6921 CERT# 6091	

¹ Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12AM" - "8PM" may not correspond to continuous readings' maximum.

² IFE = Indivd. Filter Effl. (OAR 333-061-0040(1)(d)(B&C))

September 2025

OHA - Drinking Water Program - Surface Water Quality Data Form - Giardia Inactivation								
Name: Vernonia, City of ID# OR4100922 WTP:- Month/Year:							Log Requirement: 0.5	
Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use Tables	Yes / No	[GPM]
1/ 3:40 PM	1.3	34	44	20	7.3	21	yes	605
2/ 1:30 PM	1.3	34	44	20	7.3	21		605
3/ 1:45 PM	1.3	34	44	21	7.3	20		605
4/ 12:00 PM	1.3	34	44	21	7.4	21		605
5/ 11:00 AM	1.3	34	44	20	7.3	21		605
6/ 2:15 PM	1.3	34	44	20	7.3	21		605
7/ 11:30 AM	1.3	34	44	20	7.4	22		605
8/ 2:20 PM	1.4	34	48	20	7.4	22		605
9/ 2:00 PM	1.4	34	48	20	7.4	22		605
10/ 12:00 PM	1.0	34	34	20	7.3	21		605
11/ 8:15 AM	1.2	34	41	19	7.3	23		605
12/ 10:00 AM	1.3	34	44	19	7.3	23		605
13/ 2:00 PM	1.4	34	48	19	7.3	23		605
14/ 12:00 PM	1.4	34	48	19	7.3	23		605
15/ 8:30 AM	1.4	34	48	19	7.3	23		605
16/ 11:30 AM	1.3	34	44	18	7.4	25		605
17/ 9:25 AM	1.2	34	41	17	7.3	26		605
18/ 10:00 AM	1.4	34	48	17	7.3	26		605
19/ 11:55 AM	1.4	34	48	17	7.4	27		605
20/ 12:30 AM	1.4	34	48	17	7.4	27		605
21/ 1:00 AM	1.3	34	44	17	7.3	26		605
22/ 10:00 AM	1.4	34	48	17	7.3	26		605
23/ 1:30 PM	1.9	34	65	18	7.3	26		605
24/ 2:50 PM	1.7	34	58	15	7.3	30		605
25/ 8:00 AM	1.5	34	51	15	7.3	29		605
26/ 12:30 PM	1.5	34	51	15	7.3	29		605
27/ 8:30 AM	1.5	34	51	15	7.3	29		605
28/ 9:30 AM	1.5	34	51	15	7.3	29		605
29/ 11:00 AM	1.5	34	51	15	7.3	29		605
30/ 10:12 AM	1.4	34	48	15	7.3	29		605
31/		34						605

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