

OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: Douglas
 Month/Year: May-23

System Name:	USFS Steamboat Work Center		ID#: 41	01091		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 ¹ [NTU]
1	pol	pol	pol	0.03	pol	pol	0.03
2							
3	pol	pol	pol	0.03	pol	pol	0.03
4							
5	pol	pol	pol	0.03	pol	pol	0.03
6							
7							
8	pol	pol	pol	0.03	pol	pol	0.03
9							
10	pol	pol	pol	0.03	pol	pol	0.03
11							
12							
13	pol	pol	pol	0.03	pol	pol	0.03
14							
15	pol	pol	pol	0.03	pol	pol	0.03
16							
17							
18	pol	pol	pol	0.03	pol	pol	0.03
19							
20							
21							
22	pol	pol	pol	0.03	pol	pol	0.03
23							
24							
25	pol	pol	pol	0.03	pol	pol	0.03
26							
27							
28							
29	pol	pol	pol	0.03	pol	pol	0.03
30							
31							

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

Notes: Blank Days= Plant Offline	PRINTED NAME: Jonathan Woody	
	SIGNATURE: <i>Jonathan Woody</i>	DATE: 6-9-23
	PHONE #: (541) 643-6137	CERT #: 7232

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

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - :	A
Disinfection <i>Giardia</i> Log Inactiv:	0.5

System Name: USFS Steamboat Work Center ID#: 41 01091 Month/Year: May-23

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
1	1.1	60	66.0	13.0	7.30	17.6	yes	36
2		60						36
3	1.1	60	66.0	13.0	7.30	17.6	yes	36
4		60						36
5	1.2	60	72.0	13.0	7.30	17.8	yes	36
6		60						36
7		60						36
8	1.1	60	66.0	13.0	7.50	18.9	yes	36
9		60						36
10	1.2	60	72.0	13.0	7.50	19.2	yes	36
11		60						36
12		60						36
13	1.3	60	78.0	15.0	7.40	16.3	yes	36
14		60						36
15	1.5	60	90.0	15.0	7.40	16.7	yes	36
16		60						36
17		60						36
18	1	60	60.0	15.0	7.30	15.2	yes	36
19		60						36
20		60						36
21		60						36
22	1	60	60.0	13.0	7.20	16.8	yes	36
23		60						36
24		60						36
25	1.1	60	66.0	13.0	7.60	19.7	yes	36
26		60						36
27		60						36
28		60						36
29	1.1	60	66.0	12.0	7.60	21.1	yes	36
30		60						36
31		60						36

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