

OHA - Drinking Water Program -Turbidity Monitoring Report Form

County: **Douglas**  
 Month/Year: **Jun-21**

Conventional or Direct Filtration

System Name:	USFS Tiller Ranger Station		ID#: 41	01092			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	POL	POL	POL	POL	
2	POL	POL	POL	POL	POL	POL	POL	
3	POL	POL	POL	POL	0.04	0.04	0.04	
4	0.04	0.04	0.04	POL	POL	POL	0.04	
5	POL	POL	POL	POL	POL	POL	POL	
6	POL	POL	POL	POL	POL	POL	POL	
7	POL	POL	POL	POL	0.05	0.04	0.06	
8	0.04	0.04	POL	POL	POL	POL	0.04	
9	POL	POL	POL	POL	POL	POL	POL	
10	POL	POL	POL	POL	POL	POL	POL	
11	POL	POL	POL	POL	POL	POL	POL	
12	POL	POL	POL	0.07	0.04	0.04	0.12	
13	0.04	POL	POL	POL	POL	POL	0.04	
14	POL	POL	POL	POL	POL	POL	POL	
15	POL	POL	0.06	0.06	POL	POL	0.07	
16	POL	POL	POL	POL	POL	POL	POL	
17	POL	POL	POL	POL	POL	POL	POL	
18	POL	POL	0.06	0.04	0.04	0.04	0.06	
19	0.04	POL	POL	POL	POL	POL	0.04	
20	POL	POL	POL	POL	POL	POL	POL	
21	POL	POL	POL	POL	POL	POL	POL	
22	POL	POL	POL	0.05	0.04	0.04	0.05	
23	0.04	POL	POL	POL	POL	POL	0.04	
24	POL	POL	POL	POL	POL	POL	POL	
25	POL	POL	POL	POL	POL	POL	POL	
26	POL	POL	POL	POL	POL	0.05	0.05	
27	0.04	0.04	0.04	0.12	POL	POL	0.12	
28	POL	POL	POL	POL	POL	POL	POL	
29	POL	POL	POL	POL	POL	POL	POL	
30	POL	POL	POL	POL	0.04	0.05	0.06	
31								

<b>Conventional or Direct Filtration</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> 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 / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No
All turbidity readings < IFE2 triggers	<input checked="" type="radio"/> Yes / <input type="radio"/> No		
<b>Notes:</b>	<b>PRINTED NAME: Jonathan Woody</b>		
	<b>SIGNATURE: <i>John Woody</i></b>		<b>DATE: 7-9-21</b>
	<b>PHONE #: ( 541 ) 643-6137</b>		<b>CERT #: 7232</b>

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' instrument. 2 IFE = Individual Filter Eff. (333-861-0048)(1)(e)(B&C)

OHA - Drinking Water Program - Surface Water Quality Data Form

System Name: USFS Tiller Ranger Station					ID#: 41	01092	Month/Year: Jun-21	WTP -: A	Disinfection Giardia Log Inactiv: 0.5
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Date / Time	Minimum Cl2 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	POL	86	POL	POL	POL	POL	POL	28
2	POL	86	POL	POL	POL	POL	POL	28
3	1	86	86.0	19.0	7.80	18.0	YES	28
4	POL	86	POL	POL	POL	POL	POL	28
5	1	86	86.0	19.0	7.80	18.0	YES	28
6	1.3	86	111.8	19.0	7.90	19.0	YES	28
7	0.7	86	60.2	19.0	7.90	18.0	YES	28
8	POL	86	POL	POL	POL	POL	POL	28
9	POL	86	POL	POL	POL	POL	POL	28
10	POL	86	POL	POL	POL	POL	POL	28
11	POL	86	POL	POL	POL	POL	POL	28
12	1	86	86.0	19.0	8.00	18.0	YES	28
13	1.1	86	94.6	20.0	8.10	17.0	YES	28
14	POL	86	POL	POL	POL	POL	POL	28
15	0.6	86	51.6	20.0	8.20	17.0	YES	28
16	POL	86	POL	POL	POL	POL	POL	28
17	0.6	86	51.6	19.0	7.80	17.0	Yes	28
18	0.8	86	68.8	19.0	7.80	18.0	Yes	28
19	0.9	86	77.4	19.0	8.00	18.0	Yes	28
20	0.8	86	68.8	20.0	8.20	21.0	Yes	28
21	0.8	86	68.8	20.0	8.10	21.0	Yes	28
22	1.1	86	94.6	21.0	8.00	14.0	Yes	28
23	POL	86	POL	POL	POL	POL	POL	28
24	POL	86	POL	POL	POL	POL	POL	28
25	POL	86	POL	POL	POL	POL	POL	28
26	0.6	86	51.6	23.0	8.10	15.0	Yes	28
27	1	86	86.0	23.0	8.10	15.0	Yes	28
28	0.6	86	51.6	23.0	8.00	13.0	Yes	28
29	POL	86	POL	POL	POL	POL	POL	28
30	0.5	86	43.0	24.0	7.90	13.0	Yes	28
31		86						28

3 If Cl2 at entry point < 0.2 mg/l or CT not met, DWP to be notified by end of next business day.

formula

Revised February 2012