

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: **Douglas**

Conventional or Direct Filtration

Month/Year: **Oct-25**

System Name:	USFS Tiller R.S.			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	0.03	POL	POL	POL	POL	POL	0.03
2	POL	POL	POL	POL	POL	POL	POL
3	POL	POL	POL	POL	POL	POL	POL
4	POL	POL	POL	POL	POL	POL	POL
5	POL	POL	POL	POL	POL	POL	POL
6	POL	POL	POL	POL	POL	POL	POL
7	POL	POL	POL	POL	POL	POL	POL
8	POL	POL	POL	POL	POL	POL	POL
9	POL	POL	POL	POL	POL	POL	POL
10	POL	POL	POL	0.04	0.04	0.04	0.04
11	0.03	POL	POL	POL	POL	POL	0.03
12	POL	POL	POL	POL	POL	POL	POL
13	POL	POL	POL	POL	POL	POL	POL
14	POL	POL	POL	POL	POL	POL	POL
15	POL	POL	POL	POL	POL	POL	POL
16	POL	POL	POL	POL	POL	POL	POL
17	POL	POL	POL	POL	POL	POL	POL
18	POL	POL	POL	POL	POL	POL	POL
19	POL	POL	POL	POL	POL	POL	POL
20	POL	POL	POL	POL	POL	POL	POL
21	POL	POL	POL	0.05	0.03	0.03	0.05
22	0.03	POL	POL	POL	POL	POL	0.03
23	POL	POL	POL	POL	POL	POL	POL
24	POL	POL	POL	POL	POL	POL	POL
25	POL	POL	POL	POL	POL	POL	POL
26	POL	POL	POL	POL	POL	POL	POL
27	POL	POL	POL	POL	POL	POL	POL
28	POL	POL	POL	POL	POL	POL	POL
29	POL	POL	POL	POL	POL	POL	POL
30	POL	POL	POL	POL	POL	POL	POL
31	POL	POL	POL	POL	POL	POL	POL

Conventional or Direct Filtration

95% of 4-hour turbidity readings $\leq$ 0.3 NTU?

Yes / No

All 4-hour turbidity readings $\leq$ 1 NTU?

Yes / No

All turbidity readings < IFE² triggers

Yes / No

Monthly Summary (Answer Yes or No)

CT's met everyday?
(see back)

Yes / No

All Cl₂ residual at entry point
 $\geq$ 0.2 mg/l?

Yes / No

Notes:

PRINTED NAME: *Jonathan Woody*SIGNATURE: *John Woody*

DATE: 11-7-25

PHONE #: (541) 643 6137

CERT #: 1232

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

System Name:	USFS Tiller RS.	ID#: 41	01092	Month/Year:	25-Oct	Disinfection Giardia Log Inactive:	0.5
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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]		formula	Yes / No	[GPM]
1	0.8	86	68.8	21.0	8.40	15.0	YES	28
2	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
3	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
4	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
5	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
6	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
7	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
8	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
9	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
10	0.9	86	77.4	18.0	8.30	17.8	YES	28
11	0.6	86	51.6	18.0	8.20	16.6	YES	28
12	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
13	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
14	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
15	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
16	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
17	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
18	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
19	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
20	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
21	0.9	86	77.4	16.0	8.20	19.6	YES	28
22	0.7	86	60.2	15.0	8.40	22.1	YES	28
23	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
24	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
25	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
26	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
27	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
28	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
29	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
30	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28
31	POL	86	#VALUE!	POL	POL	#VALUE!	#VALUE!	28

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

Revised November 2022

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