


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

**System Name: Corvallis, City of**    **ID#: 41 00225 WTP-: WTP - B**      **Month/Year: Oct / 2020**

DAY	12 AM (NTU)	4 AM (NTU)	8 AM (NTU)	NOON (NTU)	4 PM (NTU)	8 PM (NTU)	Highest Reading of the Day <sup>1</sup> (NTU)
1	0.03	0.03	0.03	0.02	0.02	0.02	0.03
2	0.02	0.02	0.02	0.02	0.03	0.03	0.04
3	0.03	0.03	0.02	0.02	0.02	0.02	0.03
4	0.02	0.02	0.02	0.02	0.03	0.03	0.04
5	0.03	0.03	0.03	0.03	0.02	0.02	0.03
6	0.03	0.03	0.02	0.02	0.03	0.03	0.03
7	0.03	0.03	0.03	0.03	0.03	0.02	0.03
8	0.02	0.02	0.02	0.04	0.03	0.03	0.04
9	0.03	0.03	0.03	0.03	0.03	0.03	0.04
10	0.03	0.03	0.03	0.03	0.05	0.04	0.06
11	0.04	0.03	0.03	0.03	0.04	0.03	0.05
12	0.03	0.03	0.03	0.03	0.04	0.03	0.04
13	0.03	0.03	0.03	0.02	0.03	0.03	0.07
14	0.03	0.03	0.03	0.03	0.03	0.03	0.04
15	0.03	0.03	0.03	0.03	0.03	0.03	0.04
16	0.03	0.03	0.03	0.03	0.03	0.03	0.04
17	0.03	0.03	0.03	0.02	0.03	0.03	0.04
18	0.03	0.03	0.03	0.03	0.03	0.03	0.04
19	0.03	0.03	0.03	0.03	0.03	0.03	0.04
20	0.03	0.03	0.03	0.02	0.03	0.03	0.04
21	0.03	0.03	0.03	0.03	0.04	0.03	0.05
22	0.03	0.03	0.03	0.02	0.03	0.03	0.06
23	0.03	0.03	0.02	0.02	0.03	0.03	0.05
24	0.03	0.03	0.02	0.02	0.03	0.03	0.04
25	0.03	0.03	0.03	0.02	0.03	0.03	0.04
26	0.03	0.02	0.02	0.02	0.03	0.03	0.04
27	0.03	0.02	0.02	0.02	0.03	0.02	0.04
28	0.02	0.02	0.02	0.02	0.03	0.03	0.04
29	0.02	0.02	0.02	0.02	0.03	0.03	0.04
30	0.03	0.03	0.02	0.02	0.03	0.03	0.04
31	0.03	0.03	0.03	0.02	0.03	0.03	0.04

<b>Conventional or Direct Filtration</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of the 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl <sub>2</sub> residuals at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All the 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No			
All turbidity readings < IFE <sup>2</sup> triggers? <input checked="" type="radio"/> Yes / <input type="radio"/> No			
<b>Notes:</b>	<b>PRINTED NAME:</b> Tom Hubbard		<b>DATE:</b> 11/4/2020
	<b>SIGNATURE:</b> 		
	<b>PHONE #:</b> (541) 754-1758		
		<b>CERT #:</b> T-08804	

<sup>1</sup> 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.

<sup>2</sup> IFE = Individual Filter Effluent (OAR 333-061-0040 (1) (e) (B&C))

**OHA - Drinking Water Program - Surface Water Quality Data Form**

**Corvallis, City of ID#: 41 00225 WTP-: WTP - B**

**Month/Year: Oct / 2020**

Required Log  
Inactivation: 0.5

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sup>3</sup>	Contact Time ( T )	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
01 / 1600	1.05	66	69	17	7.3	15	Yes	1528
02 / 1200	1.13	66	75	17	7.3	15	Yes	1528
03 / 1600	1.09	68	74	17	7.3	15	Yes	1458
04 / 1200	1.09	66	72	17	7.3	15	Yes	1528
05 / 1600	1.11	66	73	17	7.3	15	Yes	1528
06 / 1600	1.09	68	74	17	7.3	15	Yes	1458
07 / 1600	1.17	68	80	17	7.3	15	Yes	1458
08 / 1200	1.14	66	75	17	7.3	15	Yes	1528
09 / 1200	1.16	62	72	17	7.3	15	Yes	1667
10 / 1600	1.02	64	65	17	7.2	15	Yes	1597
11 / 1600	1.00	62	62	16	7.3	15	Yes	1667
12 / 1200	1.05	62	65	16	7.3	15	Yes	1667
13 / 1600	1.09	62	68	16	7.2	15	Yes	1667
14 / 2000	1.10	64	70	16	7.2	15	Yes	1597
15 / 1200	1.11	64	71	15	7.4	15	Yes	1597
16 / 1600	1.04	64	67	15	7.4	15	Yes	1597
17 / 1200	1.11	64	71	15	7.4	15	Yes	1597
18 / 1200	1.16	64	74	15	7.4	15	Yes	1597
19 / 1600	1.06	64	68	15	7.4	15	Yes	1597
20 / 1600	1.14	64	73	15	7.4	15	Yes	1597
21 / 1600	1.02	66	67	16	7.3	15	Yes	1528
22 / 1600	1.09	66	72	15	7.3	15	Yes	1528
23 / 1600	1.09	66	72	14	7.3	23	Yes	1528
24 / 1600	1.06	66	70	14	7.3	23	Yes	1528
25 / 1600	1.16	66	77	14	7.3	23	Yes	1528
26 / 1600	1.15	66	76	13	7.3	23	Yes	1528
27 / 1600	1.17	66	77	12	7.3	23	Yes	1528
28 / 1600	1.08	66	71	12	7.2	23	Yes	1528
29 / 1200	1.17	66	77	12	7.3	23	Yes	1528
30 / 2000	1.16	66	77	12	7.2	23	Yes	1528
31 / 1600	1.15	66	76	12	7.3	23	Yes	1528

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l, OR CT not met, notify DWP by next business day.