

OHA - Drinking Water Services - Turbidity Monitoring Report Form

County: Tillamook

Cartridge or Bag Filtration

Month/Year: April 2021

System Name: Kelly's Brighton Marina ID# 41 90922 WTP ID: B

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day ¹ [NTU]
1	12	6	6	15		.74
2	14	6	8			.72
3	14	8	6			.74
4	14	6	8			.74
5	14	8	6			.71
6	14	8	6			.73
7	14	8	6			.69
8	16	8	8			.67
9	16	8	16 8			.68
10	16	8	8			.63
11	16	8	8			.66
12	16	6	10			.64
13	16	8	8			.61
14	16	8	8			.59
15	16	8	8			.58
16	18	8	10			.60
17	18	8	10			.59
18	18	8	10			.55
19	18	6	12			.57
20	18	6	12			.58
21	18	8	10			.58
22	20	8	12			.59
23	20	8	12			.61
24	20	8	12			.60
25	20	8	12			.58
26	22	8	14			.58
27	20	8	12			.62
28	10	6	4			.60
29	10	6	4			.58
30	12	8	4			.57
31						

Cartridge Filtration Monthly Summary		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? All daily turbidity readings ≤ 5 NTU?		CT's met everyday? (see back) Yes/No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? Yes/No
Notes: PSI = pounds per square inch PSID = pounds per square inch difference (before filter - after filter) PSID When to Change Filter = Manufacturer's recommendation; may need to look in manual for manufacturer's specifications when to change the filter, at what PSID. <u>9716730694</u>		PRINTED NAME: <u>Janice Laviolette</u>	
		SIGNATURE: <u>Janice Laviolette</u>	DATE: <u>5-8-21</u>
		PHONE #: <u>(503) 368-5746</u>	CERT #:

¹ Including continuous turbidity data, if applicable, for optimization recording purposes. Compliant values in "Daily Turbidity Reading" Column may not correspond to continuous readings' maximum.

OHA - Drinking Water Services – Surface Water Quality Data Form

Tillamook Month/Year: April 2021

System Name: Kelly's Brighton marina		ID# 41 90922		WTP - B				
Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ² [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT CXT	Temp [° C]	pH	Required CT Use tables	CT Met? ² Yes/No	Peak Hourly Demand Flow [GPM]
1/	2.0							910
2/	1.8							940
3/	1.6							840
4/	1.4							950
5/	1.4							760
6/	2.0							920
7/	2.0							810
8/	1.6							790
9/	1.4							1060
10/	2.8							1160
11/	2.6							1240
12/	2.6							980
13/	2.4							570
14/	2.0							890
15/	1.8							1110
16/	1.6							1080
17/	2.8							1360
18/	2.8							970
19/	2.6							960
20/	2.4							540
21/	2.4							870
22/	2.0							710
23/	2.0							960
24/	1.8							1420
25/	1.2							1120
26/	2.6							470
27/	2.4							560
28/	2.4							1870
29/	2.0							1690
30/	1.6							1100
31/								

Per Kari Sat's

² If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWS within 24 hours.

Revised August 2016

Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf

Return by 10th of following month by email, fax or mail to:

dwp.dnce@state.or.us; Fax 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350