

OHA - Drinking Water Services - Turbidity Monitoring Report Form

County: Tillamook

Cartridge or Bag Filtration

Month/Year: MAY 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	8	4	15		.62
2	12	8	4			.60
3	12	6	6			.60
4	12	4	6			.58
5	12	6	6			.59
6	12	6	6			.58
7	12	6	6			.60
8	12	8	4			.61
9	12	6	6			.62
10	12	6	6			.62
11	14	6	8			.60
12	14	6	8			.59
13	14	8	6			.58
14	14	8	6			.56
15	14	8	6			.57
16	14	8	6			.58
17	14	6	8			.59
18	16	8	8			.61
19	16	8	8			.60
20	16	10	6			.62
21	16	8	8			.64
22	16	8	8			.63
23	16	8	8			.66
24	16	8	8			.62
25	16	8	8			.63
26	16	10	6			.65
27	16	10	6			.60
28	16	6	10			.61
29	18	6	12			.62
30	18	6	12			.63
31	18	6	12			.64

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 Lawdelle</u>	DATE: <u>6-9-21</u>
		PHONE #: <u>(503) 368-5745</u>	CERT #:

¹ Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance 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: MAY 2021

System Name: Kelly's Brighton Marina		ID# 41 90922		WTP - B				
Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ²	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT	[° C]		Use tables	Yes / No	[GPM]
1/	1.2						Yes	1130
2/	2.2							1640
3/	2.0							930
4/	2.0							810
5/	1.8							720
6/	1.8							640
7/	1.6							970
8/	1.6							920
9/	1.4							1160
10/	2.6							1320
11/	2.6							870
12/	2.4							970
13/	2.2							1230
14/	2.0							1670
15/	1.8							1720
16/	1.6							1680
17/	1.6							1320
18/	1.6							560
19/	1.2							480
20/	2.8							1020
21/	2.8							980
22/	2.6							1300
23/	2.4							1290
24/	2.4							670
25/	2.2							720
26/	2.2							780
27/	2.2							810
28/	2.0							1940
29/	1.6							1870
30/	1.4							1720
31/	2.6							1660

Per Kari Salis

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