

OHA - Drinking Water Services - Turbidity Monitoring Report Form
 Cartridge or Bag Filtration

County: Tillamook
 Month/Year: 1/22

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	20	12	8	15		.65
2	20	12	8			.63
3	20	12	8			.63
4	20	12	8			.62
5	20	12	8			.62
6	20	12	8			.63
7	20	12	8			.69
8	20	12	8			.71
9	20	12	8			.70
10	20	12	8			.68
11	20	12	8			.67
12	20	12	8			.65
13	20	12	8			.64
14	20	12	8			.64
15	20	12	8			.64
16	20	12	8			.65
17	20	12	8			.61
18	20	12	8			.62
19	20	12	8			.59
20	20	12	8			.61
21	20	12	8			.61
22	20	12	8			.60
23	20	12	8			.60
24	20	12	8			.60
25	20	12	8			.61
26	20	12	8			.61
27	20	12	8			.61
28	20	12	8			.61
29	20	12	8			.62
30	20	12	8			.62
31	20	12	8			.60

Cartridge Filtration Monthly Summary

95% of daily turbidity readings ≤ 1 NTU? Yes / No
 All daily turbidity readings ≤ 5 NTU? 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. 9716730694

Monthly Summary (Answer Yes or No)

CT's met everyday? (see back) Yes / No
 All Cl₂ residual at entry point ≥ 0.2 mg/l? Yes / No

PRINTED NAME: Colin Davis

SIGNATURE: Colin Davis DATE: 1/31/22

PHONE #: (503) 1368-5745 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: 2/22

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/	1.4						YES	80
2/	1.4							60
3/	1.4							80
4/	1.2							120
5/	1.2							300
6/	1.2							350
7/	1.2							250
8/	1.2							170
9/	1.2							570
10/	1.6							200
11/	1.8							140
12/	1.8							220
13/	1.8							150
14/	1.8							230
15/	1.8							480
16/	1.8							690
17/	1.8							120
18/	1.8							120
19/	1.8							330
20/	1.8							160
21/	1.8							180
22/	1.8							380
23/	1.8							560
24/	1.8							110
25/	1.8							100
26/	1.8							500
27/	1.8							440
28/	1.8							400
29/	1.8							530
30/	1.8							380
31/	1.8							280

low
res
gals

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