

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

County: Tillamook

Month/Year: 09/22

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	12	10	2			
2	12	10	2	15		.61
3	12	10	2			.60
4	12	10	2			.59
5	12	10	2			.61
6	12	10	2			.61
7	12	10	2			.61
8	12	10	2			.59
9	12	10	2			.60
10	12	10	2			.62
11	12	10	2			.62
12	12	10	2			.60
13	12	10	2			.60
14	12	10	2			.61
15	12	10	2			.61
16	12	10	2			.60
17	12	10	2			.59
18	12	10	2			.61
19	12	10	2			.61
20	12	10	2			.60
21	12	10	2			.59
22	12	10	2			.59
23	12	10	2			.61
24	12	10	2			.60
25	12	10	2			.59
26	12	10	2			.60
27	12	10	2			.60
28	12	10	2			.60
29	12	10	2			.61
30	12	10	2			.62
31						.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: Brian Yelle

SIGNATURE:  DATE: 10/3/22

PHONE #: (503) 368-5745 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

System Name: Kelly's Brighton Marina		ID# 41 90922		Tillamook		Month/Year: 09/22		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	1910	
2/	1.0							3340	
3/	1.2							3300	
4/	1.6							3450	
5/	1.2							3250	
6/	1.4							2230	
7/	2.4							2200	
8/	1.4							2090	
9/	1.2							2170	
10/	1.2							2000	
11/	2.0							2350	
12/	2.0							1850	
13/	1.2							3020	
14/	1.2							3160	
15/	2.2							1950	
16/	2.0							2180	
17/	1.2							2240	
18/	2.8							2100	
19/	2.6							3100	
20/	1.6							1980	
21/	1.2							2200	
22/	2.8							2230	
23/	2.8							1250	
24/	1.4							2400	
25/	1.2							2320	
26/	1.2							1490	
27/	1.0							1200	
28/	2.0							900	
29/	1.8							950	
30/	1.2							1260	
31/									

Per
Kane
Sales

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