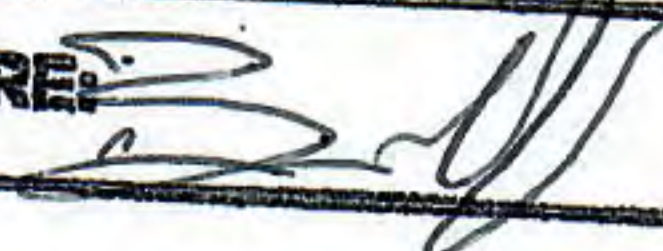


OHA - Drinking Water Services - Turbidity Monitoring Report Form
 Cartridge or Bag Filtration

County: Tillamook
 Month/Year: June 23

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		.80
3	12	10	2			.80
4	12	10	2			.81
5	12	10	2			.82
6	12	10	2			.82
7	12	10	2			.82
8	12	10	2			.81
9	12	10	2			.81
10	12	10	2			.81
11	12	10	2			.81
12	12	10	2			.81
13	12	10	2			.80
14	12	10	2			.81
15	12	10	2			.81
16	12	10	2			.80
17	12	10	2			.81
18	12	10	2			.81
19	12	10	2			.81
20	12	10	2			.81
21	12	10	2			.80
22	12	10	2			.81
23	12	10	2			.81
24	12	10	2			.81
25	12	10	2			.80
26	12	10	2			.81
27	12	10	2			.80
28	12	10	2			.81
29	12	10	2			.81
30	12	10	2			.81
31						.81

Cartridge Filtration Monthly Summary		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	CT's met everyday? (see back)	All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> 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>Bryan Velle</u>	DATE: <u>7-7-23</u>
		SIGNATURE: 	CERT #:
		PHONE #: <u>(503) 368-5745</u>	

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: June 23
 WTP - B

Date / Time	Minimum Cl ₂ Residual at 1st 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/	1.6							
2/	1.6						YES	1210
3/	1.6							1330
4/	1.4							3200
5/	1.6							1400
6/	1.6							2580
7/	1.4							1530
8/	1.4							930
9/	1.4							1060
10/	1.4							4990
11/	1.4							1900
12/	1.2							1760
13/	1.4							2600
14/	1.3							2900
15/	1.1							2200
16/	1.0							800
17/	2.2							1020
18/	1.1							1200
19/	1.3							4690
20/	1.1							1860
21/	1.6							1320
22/	1.2							860
23/	1.0							1660
24/	1.6							2870
25/	1.6							3690
26/	1.4							1940
27/	1.4							3870
28/	1.0							1910
29/	1.4							1010
30/	1.4							1840
31/								1620

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

Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf Revised August 2016

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