

OHA - Drinking Water Services -- Turbidity Monitoring Report Form

Cartridge or Bag Filtration

County: Tillamook
 Month/Year: Aug/25

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	10	8	2	15		.96
2	10	8	2			.96
3	13	10	3			.96
4	13	10	3			.96
5	13	10	3			.98
6	13	10	3			.98
7	13	10	3			.97
8	13	10	3			.96
9	13	10	3			.96
10	13	10	3			.96
11	13	10	3			.96
12	13	10	3			.96
13	13	10	3			.96
14	13	10	3			.96
15	13	10	3			.96
16	13	10	3			.98
17	13	10	3			.98
18	13	10	3			.98
19	13	10	3			.98
20	13	10	3			.96
21	13	10	3			.96
22	13	10	3			.97
23	13	10	3			.97
24	13	10	3			.96
25	13	10	3			.96
26	13	10	3			.96
27	13	10	3			.96
28	13	10	3			.97
29	13	10	3			.97
30	13	10	3			.96
31	13	10	3			.97

Cartridge Filtration Monthly Summary

95% of daily turbidity readings ≤ 1 NTU?
 All daily turbidity readings ≤ 5 NTU?

Yes / No
 Yes / No

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

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

PRINTED NAME: BRIAN VELLE

SIGNATURE: [Signature]

DATE: 9/4/25

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: Aug/25 WTP - B

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ² [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT Use tables	CT Met? ² Yes / No	Peak Hourly Demand Flow [GPM]
1/	1.3							
2/	1.3						YES	2100
3/	1.3							2590
4/	1.3							2780
5/	1.4							1240
6/	1.4							3060
7/	1.5							1020
8/	1.5							2800
9/	1.5							3200
10/	1.5							3320
11/	1.4							2080
12/	1.4							1040
13/	1.4							1980
14/	1.4							1430
15/	1.5							1740
16/	1.5							1260
17/	1.5							2650
18/	1.6							1940
19/	1.6							1940
20/	1.6							1340
21/	1.6							2020
22/	1.6							1330
23/	1.5							1240
24/	1.6							2560
25/	1.6							2946
26/	1.7							1160
27/	1.7							890
28/	1.7							910
29/	1.8							1700
30/	1.8							1200
31/	1.7							2090
								3200

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/HealthvEnvironments/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