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

System Name: Kelly's Brighton Marina ID# 41 90922 | County: Tillamook | Month/Year: SEPT '25 | 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	13	10	3	15		.96
2	13	10	3			.96
3	13	10	3			.96
4	13	10	3			.96
5	13	10	3			.97
6	13	10	3			.96
7	13	10	3			.96
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			.98
16	13	10	3			.97
17	13	10	3			.97
18	13	10	3			.97
19	13	10	3			.97
20	13	10	3			.97
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			.96
29	13	10	3			.97
30	13	10	3			.97
31						.98

Cartridge Filtration Monthly Summary

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

Monthly Summary (Answer Yes or No)

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. 9716730694

PRINTED NAME: BRIAN YELLE

SIGNATURE:

DATE: 10/3/25

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 Tillamook ID# 41 90922 Month/Year: SEPT '25 WTP – B

Date / Time	Minimum Cl_2 Residual at 1st User (C) [2]	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? [2]	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
1 /	1.6							
2 /	1.6						YES	2660
3 /	1.7							2040
4 /	1.7							840
5 /	1.7							800
6 /	1.6							1420
7 /	1.6							1300
8 /	1.6							1910
9 /	1.6							1000
10 /	1.6							720
11 /	1.7							760
12 /	1.7							1160
13 /	1.7							2400
14 /	1.6							1990
15 /	1.6							1800
16 /	1.6							2080
17 /	1.6							1910
18 /	1.6							1970
19 /	1.5							1040
20 /	1.5							1910
21 /	1.6							2980
22 /	1.5							2060
23 /	1.5							1030
24 /	1.6							1020
25 /	1.5							1030
26 /	1.5							1150
27 /	1.5							1730
28 /	1.4							2080
29 /	1.4							1230
30 /	1.4							840
31 /								700

[2] If Cl_2 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