

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: Oct 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			.96
2	13	10	3	15		.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			.98
17	13	10	3			.97
18	13	10	3			.97
19	13	10	3			.97
20	13	10	3			.97
21	13	10	3			.97
22	13	10	3			.97
23	13	10	3			.96
24	13	10	3			.96
25	13	10	3			.96
26	13	10	3			.97
27	13	10	3			.97
28	13	10	3			.97
29	13	10	3			.97
30	13	10	3			.98
31	13	10	3			.98

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 YELLE

SIGNATURE: [Signature]

DATE: 11-1-25

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: Oct 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/	1.4							
2/	1.4						YES	750
3/	1.4							660
4/	1.4							800
5/	1.4							2820
6/	1.5							1120
7/	1.5							1420
8/	1.5							1180
9/	1.4							890
10/	1.5							940
11/	1.5							1350
12/	1.6							1020
13/	1.6							1840
14/	1.6							2360
15/	1.6							660
16/	1.6							960
17/	1.6							580
18/	1.5							1070
19/	1.5							1790
20/	1.5							1110
21/	1.5							580
22/	1.4							740
23/	1.4							780
24/	1.4							800
25/	1.3							910
26/	1.3							610
27/	1.4							1050
28/	1.4							590
29/	1.3							270
30/	1.3							520
31/	1.2							350
								1040

*Per
Kemp
Garcia*

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