... Copper Rule Corrosion Control

Day	pH	~~Alk~~ Chlorine	Phos	Other	Y/N
4/3	7.5	.8			
4/5	7.5	1.2			
4/7	7	1			
4/9	7.5	1			
4/11	7.2	1			
4/13	7.5	.8			
4/15	7	.7			
4/17	6.5	.9			
4/19	7	1.25			
4/21	7	1			
4/23	7.5	1.25			
4/25	8	.15			
4/27	7.5	1.25			
4/29	7	1			

(No = N = Excursion) **Total N's** ____

<<Have minimums been met for this day?

ENTRY POINT

PWS ID: 41 | 0 | 0 | 0 | 0 | 4 |

System Name: Albany Trailer and RV Park

Entry Point: ____________________

Sample Period: 4/25
Month/Year

Number of excursions* during this month: _____
(Count the number of days when any WQP was less than the minimum required)

Total excursions during the previous 5 months: ____
(Over 9 excursions in 6 months is a violation. Entry Point and Distribution excursions are cumulative)

For OHA use only

Minimum Water Quality Parameters as set by

pH	7.2	
Alk	0.05	*(Alkalinity)*
PO4		*(Orthophosphate)*
Other		(______________)

Print Name: Logan LaVigne
Signature: [signature]
Date: 5/5/2025

Send to DWP within 10 days after end of sampling period

OHA Drinking Water Program, PO Box 14350, Portland, OR 97293-0350
Phone (971) 673-0405 Website: http://healthoregon.org/dwp/