## Health

## Water Quality Parameter Monitoring Form

## Lead & Copper Rule Corrosion Control

Day	pH	Alk	Phos	Other	YAN	<-Have ENTRY POINT
1					1	been met for PWS ID: 41
2				4	-	this day?
3						System Name. <u>PeriumRle</u> Mobile Estate
4			<u> </u>	1	<del>                                     </del>	Entry Point: Well
5		}	+-	+-		Sample Period: Dec. 202/ Month/Year
<u>6</u>	-	-	+-	+		
<del>_</del>		-				Number of excursions* during this month: (0)
9	1					(Count the number of days when any WQP was' less than the minimum required)
10	1	1			1	Deinking (V. A.
11					12/	during the previous 5 months:
12	7.2	1_	1		17	A A
13	_	-	-		14	(Over 9 excursions in 6 months to a Point and Distribution excursions are cumulative)
14	_	+	-	-	+	For OHA use only
15	Carpina Remember	+	-	十	1	1 2022
17		+				Minimum Water Quality & Comp. and
18						Minimum Water Quality Parameters as set by  Water Progra
19	9					pH 7,2
2						Alk (Alkalinity)
2		24				PO4 (Orthophosphate)
2		_	15-	-	_	Other
2		_		_	-	
-	4   5					
	0			<del></del>	<del></del>	
	27					Print Name: Shavn Attrell Signature: Shavn Attrell
00000	28					Signature:
_	29			y		Date: 1-1022
	30 7	7.7			1	Send to DWP within 10 ways after end of
	31		1		- 8	sampling period
No	0 = N =	= Excu	sion)	Total	N'S	PO Box 14350 Portland, OR 97293-0350

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