

Water Quality Parameter Monitoring Form
Lead & Copper Rule Corrosion Control

Day	рΗ	Alk	Phos	Other	Y/N	< <have< th=""><th>County: Washington</th><th>Agency: REGION 1</th></have<>	County: Washington	Agency: REGION 1	
1	Well of	f all mo	nth 3/1	-3/31		minimums			
2						been met for this day?		-	
3						tins day :		CP-C	
4							<b>PWS ID</b>	4100081	
5							BEAVERT	<b>ON, CITY OF</b>	
6									
7						Sample period: <u>March 2025</u>			
8						Month/Year			
9									
10						Number of excursions during this month: <u>0</u>			
11						(Over 9 excursions in 6 months is a violation. Entry Point and Distribution excursions are cumulative).			
12									
13								n which the water quality	
14						, ,	) fall below the	e minimum set by the	
15	Well of	f all mo	nth 3/1	-3/31		State.			
16									
17						<i>⊢Refe</i>	rence ——		
18									
19							Minimum Wa	ater Quality	
20							Parameter(s	) as set by State:	
21							pH 7.4	7	
22									
23									
24									
25									
26									
27							Name: Danielle		
28						Signature: Danielle Goodrich			
29						Date 8	& Phone#:_4/1/2	2025 503-616-8201	
30								10 days after end of	
31				/1-3/31	ing period				
(No = I	N = Exc	cursior	) <b>Tota</b>	I N's	0	·	2.		

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