

## **Water Quality Parameter Monitoring Form**

## **Lead & Copper Rule Corrosion Control**

Day	рН	Alk	Phos	Sili	Y/N	< <have< th=""><th></th><th></th><th></th></have<>			
1	7.90				YES	minimums			
2	7.20				YES	been met		ENTRY POINT	
3	7.62				YES	for this day?		Α	
4	7.42				YES	PWS ID: 4100152			
5	7.23				YES	BROWNSVILLE, CITY OF			
6	7.28				YES				
7	7.62				YES	Sample	Sample Period: May-22		
8	7.49				YES		Month/Year		
9	7.69				YES				
10	7.38				YES	Number o	Number of excursions* during this month:		
11	7.44				YES	(Count the	(Count the number of days when any WQP was less		
12	7.23				YES	than the m	than the minimum required)		
13	7.31				YES				
14	7.29				YES				
15	7.59				YES	Total exc	Total excursions during the previous 5 months:0		
16	7.27				YES	(Over 9 ex	(Over 9 excursions in 6 months is a violation. Entry		
17	7.36				YES	Point and	Point and Distribution excursions are cumulative)		
18	7.25				YES	Is the sys	Is the system in compliance? YES		
19	7.20				YES				
20	7.21				YES	Reference			
21	7.35				YES				
22	7.41				YES	'	Minimum Water Quality		
23	7.39				YES	Pa	Parameters as set by State:		
24	7.46				YES				
25	7.41				YES		pH <b>7.2</b>		
26	7.46				YES				
27	8.22				YES				
28	8.60				YES				
29	8.79				YES	Prir	nt Name:	Karl Frink	
30	8.98				YES	Si	gnature:	Karl Frink	
31	7.39				YES		Date:	6/7/2022	
(No = N = Excursion) Total N's					0	Send to OH	Send to OHD within 10 days after end of sampling period.		

Send to OHD within 10 days after end of sampling period. Oregon Health Division, PO Box 14350, Portland, OR 97293-0350 Phone (503) 731-4381