

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	7.27				YES	minimums			
2	7.37				YES	been met	E	ENTRY POINT	
3	7.49				YES	for this day?		Α	
4	7.32				YES		PWS ID: 4100152		
5	7.26				YES		BROWNSVILLE, CITY OF		
6	7.37				YES				
7	7.40				YES	Sample	e Period:	Jul-24	
8	7.28				YES		Month/Year		
9	7.28				YES				
10	7.26				YES	Number (of excursions* du	ring this month:	0
11	7.27				YES	(Count the	(Count the number of days when any WQP was less		
12	7.26				YES	than the n	than the minimum required)		
13	7.59				YES				
14	7.48				YES				
15	7.40				YES	Total exc	ursions during th	e previous 5 months:	0
16	7.70				YES	(Over 9 ex	(Over 9 excursions in 6 months is a violation. Entry		
17	7.52				YES	Point and	Point and Distribution excursions are cumulative)		
18	7.33				YES	Is the sys	tem in complianc	e?	YES
19	7.81				YES				
20	8.23				YES	Reference			
21	7.78				YES				
22	7.84				YES		Minimum Water Quality		
23	8.44				YES	Pa	rameters as	set by State:	
24	7.93				YES				
25	7.63				YES		pH 7.2		
26	8.06				YES				
27	8.49				YES				
28	7.64				YES			-	
29	8.12				YES	Pri	nt Name:	Karl Frink	
30	8.07				YES	Si	gnature:	Karl Frink	
31	7.95				YES		Date:	8/9/2024	
(No = N = Excursion) Total N's				tal N's	0	Send to OF	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