



Water Quality Parameter Monitoring Form  
**Lead & Copper Rule Corrosion Control**

Day	pH	Alk	Phos	Other	Y/N
1	7.2				Y
2	6.8				N
3	7.0	35			Y
4	7.0				Y
5	7.0				Y
6	7.0				Y
7	7.1				Y
8	7.2				Y
9	7.1				Y
10	7.1	35			Y
11	7.0				Y
12	7.0				Y
13	7.0				Y
14	7.1				Y
15	7.2				Y
16	7.2				Y
17	7.1	25			Y
18	7.1				Y
19	7.0				Y
20	7.0				Y
21	7.0				Y
22	7.1				Y
23	7.2				Y
24	7.1	30			Y
25	7.1				Y
26	7.0				Y
27	7.0				Y
28	7.0				Y
29	7.0				Y
30	7.0				Y
31	7.0	30			Y
					1

<<Have  
minimums been  
met for this day?

## ENTRY POINT

**PWS ID: 41 00213**

**System Name:** Coquille, City of

**Entry Point:** EP-A

**Sample Period:** Mar-25

**Number of excursions during this month :** 1

*(Count the number of days when any WQP was less than the minimum required)*

**Total excursions during the previous 5 months:** 0

*(Over 9 excursions in 6 months is a violation. Entry Point and Distribution excursions are cumulative)*

*For OHA use only*

### Minimum Water Quality Parameter as set by State:

pH	<b>7.0</b>	
Alk	<b>16</b>	(Alkalinity)
Phos		(Phos. Max)
Other		( )

**Print Name:**

**Signature:**

**Date:**

Gary Dagitt  
Gary Dagitt  
4/2/25

Send to Drinking Water Program within 10 days after end of sampling period.

OHA Drinking Water Program, P.O. Box 14350, Portland, OR 97293-0350

Phone: (971) 673-0405

Website: <http://healthoregon.org/dwp/>