



Water Quality Parameter Monitoring Form

Lead & Copper Rule Corrosion Control

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Certification

Drinking Water Services

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Day	pH	Alk	Phos	Other	Y/N
1	7.0				Y
2	7.0				Y
3	7.0				Y
4	7.1				Y
5	7.0				Y
6	7.0				Y
7	7.0	45			Y
8	7.0				Y
9	7.0				Y
10	7.0				Y
11	7.0				Y
12	7.0				Y
13	7.1				Y
14	7.0	50			Y
15	7.0				Y
16	7.0				Y
17	7.1				Y
18	7.0				Y
19	7.1				Y
20	7.1				Y
21	7.0	50			Y
22	7.0				Y
23	7.0				Y
24	7.0				Y
25	7.0				Y
26	7.0				Y
27	7.1				Y
28	7.0	50			Y
29	7.0				Y
30	7.0				Y
(No=N=Excursion)Total N's					0

<<Have minimums been met for this day?

## ENTRY POINT

### PWS ID: 41 00213

**System Name:** Coquille, City of

**Entry Point:** EP-A

**Sample Period:** 44866

Nov-22

**Number of excursions during this month :** 0  
*(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	7.0	
Alk	16	(Alkalinity)
Phos		(Phos. Max)
Other		( )

**Print Name:** Ray Doan

**Signature:**

**Date:** 12/2/22

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/>