



Water Quality Parameter Monitoring Form

**Lead & Copper Rule Corrosion Control**

Day	pH	Alk	Phos	Other	Y/N
1	7.0				Y
2	7.2				Y
3	7.0	46			Y
4	7.0				Y
5	7.0				Y
6	7.0				Y
7	7.0				Y
8	7.2				Y
9	7.1	58			Y
10	7.1				Y
11	7.1				Y
12	7.1				Y
13	7.0				Y
14	7.3				Y
15	7.0				Y
16	7.1	60			Y
17	7.0				Y
18	7.0				Y
19	7.0				Y
20	7.0				Y
21	7.0				Y
22	7.1				Y
23	7.2	31			Y
24	7.1				Y
25	7.1				Y
26	7.1				Y
27	7.2				Y
28	7.0				Y
29	7.2				Y
30	7.1	61			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:** Sep-24

**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	<b>7.0</b>	
Alk	<b>16</b>	<i>(Alkalinity)</i>
Phos		<i>(Phos. Max)</i>
Other		<i>(_____)</i>

**Print Name:** Gary Dag. 7

**Signature:** *Gary Dag. 7*

**Date:** 10/4/24

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/>