

Water Quality Parameter Monitoring Form

Lead & Copper Rule Corrosion Control

Total excursions during the previous 5 months: Count the number of days when any WQP was less than the minimum required	Day	у рН	Alk	Comments	Y/N	< <have< th=""></have<>
Deen met for this day? PWS ID: 41 0 0 5 0 8	1	17.80	140		u	minimums
System Name: Marcola Water District Entry Point: EP-D (Irish Well) Sample Period: April 2022 Month/year Number of excursions* during this month: (Count the number of days when any WQP was less than the minimum required) Total excursions during the previous 5 months: (Over 9 excursions in 6 months is a violation. Entry Point and Distribution excursions are cumulative) For OHA use only Minimum Water Quality Parameters as set by PH 7.0 Alk 45.0 (Alkalinity) PO4 (Orthophosphate) Other Print Name: Signature: Date: Send to DWP within 10 days after end of sampling period	2					
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OHA Drinking Water Program, PO Box 14350, Portland, OR 97293-0350 Phone (971) 673-0405 Website: http://healthoregon.org/dwp/