

## Water Quality Parameter Monitoring Form

## **Lead & Copper Rule Corrosion Control**

Day 1	рН	Alk mg/L	Y/N	<< Have minimums been met for this day?	ENTRY POINT			
2					PWI	D ID: (	OR 4100513	
3					1		J.I. 1200520	
5	7.74	30	Y	System Name:		Medford Water Commission		
6	7.79	25	Υ			-		
7				Entry Point:		В		
8				Camanda	D!d.		2024	
9				Sample Period:		A	August, 2024	
10				Month/Year  Number of excursions* during this month:  (Count the number of days when any WQP was less than the				
11								
12								
13	8.01	34	Υ	minimum required)				
14				Total excursions during the previous 5 months: 0				
15	<u>.</u>			(Over 9 excursions in 6 months is a violation. Entry Point and				
16				Distributio	on excursio	ns are cu	mulative)	
17								
18				ls system	n in comr	diance?	Yes	
19				Is system in compliance? Yes				
20	7.91	30	Υ					
21	7.86	33	Y		Minimum Water Quality Parameters as set by State:			
22								
23							,	
24							OH 7	
25	7.76		<u>                                   </u>			P	711 7	
26	7.76	32	Υ					
27								
28				Dulus N		N 1 - 44 C	l - l-	
29				Print Na	ıme:	ινιαπ Se	everloh	
30				Signatu	ro.	Mat	H201	
	7 74		1	Signatu	· ·	1 40/0	perenta	
Min 7.74 Total N's 0				Data		09/01/2024		
		= Excursio	0	Date:				

(No = N = Excursion)

Send to DWP within 10 days after end of sampling period.

OHA Drinking Water Program, PO Box 14350, Portland, OR 97293-0350 Phone (971) 673-0405 Website: http://healthoregon.org/dwp/ Email dwp.dmce@state.or.us