



Water Quality Parameter Monitoring Form
Lead & Copper Rule Corrosion Control

(N = No = Excursion)

Total N's

1

<Has sample
met the
minimums?

DISTRIBUTION

PWS ID: 41 0 0 5 1 3

System Name: Medford Water

Sample Period: December /2025

Sample Frequency: Monthly

Distribution Samples required: _____

Number of excursions during this Sample Period = 0

(Number of locations when any WQP was less than the minimum.)

Note: Entry Point and Distribution Excursions are cumulative. Add Entry Point and Distribution Excursions to get total for sample period.

For OHA use only

Minimum Water Quality Parameters as set by

pH	
Alk	(Alkalinity)
PO4	(Orthophosphate)
Other	(_____)

Print Name: Matt Severloh

Signature: Mark Seward

Date: 1/6/2025

Send to Drinking Water Program 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/>