## OHA

Water Quality Parameter Monitoring Form

Oregon

Health Authority

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

County: Marion Agency: REGION 1 Have **ASR** minimums **ENTRY POINT** Date **System Status** ASR pH Alkalinity been met for the day? EP-B SU Y/N mg/L PWS ID: 4100731 6/1/2023 OFF System name City of Salem Public Works OFF **Entry Point** ASR Facility 6/2/2023 6/3/2023 OFF Sampling Period June 2023 6/4/2023 OFF 6/5/2023 OFF Number of excursions during this month 6/6/2023 OFF 0 6/7/2023 OFF 6/8/2023 OFF (Count the number of days when any WQP was less than the minimum required) 6/9/2023 OFF 6/10/2023 OFF 6/11/2023 OFF Total excursions during the previous 5 months 0 6/12/2023 OFF OFF (over 9 excursions in six months is a violation. 6/13/2023 6/14/2023 OFF Entry point and distribution excursions are cumulative) 6/15/2023 OFF 6/16/2023 OFF 6/17/2023 OFF For DHS use only 6/18/2023 OFF 6/19/2023 OFF **Minimum Water Quality** Parameters as set by State 6/20/2023 OFF 6/21/2023 OFF 6/22/2023 OFF рΗ 6/23/2023 OFF 6/24/2023 OFF Alkalinity 20 mg/l 6/25/2023 OFF 6/26/2023 ON 7.54 29.0 6/27/2023 ON 7.84 27.0 6/28/2023 ON 7.54 27.0 Υ 7.42 6/29/2023 ON 25.0 Υ **Print Name: Dwayne Barnes** 6/30/2023 ON 7.38 25.0 Signature: July 3, 2023 Date: (No=N=Excursion) Total N's

Send to DHS within 10 days after end of sampling period DHS-Drinking Water Program, PO Box 14350, Portland OR 97293-0350 Phone (971) 673-0405