## OHA

Water Quality Parameter Monitoring Form

Oregon

Health Authority

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

Date	System Status	ASR pH	ASR Alkalinity	Have minimums been met for the dav?		ENTRY POINT EP-B	
		SU	mg/L	Y/N		PWS ID: 4100731	
1/1/2024	OFF				System name	City of Salem Public Works	
1/2/2024	OFF				Entry Point	ASR Facility	
/3/2024	OFF				Sampling Period	January 2024	
1/4/2024	OFF					,	
/5/2024	OFF						
1/6/2024	OFF				Number of excursions during this month 0		
1/7/2024	OFF					_	
1/8/2024	OFF				(Count the number of days when any WQP was less		
/9/2024	OFF				than the minimum required)		
1/10/2024	OFF						
1/11/2024	OFF				Total excursions during the previous 5 months 0		
/12/2024	OFF					_	
1/13/2024	OFF				(over 9 excursions in six months is a violation.		
/14/2024	OFF				Entry point and distribution excursions are cumulative)		
1/15/2024	OFF						
1/16/2024	OFF						
/17/2024	OFF				For DHS use only		
/18/2024	OFF						
/19/2024	OFF				Minimum	Water Quality	
/20/2024	OFF				Parameters as set by State		
/21/2024	OFF						
1/22/2024	OFF				рН	7.2	
1/23/2024	OFF						
/24/2024	OFF				Alkalinity	15 mg/l	
1/25/2024	OFF						
1/26/2024	OFF						
1/27/2024	OFF						
/28/2024	OFF						
/29/2024	OFF				Print Name:	Dwayne ₿arnes	
/30/2024	OFF				Signature:		
/31/2024	OFF				Date:	February 5, 2024	
					= ~***	-	
No=N=Exc			Total N's	0			

Send to DHS within 10 days after end of sampling period