

Water Quality Parameter Monitoring Form  
**Lead & Copper Rule Corrosion Control**

County: Marion Agency: REGION 1

Date	System Status	ASR pH	ASR Alkalinity	Have minimums been met for the day?
		SU	mg/L	Y/N
11/1/2024	off			
11/2/2024	off			
11/3/2024	off			
11/4/2024	off			
11/5/2024	off			
11/6/2024	off			
11/7/2024	off			
11/8/2024	off			
11/9/2024	off			
11/10/2024	off			
11/11/2024	off			
11/12/2024	off			
11/13/2024	off			
11/14/2024	off			
11/15/2024	OFF			
11/16/2024	OFF			
11/17/2024	OFF			
11/18/2024	OFF			
11/19/2024	OFF			
11/20/2024	off			
11/21/2024	OFF			
11/22/2024	OFF			
11/23/2024	OFF			
11/24/2024	OFF			
11/25/2024	OFF			
11/26/2024	OFF			
11/27/2024	OFF			
11/28/2024	OFF			
11/29/2024	OFF			
11/30/2024	OFF			
(No=N=Excursion)			<b>Total N's</b>	0

<b>ENTRY POINT</b>
<b>EP-B</b>
<b>PWS ID: 4100731</b>
City of Salem Public Works
ASR Facility
November 2024

<b>System name</b>	City of Salem Public Works
<b>Entry Point</b>	ASR Facility
<b>Sampling Period</b>	November 2024

**Number of excursions during this month** 0


(Count the number of days when any WQP was less than the minimum required)

**Total excursions during the previous 5 months** 4

(over 9 excursions in six months is a violation. Entry point and distribution excursions are cumulative)

For DHS use only	
<b>Minimum Water Quality Parameters as set by State</b>	
pH	<u>7.2</u>
Alkalinity	<u>15 mg/l</u>

**Print Name:** Dwayne Barnes

**Signature:** 

**Date:** December 5, 2024

Send to DHS within 10 days after end of sampling period