Oregon Health Authority

Water Quality Parameter Monitoring Form

# Lead & Copper Rule Corrosion Control

| ID # | Sample Location | pH | Alk | PO4 | Other | Y/N |
|---|---|---|---|---|---|---|
| RS3 | Admin sink 9/5 | 8.1 | | | | Y |

(N = No = Excursion) **Total N's** Ø

<Has sample met the minimum(s)?

County: Douglas Agency: REGION 2

## DISTRIBUTION

**PWS ID 4101092**

**USFS TILLER RANGER STATION**

**Sample Period:** Sept 24
Month/Year

**Sample Frequency:** Every 6 months

**Distribution Samples required:** 1

**Number of excursions during this Sample Period =** Ø

*(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.*

*Reference*

**Minimum Water Quality Parameters as set by State:**

pH 7.4

**Print Name:** Jonathan Woody

**Signature:** [signature]

**Date:** 10-9-2024

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/