

Water Quality Parameter Monitoring Form
Lead & Copper Rule Corrosion Control

ID #	Sample Location	pH	Alk	PO4	other	Y/N
4		7.1				
41		7.1				
48		7.1				
55		7.3				
61		7.2				

(N = No = Excursion) Total N's

<Has sample met the minimums?

DISTRIBUTION

PWS ID: 41 0 1 1 2 5

System Name: MTVIEW CO-OP A

Sample Period: Mar 2022

Sample Frequency: Weekly Month/Year

Distribution Samples required:

Number of excursions during this Sample Period = _____

(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: Rick White

Signature: R. L. Wright

Date: 3-31-2022

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 (503) 672-0125

Phone (971) 673-0405 Website: <http://healthoregon.org/dwp/>