

Water Quality Parameter Monitoring Form
Lead & Copper Rule Corrosion Control

ID #	Sample Location	pH	Alk	PO ₄	other	Y/N
0-6		7.6				
9-13		7.4				
-20		7.5				
27		7.5				

(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: 10/2023

Sample Frequency: Week ^{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 7.1

Alk (Alkalinity)

PO4 (Orthophosphate)

Other ()

Print Name: Ricky White

Signature: Ry 1-white

Date: 10-31-23

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/>