

Water Quality Parameter Monitoring Form

Lead & Copper Rule Corrosion Control

Day	рН	Alk	Phos	Other	Y/N	<pre><<have entry="" minimums="" point<="" pre=""></have></pre>		
1						minimums been met for		
2						this day? PWS ID: 41 0 / 2 3 3		
3						System Name: Deer Island Water		
4						System Name. <u>Jeev 13/44/7 Way</u>		
5						Entry Point:		
6						Sample Period: 4/2021 Month/Year		
7								
8						Number of excursions* during this month:		
9						(Count the number of days when any WQP was		
10						less than the minimum required)		
11								
12						Total excursions during the previous 5 months (Over 9 excursions in 6 months is a violation. Entry Point and Distribution excursions are cumulative) For OHA use only		
13								
14	7.3				Y			
15								
16						r or or in t doe only		
17						Minimum Water Quality		
18						Parameters as set by		
19								
20						pH		
21						Alk (Alkalinity)		
22						PO4 (Orthophosphate)		
23						Other		
24								
25								
26								
27						Print Name: QAvid Graham		
28						4 1 / 1 //		
29	7.2				У	Signature: (1) (1) (1) (2) (2) (2)		
30								
31					V	Send to DWP 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/