



Water Quality Parameter Monitoring Form

Lead & Copper Rule Corrosion Control



Day	pH	Alk	Phos	Other	Y/N
1	—				
2	—				
3	—				
4	—				
5	—				
6	—				
7	—				
8	—				
9	—				
10	—				
11	—				
12	—				
13	—				
14	—				
15	—				
16	—				
17	—				
18	—				
19	—				
20	—				
21	—				
22	8.6				
23	8.5				
24	8.7				
25	8.5				
26	—				
27	—				
28	8.4				
29	8.3				
30	8.4				
31	8.3				

<<Have minimums been met for this day? **ENTRY POINT**

PWS ID: 41 90541

System Name: Camas Valley School

Entry Point: Water House

Sample Period: Aug 2023
Month/Year

Number of excursions* during this month: _____
 (Count the number of days when any WQP was less than the minimum required)

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

Minimum Water Quality Parameters as set by

pH

Alk (Alkalinity)

PO4 (Orthophosphate)

Other (_____)

Print Name: Robert Gerke

Signature:

Date: 8-31-23

Send to DWP within 10 days after end of sampling period

(No = N = Excursion) Total N's



Home of the Hornets

Fax Cover Sheet

Camas Valley School District
P.O. Box 57
Camas Valley, OR 97416

Telephone: 541-445-2131 Ext. 4229

Fax: 541-445-2041

To: OHA Drinking Water Program 971-673-0458

From: rgerke@camasvalley.k12.or.us

RE: _____

2 Pages, including cover sheet

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