



Water Quality Parameter Monitoring Form Lead & Copper Rule Corrosion Control



Day	pH	Alk	Phos	Other	Y/N
1	7.5				
2	7.5				
3	7.3				
4	7.6				
5	—				
6	—				
7	—				
8	7.6				
9	7.5				
10	7.5				
11	7.7				
12	—				
13	—				
14	—				
15	7.7				
16	7.5				
17	7.7				
18	7.4				
19	—				
20	—				
21	—				
22	7.5				
23	7.7				
24	7.5				
25	7.6				
26	—				
27	—				
28	—				
29	7.7				
30	7.8				
31	—				

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

PWS ID: 41

System Name: Camas Valley School

Entry Point: Water House

Sample Period: April 2024
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 (Alkalinity)

Alk (Alkalinity)

PO4 (Orthophosphate)

Other (_____)

Print Name: Robert Gerke

Signature: _____

Date: _____

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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