

## Water Quality Parameter Monitoring Form Lead & Copper Rule Corrosion Control

ID #	Sample Location	pH	Alk	PO4	other	Y/N
5/2	HEALTH ROOM.	7-				
5/9	HEALTH ROOM	7				
5/18	HEALTH ROOM	7.4				
5/25	HEALTH ROOM	7.7				

<Has sample met the minimums? **DISTRIBUTION**

PWS ID: 41 9 1 8 0 5

System Name: ELMIRA HIGH / ELEMENTARY

Sample Period: MAY 2022  
Month/Year

Sample Frequency: WKLY

Distribution Samples required: \_\_\_\_\_

Number of excursions during this Sample Period = 2

(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 7.2

Alk \_\_\_\_\_ (Alkalinity)

PO4 \_\_\_\_\_ (Orthophosphate)

Other \_\_\_\_\_ (\_\_\_\_\_)

(N = No = Excursion) Total N's 2

Print Name: THIESSEN

Signature: [Signature]

Date: 6-7-22

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/>