CAL.. ORNIA REGIONAL WATER QUALITY CON . .OL BOARD
COLORADO RIVER BASIN

WDID NO.: 7A1310570011
ORDER NO.: R7-2003-0054
NPDES NO.: CA0104841
REPORTING FREQUENCY: QUARTERLY

MONITORING AND REPORTING PROGRAM
FOR DATE GARDENS MOBILE HOME PARK
QUARTER MARCH
YEAR 2005

TYPE OF SAMPLE:	INFLUENT		RECEIVING WATER - R1 (UPSTREAM)				
CONSTITUENTS	20°C BOD_5	Sus. Solids	DO	Hydrogen Ion	Chlorine	E. Coli	
FREQUENCY	Quarterly	Quarterly	Quarterly	Quarterly	Quarterly	Quarterly	
DESCRIPTION	24-Hr. Comp.	24-Hr. Comp.	Grab	Grab	Grab	Grab	
UNITS	mg/L	mg/L	mg/L	pH Units	mg/L	MPN/100mL	
REQUIREMENTS							
30-DAY MEAN							
7-DAY MEAN							
MAXIMUM							
DATE OF SAMPLE							
1							
2							
3							
4							
5							
6							
7	144	248.5	7.8	7.86			
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							
31							
QUARTER MEAN							
MAXIMUM							

I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure qualified personnel properly gather and evaluate the information submitted based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations.

Signature: [illegible]

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MONITORING AND REPORTING PROGRAM
FOR DATE GARDENS MOBILE HOME PARK
QUARTER MARCH
QUARTERLY REPORT

RECEIVED
APR 07 2005
REGION 7

M3Q1

CAL.. ORNIA REGIONAL WATER QUALITY CON..ROL BOARD
COLORADO RIVER BASIN

REPORTING FREQUENCY: QUARTERLY

YEAR 2005

TYPE OF SAMPLE:	RECEIVING WATER - R2 (DOWNSTREAM)					EFFLUENT	
CONSTITUENTS	DO	Hydrogen Ion	Chlorine	E. Coli		20°C BOD_5	Sus. Solids
FREQUENCY	Quarterly	Quarterly	Quarterly	Quarterly			
DESCRIPTION	Grab	Grab	Grab	Grab		% Removal	% Removal
UNITS	mg/L	pH Units	mg/L	MPN/100mL			
REQUIREMENTS							
30-DAY MEAN						85%	85%
MINIMUM	5.0	6.0					
MAXIMUM		9.0	0.02	400			
DATE OF SAMPLE							
0.008465							
0.00874							
0.009385							
0.009183							
0.008825							
0.009912							
0.008555	7.8	7.34				9	4.5
0.008642							
0.00954							
0.008165							
0.00918							
0.009458							
0.010565							
0.008819							
0.008385							
0.007895							
0.010265							
0.008527							
0.010165							
0.009682							
0.009111							
0.008645							
0.010399							
0.008589							
0.009165							
0.009535							
0.008485							
0.010025							
0.008733							
0.009212							
0.010445							
QUARTER MEAN							
MAXIMUM							

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Signature: R. Nordberg

WDID NO.: 7A1310570011
ORDER NO.: R7-2003-0054
NPDES NO.: CA0104841
REPORTING FREQUENCY: QUARTERLY

MONITORING AND REPORTING PROGRAM
FOR DATE GARDENS MOBILE HOME PARK
QUARTER MARCH
YEAR 2005

QUARTERLY REPORT

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REGION 7

CAL.. ORNIA REGIONAL WATER QUALITY CON..OL BOARD
COLORADO RIVER BASIN

1. Is there receiving water at Station R-1? Yes No
If the answer is no proceed to Station R-2 Section, otherwise continue with the following questions.
PLEASE CIRCLE THE APPROPRIATE ANSWER

Station R-1 Section (The following questions refer to Station R-1)

1. Is there the presence of floating or suspended matter present?	Yes	No
2. Is there discoloration present?	Yes	No
3. Is there aquatic life present?	Yes	No
4. Is there visible film, sheen or coating present?	Yes	No
5. Is there fungi, slime or objectable growths present?	Yes	No
6. Is there potential nuisance conditions present?	Yes	No

Station R-2 Section (The following questions refer to Station R-2)

Is there the presence of floating or suspended matter present?	Yes	No
Is there discoloration present?	Yes	No
Is there aquatic life present?	Yes	No
Is there visible film, sheen or coating present?	Yes	No
Is there fungi, slime or objectable growths present?	Yes	No
Is there potential nuisance conditions present?	Yes	No

Any additional comments.

I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure qualified personnel properly gather and evaluate the information submitted based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations.

Signature: R. Vanderwolf

QUARTERLY REPORT

RECEIVED
APR 07 2005
DIVISION

TESTED AT ATS LABORATORIES, BRAWLEY, CA DATE

RECEIVED: 3-7-05 1225PM ANALYSIS:

SAMPLED FROM CLIENT: DISTRICT:

DATE GARDENS

SAMPLED BY: ROD

DATE/TIME: 3-7-05

TYPE OF SAMPLE: RAW

CHLORINE RESIDUE: ?

SITE CODE 21-3 SAMPLE SITE: R 1

DILUTION: 1.0, 0.1, 0.01 ML

TOTAL COLIFORM = PRESENCE
FECAL COLIFORM = PRESENCE
E COLI = PRESENCE

ANALYST: LLW/MO COLIFORM=>=16000/FECAL=3000/ECOLI=1700/100ML

DATE START: 3-7-05 TIME START: 1230PM

DATE COMPLETED: 3-9-05 TIME COMPLETED: 1000AM

DATE REPORTED: 3-9-05 METHOD NAME: 9221BE/F/

ATS LABORATORIES 104 S 8TH ST., BRAWLEY, CA 92227

LAB DIRECTOR, LINDA L WEBSTER, PHONE 760-344-2532

Upstream

TESTED AT ATS LABORATORIES, BRAWLEY, CA DATE M7982-3

RECEIVED: 3-7-05 1225PM ANALYSIS:

SAMPLED FROM CLIENT: DISTRICT

DATE GARDENS

SAMPLED BY: ROD

DATE/TIME: 3-7-05

TYPE OF SAMPLE: RAW

CHLORINE RESIDUE: ?

SITE CODE: 21-4 SAMPLE SITE: R

DILUTION: 1.0, 0.1, 0.01 ML

TOTAL COLIFORM PRESENCE
FECAL COLIFORM = PRESENCE
E COLI = PRESENCE

ANALYST: LLW/MO CLIFORM=>=16000/FECAL=16000/ECOLI=3000/100ML

DATE START: 3-7-05 TIME START: 1230PM

DATE COMPLETED: 3-9-05 TIME COMPLETED: 1000AM

DATE REPORTED: 3-9-05 METHOD: 9221B/E/F

ATS LABORATORIES 104 S 8TH ST., BRAWLEY, CA 92227

LAB DIRECTOR: LINDA L WEBSTER , PHONE 760-344-2532

Downstream

RECEIVED
APR 07 2005
REGION 7

BACTERIOLOGICAL ANALYSIS OF WATER LAB NO: M8020

TESTED AT ATS LABORATORIES, BRAWLEY, CA DATE

RECEIVED: 3-14-05 _ _ 215PM ANALYSIS: _____

SAMPLED FROM CLIENT: DISTRICT

DATE GARDENS

SAMPLED BY: ROD

DATE/TIME: 3-14-05 ?

TYPE OF SAMPLE: RAW

CHLORINE RESIDUE: UV

SITE CODE: 21-2

SAMPLE SITE: FIN EFF

TOTAL COLIFORM	PRESENCE	DILUTION: 1.0, 0.1, 0.01 ML
FECAL COLIFORM =	PRESENCE	
E COLI =	PRESENCE	

ANALYST: LLW/MO COLIFORM=1300/FECAL=1300/ECOLI=1300/100ML

DATE START:	3-14-05	TIME START:	230AM
DATE COMPLETED:	3-16-05	TIME COMPLETED:	130PM
DATE REPORTED:	3-17-05	METHOD:	9221B/E/F

ATS LABORATORIES 104 S 8TH ST., BRAWLEY, CA 92227

LAB DIRECTOR: LINDA L WEBSTER , PHONE 760-344-2532

RECEIVED

APR 07 2005

REGION 7

BACTERIOLOGICAL ANALYSIS OF WATER LAB NO: M8095

TESTED AT ATS LABORATORIES, BRAWLEY, CA DATE

RECEIVED: 1100AM 3-28-05 ANALYSIS:

SAMPLED FROM CLIENT:

DATE GARDENS

DISTRICT

SAMPLED BY: R.V.

DATE/TIME: 3-28-05 730AM

TYPE OF SAMPLE: RAW

CHLORINE RESIDUE: UV

SITE CODE: 212

SAMPLE SITE: FINAL EFF

TOTAL COLIFORM = PRESENCE

FECAL = PRESENCE

E COLI = PRESENCE

DILUTION: 1.0, 0.1, 0.01/ML

ANALYST: LLW/MO

COLIFORM= ≤16000/FECAL=5000/ECOLI=2200/100ML

DATE START: 3-28-05

TIME START: 1100AM

DATE COMPLETED: 3-30-05

TIME COMPLETED: 700AM

DATE REPORTED: 3-30-05

METHOD: 9221B/E/F

ATS LABORATORIES 104 S 8TH ST., BRAWLEY, CA 92227

LAB DIRECTOR: LINDA L WEBSTER , PHONE 760-344-2532

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REGION 7

APR 07 2005

REGION 7

**********BACTERIOLOGICAL ANALYSIS OF WATER********** M7975 **********

TESTED AT ATS LABORATORIES, BRAWLEY, CA DATE

RECEIVED: 3-7-05 1030AM ANALYSIS:

SAMPLED FROM CLIENT: DISTRICT:

DATE GARDENS

SAMPLED BY: ROCKY

DATE/TIME: 3-7-05 930AM

TYPE OF SAMPLE: RAW

CHLORINE RESIDUE: UV

SITE CODE: 21-2 SAMPLE SITE: FIN EFF

TOTAL COLIFORM = PRESENCE DILUTION: 1.0, 0.1, 0.01 ML

FECAL COLIFORM PRESENCE

E COLI = PRESENCE

ANALYST: LLW/MO COLIFORM=>=16000/FECAL=>=16000/ECOLI=>=16000/100ML

DATE START: 3-7-05 TIME START: 1030AM

DATE COMPLETED: 3-9-05 TIME COMPLETED: 900AM

DATE REPORTED: 3-9-05 METHOD NAME: 9221BE/F/

ATS LABORATORIES 104 S 8TH ST., BRAWLEY, CA 92227

LAB DIRECTOR, LINDA L WEBSTER, PHONE 760-344-2532

**********BACTERIOLOGICAL ANALYSIS OF WATER********** LAB NO. **********

TESTED AT ATS LABORATORIES, BRAWLEY, CA DATE M7982-1

RECEIVED: 3-7-05 1225PM ANALYSIS:

SAMPLED FROM CLIENT: DISTRICT

DATE GARDENS

SAMPLED BY: ROD

DATE/TIME: 3-7-05

TYPE OF SAMPLE: RAW

CHLORINE RESIDUE: UV

SITE CODE: 21-2 SAMPLE SITE: FIN EFF

TOTAL COLIFORM PRESENCE DILUTION: 1.0, 0.1, 0.01 ML

FECAL COLIFORM = PRESENCE

E COLI = PRESENCE

ANALYST: LLW/MO CLIFORM=>=16000/FECAL=>=16000/ECOLI=>=16000/100ML

DATE START: 3-7-05 TIME START: 1230PM

DATE COMPLETED: 3-9-05 TIME COMPLETED: 1000AM

DATE REPORTED: 3-9-05 METHOD: 9221B/E/F

ATS LABORATORIES 104 S 8TH ST., BRAWLEY, CA 92227

LAB DIRECTOR: LINDA L WEBSTER , PHONE 760-344-2532

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APR 07 2005
REGION 7

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BACTERIOLOGICAL ANALYSIS OF WATER LAB NO: M8049

TESTED AT ATS LABORATORIES, BRAWLEY, CA DATE

RECEIVED 3-21-05 1021AM ANALYSIS:

SAMPLED FROM CLIENT: DISTRICT

DATE GARDENS

SAMPLED BY: RV

DATE/TIME: 3-21-05 900AM

TYPE OF SAMPLE: RAW

CHLORINE RESIDUE: UV

SITE CODE: 21-2

SAMPLE SITE: FINAL EFFLUENT

TOTAL COLIFORM PRESENCE DILUTION; 1.0,0.1,0.01ML

FECAL COLIFOR= PRESENCE

ECOLI= PRESENCE

ANALYST: LLW/MO COLIFORM=300/FECAL=300/ECOLI=300/100ML

DATE START: 3-21-05 TIME START: 1030AM

DATE COMPLETED: 3-24-05 TIME COMPLETED: 730AM

DATE REPORTED: 3-24-05 METHOD: 9221B/E/F

ATS LABORATORIES 104 S 8TH ST., BRAWLEY, CA 92227

****** LAB DIRECTOR: LINDA L WEBSTER, PHONE 760-344-2582 ******

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REGION 7