

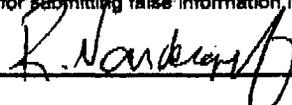
CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD  
 COLORADO RIVER BASIN

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

MONITORING AND REPORTING PROGRAM  
 FOR DATE GARDENS MOBILE HOME PARK  
 MONTH JUNE  
 YEAR 2006

TYPE OF SAMPLE: EFFLUENT							
CONSTITUENTS	Flow	Sus. Solids	20°C BOD <sub>5</sub>	pH	E. Coli	Chlorine	TDS
FREQUENCY	Daily	Monthly	Monthly	Monthly	5 Samples/Mo.	Daily	Monthly
DESCRIPTION		24-Hr. Comp.	24-Hr. Comp.	Grab	Grab	Grab	Grab
UNITS	mgd	mg/L	mg/L	pH UNITS	MPN/100mL	mg/L	mg/L
REQUIREMENTS							
30-DAY MEAN	0.021	30	30	6.0-9.0	126	0.01	2000
7-DAY MEAN		45	45	6.0-9.0			2500
MAXIMUM					400	0.02	
DATE OF SAMPLE							
1	0.0930						
2	0.0950						
3	0.0098						
4	0.0098						
5	0.0091						
6	0.0093						
7	0.0094	7.8	6.8	7.1	2	0	
8	0.0098						
9	0.0094						
10	0.0096						
11	0.0092						
12	0.0091				11		
13	0.0098						
14	0.0098				30		
15	0.0093						
16	0.0094						
17	0.0098						
18	0.0098						
19	0.0091						
20	0.0093						
21	0.0094				22		
22	0.0094						
23	0.0097						
24	0.0098						
25	0.0084						
26	0.0093						
27	0.0096						
28	0.0097				4		
29	0.0098						
30	0.0098						
31							
30-DAY MEAN	0.0092	7.8	6.8	7.1	9	0	#DIV/0!
7-DAY MEAN							
MAXIMUM	0.0099	7.8	6.8	7.1	30	0	#DIV/0!

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: 

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MONTHLY REPORT

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD  
 COLORADO RIVER BASIN

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ORDER NO.: R7-2003-0064  
 NPDES NO.: CA0104841  
 REPORTING FREQUENCY: QUARTERLY

MONITORING AND REPORTING PROGRAM  
 FOR DATE GARDENS MOBILE HOME PARK  
 QUARTER: SECOND  
 YEAR: 2006

TYPE OF SAMPLE:	INFLUENT		RECEIVING WATER - R1 (UPSTREAM)			
	20°C BOD <sub>5</sub>	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	330.0	197.0	6.6	7.1	0.0	1700.0
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	330.0	197.0	6.6	7.1	0.0	1700.0
MAXIMUM						

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Signature: *K. [Signature]*

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CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD  
 COLORADO RIVER BASIN

WDID NO.: 7A1310570011  
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 REPORTING FREQUENCY: QUARTERLY

MONITORING AND REPORTING PROGRAM  
 FOR DATE GARDENS MOBILE HOME PARK  
 QUARTER: SECOND  
 YEAR: 2006

TYPE OF SAMPLE:	RECEIVING WATER - R2 (DOWNSTREAM)				EFFLUENT	
CONSTITUENTS	DO	Hydrogen Ion	Chlorine	E. Coli	20°C BOD <sub>5</sub>	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					%	%
MINIMUM	5.0	6.0			85	85
MAXIMUM		9.0	0.02			
DATE OF SAMPLE						
1						
2						
3						
4						
5						
6						
7	6.1	6.7	0.0	30.0	97	96
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	6.1	6.7	0.0	30.0	97	96
MAXIMUM	6.1	6.7	0.0	30.0	97	96

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Signature: R. Vandenberg

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COLORADO RIVER BASIN

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REPORTING FREQUENCY: QUARTERLY

MONITORING AND REPORTING PROGRAM  
FOR DATE GARDENS MOBILE HOME PARK  
QUARTER: SECOND  
YEAR: 2006

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
- 2. Is there discoloration present? Yes
- 3. Is there aquatic life present? Yes
- 4. Is there visible film, sheen or coating present? Yes
- 5. Is there fungi, slime or objectionable growths present? Yes
- 6. Is there potential nuisance conditions present? Yes

- No
- No
- No
- No
- No
- No

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

- Is there the presence of floating or suspended matter present? Yes
- Is there discoloration present? Yes
- Is there aquatic life present? Yes
- Is there visible film, sheen or coating present? Yes
- Is there fungi, slime or objectionable growths present? Yes
- Is there potential nuisance conditions present? Yes

- No
- No
- No
- No
- No
- No

Any additional comments.

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Signature: R. Anderson

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REGION 7 QUARTERLY REPORT



**Imperial Valley Environmental Laboratory**

331 West 2<sup>nd</sup> Street  
Calxico CA, 92231  
(Tel) 760-357-8764  
(Fax) 760-357-8765  
ELAP Certification # 2524

Client: Date Gardens RV.

Contact: Rocky V.

Log Number: M1112  
Sample ID: M1112-3  
Sample Site: Effluent  
Collected by: Hector O  
Date Sampled and Time: 06-07-06, 9:39am  
Temperature: 35° Celcius

Received by: Patty Hardin  
Date Received: 06-07-06  
Time Received: 12:50pm  
Test Start Time: 1:00pm  
Chlorine Residual: 0  
Date Test Ended: 06-09-06  
Test End Time: 1:45pm

**Analytical Results**

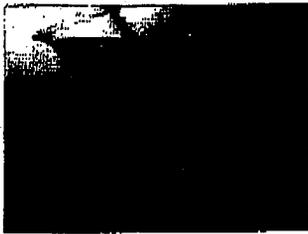
Date	Final Result	Test Name	Count	Volume Tested
06-09-06	Total Coliform --	MPN by MTF	2	MPN- 100mL. Water
06-09-06	Fecal Coliform -	MPN by MTF	2	MPN- 100mL. Water
06-09-06	E. Coli -	MPN by MTF	2	MPN- 100mL. Water

Miguel E. Ortega, Laboratory Director

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REGION 7



**Imperial Valley Environmental Laboratory**

331 West 2<sup>nd</sup> Street  
Calexico CA, 92231  
(Tel) 760-357-8764  
(Fax) 760-357-8765  
ELAP Certification # 2524

Client: Date Gardens RV.

Contact: Rocky V.

Log Number: M1119  
Sample ID: M1119  
Sample Site: Effluent  
Collected by: Hector O  
Date Sampled and Time: 06-12-06, 12:01pm  
Temperature: 13° Celcius

Received by: Patty Hardin  
Date Received: 06-12-06  
Time Received: 3:40pm  
Test Start Time: 3:50pm  
Chlorine Residual: 0  
Date Test Ended: 06-15-06  
Test End Time: 3:00pm

**Analytical Results**

Date	Final Result	Test Name	Count	Volume Tested
06-15-06	Total Coliform --	MPN by MTF	30	MPN- 100mL. Water
06-15-06	Fecal Coliform -	MPN by MTF	11	MPN- 100mL. Water
06-15-06	E. Coli -	MPN by MTF	11	MPN- 100mL. Water

Miguel E. Ortega, Laboratory Director

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