

**MONTHLY SUMMARY OF DISTRIBUTION SYSTEM COLIFORM MONITORING**  
 (including triggered source monitoring for systems subject to the Groundwater Rule)

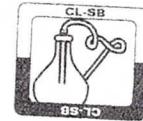
System Name Mount Baldy Community	System Number 3610033																																																												
Sampling Period Month April	Year 2023																																																												
<table border="1"> <thead> <tr> <th></th> <th>Number Required</th> <th>Number Collected</th> <th>Number Total Coliform Positives</th> <th>Number Fecal/E.coli Positives</th> </tr> </thead> <tbody> <tr> <td>1. Routine Samples (see note 1)</td> <td>1</td> <td>1</td> <td>0</td> <td>0</td> </tr> <tr> <td>2. Repeat Samples following Samples that are Total Coliform Positive and Fecal/E.coli Negative (see notes 5 and 6)</td> <td></td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>3. Repeat Samples following Routine Samples that are Total Coliform Positive and Fecal/E.coli Positive (see notes 5 and 6)</td> <td></td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>4. MCL Computation for Total Coliform Positive Samples</td> <td></td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>a. Totals (sum of columns)</td> <td></td> <td>1</td> <td>0</td> <td>0</td> </tr> <tr> <td>b. If 40 or more samples collected in month, determine percent of samples that are total coliform positive [(total number positive/total number collected) x 100] =</td> <td></td> <td></td> <td>%</td> <td></td> </tr> <tr> <td>c. Is system in compliance... ...with fecal/E. coli MCL? (see notes 2 and 3)</td> <td>Yes</td> <td>No</td> <td></td> <td></td> </tr> <tr> <td>...with monthly MCL? (see note 4)</td> <td>Yes</td> <td>No</td> <td></td> <td></td> </tr> <tr> <td>5. Source Samples Triggered by Routine Samples that are Total Coliform Positive (This applies only to systems subject to the Groundwater Rule - see notes 7 and 8)</td> <td></td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>6. Invalidated Samples (Note what samples, if any, were invalidated; who authorized the invalidation; and when replacement samples were collected. Attach additional sheets, if necessary.)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>7. Summary Completed By:</td> <td colspan="3"></td> <td></td> </tr> </tbody> </table>			Number Required	Number Collected	Number Total Coliform Positives	Number Fecal/E.coli Positives	1. Routine Samples (see note 1)	1	1	0	0	2. Repeat Samples following Samples that are Total Coliform Positive and Fecal/E.coli Negative (see notes 5 and 6)		0	0	0	3. Repeat Samples following Routine Samples that are Total Coliform Positive and Fecal/E.coli Positive (see notes 5 and 6)		0	0	0	4. MCL Computation for Total Coliform Positive Samples		0	0	0	a. Totals (sum of columns)		1	0	0	b. If 40 or more samples collected in month, determine percent of samples that are total coliform positive [(total number positive/total number collected) x 100] =			%		c. Is system in compliance... ...with fecal/E. coli MCL? (see notes 2 and 3)	Yes	No			...with monthly MCL? (see note 4)	Yes	No			5. Source Samples Triggered by Routine Samples that are Total Coliform Positive (This applies only to systems subject to the Groundwater Rule - see notes 7 and 8)		0	0	0	6. Invalidated Samples (Note what samples, if any, were invalidated; who authorized the invalidation; and when replacement samples were collected. Attach additional sheets, if necessary.)					7. Summary Completed By:				
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**NOTES AND INSTRUCTIONS:**

1. Routine samples include:
  - a. Samples required pursuant to 22 CCR Section 64423 and any additional samples required by an approved routine sample sizing plan established pursuant to 22 CCR Section 64422.
  - b. Extra samples are required for systems collecting less than five routine samples per month that had one or more total coliform positives in previous month;
  - c. Extra samples for systems with high source water turbidities that are using surface water or groundwater under direct influence of surface water and do not practice filtration in compliance with regulations;
2. Note: For a repeat sample following a total coliform positive sample, any fecal/E.coli positive repeat (boxed entry) constitutes an MCL violation and requires immediate notification to the Division (22 CCR, Section 64426.1).
3. Note: For repeat sample following a fecal/E.coli positive sample, any total coliform positive repeat (boxed entry) constitutes an MCL violation and requires immediate notification to the Division (22 CCR, Section 64426.1).
4. Total coliform MCL (Notify the Division within 24 hours of MCL violation):
  - a. For systems collecting less than 40 samples, if two or more samples are total coliform positive, then the MCL is violated.
  - b. For systems collecting 40 or more samples, if more than 5.0 percent of samples collected are total coliform positive, then the MCL is violated.
5. Positive results and their associated repeat samples are to be tracked on the Coliform Monitoring Worksheet.
6. Repeat samples must be collected within 24 hours of being notified of the positive results. For systems collecting more than one routine sample per month, three repeat samples must be collected for each total coliform positive sample. For systems collecting one or fewer routine samples per month, four repeat samples must be collected for each total coliform positive sample.
7. For systems subject to the Groundwater Rule: Positive results and the associated triggered source samples are to be tracked on the Coliform Monitoring Worksheet.
8. For triggered sample(s) required as a result of a total coliform routine positive sample, an E.coli, enterococci, or coliphage positive triggered sample (boxed entry) requires immediate notification to the Division, Tier 1 public notification, and corrective action.

10/2009 - 8411

**Clinical Laboratory of San Bernardino, Inc.**  
Celebrating 50 Years of Analytical Service 1967-2017



**Client:** Choice Water Solutions  
8424 Santa Monica Blvd Ste 291  
West Hollywood CA, 90069

**Project:** Mt. Baldy HOA  
**Sub Project:**

**Sampler:** Ron Capotosto  
**Sampled:** 04/04/23

**Received:** 04/04/23 16:10  
**Reported:** 04/20/23

**Contact:** Ron Capotosto  
**Phone:** (760) 427-0603  
**Fax:**  
**System:**

**RESULTS**

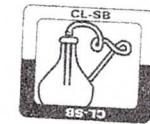
Laboratory ID	Sample Time	Sample Location	Total Coliform	E. Coli
23D0593-04	12:30	Ranger Station 6774 Mt Baldy Rd	P/A	P/A

A Absence of Bacteria  
P Presence of Bacteria

Bridget Durand  
Project Manager

Post Office Box 329 San Bernardino, CA 92402 (909) 825-7693 Fax (909) 825-7696 ELAP Number 1088

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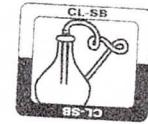
**RESULTS**

Laboratory ID	Sample Time	Sample Location	Total Coliform (Density) MPN/100 mL	E. Coli (Density) MPN/100 mL
23D0593-01	12:50	Bear Creek Spring	<1.0	<1.0
23D0593-02	12:15	Well 1	<1.0	<1.0
23D0593-03	12:15	Well 2	<1.0	<1.0

Bridget Durand  
Project Manager

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**Clinical Laboratory of San Bernardino, Inc.**  
 Celebrating 55 Years of Analytical Service 1967-2022



Choice Water Solutions 8424 Santa Monica Blvd Ste 291 West Hollywood CA, 90069	Project: Mt. Baldy HOA Sub Project: Project Manager: Ron Capotosto	Work Order: 23D0593 Received: 04/04/23 16:10 Reported: 04/21/23						
<b>Well 1</b>								
Analyte	23D0593-02 (Water)	Sample Date: 04/04/23 12:15 Sampler: Ron Capotosto						
<b>Synthetic Organic Analyses</b>								
Dalapon	EPA 515.4	ND	10	200	ug/L	04/17/23	04/18/23	2316001
2,4,5-TP (SILVEX)	EPA 515.4	ND	1.0	50	ug/L	04/17/23	04/18/23	2316001
Bentazon (BASAGRAN)	EPA 515.4	ND	2.0	18	ug/L	04/17/23	04/18/23	2316001
Picloram	EPA 515.4	ND	1.0	500	ug/L	04/17/23	04/18/23	2316001
2,4-D	EPA 515.4	ND	10	70	ug/L	04/17/23	04/18/23	2316001
Pentachlorophenol (PCP)	EPA 515.4	ND	0.20	1	ug/L	04/17/23	04/18/23	2316001
Dinoseb (DNBP)	EPA 515.4	ND	2.0	7	ug/L	04/17/23	04/18/23	2316001
<i>Surrogate: 2,4-Dichlorophenylacetic acid</i>	<i>EPA 515.4</i>	<i>93 %</i>						
ND	Analyte NOT DETECTED at or above the reporting limit					04/17/23	04/18/23	2316001

Stu Styles For Bridget Durand  
Project Manager

Post Office Box 329 San Bernardino, CA 92402 (909) 825-7693 Fax (909) 825-7696 ELAP Number 1088

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**Clinical Lab of San Bernardino, Inc.**  
21881 Barton Road Grand Terrace CA 92313 909 825-7693 / 516-A N 8th St Lompoc CA 93436 805 737-7300

**Chain of Custody**

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