	Connecticut Depa Water Qua					_			ction	
PWS ID	PWS Name	iity wit	intoring a	iiiu Coii	Classifi				er Tyne P	rimary Source
CT0070014	BERLIN BOWLING CENTER				N		25	OWII	P	GW
	where applicable)		Service	Residen		mmercial		al	Combined	Agricultural
1782 BERLIN TU			Connectio		tiai co	1	maastin	ui -	COMBINE	7 Gileatearai
Towns Served:										
TOWNS SELVEU.	DENEIN	Mc	nitoring Re	auireme	nts					
Water System	n Facility: DISTRIBUTION SY			quireine	1163					
Total Coliforn	m (3100)						1	rou	tine (RT)	per quarter
Sampling	Point (Sampling Point ID)			Monitori	ng Perio	od Co	llection Pe			ance Status
	m Inventory of Active Sampling	Points		7/1/19 -						mplete
	, ,			10/1/19 -						mplete
				1/1/20 -						mplete
				4/1/20 -						•
				7/1/20 -						
Physical Para	ameters (PPS)			., _, _	2, 2 0, 2	-	1	rou	tine (RT)	per quarter
-	Point (Sampling Point ID)			Monitori	na Perio	nd Co	- llection Pe			ance Status
	m Inventory of Active Sampling	Points		7/1/19 -				7.00		mplete
30,000,1101	Threaten y or Active Sampling	1 011163		10/1/19 -						mplete
				1/1/20 -						mplete
				4/1/20 -					CO	ilipiete
\A/=+= C=+=	- Facility - FAITDY BOINT (M	/CE ID: 00	700\	7/1/20 -	9/30/2	U				
	r Facility: ENTRY POINT (W	73F ID: 00	700)						/=	_\
	Nitrite (NOX)			0.4 a militari	las Davi	-d C-	llastian Da		=	RT) per year
	Point (Sampling Point ID)			Monitori			llection Pe	rioa		ance Status
ENTRY PO	INT (3)			1/1/19 -						mplete
				1/1/20 -					Co	mplete
				1/1/21 -						
	Water Sy	ystem F	acility and S	Sampling	Point	t Inven	itory			
Water						Tot		and		
,	ter System Facility		Point Sampling			Colife				Stage
Facility ID		ID	Descriptio		Sta			Tier	Asbestos	WQP 2 DBPR
00600 DIST	TRIBUTION SYSTEM	4	DISTRIBUT	ION SYSTEM	l A	A Y	,			
		DOWNSTR	EAM WITHIN 5	SERVICE CO	N A	4				
		UPSTRE/	AM WITHIN 5	SERVICE COI	N A	4				
00700 ENT	RY POINT	3	ENTRY PO	NT	P	4				
20130 WEL	<u>.L</u>	2	WELL		P	4				
59336 HYD	ROPNEUMATIC TANK									
			Contact Info	ormation	1					
Name			Organization						Job Title	
Mr. Charles W.	. lanza		Lanza Develo	nment IIC			Owner		300 1100	
Mailing Address		Mailing Ad	ddress Line Two	p.meme LLC			City		State	Zip Code
27 Homewood		Triuming AC	adicas Line TWO			Wolcott			CT	06716
Business Pho			Mobile Phone	Emergency	Dhone				CI	00/10
860-828-413	31			Lineigency	FIIOHE	Liliali AC	iui C33			
Contact Role(s)	Administrative Contact, Leg	al Contact	, Owner							

Schedule Generation Date: 3/10/2020 Page 1

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

			0		r			
ı	PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
(CT0070014	BERLIN BOWLING CENTER			NC	25	Р	GW
ı	Local Address (where applicable)		Service	Residen	ntial Commerc	ial Industri	al Combine	ed Agricultural
	1782 BERLIN TURNPIKE		Connections		1			

Towns Served: BERLIN

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Page 2

Schedule Generation Date: 3/10/2020

			_									
	Co	nnectic	ut Depa	rtment of	f Public	: Health l	Drink	ing Wa	ater Se	ction		
		Wa	ter Oua	lity Monit	oring a	ind Com	nliano	e Sche	edule			
PWS ID	DVA	'S Name	ter qua	incy Monne	or mg o		Classificat		lation Own	or Type D	rimaru	Source
			un.									
CT0070154		A SOCIAL CL	UB		Ci	D = = i = i = = + i	NC		25	P	GV	
		e applicable)			Service Connectio	Residentia			ndustrial	Combined	Agrio	cultural
999 KENSIN					Connectio	1115	1	L				
Towns Serv	ed: BERL	IN										
				Monit	oring Re	quiremen	ts					
Water Syst	tem Fac	ility: DISTR	IBUTION S'	YSTEM (WSF I	D: 00600)							
Total Coli		•			-				1 rou	tine (RT)	per al	uarter
	•	= c c , t (Sampling P	oint ID)			Monitoring	a Period	Collect	ion Period	Compl		
		entory of Act		Points		7/1/19 - 9					mplete	
						10/1/19 - 1					mplete	_
						1/1/20 - 3						
						4/1/20 - 6						
						7/1/20 - 9						
Total Coli	form (3	100)				,,1,20	750720		1 ro	peat (RP)	ner n	period
	_	t (Sampling P	oint ID)			Monitoring	a Period	Collect	ion Period	Compl		
		entory of Act		Points		7/23/08 - 7		Concer	ion i criou		mplete	
Physical P			ive Jampinig	TOITES		7723700 - 1	7720700		1 rou	tine (RT)		
-		eis (PP3) t (Sampling P	oint ID)			Monitoring	a Period	Collect	ion Period	Compli		
		entory of Act		Points		7/1/19 - 9		Conecti	ion renou		mplete	
Select	II OIII IIIV	entory of Act	ive Sampling	POIIICS		10/1/19 - 1						
										CC	mplete	=
						1/1/20 - 3						
						4/1/20 - 6						
						7/1/20 - 9	/30/20					
•			Y POINT (V	VSF ID: 00700)								
Nitrate A		• •								routine (F		-
		t (Sampling P	oint ID)			Monitoring		Collect	ion Period	Compl		
ENTRY	POINT (3)				1/1/19 - 12				Сс	mplete	9
						1/1/20 - 12						
						1/1/21 - 12	2/31/21					
			Water Sy	ystem Facil	ity and S	Sampling F	Point Ir	nventoi	ry			
Water								Total	Lead and			
System	Water Sy	stem Facility		Sampling Point	Sampling	Point		Coliform	Copper			Stage
Facility ID				ID	Descriptio	n	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
00600	DISTRIBU	TION SYSTEM	1	4	DISTRIBUT	ION SYSTEM	Α	Υ				
				DOWNSTREAM	WITHIN 5	SERVICE CON	Α					
				UPSTREAM	WITHIN 5	SERVICE CON	Α					
00700 I	ENTRY PO	DINT		3	ENTRY PO	INT	Α					
55105 \	WELL 2			2	WELL 2		Α					
55107 I	BLADDER	TANK										
				Car	tact Info	ormation						
						nination						
Name					rganization					Job Title		
Mr. Christo					Svea Social Club Inc				sident			
Mailing Add		e One		Mailing Addres	s Line Two			Ci	ty	State	Zip C	
201 Hamme	-							cky Hill		СТ	060	67
Business		Extension	Fax	Mobi	ile Phone	Emergency P	hone En	nail Addre	SS			
860-828-	9447											

860-828-9447

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements.

Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Schedule Generation Date: 3/10/2020 Page 3

	Connecticu	ıt Depa	irtment (of Public	Health	ı Drii	nking	g Water	Sect	ion	
	Wat	er Qua	lity Mon	itoring a	nd Con	nplia	nce S	Schedul	le		
PWS ID	PWS Name					Classif	ication	Population	Owner ⁻	Гуре Р	Primary Source
CT0070154	SVEA SOCIAL CLU		NC			25	Р		GW		
Local Address (w	here applicable)			Service	Resider	ntial Co	mmerci	al Industri	al Cor	nbined	d Agricultural
999 KENSINGTOI	N ROAD			Connection	ns		1				
Towns Served: B	ERLIN					,					
Contact Role(s):	Administrative C	ontact, Leg	gal Contact, O	wner							
Name				Organization					Jol	Title	
Svea Social Club											
Mailing Address	Line One		Mailing Addr	ess Line Two				City	S	tate	Zip Code
P. O. Box 113 999 Kensingto			on Rd			Kensin		СТ	06037		
Business Phone Extension Fax		Mo	bile Phone	Emergency	/ Phone	Email A	Address				
Contact Role(s):	Owner										

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Schedule Generation Date: 3/10/2020

C		ut Depar						_			
	Wa	ter Quali	ty Mon	itoring a	and	Comp	oliano	e So	chedule		
PWS ID PV	VS Name					CI	lassificat	ion P	opulation C	Owner Type Pr	imary Source
CT0070204 SA	FARI GOLF						NC		25	Р	GW
Local Address (whe	re applicable)			Service	F	Residentia	l Comm	nercial	Industrial	Combined	Agricultural
2340 WILBUR CROS	SS HIGHWAY			Connection	ons		1	L			
Towns Served: BER	LIN										
			Moni	toring Re	quii	rement	ts				
Water System Fa	cility: DISTR	IBUTION SYS	TEM (WSF	ID: 00600)							
Total Coliform (3100)								1 ו	outine (RT) _I	oer quarter
Sampling Poir	nt (Sampling P	oint ID)			М	lonitoring	Period	Col	lection Peri	od Compli	ance Status
Select from In	ventory of Act	ive Sampling P	oints		7	/1/19 - 9/	/30/19			Co	mplete
					4	/1/20 - 6/	/30/20				
					7	/1/20 - 9/	/30/20				
Physical Parame										outine (RT) _ا	-
Sampling Poir						lonitoring		Col	lection Peri	-	ance Status
Select from In	ventory of Act	ive Sampling P	oints			/1/19 - 9/	-			Со	mplete
						/1/20 - 6/					
				-1	7	/1/20 - 9/	/30/20				
Water System Fa	•	Y POINT (WS	F ID: 0070	0)							
Nitrate And Nitr		4 1								1 routine (R	
Sampling Poir		oint ID)				lonitoring		Col	lection Peri	-	ance Status
ENTRY POINT	(3)					/1/19 - 12				Co	mplete
						/1/20 - 12					
			0.1	- "		/1/21 - 12	• •				
			Other	Compliar	ice S	schedu	les				
Compliance Schedu	ıle Activity					Du	e Date		Achiev	ed Date	
SEASONAL START L	IP COMPLETIC	N				4/1	1/2020				
		1	Public No	otificatio	n Re	quirem	nents				
				Compliance		Notice	Pub	lic Not	<u>ification</u>	PN Cert	<u>ification</u>
Violation/Situation				Period		Tier	Requi		Performed		Received
REVISED TOTAL CO	LIFORM RULE	,		/6/18 - 5/17/		3	6/18/2			6/28/2019	
		Water Sys	stem Fac	ility and S	Sam	pling P	oint Ir	nven	tory		
Water								Tota			
*	ystem Facility	Sa		nt Sampling		•		Colifo			Stage
Facility ID	LITIONI CVCTEN	•	ID	Description		C)/CTEN 4	Status	Rul		ier Asbestos	WQP 2 DBPR
00600 DISTRIB	UTION SYSTEM		4	DISTRIBU			A	Υ			
				M WITHIN 5			A				
00700 FNTDV D	OINT		UPSTREAM	WITHIN 5		ICE CON	Α				
00700 ENTRY P	OINT		3	ENTRY PO	IIN I		Α				
20145 WELL			2	WELL			A				
			Co	ntact Inf		ation					
Name				Organization						Job Title	
Mr. Tom Bukowski				Safari Golf, Ir	nc.				Owner - Pre		71.6.1
Mailing Address Lir	ne One	N	failing Addr	ess Line Two					City	State	Zip Code
78 Wildwood Lane		-		Lil Bi	1-			nsingt		СТ	06037
Business Phone	Extension	Fax	Mo	bile Phone	_	ergency Ph					
860-828-9800	has been a second	dia helm so o o	and a	of multiple and		50-828-86	-		@gmail.cor		
NOTE: This information	nas peen provide	u to neib owners i	una operators	or public water	svstem	s maintain d	compilance	: with d	rınkına water i	uuaiitv monitorin	u requirements.

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Schedule Generation Date: 3/10/2020 Page 5

Connecticut Department of Public Health Drinking Water Section	
Water Quality Monitoring and Compliance Schedule	

PWS ID	PWS Name					Clas	ssification	Population	Owner Type	Primary Source
СТ0070204	SAFARI GOLF						NC	25	Р	GW
Local Address (where applicable)			Service	Residen	itial Commerc		al Industri	al Combine	ed Agricultural	
2340 WILBUR CROSS HIGHWAY		Connections		1						

Towns Served: BERLIN

Contact Role(s): Administrative Contact, Legal Contact, Owner

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Page 6

Schedule Generation Date: 3/10/2020