

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

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180342 | BROOKFIELD OFFICE PARK ASSOCIATION | NTNC | 35 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 304 FEDERAL ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/19 | 6/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/20 | 6/1-9/30 | | | |
| | 1/1/21 - 12/31/21 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | |
| Chloride (1017) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Nitrate And Nitrite (NOX) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | | | |
| | 1/1/20 - 12/31/20 | | Complete | | |

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.

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

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180342 | BROOKFIELD OFFICE PARK ASSOCIATION | NTNC | 35 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 304 FEDERAL ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

| Nitrate And Nitrite (NOX) | 1 routine (RT) per year | | |
|---|--------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 1/1/21 - 12/31/21 | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Organic Chemicals (VOCS) | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: **WELL (WSF ID: 10064)**

| E. Coli (3014) | 1 routine (RT) per quarter | | |
|---|----------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL (2) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | GENERIC DISTRIBUTION | A | Y | | | |
| | | BOP001 | GROUND FL LADIES RM | A | Y | 2 | Y | Y |
| | | BOP002 | GROUND FLR LADIES R | A | Y | 2 | Y | Y |
| | | BOP003 | 2ND FLR LADIES LEFT | A | Y | 2 | Y | |
| | | BOP004 | 2ND FLR LADIES RIGHT | A | Y | 2 | Y | |
| | | BOP005 | 3RF FLR LADIES LEFT | A | Y | 2 | Y | |
| | | BOP006 | 3RD FLR LADIES RIGHT | A | Y | 2 | Y | |
| | | BOP007 | RR MENS RM 1F L | A | Y | 2 | Y | |

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180342 | BROOKFIELD OFFICE PARK ASSOCIATION | NTNC | 35 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 304 FEDERAL ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | BOP008 | RR MENS RM 1F R | A | Y | 2 | Y | |
| | | BOP009 | RR MENS RM 2F L | A | Y | 2 | Y | Y |
| | | BOP010 | RR MENS RM 2F M | A | Y | 2 | Y | Y |
| | | BOP011 | RR MENS RM 3F | A | Y | 2 | Y | Y |
| | | BOP012 | RR MENS RM 3F L | A | Y | 2 | Y | Y |
| | | BOP013 | RR MENS RM 3F R | A | Y | 2 | Y | Y |
| | | BOP014 | RR LADY ROOM 1F | A | Y | 2 | Y | Y |
| | | BOP015 | RR LADY ROOM 1F L | A | Y | 2 | Y | |
| | | BOP016 | RR LADY ROOM 1F R | A | Y | 2 | Y | |
| | | BOP017 | RR LADY RM 2F L | A | Y | 2 | Y | |
| | | BOP018 | RR LADY RM 2F R | A | Y | 2 | Y | |
| | | BOP019 | RR LADY RM 3F | A | Y | 2 | Y | |
| | | BOP020 | RR HAIR SALON | A | Y | 2 | Y | Y |
| | | BOP021 | DR OR DENTIS LAB SNK | A | Y | 2 | Y | Y |
| | | BOP022 | RR DR DENT OFFICE | A | Y | 2 | Y | Y |
| | | BOP023 | BKFLD HEALTH INJURY | A | Y | 2 | Y | Y |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10064 | WELL | 2 | WELL | A | | | | |
| 59400 | ATMOSPHERIC STORAGE | | | | | | | |
| 936 | TREATMENT SYSTEM | | | | | | | |

Certified Operator Information

Water System Facility: **TREATMENT SYSTEM (WSF ID: 936)**

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|-----------------|----------------|---|--------------------------|
| HURLBUT, ANDREW | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |

Contact Information

| | | | | | | | |
|---------------------------|-----------|--------------------------|--------------|-----------------|---------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. John J. Scarfi | | Brookfield Office Park | | | President | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 304 Federal Road | | Suite 114 | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-775-8757 | | 203-797-8706 | | | | | |
| Contact Role(s): | | Legal Contact | | | | | |

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.

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

| | | | | | | | | |
|--|---|---------------------|--------------------------|-----------------|--------------------|-----------|--------------|----------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | | |
| CT0180342 | BROOKFIELD OFFICE PARK ASSOCIATION | NTNC | 35 | P | GW | | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural | |
| 304 FEDERAL ROAD | | | 1 | | | | | |
| Towns Served: BROOKFIELD | | | | | | | | |
| Name | | | Organization | | | Job Title | | |
| Mr. Ben Stueck | | | Rei Property Mgt | | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| C/O Rei Property & Asset Management, Inc | | | 2A Ives Street | | | Danbury | CT | 06810 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-744-8400 | 128 | | | | bstueck@rei-pm.net | | | |
| Contact Role(s): Administrative Contact | | | | | | | | |

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180352 | BROOKFIELD PROFESSIONAL BLDG | NTNC | 35 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 300 FEDERAL ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/19 | 6/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/20 | 6/1-9/30 | | | |
| | 1/1/21 - 12/31/21 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | |
| Chloride (1017) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Nitrate And Nitrite (NOX) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/20 | | | | |

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.

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

| | | | | | | | |
|----------------------------------|-------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180352 | BROOKFIELD PROFESSIONAL BLDG | NTNC | 35 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 300 FEDERAL ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

| | | | | | | | |
|--|--|--------------------------|--|---------------------------------------|--|--------------------------|--|
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | | | |
| Nitrate And Nitrite (NOX) | | | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| | | 1/1/21 - 12/31/21 | | | | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | | | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 1/1/17 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 12/31/22 | | | | | |
| | | 1/1/23 - 12/31/25 | | | | | |
| Organic Chemicals (VOCS) | | | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 1/1/17 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 12/31/22 | | | | | |
| | | 1/1/23 - 12/31/25 | | | | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|-----------|---------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | BATHROOM SI | GENERATED BY BATCH | A | Y | | | |
| | | BPB001 | LAB AREA | A | Y | 2 | Y | Y |
| | | BPB002 | STAFF BATHROOM SINK | A | Y | 2 | Y | Y |
| | | BPB003 | BATHROOM SINK | A | Y | 2 | Y | Y |
| | | BPB004 | EXAM RM 1 SINK | A | Y | 2 | Y | Y |
| | | BPB005 | EXAM RM 2 SINK | A | Y | 2 | Y | Y |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | EXAM RM 1 S | GENERATED BY BATCH | A | Y | | | |
| | | EXAM RM 2 S | GENERATED BY BATCH | A | Y | | | |
| | | LAB AREA | GENERATED BY BATCH | A | Y | | | |
| | | STAFF BATHR | GENERATED BY BATCH | A | Y | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10065 | WELL | 2 | WELL | A | | | | |
| 61694 | PRESSURE TANK | | | | | | | |

Certified Operator Information

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.

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

| | | | | | | | |
|----------------------------------|-------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180352 | BROOKFIELD PROFESSIONAL BLDG | NTNC | 35 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 300 FEDERAL ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Certified Operator Information

| | | | |
|---|----------------------|---|---------------------------------|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
| Facility Classification: SMALL WATER SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| HURLBUT, ANDREW | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |

Contact Information

| | | | | | | | | | |
|-------------------------------|-----------|-----|--------------------------|-----------------|------------------|------------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Mr. Craig L. Froehlich | | | Cff Realty, LLC | | | Owner | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| 14 Aragon Circle | | | | | | Brookfield | | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | | |
| 203-775-6644 | | | | | Froballs@aol.com | | | | |

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

| | | | | | | | | | |
|--------------------------|-----------|-----|--------------------------|-----------------|---------------|------------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Cff Realty, LLC | | | | | | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| 14 Aramon Circle | | | | | | Brookfield | | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email 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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|----------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181102 | SAINT JOSEPH SCHOOL | NTNC | 200 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 159 WHISCONIER ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Chlorine Residual (1012) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Disinfectant Byproducts - TTHM & HAA5 (DBP) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| NURSES SINK (SJS002) | 1/1/19 - 12/31/19 | 9/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/20 | 9/1-9/30 | | | |
| | 1/1/21 - 12/31/21 | 9/1-9/30 | | | |
| Lead And Copper (PBCU) | | 10 routine (RT) per six months | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 12/31/20 | | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | |
| Chloride (1017) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|----------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181102 | SAINT JOSEPH SCHOOL | NTNC | 200 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 159 WHISCONIER ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

| Chloride (1017) | 1 routine (RT) per quarter | | |
|---|---------------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |
| Inorganic Chemicals (IOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/21 | | Complete |
| | 1/1/22 - 12/31/24 | | |
| Nitrate And Nitrite (NOX) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | Complete |
| | 1/1/21 - 12/31/21 | | |
| Pesticides, Herbicides and PCBs-Phase II (SOC2) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Pesticides, Herbicides and PCBs-Phase V (SOC5) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Organic Chemicals (VOCS) | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |
| Water System Facility: SCHOOL WELL (WSF ID: 10071) | | | |
| E. Coli (3014) | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL (2) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

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.

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

| | | | | | | | |
|----------------------------------|----------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181102 | SAINT JOSEPH SCHOOL | NTNC | 200 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 159 WHISCONIER ROAD | | | 1 | | | | |

Towns Served: BROOKFIELD

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **ENTRY POINT (WSFID: 00700)**

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---|---------------------------|--------------------------------------|
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: 0.2 MG/L | Daily |
| Start Date: 1/1/2005 | Compliance History: | Operating Limit | Monitoring Compliance Status: |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 10/1/2019 - 10/31/2019 | | |
| | 11/1/2019 - 11/30/2019 | | |
| | 12/1/2019 - 12/31/2019 | | |
| | 1/1/2020 - 1/31/2020 | | |
| | 2/1/2020 - 2/29/2020 | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|------------|---------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2012 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2013 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2019 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |
| CAP - ADDRESS DEFICIENCY | 6/30/2020 | |

Public Notification Requirements

| Violation/Situation | Compliance Period | Notice Tier | Public Notification | | PN Certification | |
|------------------------------|--------------------|-------------|---------------------|-----------|------------------|----------|
| | | | Required | Performed | Due to DPH | Received |
| Lead and Copper TT Violation | 4/1/14 - 6/30/15 | 2 | 9/28/2014 | | 10/8/2014 | |
| Chlorine M&R Violation | 10/1/14 - 10/31/14 | 3 | 1/9/2016 | | 1/19/2016 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | SJS001 | KITCHEN SINK | P | Y | 1 | | |
| | | SJS002 | NURSES SINK | A | Y | 1 | | Y |
| | | SJS003 | B BATHROOM UPPER | P | Y | 1 | | |
| | | SJS004 | G BATHROOM UPPER | P | Y | 1 | | |
| | | SJS005 | UTILITY CLOSET UPPER | P | Y | 1 | | |
| | | SJS006 | B BATHROOM LOWER | P | Y | 1 | | |
| | | SJS007 | G BATHROOM LOWER | P | Y | 1 | | |
| | | SJS008 | UTILITY CLOSET LOWER | P | Y | 1 | | |
| | | SJS009 | B BATHROOM GYM | P | Y | 1 | | |
| | | SJS010 | G BATHROOM GYM | P | Y | 1 | | |
| | | SJS011 | T LOUNGE LOWER | P | Y | 1 | | |

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.

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

| | | | | | | | |
|----------------------------------|----------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181102 | SAINT JOSEPH SCHOOL | NTNC | 200 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 159 WHISCONIER ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | SJS012 | OUTSIDE WELL PIT | P | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10071 | SCHOOL WELL | 2 | WELL | A | | | | |
| 45037 | TREATMENT PLANT | | | | | | | |
| 54353 | CONTACT TANK | | | | | | | |

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 45037)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------|----------------|---|--------------------------|
| FOLEY, JAMES | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 3/31/2023 |

Contact Information

| | | | | | | | |
|----------------------------|-----------|--------------------------------|--------------|-----------------|-------------------|-------|------------|
| Name | | Organization | | | Job Title | | |
| Reverend George F. O'neill | | Saint Joseph Church And School | | | Pastor | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 163 Whisconier Road | | P.O. Box 5072 | | | Brookfield | CT | 06804-5072 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-775-1035 | 12 | 203-775-1684 | | 203-775-5928 | luke756@gmail.com | | |

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|--------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181112 | WHISCONIER MIDDLE SCHOOL | NTNC | 1,010 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 17 WEST WHISCONIER ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094) 1 routine (RT) per nine years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/28 | | |

Total Coliform (3100) 1 routine (RT) per quarter

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Lead And Copper (PBCU) 10 routine (RT) per year

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/19 | 6/1-9/30 | Complete |
| | 1/1/20 - 12/31/20 | 6/1-9/30 | |
| | 1/1/21 - 12/31/21 | 6/1-9/30 | |

Physical Parameters (PPS) 1 routine (RT) per quarter

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Inorganic Chemicals (IOCS) 1 routine (RT) per three years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Nitrate And Nitrite (NOX) 1 routine (RT) per year

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |

Pesticides, Herbicides and PCBs - Phase II & V (SOCS) 1 routine (RT) per three years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

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.

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

| | | | | | | | |
|----------------------------------|---------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181112 | WHISCONIER MIDDLE SCHOOL | NTNC | 1,010 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 17 WEST WHISCONIER ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

| Organic Chemicals (VOCS) | 1 routine (RT) per year | | |
|---|--------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | Complete |
| | 1/1/21 - 12/31/21 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2012 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2013 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Public Notification Requirements

| <i>Violation/Situation</i> | <i>Compliance Period</i> | <i>Notice Tier</i> | <i>Public Notification</i> | | <i>PN Certification</i> | |
|------------------------------|--------------------------|--------------------|----------------------------|------------------|-------------------------|-----------------|
| | | | <i>Required</i> | <i>Performed</i> | <i>Due to DPH</i> | <i>Received</i> |
| Total Coliform MCL Violation | 8/1/13 - 8/31/13 | 2 | 10/12/2013 | | 10/22/2013 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | GENERIC DISTRIBUTION | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | WMS001 | TEACHERS ROOM SINK | A | | 1 | Y | |
| | | WMS002 | BOYS LOCKER RM | A | | 2 | | |
| | | WMS003 | B WING GIRLS LAV | A | | 2 | | |
| | | WMS004 | CAFETERIA FOUNTAIN | A | | 2 | | |
| | | WMS005 | FOUNTAIN D WING | A | | 2 | | |
| | | WMS006 | NURSE CLINIC SINK | A | | 1 | | |
| | | WMS007 | A WING BOYS LAV | A | | 2 | | |
| | | WMS008 | MAIN OFFICE SINK | A | | 1 | | |
| | | WMS009 | C WING FOUNTAIN | A | | 2 | | |
| | | WMS010 | KITCHEN SINK | A | | 1 | | |
| | | WMS011 | CAFETERIA HABD SINK | A | Y | | | |
| | | WMS012 | MENS LAV CUST ROOM | A | Y | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10072 | WELL #1 | 2 | WELL #1 | A | | | | |
| 47596 | ATMOSPHERIC STORAGE | | | | | | | |
| 47598 | PRESSURE STORAGE | | | | | | | |
| 54093 | WELL #2 | 2 | WELL #2 | A | | | | |

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.

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

| | | | | | | | |
|----------------------------------|---------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181112 | WHISCONIER MIDDLE SCHOOL | NTNC | 1,010 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 17 WEST WHISCONIER ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------------|----------------|--|--------------------------|
| TOMASCAK, THOMAS S. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 12/31/2021 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2022 |

Contact Information

| | | | | | | | | |
|--------------------------|-----------|---------------------------|--------------------------|-----------------|------------------------|------------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Mr. Kenneth Post | | Brookfield Public Schools | | | Dir Bus & Ops | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| PO Box 5194 | | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-775-7629 | | | | | postk@brookfieldps.org | | | |

Contact Role(s): **Administrative Contact**

| | | | | | | | | |
|--------------------------|-----------|--------------------|--------------------------|-----------------|------------------------|------------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Mr. Stephen Dunn | | Town of Brookfield | | | First Selectman | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 100 Pocono Road | | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-775-7301 | | | | | sdunn@brookfieldct.gov | | | |

Contact Role(s): **Legal Contact**

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181122 | HUCKLEBERRY HILL ELEMENTARY SCHOOL | NTNC | 830 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 100 CANDLEWOOD LAKE ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/21 | 6/1-9/30 | | | |
| | 1/1/22 - 12/31/24 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Nitrate And Nitrite (NOX) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/20 | | | | |
| | 1/1/21 - 12/31/21 | | | | |
| Pesticides, Herbicides and PCBs-Phase II (SOC2) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Pesticides, Herbicides and PCBs-Phase V (SOC5) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |

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.

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

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181122 | HUCKLEBERRY HILL ELEMENTARY SCHOOL | NTNC | 830 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 100 CANDLEWOOD LAKE ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Pesticides, Herbicides and PCBs-Phase V (SOC5) 1 routine (RT) per three years

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Organic Chemicals (VOCS) 1 routine (RT) per year

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | Complete |
| | 1/1/21 - 12/31/21 | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|------------|---------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2012 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | GENERIC DISTRIBUTION | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | HHS001 | 600 WING LADIES LAV | A | | 1 | | |
| | | HHS002 | 600 WING MENS LAV | A | | 1 | | |
| | | HHS003 | 200 WING MENS LAV | A | | 2 | | |
| | | HHS004 | 300 WING GIRLS LAV | A | | 2 | | |
| | | HHS005 | 400 WING BOYS LAV | A | | 2 | | |
| | | HHS006 | 100 WING BOYS LAV | A | Y | 2 | | |
| | | HHS007 | KITCHEN SINK | A | Y | 2 | Y | |
| | | HHS008 | MAIN OFFICE WORK SNK | A | | 1 | | |
| | | HHS009 | 200 WING STAFF LAV | A | | 2 | | |
| | | HHS010 | LIBRARY SINK | A | | 1 | | |
| | | HHS011 | ROOM 204 | A | Y | | | |
| | | HHS012 | STAFF BATH CUST RM | A | Y | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10073 | WELL 1 | 2 | WELL | A | | | | |
| 11019 | WELL 2 | 2 | WELL 2 | A | | | | |
| 47592 | ATMOSPHERIC STORAGE | | | | | | | |
| 47594 | PRESSURE STORAGE | | | | | | | |

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.

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

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181122 | HUCKLEBERRY HILL ELEMENTARY SCHOOL | NTNC | 830 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 100 CANDLEWOOD LAKE ROAD | | | 1 | | | | |

Towns Served: BROOKFIELD

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------------|----------------|--|--------------------------|
| TOMASCAK, THOMAS S. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 12/31/2021 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2022 |

Contact Information

| | | | | | | |
|--------------------------|-----------|---------------------------|--------------|-----------------|------------------------|----------|
| Name | | Organization | | | Job Title | |
| Mr. Kenneth Post | | Brookfield Public Schools | | | Dir Bus & Ops | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| PO Box 5194 | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 203-775-7629 | | | | | postk@brookfieldps.org | |

Contact Role(s): **Administrative Contact**

| | | | | | | |
|--------------------------|-----------|--------------------------|--------------|-----------------|------------------------|----------|
| Name | | Organization | | | Job Title | |
| Mr. Stephen Dunn | | Town of Brookfield | | | First Selectman | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 100 Pocono Road | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 203-775-7301 | | | | | sdunn@brookfieldct.gov | |

Contact Role(s): **Legal Contact**

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|--------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181132 | CENTER ELEMENTARY SCHOOL | NTNC | 527 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 8 OBTUSE HILL | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Asbestos (1094) 1 routine (RT) per nine years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/28 | | |

Total Coliform (3100) 1 routine (RT) per quarter

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Lead And Copper (PBCU) 10 routine (RT) per three years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 1/1/18 - 12/31/20 | 6/1-9/30 | |
| | 1/1/21 - 12/31/23 | 6/1-9/30 | |

Physical Parameters (PPS) 1 routine (RT) per quarter

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: ENTRY POINT (WSF ID: 00700)

Inorganic Chemicals (IOCS) 1 routine (RT) per three years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Nitrate And Nitrite (NOX) 1 routine (RT) per year

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |

Pesticides, Herbicides and PCBs - Phase II & V (SOCS) 1 routine (RT) per three years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Organic Chemicals (VOCS) 1 routine (RT) per year

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
|---|--------------------------|--------------------------|--------------------------|

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.

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

| | | | | | | | |
|----------------------------------|---------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181132 | CENTER ELEMENTARY SCHOOL | NTNC | 527 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 8 OBTUSE HILL | | | 1 | | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

| Organic Chemicals (VOCS) | 1 routine (RT) per year | | |
|---|--------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | Complete |
| | 1/1/21 - 12/31/21 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2012 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2013 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | GENERIC DISTRIBUTION | A | Y | | | |
| | | CES000 | GENERATED BY BATCH | A | Y | | | |
| | | CES001 | FOUNTAIN BY GYM | A | | 2 | | |
| | | CES002 | BOYS LAV WEST | A | | 2 | | |
| | | CES003 | FOUNTAIN BOILER RM | A | | 2 | | |
| | | CES004 | GIRLS LAV WEST | A | | 2 | | |
| | | CES005 | LADIES RM BY GYM | A | | 2 | | |
| | | CES006 | FOUNTAIN BY RM 22 | A | | 2 | | |
| | | CES007 | BOYS LAV EAST | A | | 2 | | |
| | | CES008 | OTPT ROOM | A | | 2 | | |
| | | CES009 | KITCHEN | A | | 2 | | |
| | | CES010 | GIRLS LAV EAST | A | | 2 | | |
| | | CES011 | TEACHERS ROOM SINK | A | Y | | | Y |
| | | CES012 | TEACHERS RM LAV SINK | A | Y | | | |
| | | CES013 | NURSE CLINIC SINK | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10074 | WELL #1 | 2 | WELL | A | | | | |
| 47602 | ATMOSPHERIC STORAGE | | | | | | | |
| 47605 | PRESSURE STORAGE | | | | | | | |
| 54095 | WELL #2 | 2 | WELL #2 | A | | | | |

Certified Operator Information

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.

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

| | | | | | | | |
|----------------------------------|---------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181132 | CENTER ELEMENTARY SCHOOL | NTNC | 527 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 8 OBTUSE HILL | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------------|----------------|--|--------------------------|
| TOMASCAK, THOMAS S. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 12/31/2021 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2022 |

Contact Information

| | | | | | | | |
|--------------------------|-----------|---------------------------|--------------------------|-----------------|------------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. Kenneth Post | | Brookfield Public Schools | | | Dir Bus & Ops | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| PO Box 5194 | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-775-7629 | | | | | postk@brookfieldps.org | | |

Contact Role(s): **Administrative Contact**

| | | | | | | | |
|--------------------------|-----------|--------------------|--------------------------|-----------------|------------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. Stephen Dunn | | Town of Brookfield | | | First Selectman | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| 100 Pocono Road | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-775-7301 | | | | | sdunn@brookfieldct.gov | | |

Contact Role(s): **Legal Contact**

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181142 | BROOKFIELD HIGH SCHOOL | NTNC | 995 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 45 LONG MEADOW HILL ROAD | | | 1 | | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| | | | | | |
|--|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 7/31/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 10 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/19 | 6/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/20 | 6/1-9/30 | | | |
| | 1/1/21 - 12/31/21 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00701) | | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Nitrate And Nitrite (NOX) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/20 | | | | |
| | 1/1/21 - 12/31/21 | | | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
|----------------------------------|------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| CT0181142 | BROOKFIELD HIGH SCHOOL | NTNC | 995 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 45 LONG MEADOW HILL ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00701)**

| Organic Chemicals (VOCS) | 1 routine (RT) per year | | |
|---|--------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | Complete |
| | 1/1/21 - 12/31/21 | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|------------|---------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 9/28/2010 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 3/31/2011 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 9/28/2011 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2012 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2013 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Public Notification Requirements

| Violation/Situation | Compliance Period | Notice Tier | Public Notification | | PN Certification | |
|------------------------------|-------------------|-------------|---------------------|-----------|------------------|----------|
| | | | Required | Performed | Due to DPH | Received |
| Total Coliform MCL Violation | 9/1/14 - 9/30/14 | 2 | 11/14/2014 | | 11/24/2014 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | GENERIC DISTRIBUTION | A | Y | | | |
| | | BHS001 | HOME ECONOMICS RM | A | | 2 | | |
| | | BHS002 | SAIL ROOM SINK | A | | 2 | | |
| | | BHS003 | CUSTODIAL OFFICE SNK | A | | 2 | | |
| | | BHS004 | KITCHEN SINK | A | | 2 | | |
| | | BHS005 | CAFE B FOUNTAIN | A | | 2 | | |
| | | BHS006 | 600 WING GIRLS LAV | A | | 2 | | |
| | | BHS007 | MAIN OFFICE FOUNTAIN | A | | 2 | | |
| | | BHS008 | 100 WING FOUNTAIN | A | | 2 | | |
| | | BHS009 | BOYS LOCKER RM SINK | A | | 2 | | |
| | | BHS010 | TEACHERS ROOM SINK | A | | 2 | Y | |
| | | BHS011 | KITCHEN HAND WASH | A | Y | | | |
| | | BHS012 | BOY BATH BY ROOM 110 | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00701 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 54085 | WELL #3 | 2 | WELL #3 | A | | | | |

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.

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

| | | | | | | | |
|----------------------------------|-------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0181142 | BROOKFIELD HIGH SCHOOL | NTNC | 995 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 45 LONG MEADOW HILL ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 54087 | WELL #4 | 2 | WELL #4 | A | | | | |
| 54091 | WELL #6 | 2 | WELL #6 | A | | | | |
| 56646 | TRANSFER PUMPS | | | | | | | |
| 61063 | ATMOSPHERIC STORAGE | | | | | | | |

Certified Operator Information

| | | | |
|---|----------------|--|--------------------------|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
| Facility Classification: CLASS 1 DISTRIBUTION SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| TOMASCAK, THOMAS S. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS I | 12/31/2021 6/30/2022 |

Contact Information

| | | | | | | | | |
|--------------------------|-----------|---------------------------|--------------------------|-----------------|----------------------------|------------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Mr. Dan Caldwell | | Brookfield Public Schools | | | Facilities Manager | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 100 Pocono Rd | | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-775-7700 | 7709 | | | | caldwelld@brookfieldps.org | | | |

| | | | | | | | | |
|--|-----------|--------------|--------------------------|-----------------|---------------|------------|-------|----------|
| Contact Role(s): Administrative Contact | | | | | | | | |
| Name | | Organization | | | Job Title | | | |
| Town of Brookfield | | | | | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 45 Long Meadow Hill Rd | | | P.O. Box 5106 | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| | | | | | | | | |

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

- Please note the following:**
- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
 - If a Collection Period is specified, all water quality samples must be collected during the specified period.
 - 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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189013 | SILVERMINE ROAD WATER SYSTEM | NTNC | 50 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| SILVERMINE ROAD | | | | 6 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| Chlorine Residual (1012) | | 1 routine (RT) per quarter | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Haloacetic Acids (2456) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| 559A UNIT 1 FRONT OFFICE (SLVRMINE015) | 1/1/19 - 12/31/19 | 9/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/20 | 9/1-9/30 | | | |
| | 1/1/21 - 12/31/21 | 9/1-9/30 | | | |
| Total Trihalomethanes (2950) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| 559B UNIT 9 KITCHENETTE (SLVRMINE024) | 1/1/19 - 12/31/19 | 9/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/20 | 9/1-9/30 | | | |
| | 1/1/21 - 12/31/21 | 9/1-9/30 | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/17 - 12/31/19 | 6/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/22 | 6/1-9/30 | | | |
| | 1/1/23 - 12/31/25 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189013 | SILVERMINE ROAD WATER SYSTEM | NTNC | 50 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| SILVERMINE ROAD | | | | 6 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

| Inorganic Chemicals (IOCS) | 1 routine (RT) per three years | | |
|--|---------------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/21 | | |
| | 1/1/22 - 12/31/24 | | |
| Nitrate And Nitrite (NOX) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Organic Chemicals (VOCS) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |

Water System Facility: **WELL 4 (WSF ID: 10078)**

| E. Coli (3014) | 1 routine (RT) per quarter | | |
|---|-----------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 4 (2) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: **WELL 3 (WSF ID: 10079)**

| E. Coli (3014) | 1 routine (RT) per quarter | | |
|---|-----------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 3 (2) | 7/1/19 - 9/30/19 | | Out of Service |
| | 10/1/19 - 12/31/19 | | Out of Service |
| | 1/1/20 - 3/31/20 | | |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: **WELL 1 (WSF ID: 10081)**

| E. Coli (3014) | 1 routine (RT) per quarter | | |
|---|-----------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 1 (2) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |

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.

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

| | | | | | | | |
|----------------------------------|-------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189013 | SILVERMINE ROAD WATER SYSTEM | NTNC | 50 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| SILVERMINE ROAD | | | | 6 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

| | | | |
|--|--------------------------|-----------------------------------|--------------------------|
| Water System Facility: WELL 1 (WSF ID: 10081) | | | |
| E. Coli (3014) | | 1 routine (RT) per quarter | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

| | | | |
|--|---|---------------------------|---------------------------|
| Water System Facility: ENTRY POINT (WSFID: 00700) | | | |
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: 0.2 MG/L | Daily |
| Start Date: 12/1/2009 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 10/1/2019 - 10/31/2019 | | |
| | 11/1/2019 - 11/30/2019 | | |
| | 12/1/2019 - 12/31/2019 | | |
| | 1/1/2020 - 1/31/2020 | | |
| | 2/1/2020 - 2/29/2020 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| CROSS CONNECTION SURVEY REPORT | 3/1/2019 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| RESPOND TO SANITARY SURVEY | 2/20/2020 | 2/20/2020 |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |
| CORRECTIVE ACTION/CORRECTIVE ACTION PLAN | 5/7/2020 | 2/20/2020 |
| CAP - ADDRESS DEFICIENCY | 6/1/2020 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | SILMINE001 | BLDA | P | Y | 2 | | |
| | | SILMINE002 | TAP NEAR BALTIC LUMB | P | | 2 | | |
| | | SILMINE003 | PUMP STATION TAP | P | | 2 | | |
| | | SILMINE004 | BLD ACROSS PUMP ST | P | | 2 | | |
| | | SILMINE005 | DADE BEHRING BLB | P | | 2 | | |
| | | SLVRMINE001 | 100 SLVRMINE LADIES | A | Y | 2 | | |
| | | SLVRMINE002 | 100 SLVRMINE MENS RM | A | Y | 2 | | |
| | | SLVRMINE003 | 100 SLVRMINE BREAK R | A | Y | 2 | Y | |
| | | SLVRMINE004 | 100 SLVRMINE KIT HAN | A | Y | 2 | | |

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189013 | SILVERMINE ROAD WATER SYSTEM | NTNC | 50 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| SILVERMINE ROAD | | | | 6 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | SLVRMINE005 | 100 SLVRMINE KIT DIS | A | Y | 2 | | |
| | | SLVRMINE006 | 595 FEDERAL ROAD | A | Y | 2 | | |
| | | SLVRMINE007 | 101 SLVRMINE LADIES | A | Y | 2 | | |
| | | SLVRMINE008 | 101 SLVRMINE MENS RM | A | Y | 2 | | |
| | | SLVRMINE009 | 101 SLVRMINE KITCHEN | A | Y | 2 | | |
| | | SLVRMINE010 | 559A UNIT 1 MENS LOC | A | Y | 2 | | |
| | | SLVRMINE011 | 559A UNIT 1 MENS LOC | A | Y | 2 | | |
| | | SLVRMINE012 | 559A UNIT 1 LADIES L | A | Y | 2 | | |
| | | SLVRMINE013 | 559A UNIT 1 LADIES L | A | Y | 2 | | |
| | | SLVRMINE014 | 559A UNIT 1 UNISEX B | A | Y | 2 | | |
| | | SLVRMINE015 | 559A UNIT 1 FRONT OF | A | Y | 2 | | Y |
| | | SLVRMINE016 | 559A UNIT 9 BATH 1 S | A | Y | 2 | | |
| | | SLVRMINE017 | 559A UNIT 9 BATH 2 S | A | Y | 2 | | |
| | | SLVRMINE018 | 559A UNIT 9 STORE FR | A | Y | 2 | Y | |
| | | SLVRMINE019 | 559A UNIT 9 LARGE KI | A | Y | 2 | | |
| | | SLVRMINE020 | 559A UNIT 9 BACK KIT | A | Y | 2 | | |
| | | SLVRMINE021 | 559B UNIT 1 BATH | A | Y | 2 | | |
| | | SLVRMINE022 | 559B UNIT 9 LADIES R | A | Y | 2 | | |
| | | SLVRMINE023 | 559B UNIT 9 MENS ROO | A | Y | 2 | | |
| | | SLVRMINE024 | 559B UNIT 9 KITCHENE | A | Y | 2 | | Y |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10078 | WELL 4 | 2 | WELL 4 | A | | | | |
| 10079 | WELL 3 | 2 | WELL 3 | A | | | | |
| 10081 | WELL 1 | 2 | WELL 1 | A | | | | |
| 48058 | ATMOSPHERIC STORAGE | | | | | | | |
| 48060 | PRESSURE STORAGE 1 | | | | | | | |
| 48062 | PRESSURE STORAGE 2 | | | | | | | |
| 48064 | PRESSURE STORAGE 3 | | | | | | | |
| 56543 | TREATMENT PLANT | | | | | | | |

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 56543)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|--------------------|-------------------|---|--------------------------|
| BLACK, RON W. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 |
| GIORDANO, DAVID S. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2020 |

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.

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

| | | | | | | | |
|----------------------------------|-------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189013 | SILVERMINE ROAD WATER SYSTEM | NTNC | 50 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| SILVERMINE ROAD | | | | 6 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 56543)**

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------|---------------|------------------|--------------------------|
|---------------|---------------|------------------|--------------------------|

Contact Information

| | | | | | | | |
|--------------------------|-----------|-----------------------------|--------------------------|-----------------|-------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. Roy Young | | Silvermine Development Corp | | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| 88 Rosehill Avenue | | | P.O. Box 1157 | | Danbury | CT | 06810 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-744-2090 | | | | | royy@poly-fil.com | | |

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189093 | FELCHRIS - 61 COMMERCE DRIVE | NTNC | 25 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 61 COMMERCE DRIVE | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/18 - 12/31/20 | 6/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/22 | 6/1-9/30 | | | |
| | 1/1/23 - 12/31/25 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/18 - 12/31/20 | | Complete | | |
| | 1/1/21 - 12/31/23 | | | | |
| Nitrate And Nitrite (NOX) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/20 | | Complete | | |
| | 1/1/21 - 12/31/21 | | | | |
| Pesticides, Herbicides and PCBs-Phase II (SOC2) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Pesticides, Herbicides and PCBs-Phase V (SOC5) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |

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.

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

| | | | | | | | |
|----------------------------------|-------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189093 | FELCHRIS - 61 COMMERCE DRIVE | NTNC | 25 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 61 COMMERCE DRIVE | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Pesticides, Herbicides and PCBs-Phase V (SOC5) **1 routine (RT) per three years**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Organic Chemicals (VOCS) **1 routine (RT) per year**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |

Water System Facility: **WELL (WSF ID: 10086)**

E. Coli (3014) **1 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| WELL (2) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION EXEMPTION | 3/1/2021 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | L001 | AB ELECT KITCHEN | A | Y | N | | |
| | | L002 | AB ELECT LADIES RM L | A | Y | N | | |
| | | L003 | AB ELECT LADIES RM R | A | Y | N | | |
| | | L004 | AB ELECT LADIES RM M | A | Y | N | | |
| | | L005 | AB ELECT MENS RM L | A | Y | N | | |
| | | L006 | AB ELECT MENS RM R | A | Y | N | | |
| | | L007 | LINCARE KIT SNK | A | Y | N | | |
| | | L008 | LINCARE RR | A | Y | N | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10086 | WELL | 2 | WELL | A | | | | |

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.

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

| | | | | | | | |
|----------------------------------|-------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189093 | FELCHRIS - 61 COMMERCE DRIVE | NTNC | 25 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 61 COMMERCE DRIVE | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 45012 | WATER TREATMENT | | | | | | | |

Certified Operator Information

| | | | |
|---|----------------|---|--------------------------|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
| Facility Classification: SMALL WATER SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| HURLBUT, PAUL | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2022 |

Contact Information

| | | | | | | | | |
|-----------------------------|-----------|--------------|--------------------------|-----------------|-------------------------|------------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Mr. Armando Bernardo | | Felchris | | | Owner | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 61 Commerce Drive | | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-740-2793 | 100 | 203-775-4886 | | 203-241-6944 | ab@ABELECTRONICSINC.com | | | |

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189353 | BROOKFIELD REGIONAL YMCA | NTNC | 100 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 2 HUCKLEBERRY HILL ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094) **1 routine (RT) per nine years**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/28 | | |

Total Coliform (3100) **1 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Lead And Copper (PBCU) **5 routine (RT) per three years**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/21 | 6/1-9/30 | |
| | 1/1/22 - 12/31/24 | 6/1-9/30 | |

Physical Parameters (PPS) **1 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Inorganic Chemicals (IOCS) **1 routine (RT) per three years**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Nitrate And Nitrite (NOX) **1 routine (RT) per year**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |

Pesticides, Herbicides and PCBs-Phase II (SOC2) **1 routine (RT) per three years**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Pesticides, Herbicides and PCBs-Phase V (SOC5) **1 routine (RT) per three years**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| | | | |

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189353 | BROOKFIELD REGIONAL YMCA | NTNC | 100 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 2 HUCKLEBERRY HILL ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Pesticides, Herbicides and PCBs-Phase V (SOC5) **1 routine (RT) per three years**

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Organic Chemicals (VOCS) **1 routine (RT) per year**

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | Complete |
| | 1/1/21 - 12/31/21 | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|------------|---------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2012 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2012 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Total Coliform Status | Lead and Copper Rule | Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|-----------------------|----------------------|------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | GENERIC DISTRIBUTION | A | Y | N | | |
| | | BYMCA001 | GIRLS BATHROOM SINK | A | Y | N | | |
| | | BYMCA002 | BOYS BATHROOM SINK | A | Y | N | | |
| | | BYMCA003 | I/T ROOM SINK | A | Y | N | | |
| | | BYMCA004 | TWOS ROOM SINK | A | Y | N | | |
| | | BYMCA005 | THREES ROOM SINK | A | Y | N | | |
| | | BYMCA006 | KITCHEN SINK | A | Y | N | | |
| | | BYMCA006 - | GENERATED BY BATCH | A | Y | | | |
| | | BYMCA007 | MENS LOCKER SINK | A | Y | N | | |
| | | BYMCA007 - | GENERATED BY BATCH | A | Y | | | |
| | | BYMCA008 | WOMENS LOCKER SINK | A | Y | N | | |
| | | BYMCA008 - | GENERATED BY BATCH | A | Y | | | |
| | | BYMCA009 | WOMENS HEALTH SINK | A | Y | N | | |
| | | BYMCA009 - | GENERATED BY BATCH | A | Y | | | |
| | | BYMCA010 | MENS HEALTH SINK | A | Y | N | | |
| | | BYMCA010 - | GENERATED BY BATCH | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10101 | WELL #2 | 2 | WELL #2 | A | | | | |

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.

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

| | | | | | | | |
|----------------------------------|---------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189353 | BROOKFIELD REGIONAL YMCA | NTNC | 100 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 2 HUCKLEBERRY HILL ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|------------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 10102 | WELL #1 | 2 | WELL #1 | A | | | | |
| 45039 | TREATMENT PLANT | | | | | | | |
| 60864 | ATMOSPHERIC STORAGE OLD | | | | | | | |
| 60865 | ATMOSPHERIC STORAGE TANK NEW | | | | | | | |
| 61767 | BOOSTER PUMPS | | | | | | | |

Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 45039)**

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------------|----------------|--|--------------------------|
| TOMASCAK, THOMAS S. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 12/31/2021 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2022 |

Contact Information

| | | | | | | | |
|---|-----------|--------------------------|--------------|-----------------|---------------|----------|--|
| Name | | Organization | | | Job Title | | |
| Regional YMCA of Western Connecticut | | | | | | | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code | |
| 2A Huckleberry Hill Rd | | | | Brookfield | CT | 06804 | |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| | | | | | | | |

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

| | | | | | | | |
|--------------------------|-----------|-----------------------------|--------------|-----------------|-------------------------|----------|--|
| Name | | Organization | | | Job Title | | |
| Ms. Gail Null | | Regional YMCA of Western Ct | | | Vip of Operations | | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code | |
| 2 Huckleberry Hill Rd | | | | Brookfield | CT | 06804 | |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-775-4444 | 119 | | | | gnull@regionallymca.org | | |

Contact Role(s): **Administrative Contact**

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

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

| | | | | | | | |
|----------------------------------|---------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189483 | CANDLEWOOD LAKE SHOPPING PLAZA | NTNC | 25 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 14 CANDLEWOOD LAKE LANE | | | | 11 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

| Chlorine Residual (1012) | | 1 routine (RT) per quarter | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Haloacetic Acids (2456) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| JOY HALLMARK BATH (CWPLAZA009) | 1/1/19 - 12/31/19 | 9/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/20 | 9/1-9/30 | | | |
| | 1/1/21 - 12/31/21 | 9/1-9/30 | | | |
| Total Trihalomethanes (2950) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| MICHAELS CLASS SINK (CWPLAZA013) | 1/1/19 - 12/31/19 | 9/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/20 | 9/1-9/30 | | | |
| | 1/1/21 - 12/31/21 | 9/1-9/30 | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/18 - 12/31/20 | 6/1-9/30 | | | |
| | 1/1/21 - 12/31/23 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |

Water System Facility: ENTRY POINT (WSF ID: 00700)

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189483 | CANDLEWOOD LAKE SHOPPING PLAZA | NTNC | 25 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 14 CANDLEWOOD LAKE LANE | | | | 11 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | |
|--|--------------------------|---------------------------------------|--------------------------|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | |
| | 1/1/20 - 12/31/22 | | | |
| | 1/1/23 - 12/31/25 | | | |
| Nitrate And Nitrite (NOX) | | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | |
| | 1/1/20 - 12/31/20 | | | |
| | 1/1/21 - 12/31/21 | | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | |
| | 1/1/20 - 12/31/22 | | | |
| | 1/1/23 - 12/31/25 | | | |
| Organic Chemicals (VOCS) | | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete | |
| | 10/1/19 - 12/31/19 | | Complete | |
| | 1/1/20 - 3/31/20 | | Complete | |
| | 4/1/20 - 6/30/20 | | | |
| | 7/1/20 - 9/30/20 | | | |

Water System Facility: **WELL #1 (WSF ID: 10804)**

| E. Coli (3014) | | 1 routine (RT) per quarter | | |
|---|--------------------------|-----------------------------------|--------------------------|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| WELL #1 (2) | 7/1/19 - 9/30/19 | | Complete | |
| | 10/1/19 - 12/31/19 | | Complete | |
| | 1/1/20 - 3/31/20 | | Complete | |
| | 4/1/20 - 6/30/20 | | | |
| | 7/1/20 - 9/30/20 | | | |

Water System Facility: **WELL #2 (WSF ID: 10805)**

| E. Coli (3014) | | 1 routine (RT) per quarter | | |
|---|--------------------------|-----------------------------------|--------------------------|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| WELL #2 (2) | 7/1/19 - 9/30/19 | | Out of Service | |
| | 10/1/19 - 12/31/19 | | Out of Service | |
| | 1/1/20 - 3/31/20 | | | |
| | 4/1/20 - 6/30/20 | | | |
| | 7/1/20 - 9/30/20 | | | |

Water System Facility: **WELL #5 (WSF ID: 10808)**

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.

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

| | | | | | | | |
|----------------------------------|---------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189483 | CANDLEWOOD LAKE SHOPPING PLAZA | NTNC | 25 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 14 CANDLEWOOD LAKE LANE | | | | 11 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

| | | | |
|---|--------------------------|-----------------------------------|--------------------------|
| Water System Facility: WELL #5 (WSF ID: 10808) | | | |
| E. Coli (3014) | | 1 routine (RT) per quarter | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL #5 (2) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

| | | | |
|--|---|---------------------------|---------------------------|
| Water System Facility: ENTRY POINT (WSFID: 00700) | | | |
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: 0.2 MG/L | Daily |
| Start Date: 1/1/2005 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 10/1/2019 - 10/31/2019 | | |
| | 11/1/2019 - 11/30/2019 | | |
| | 12/1/2019 - 12/31/2019 | | |
| | 1/1/2020 - 1/31/2020 | | |
| | 2/1/2020 - 2/29/2020 | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|-----------|---------------|
| ADDRESS CONTAMINATION | 1/11/2019 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | GENERIC DISTRIBUTION | A | Y | | | |
| | | CWPLAZA001 | BB&B FRONT MENS RM | A | Y | 2 | | |
| | | CWPLAZA002 | BB&B KITCHENETTE | A | Y | 2 | | |
| | | CWPLAZA003 | NAIL&SPA KITCHETTE | A | Y | 2 | | |
| | | CWPLAZA004 | RESTAURANT FOOD SINK | A | Y | 2 | | |
| | | CWPLAZA005 | GNC CUSTODIAL SINK | I | Y | 2 | | |
| | | CWPLAZA006 | GNC BATHROOM | A | Y | 2 | | |
| | | CWPLAZA007 | BAGELMAN SINK 1 | A | Y | 2 | | |
| | | CWPLAZA008 | BAGELMAN SINK 2 | A | Y | 2 | | |
| | | CWPLAZA009 | JOY HALLMARK BATH | A | Y | 2 | | Y |
| | | CWPLAZA010 | CVS CUSTODIAL SINK | I | Y | 2 | | |
| | | CWPLAZA011 | TJ MAXX CUST SINK | I | Y | 2 | | |

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189483 | CANDLEWOOD LAKE SHOPPING PLAZA | NTNC | 25 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 14 CANDLEWOOD LAKE LANE | | | | 11 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | CWPLAZA012 | MICHAELS KITCHENETTE | A | Y | 2 | | |
| | | CWPLAZA013 | MICHAELS CLASS SINK | A | Y | 2 | | Y |
| | | CWPLAZA014 | RAY & FLAN LADIES RM | A | Y | 2 | Y | |
| | | CWPLAZA015 | RAY & FLAN MENS RM | A | Y | 2 | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10804 | WELL #1 | 2 | WELL #1 | A | | | | |
| 10805 | WELL #2 | 2 | WELL #2 | A | | | | |
| 10808 | WELL #5 | 2 | WELL #5 | A | | | | |
| 45029 | TREATMENT PLANT | | | | | | | |
| 52779 | ATMOSPHERIC STORAGE | | | | | | | |
| 52788 | HYDROPNEUMATIC TANK | | | | | | | |

Certified Operator Information

| Water System Facility: TREATMENT PLANT (WSF ID: 45029) | | | |
|---|-------------------|--|--------------------------|
| Facility Classification: CLASS 1 TREATMENT PLANT | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| BLACK, RON W. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 6/30/2020 |
| GIORDANO, DAVID S. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2020 6/30/2020 |

Contact Information

| | | | | | | | |
|--|-----------|--------------------|--------------------------|-----------------|-------------------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. Neil Rube | | R&F Danbury, LLC | | | Vice President | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| 7248 Morgan Road | | | | | Liverpool | NY | 13088 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 315-453-2500 | | 315-453-2570 | | | | | |
| Contact Role(s): Legal Contact, Owner | | | | | | | |
| Name | | Organization | | | Job Title | | |
| Mr. Carl Tedeschi | | Raymour & Flanigan | | | Director of Property | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| 7248 Morgan Rd | | | | | Liverpool | NY | 13088 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 315-453-2553 | | 315-461-3677 | | | ctedeschi@raymourflanigan.com | | |
| Contact Role(s): Administrative Contact | | | | | | | |

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.

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

| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
|----------------------------------|---------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| CT0189483 | CANDLEWOOD LAKE SHOPPING PLAZA | NTNC | 25 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 14 CANDLEWOOD LAKE LANE | | | | 11 | | | |

Towns Served: BROOKFIELD

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189493 | COUNTRY KIDS PLAY FARM | NTNC | 167 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 107 OLD STATE ROAD | | | 1 | | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094) 1 routine (RT) per nine years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/28 | | |

Total Coliform (3100) 1 routine (RT) per quarter

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Lead And Copper (PBCU) 5 routine (RT) per three years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 1/1/17 - 12/31/19 | 6/1-9/30 | Complete |
| | 1/1/20 - 12/31/22 | 6/1-9/30 | |
| | 1/1/23 - 12/31/25 | 6/1-9/30 | |

Physical Parameters (PPS) 1 routine (RT) per quarter

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Chloride (1017) 1 routine (RT) per quarter

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Inorganic Chemicals (IOCS) 1 routine (RT) per three years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Nitrate And Nitrite (NOX) 1 routine (RT) per year

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |

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.

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

| | | | | | | | |
|----------------------------------|-------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189493 | COUNTRY KIDS PLAY FARM | NTNC | 167 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 107 OLD STATE ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

| | | | | | | | |
|---|--|--------------------------|--|---------------------------------------|--|--------------------------|--|
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | | | |
| Nitrate And Nitrite (NOX) | | | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| | | 1/1/21 - 12/31/21 | | | | | |
| Pesticides, Herbicides and PCBs-Phase II (SOC2) | | | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 1/1/17 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 12/31/22 | | | | | |
| | | 1/1/23 - 12/31/25 | | | | | |
| Pesticides, Herbicides and PCBs-Phase V (SOC5) | | | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 1/1/17 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 12/31/22 | | | | | |
| | | 1/1/23 - 12/31/25 | | | | | |
| Organic Chemicals (VOCS) | | | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 7/1/19 - 9/30/19 | | | | Complete | |
| | | 10/1/19 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 3/31/20 | | | | Complete | |
| | | 4/1/20 - 6/30/20 | | | | | |
| | | 7/1/20 - 9/30/20 | | | | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2024 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | KIDFARM001 | STAFF BATHROOM | A | Y | N | Y | |
| | | KIDFARM002 | ROOM #2 | A | Y | N | | |
| | | KIDFARM003 | BOYS ROOM UPSTAIRS | A | Y | N | | |
| | | KIDFARM004 | UPSATIRS SINK | A | Y | N | | |
| | | KIDFARM005 | ROOM #3 | A | Y | N | | |
| | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10110 | WELL | 2 | WELL | A | | | | |

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.

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

| | | | | | |
|------------------|-------------------------------|----------------|------------|------------|----------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source |
| CT0189493 | COUNTRY KIDS PLAY FARM | NTNC | 167 | P | GW |

| | | | | | | |
|----------------------------------|---------------------|-------------|------------|------------|----------|--------------|
| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 107 OLD STATE ROAD | 1 | | | | | |

Towns Served: BROOKFIELD

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|--------------------|-------------------|---|--------------------------|
| BLACK, RON W. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 |
| GIORDANO, DAVID S. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2020 |

Contact Information

| | | |
|-------------------------|------------------------|---------------|
| Name | Organization | Job Title |
| Ms. Camille Sage | Country Kids Play Farm | Administrator |

| | | | | |
|--------------------------|--------------------------|------------|-------|----------|
| Mailing Address Line One | Mailing Address Line Two | City | State | Zip Code |
| 107 Old State Rd | | Brookfield | CT | 06804 |

| | | | | | |
|----------------|-----------|--------------|--------------|-----------------|------------------|
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address |
| 203-775-2126 | | 203-740-1551 | | | ckpf8888@aol.com |

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

| | | |
|----------------|--------------|-----------|
| Name | Organization | Job Title |
| Camille | | |

| | | | | |
|--------------------------|--------------------------|------------|-------|----------|
| Mailing Address Line One | Mailing Address Line Two | City | State | Zip Code |
| Att Camille | 107 Old State Rd | Brookfield | CT | 06804 |

| | | | | | |
|----------------|-----------|-----|--------------|-----------------|---------------|
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address |
| | | | | | |

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

| | | |
|----------------------------|--------------|-----------|
| Name | Organization | Job Title |
| Whisconier View Inc | | |

| | | | | |
|--------------------------|--------------------------|------------|-------|----------|
| Mailing Address Line One | Mailing Address Line Two | City | State | Zip Code |
| 107 State Road | | Brookfield | CT | 06804 |

| | | | | | |
|----------------|-----------|-----|--------------|-----------------|---------------|
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address |
| | | | | | |

Contact Role(s): **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

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|--|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189513 | PRINCE OF PEACE LUTHERAN CHURCH | NTNC | 58 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 119 JUNCTION ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094) **1 routine (RT) per nine years**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/28 | | |

Total Coliform (3100) **1 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Lead And Copper (PBCU) **5 routine (RT) per three years**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/21 | 6/1-9/30 | |
| | 1/1/22 - 12/31/24 | 6/1-9/30 | |

Physical Parameters (PPS) **1 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Inorganic Chemicals (IOCS) **1 routine (RT) per three years**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/19 - 12/31/21 | | |
| | 1/1/22 - 12/31/24 | | |

Nitrate And Nitrite (NOX) **1 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Pesticides, Herbicides and PCBs-Phase II (SOC2) **1 routine (RT) per three years**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

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.

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

| | | | | | | | |
|----------------------------------|--|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189513 | PRINCE OF PEACE LUTHERAN CHURCH | NTNC | 58 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 119 JUNCTION ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Pesticides, Herbicides and PCBs-Phase V (SOC5) 1 routine (RT) per three years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Organic Chemicals (VOCS) 1 routine (RT) per year

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION EXEMPTION | 3/1/2021 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | GENERIC DISTRIBUTION | A | Y | | | |
| | | A | GREEN LOUNGE | A | Y | 1 | Y | Y |
| | | B | LADIES ROOM -SCHOOL | A | Y | | Y | Y |
| | | B - LADIES | GENERATED BY BATCH | A | Y | | | |
| | | C | LADIES ROOM - CHURCH | A | Y | 1 | Y | Y |
| | | C - LADIES | GENERATED BY BATCH | A | Y | | | |
| | | D | KITCHEN SINK | A | Y | 2 | Y | Y |
| | | D - KITCHEN | GENERATED BY BATCH | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | E | MENS ROOM - SCHOOL | A | Y | 2 | | |
| | | F | CLASSROOM 1 | A | Y | | Y | Y |
| | | G | GIRLS ROOM - SCHOOL | A | Y | | Y | Y |
| | | H | BOYS ROOM - SCHOOL | A | Y | 2 | Y | Y |
| | | H - BOYS RO | GENERATED BY BATCH | A | Y | | | |
| | | I | CLASSROOM 2 | A | Y | | Y | Y |
| | | J | CLASSROOM 3 | A | Y | | Y | Y |
| | | K | CLASSROOM 4 | A | Y | | Y | Y |
| | | K - CLASSRO | GENERATED BY BATCH | A | Y | | | |
| | | L | CLASSROOM 5 | A | Y | | Y | Y |
| | | M | SACRISTY | A | Y | | Y | Y |
| | | N | FRONT OFFICE | A | Y | | Y | Y |
| | | P | MENS ROOM - CHURCH | A | Y | | Y | Y |

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.

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

| | | | | | | | |
|----------------------------------|--|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189513 | PRINCE OF PEACE LUTHERAN CHURCH | NTNC | 58 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 119 JUNCTION ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | Q | LADIES ROOM - LOWER | A | Y | | Y | Y |
| | | R | MENS ROOM - LOWER | A | Y | | Y | Y |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10111 | WELL | 2 | WELL | A | | | | |

Certified Operator Information

| | | | |
|---|----------------|---|--------------------------|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
| Facility Classification: SMALL WATER SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| HURLBUT, PAUL | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2022 |

Contact Information

| | | | | | | | |
|---------------------------|-----------|--------------------------|--------------|-----------------|---------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Ms. Debra A. Nobes | | | | | Director | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| PO Box 5184 | | Route 133 | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-775-0140 | | 203-775-9573 | | | | | |

| | | | | | | | |
|---|-----------|--------------------------|--------------|-----------------|---------------|-------|----------|
| Contact Role(s): Administrative Contact, Legal Contact | | | | | | | |
| Name | | Organization | | | Job Title | | |
| Prince of Peace Lutheran Church | | | | | | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 119 Junction Rd, P. O. Box 5184 | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| | | | | | | | |

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

- Please note the following:**
- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
 - If a Collection Period is specified, all water quality samples must be collected during the specified period.
 - 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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|--|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189563 | LANDMARK OFFICE CONDO ASSOCIATION | NTNC | 35 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 2 OLD NEW MILFORD ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per month | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 10/1/19 - 10/31/19 | | Complete | | |
| | 11/1/19 - 11/30/19 | | Complete | | |
| | 12/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 1/31/20 | | Complete | | |
| | 2/1/20 - 2/29/20 | | | | |
| | 3/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 4/30/20 | | | | |
| | 5/1/20 - 5/31/20 | | | | |
| | 6/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 7/31/20 | | | | |
| | 8/1/20 - 8/31/20 | | | | |
| | 9/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/21 | 6/1-9/30 | | | |
| | 1/1/22 - 12/31/24 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per month | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 10/1/19 - 10/31/19 | | Complete | | |
| | 11/1/19 - 11/30/19 | | Complete | | |
| | 12/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 1/31/20 | | Complete | | |
| | 2/1/20 - 2/29/20 | | | | |
| | 3/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 4/30/20 | | | | |
| | 5/1/20 - 5/31/20 | | | | |
| | 6/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 7/31/20 | | | | |
| | 8/1/20 - 8/31/20 | | | | |
| | 9/1/20 - 9/30/20 | | | | |
| Chloride (1017) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete | | |

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

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.

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

| | | | | | | | |
|----------------------------------|-----------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189563 | LANDMARK OFFICE CONDO ASSOCIATION | NTNC | 35 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 2 OLD NEW MILFORD ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

| | | | | | | | |
|--|--------------------------|--------------------------|---------------------------------------|--|--|--|--------------------------|
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | | | |
| Chloride (1017) | | | 1 routine (RT) per quarter | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | | | | | <i>Compliance Status</i> |
| | 10/1/19 - 12/31/19 | | | | | | Complete |
| | 1/1/20 - 3/31/20 | | | | | | Complete |
| | 4/1/20 - 6/30/20 | | | | | | |
| | 7/1/20 - 9/30/20 | | | | | | |
| Inorganic Chemicals (IOCS) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | | | | | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | | | | | Complete |
| | 1/1/20 - 12/31/22 | | | | | | |
| | 1/1/23 - 12/31/25 | | | | | | |
| Nitrate And Nitrite (NOX) | | | 1 routine (RT) per year | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | | | | | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | | | | | Complete |
| | 1/1/20 - 12/31/20 | | | | | | |
| | 1/1/21 - 12/31/21 | | | | | | |
| Pesticides, Herbicides and PCBs-Phase II (SOC2) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | | | | | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | | | | | Complete |
| | 1/1/20 - 12/31/22 | | | | | | |
| | 1/1/23 - 12/31/25 | | | | | | |
| Pesticides, Herbicides and PCBs-Phase V (SOC5) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | | | | | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | | | | | Complete |
| | 1/1/20 - 12/31/22 | | | | | | |
| | 1/1/23 - 12/31/25 | | | | | | |
| Organic Chemicals (VOCS) | | | 1 routine (RT) per year | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | | | | | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | | | | | Complete |
| | 1/1/20 - 12/31/20 | | | | | | |
| | 1/1/21 - 12/31/21 | | | | | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|-----------|---------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |

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.

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

| | | | | | | | |
|----------------------------------|--|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189563 | LANDMARK OFFICE CONDO ASSOCIATION | NTNC | 35 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 2 OLD NEW MILFORD ROAD | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | FIRST FLOOR | GENERATED BY BATCH | A | Y | | | |
| | | SUITE 1C - | GENERATED BY BATCH | A | Y | | | |
| | | SUITE 2A - | GENERATED BY BATCH | A | Y | | | |
| | | SUITE 2C - | GENERATED BY BATCH | A | Y | | | |
| | | SUITE 3A - | GENERATED BY BATCH | A | Y | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10113 | WELL | 2 | WELL | A | | | | |

Certified Operator Information

| | | | |
|---|----------------|---|--------------------------|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
| Facility Classification: SMALL WATER SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| HURLBUT, ANDREW | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |

Contact Information

| | | | | | | |
|--------------------------|-----------|--------------------------|--------------|-----------------|------------------|----------|
| Name | | Organization | | Job Title | | |
| Mr. Craig L. Froehlich | | Cff Realty, LLC | | Owner | | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 14 Aragon Circle | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 203-775-6644 | | | | | Froballs@aol.com | |

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180104 | BROOKFIELD COMMONS | NTNC | 125 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 246 FEDERAL ROAD | | | | 2 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| Chlorine Residual (1012) | | 1 routine (RT) per quarter | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Haloacetic Acids (2456) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| BROOKFIELD VISION CARE (BROOKBC006) | 1/1/19 - 12/31/19 | 8/1-8/31 | Complete | | |
| | 1/1/20 - 12/31/20 | 8/1-8/31 | | | |
| | 1/1/21 - 12/31/21 | 8/1-8/31 | | | |
| Total Trihalomethanes (2950) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| MILLENNIUM TRAVEL (BROOKBC004) | 1/1/19 - 12/31/19 | 8/1-8/31 | Complete | | |
| | 1/1/20 - 12/31/20 | 8/1-8/31 | | | |
| | 1/1/21 - 12/31/21 | 8/1-8/31 | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/21 | 6/1-9/30 | | | |
| | 1/1/22 - 12/31/24 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180104 | BROOKFIELD COMMONS | NTNC | 125 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 246 FEDERAL ROAD | | | | 2 | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

| Chloride (1017) | | 1 routine (RT) per quarter | | | |
|--|--------------------------|---------------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Nitrate And Nitrite (NOX) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/20 | | | | |
| | 1/1/21 - 12/31/21 | | | | |
| Pesticides, Herbicides and PCBs-Phase II (SOC2) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Pesticides, Herbicides and PCBs-Phase V (SOC5) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Organic Chemicals (VOCS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: WELL B/C (WSF ID: 10861) | | | | | |
| E. Coli (3014) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| WELL B/C (2) | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180104 | BROOKFIELD COMMONS | NTNC | 125 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 246 FEDERAL ROAD | | | | 2 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **WELL B/C (WSF ID: 10861)**

| E. Coli (3014) | 1 routine (RT) per quarter | | |
|---|----------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: **WELL D (WSF ID: 10862)**

| E. Coli (3014) | 1 routine (RT) per quarter | | |
|---|----------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL D (2) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **ENTRY POINT (WSFID: 00700)**

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|------------------------------|---|---------------------------|---------------------------|
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: .2 MG/L | Daily |
| Start Date: 10/1/2010 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 10/1/2019 - 10/31/2019 | | |
| | 11/1/2019 - 11/30/2019 | | |
| | 12/1/2019 - 12/31/2019 | | |
| | 1/1/2020 - 1/31/2020 | | |
| | 2/1/2020 - 2/29/2020 | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|-----------|---------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| RESPOND TO SANITARY SURVEY | 1/18/2020 | 1/27/2020 |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |
| CORRECTIVE ACTION/CORRECTIVE ACTION PLAN | 4/17/2020 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | BROOKBC001 | HEALTHSOUTH | A | Y | 2 | | |
| | | BROOKBC002 | ACCURATE OFICE MACH | A | | 2 | | |
| | | BROOKBC003 | OUT TAP NR GEROSA | A | Y | 2 | | |
| | | BROOKBC004 | MILLENIUUM TRAVEL | A | | 2 | | Y |
| | | BROOKBC005 | DR PARAVATIS OFFICE | A | | 2 | | |

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.

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

| | | | | | | | |
|----------------------------------|---------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180104 | BROOKFIELD COMMONS | NTNC | 125 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 246 FEDERAL ROAD | | | | 2 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | BROOKBC006 | BROOKFIELD VISION CA | A | | | | Y |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10861 | WELL B/C | 2 | WELL B/C | A | | | | |
| 10862 | WELL D | 2 | WELL D | A | | | | |
| 1098 | TREATMENT PLANT | | | | | | | |
| 47612 | ATMOSPHERIC STORAGE | | | | | | | |

Certified Operator Information

| | | | |
|--|----------------|---|--------------------------|
| Water System Facility: TREATMENT PLANT (WSF ID: 1098) | | | |
| Facility Classification: CLASS 1 TREATMENT PLANT | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| HURLBUT, ANDREW | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |

Contact Information

| | | | | | | | |
|--------------------------|-----------|--------------------------|--------------|-----------------|----------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Ms. Peg Routhier | | Rei Property Management | | | Vp, Association Mgr. | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 2A Ives Street | | | | | Danbury | CT | 06810 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-744-8400 | 138 | 203-744-2758 | 203-948-1785 | | prouthier@rei-pm.net | | |

| | | | | | | | |
|--|-----------|--------------------------|--------------|-----------------|---------------|-------|----------|
| Contact Role(s): Administrative Contact | | | | | | | |
| Name | | Organization | | | Job Title | | |
| Brookfield Commons Association Inc | | | | | | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 246A Federal Road | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-885-7460 | | | | | | | |

Contact Role(s): **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

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|--------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180384 | GREEN TREE TOYOTA | NTNC | 55 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 45 COMMERCE ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per month | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 10/1/19 - 10/31/19 | | Complete | | |
| | 11/1/19 - 11/30/19 | | Complete | | |
| | 12/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 1/31/20 | | Complete | | |
| | 2/1/20 - 2/29/20 | | | | |
| | 3/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 4/30/20 | | | | |
| | 5/1/20 - 5/31/20 | | | | |
| | 6/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 7/31/20 | | | | |
| | 8/1/20 - 8/31/20 | | | | |
| | 9/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/17 - 12/31/19 | 6/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/22 | 6/1-9/30 | | | |
| | 1/1/23 - 12/31/25 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per month | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 10/1/19 - 10/31/19 | | Complete | | |
| | 11/1/19 - 11/30/19 | | Complete | | |
| | 12/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 1/31/20 | | Complete | | |
| | 2/1/20 - 2/29/20 | | | | |
| | 3/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 4/30/20 | | | | |
| | 5/1/20 - 5/31/20 | | | | |
| | 6/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 7/31/20 | | | | |
| | 8/1/20 - 8/31/20 | | | | |
| | 9/1/20 - 9/30/20 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |

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.

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

| | | | | | | | |
|----------------------------------|--------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180384 | GREEN TREE TOYOTA | NTNC | 55 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 45 COMMERCE ROAD | | | | 1 | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

| Chloride (1017) | 1 routine (RT) per quarter | | |
|--|---------------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |
| Inorganic Chemicals (IOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Nitrate And Nitrite (NOX) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |
| Pesticides, Herbicides and PCBs-Phase II (SOC2) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Pesticides, Herbicides and PCBs-Phase V (SOC5) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Organic Chemicals (VOCS) | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

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.

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

| | | | | | | | |
|----------------------------------|--------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180384 | GREEN TREE TOYOTA | NTNC | 55 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 45 COMMERCE ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | GTT001 | MENS BATHROOM 1ST FL | P | Y | 3 | | |
| | | GTT002 | LADIES RM 1ST FL | P | Y | 3 | | |
| | | GTT003 | UPSTAIRS LADIES RM | P | Y | 3 | | |
| | | GTT004 | UPSTAIRS MENS RM | P | Y | 3 | | |
| | | GTT005 | SHOP SINK | P | Y | 3 | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10066 | WELL1 | 2 | WELL1 | A | | | | |

Certified Operator Information

| | | | |
|---|----------------|---|--------------------------|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
| Facility Classification: SMALL WATER SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| FOLEY, JAMES | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 3/31/2023 |

Contact Information

| | | | | | | |
|-----------------------------|-----------|--------------------------|--------------|-----------------|---------------|----------|
| Name | | Organization | | | Job Title | |
| Mr. Harold Tananbaum | | | | | Owner | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 21 Baldwin Farm Rd. | | | | Greenwich | CT | 06830 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 203-775-6221 | | | | | | |

| | | | | | | |
|--|-----------|--------------------------|--------------|-----------------|---------------|----------|
| Contact Role(s): Legal Contact, Owner | | | | | | |
| Name | | Organization | | | Job Title | |
| Mr. John Blank | | Greentree Toyota | | | | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 45 Commerce Drive | | | | Brookfield | CT | 06776 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 203-775-6221 | | | | | | |

Contact Role(s): **Administrative Contact**

Please note the following:

- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 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

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180694 | MCMULLIN MANUFACTURING CORPORATION | NTNC | 33 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 70 POCONO ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/17 - 12/31/19 | 6/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/22 | 6/1-9/30 | | | |
| | 1/1/23 - 12/31/25 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/18 - 12/31/20 | | Complete | | |
| | 1/1/21 - 12/31/23 | | | | |
| Nitrate And Nitrite (NOX) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/20 | | | | |
| | 1/1/21 - 12/31/21 | | | | |
| Pesticides, Herbicides and PCBs-Phase II (SOC2) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Pesticides, Herbicides and PCBs-Phase V (SOC5) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |

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.

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

| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
|----------------------------------|------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| CT0180694 | MCMULLIN MANUFACTURING CORPORATION | NTNC | 33 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 70 POCONO ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

| Pesticides, Herbicides and PCBs-Phase V (SOC5) | | 1 routine (RT) per three years | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |

| Organic Chemicals (VOCS) | | 1 routine (RT) per year | | | |
|---|--------------------------|--------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/20 | | | | |
| | 1/1/21 - 12/31/21 | | | | |

Water System Facility: WELL (WSF ID: 10988)

| E. Coli (3014) | | 1 routine (RT) per quarter | | | |
|---|--------------------------|-----------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| WELL (2) | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION EXEMPTION | 3/1/2021 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | TT001 | LADIES ROOM 1ST FLR | A | Y | 2 | Y | Y |
| | | TT002 | MENS ROOM 1ST FLR | A | Y | 2 | Y | Y |
| | | TT003 | CAFETERIA 1ST FLR | A | Y | 2 | Y | Y |
| | | TT004 | LADIES ROOM 2ND FLR | A | Y | 2 | Y | Y |
| | | TT005 | MENS ROOM 2ND FLR | A | Y | 2 | Y | Y |
| | | TT006 | CAFETERIA 2ND FLR | A | Y | 2 | Y | Y |
| | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10988 | WELL | 2 | WELL | A | | | | |
| 57389 | TREATMENT PLANT | | | | | | | |
| 57391 | PRESSURE STORAGE | | | | | | | |

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.

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

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180694 | MCMULLIN MANUFACTURING CORPORATION | NTNC | 33 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 70 POCONO ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 57389)**

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|-----------------|----------------|---|--------------------------|
| HURLBUT, ANDREW | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |

Contact Information

| | | | | | | |
|--------------------------|-----------|-----------------------------|--------------|-----------------|------------------------|----------|
| Name | | Organization | | Job Title | | |
| Mr. Ted R. Anson | | McMullin Manufacturing Corp | | Dir Risk Mangt | | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| P.O. Box 780 | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 203-740-3366 | | 203-775-7953 | | 203-733-0200 | tanson@mcmullinmfg.com | |

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-----------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180914 | ELMBROOK PLAZA | NTNC | 30 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 632-640 FEDERAL RD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

| | | | | | |
|--|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/16 - 12/31/24 | | Complete | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/19 | 6/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/20 | 6/1-9/30 | | | |
| | 1/1/21 - 12/31/21 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/21 | | Complete | | |
| | 1/1/22 - 12/31/24 | | | | |
| Nitrate And Nitrite (NOX) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/20 | | Complete | | |
| | 1/1/21 - 12/31/21 | | | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Organic Chemicals (VOCS) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | | |

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-----------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180914 | ELMBROOK PLAZA | NTNC | 30 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 632-640 FEDERAL RD | | | | 1 | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

| Organic Chemicals (VOCS) | 1 routine (RT) per year | | |
|---|--------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | GENERIC DISTRIBUTION | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | EP001 | PULCINELLA M REST RM | A | Y | 2 | Y | |
| | | EP002 | PULCINELLA L REST RM | A | Y | 2 | Y | |
| | | EP003 | PULCINELLA BAR SINK | A | Y | 2 | Y | |
| | | EP004 | PULCINELLA BAR H SIN | A | Y | 2 | Y | |
| | | EP005 | PULCINELLA K H SINK | A | Y | 2 | Y | |
| | | EP006 | PULCINELLA L TRPL SI | A | Y | 2 | Y | |
| | | EP007 | PULCINELLA K H SINK | A | Y | 2 | Y | |
| | | EP008 | PULCINELLA K PREP SI | A | Y | 2 | Y | |
| | | EP009 | PULCINELLA EMP H SIN | A | Y | 2 | Y | |
| | | EP010 | PULCINELLA UTIL SINK | A | Y | 2 | Y | |
| | | EP011 | PULCINELLA REST RM S | A | Y | 2 | Y | |
| | | EP012 | PULCINELLA BAR SINK | A | Y | 2 | Y | |
| | | EP013 | CREDIT WORKS RESTR | A | Y | 2 | Y | |
| | | EP014 | PAPERBACK REST RM | A | Y | 2 | Y | |
| | | EP015 | SCOTT LIMO REST RM | A | Y | 2 | Y | |
| | | EP016 | KUMON REST RM | A | Y | 2 | Y | |
| | | EP017 | AIG REST RM | A | Y | 2 | Y | |
| | | EP018 | AIG KITHCHEN SINK | A | Y | 2 | Y | |
| | | EP019 | 2ND FLR L REST RM | A | Y | 2 | Y | |
| | | EP020 | 2ND FLR M REST RM | A | Y | 2 | Y | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 20383 | WELL | 2 | WELL | A | | | | |

Certified Operator Information

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.

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

| | | | | | | | |
|----------------------------------|-----------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0180914 | ELMBROOK PLAZA | NTNC | 30 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 632-640 FEDERAL RD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Certified Operator Information

| | | | |
|---|----------------------|---|-------------------|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
| Facility Classification: SMALL WATER SYSTEM | | | Certification |
| Operator Name | Operator Type | Certification(s) | Expiration |
| FOLEY, JAMES | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 3/31/2023 |

Contact Information

| | | | | | | | |
|--|-----------|-------------------|--------------------------|-----------------|------------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. John C Iaruso | | Samtor Realty LLC | | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| 640 Federal Rd | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 914-486-8862 | | | | 845-542-4488 | samtorrealty@gmail.com | | |
| 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

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|--------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189763 | COUNTRY KIDS CLUB | NTNC | 55 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 94 OLD STATE ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/17 - 12/31/19 | 6/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/22 | 6/1-9/30 | | | |
| | 1/1/23 - 12/31/25 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: TREATMENT PLANT (WSF ID: 00700) | | | | | |
| Chloride (1017) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Nitrate (1040) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Nitrite (1041) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |

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.

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

| | | | | | | | |
|----------------------------------|--------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189763 | COUNTRY KIDS CLUB | NTNC | 55 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 94 OLD STATE ROAD | | | | 1 | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **TREATMENT PLANT (WSF ID: 00700)**

| Nitrite (1041) | 1 routine (RT) per year | | |
|--|---------------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | Complete |
| | 1/1/21 - 12/31/21 | | |
| Inorganic Chemicals (IOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | 1 (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | 1/1-12/31 | Waiver |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Organic Chemicals (VOCS) | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | KIDCLUB001 | KITCHEN SINK | A | Y | N | | |
| | | KIDCLUB002 | WOMANS BATH UPSTRS | A | Y | N | | |
| | | KIDCLUB003 | ROOM #2 | A | Y | N | | |
| | | KIDCLUB004 | MENS RM DOWNSTAIRS | A | Y | N | | |
| | | KIDCLUB005 | DWNSTRS CLASS SINK | A | Y | N | Y | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |

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.

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

| | | | | | | | |
|----------------------------------|--------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189763 | COUNTRY KIDS CLUB | NTNC | 55 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 94 OLD STATE ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00700 | TREATMENT PLANT | 3 | ENTRY POINT | A | | | | |
| 10120 | WELL #1 | 2 | COUNTRY KID'S CLUB | A | | | | |
| 10837 | WELL #2 | 2 | WELL #2 | A | | | | |

Certified Operator Information

| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
|---|-------------------|--|--------------------------|
| Facility Classification: SMALL WATER SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| BLACK, RON W. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 6/30/2020 |
| GIORDANO, DAVID S. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2020 6/30/2020 |

Contact Information

| | | | | | | | |
|--------------------------|-----------|------------------------|--------------------------|-----------------|------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Ms. Camille Sage | | Country Kids Play Farm | | | Administrator | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| 107 Old State Rd | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-775-2126 | | 203-740-1551 | | | ckpf8888@aol.com | | |

| | | | | | | | |
|--|-----------|---------------|--------------------------|-----------------|---------------|-------|----------|
| Contact Role(s): Administrative Contact | | | | | | | |
| Name | | Organization | | | Job Title | | |
| Ms. Rosanne Keller | | Kids View LLC | | | President | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| 8 Sulky Drive | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| | | | | | | | |

Contact Role(s): **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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189823 | U. S. POST OFFICE - BROOKFIELD | NTNC | 70 | F | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 115 POCONO ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per month | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 10/1/19 - 10/31/19 | | Complete | | |
| | 11/1/19 - 11/30/19 | | Complete | | |
| | 12/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 1/31/20 | | Complete | | |
| | 2/1/20 - 2/29/20 | | | | |
| | 3/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 4/30/20 | | | | |
| | 5/1/20 - 5/31/20 | | | | |
| | 6/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 7/31/20 | | | | |
| | 8/1/20 - 8/31/20 | | | | |
| | 9/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per six months | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 12/31/20 | | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per month | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 10/1/19 - 10/31/19 | | Complete | | |
| | 11/1/19 - 11/30/19 | | Complete | | |
| | 12/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 1/31/20 | | Complete | | |
| | 2/1/20 - 2/29/20 | | | | |
| | 3/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 4/30/20 | | | | |
| | 5/1/20 - 5/31/20 | | | | |
| | 6/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 7/31/20 | | | | |
| | 8/1/20 - 8/31/20 | | | | |
| | 9/1/20 - 9/30/20 | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |

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.

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

| | | | | | | | |
|----------------------------------|---------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189823 | U. S. POST OFFICE - BROOKFIELD | NTNC | 70 | F | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 115 POCONO ROAD | | | | 1 | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

| Inorganic Chemicals (IOCS) | | | 1 routine (RT) per three years |
|--|--------------------------|--------------------------|---------------------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/18 - 12/31/20 | | |
| | 1/1/21 - 12/31/23 | | |
| Nitrate And Nitrite (NOX) | | | 1 routine (RT) per year |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |
| Pesticides, Herbicides and PCBs-Phase II (SOC2) | | | 1 routine (RT) per three years |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Pesticides, Herbicides and PCBs-Phase V (SOC5) | | | 1 routine (RT) per three years |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Organic Chemicals (VOCS) | | | 1 routine (RT) per year |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|-----------|---------------|
| CROSS CONNECTION SURVEY REPORT | 3/1/2019 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | BP001 | BREAK ROOM | P | Y | 1 | | |
| | | BP001 - BRE | GENERATED BY BATCH | A | Y | | | |
| | | BP002 | LADIES RM L SINK | P | Y | 1 | | |
| | | BP002 - LAD | GENERATED BY BATCH | A | Y | | | |
| | | BP003 | LADIES RM R SINK | P | Y | 1 | | |
| | | BP003 - LAD | GENERATED BY BATCH | A | Y | | | |

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.

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

| | | | | | | | |
|----------------------------------|---------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189823 | U. S. POST OFFICE - BROOKFIELD | NTNC | 70 | F | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 115 POCONO ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | BP004 | MENS RM SINK 1 | P | Y | 1 | | |
| | | BP004 - MEN | GENERATED BY BATCH | A | Y | | | |
| | | BP005 | MENS RM SINK 2 | P | Y | 1 | | |
| | | BP005 - MEN | GENERATED BY BATCH | A | Y | | | |
| | | BP006 | MENS RM SINK 3 | P | Y | 1 | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10945 | WELL | 2 | WELL | A | | | | |

Certified Operator Information

| | | | |
|---|----------------|---|--------------------------|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
| Facility Classification: SMALL WATER SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| FOLEY, JAMES | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 3/31/2023 |

Contact Information

| | | | | | | |
|--------------------------|-----------|--------------------------|--------------|-----------------|----------------------------|------------|
| Name | | Organization | | Job Title | | |
| Mr. Greg Holotko | | Us Postal Service | | Postmaster | | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 115 Pocono Road | | | | Brookfield | CT | 06804-9888 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 203-775-2717 | | 203-775-5252 | | | Gregory.J.Holotko@usps.gov | |

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

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|----------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189873 | GREENFIELD GLOBAL USA INC | NTNC | 33 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 58 VALE ROAD | | | | 1 | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| | | | | | |
|--|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/16 - 12/31/24 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/17 - 12/31/19 | 6/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/22 | 6/1-9/30 | | | |
| | 1/1/23 - 12/31/25 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/21 | | Complete | | |
| | 1/1/22 - 12/31/24 | | | | |
| Nitrate And Nitrite (NOX) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/20 | | | | |
| | 1/1/21 - 12/31/21 | | | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/18 - 12/31/20 | | | | |
| | 1/1/21 - 12/31/23 | | | | |
| Organic Chemicals (VOCS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |

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.

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

| | | | | | | | |
|----------------------------------|----------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189873 | GREENFIELD GLOBAL USA INC | NTNC | 33 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 58 VALE ROAD | | | | 1 | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

| Organic Chemicals (VOCS) | 1 routine (RT) per quarter | | |
|---|----------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 1/1/20 - 3/31/20 | | |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION EXEMPTION | 3/1/2022 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | GENERIC LOCATION | A | | | | |
| | | D001 | RESTROOM 1 | A | Y | N | Y | Y |
| | | D002 | RESTROOM 2 | A | Y | N | Y | Y |
| | | D003 | RESTROOM 3 | A | Y | N | Y | Y |
| | | D004 | LABORATORY SINK | A | Y | N | Y | Y |
| | | D005 | PRODUCTION TAP | A | Y | N | Y | Y |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 53638 | WELL | 2 | WELL | A | | | | |
| 53761 | PHARMCO PRODUCTS WTP | | | | | | | |
| 54290 | BLADDER TANK 1 | | | | | | | |
| 54292 | BLADDER TANK 2 | | | | | | | |

Certified Operator Information

Water System Facility: **PHARMCO PRODUCTS WTP (WSF ID: 53761)**

Facility Classification: CLASS 1 TREATMENT PLANT

| <i>Operator Name</i> | <i>Operator Type</i> | <i>Certification(s)</i> | <i>Certification Expiration</i> |
|----------------------|----------------------|---|---------------------------------|
| HURLBUT, PAUL | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2022 |

Contact Information

| | | | | | | | |
|--------------------------|-----------|---------------------------|--------------|-----------------|----------------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. Drew Wagner | | Greenfield Global USA Inc | | | Ehs Manager | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 58 Vale Rd | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-740-5030 | | | | | drew.wagner@greenfield.com | | |

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.

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

| | | | | | | | | |
|---|----------------------------------|---------------------|---------------------------|-----------------|-------------------------|------------------------|--------------|----------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | | |
| CT0189873 | GREENFIELD GLOBAL USA INC | NTNC | 33 | P | GW | | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural | |
| 58 VALE ROAD | | | | 1 | | | | |
| Towns Served: BROOKFIELD | | | | | | | | |
| Contact Role(s): Administrative Contact, Legal Contact | | | | | | | | |
| Name | | | Organization | | | Job Title | | |
| Mr. Ron Kean | | | Greenfield Global USA Inc | | | Vp And General Council | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 20 Toronto Street | | | | | | Toronto, Ontario | | |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 416-304-1700 | 8527 | | | | ron.kean@greenfield.com | | | |
| 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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|--------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189923 | 125 COMMERCE DRIVE | NTNC | 37 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | | 1 | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| | | | | | |
|--|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per six months | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 12/31/20 | | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Nitrate And Nitrite (NOX) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/20 | | Complete | | |
| | 1/1/21 - 12/31/21 | | | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |

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.

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

| | | | | | | | |
|----------------------------------|---------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189923 | 125 COMMERCE DRIVE | NTNC | 37 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | | 1 | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

| Organic Chemicals (VOCS) | 1 routine (RT) per year | | |
|---|--------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2010 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2011 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2016 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2019 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 125COM001 | 1ST FLOOR LADIES | A | Y | 1 | | |
| | | 125COM002 | 1ST FLOOR MEN | A | Y | 1 | | |
| | | 125COM003 | 1ST FLOOR JANITOR | A | Y | 1 | | |
| | | 125COM004 | 2ND FLOOR LADIES | A | Y | 1 | | |
| | | 125COM005 | 2ND FLOOR MEN | A | Y | 1 | | |
| | | 125COM006 | 2ND FLOOR JANITOR | A | Y | 1 | | |
| | | 125COM007 | PETRO KITCHEN | A | Y | | | |
| | | 4 | DISTRIBUTION | A | | | | |
| | DOWNSTREAM | | WITHIN 5 SERVICE CON | A | | | | |
| | UPSTREAM | | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 54631 | WELL | 2 | WELL | A | | | | |
| 55774 | PRESSURE STORAGE | | | | | | | |

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

| <i>Operator Name</i> | <i>Operator Type</i> | <i>Certification(s)</i> | <i>Certification Expiration</i> |
|----------------------|----------------------|---|---------------------------------|
| FOLEY, JAMES | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 3/31/2023 |

Contact Information

| | | |
|--------------------------|--------------------------|---------------------|
| Name | Organization | Job Title |
| Mr. Don F. Longo | Tecor Properties LLC | |
| Mailing Address Line One | Mailing Address Line Two | City State Zip Code |

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.

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

| | | | | | | | |
|--|---------------------------|---------------------|--------------|-----------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189923 | 125 COMMERCE DRIVE | NTNC | 37 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |
| 3 Production Drive | | | Unit #1 | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-938-0751 | | 203-775-0624 | 203-948-2357 | | | | |
| 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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-----------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189973 | PHOTRONICS, INC. BUILDING 1 | NTNC | 110 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 15 SECOR ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

| | | | | | | | |
|--|--|--------------------------|--|---------------------------------------|--|--------------------------|--|
| Water System Facility: DISTRIBUTION (WSF ID: 00600) | | | | | | | |
| Asbestos (1094) | | | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| Select from Inventory of Active Sampling Points | | 1/1/11 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 12/31/28 | | | | | |
| Total Coliform (3100) | | | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| Select from Inventory of Active Sampling Points | | 7/1/19 - 9/30/19 | | | | Complete | |
| | | 10/1/19 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 3/31/20 | | | | Complete | |
| | | 4/1/20 - 6/30/20 | | | | | |
| | | 7/1/20 - 9/30/20 | | | | | |
| Lead And Copper (PBCU) | | | | 5 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| Select from Inventory of Active Sampling Points | | 1/1/19 - 12/31/21 | | 6/1-9/30 | | | |
| | | 1/1/22 - 12/31/24 | | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| Select from Inventory of Active Sampling Points | | 7/1/19 - 9/30/19 | | | | Complete | |
| | | 10/1/19 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 3/31/20 | | | | Complete | |
| | | 4/1/20 - 6/30/20 | | | | | |
| | | 7/1/20 - 9/30/20 | | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | | | |
| Inorganic Chemicals (IOCS) | | | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 1/1/18 - 12/31/20 | | | | | |
| | | 1/1/21 - 12/31/23 | | | | | |
| Nitrate And Nitrite (NOX) | | | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 1/1/19 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 12/31/20 | | | | | |
| | | 1/1/21 - 12/31/21 | | | | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | | | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 1/1/17 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 12/31/22 | | | | | |
| | | 1/1/23 - 12/31/25 | | | | | |
| Organic Chemicals (VOCS) | | | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 1/1/17 - 12/31/19 | | | | Complete | |

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.

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

| | | | | | | | |
|----------------------------------|------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189973 | PHOTRONICS, INC. BUILDING 1 | NTNC | 110 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 15 SECOR ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

| | | | |
|---|--------------------------|---------------------------------------|--------------------------|
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | |
| Organic Chemicals (VOCS) | | 1 routine (RT) per three years | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION | 4 | DISTRIBUTION | A | | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | PHOTRB1001 | LOBBY LAVATORY | A | | N | Y | |
| | | PHOTRB1002 | KITCHEN | A | Y | N | | |
| | | PHOTRB1003 | 1ST FLOOR MENS ROOM | A | Y | N | | |
| | | PHOTRB1004 | 1ST FLOOR MENS ROOM | A | Y | N | | |
| | | PHOTRB1005 | 1ST FLOOR LADIES ROO | A | Y | N | | |
| | | PHOTRB1006 | 1ST FLOOR LADIES ROO | A | Y | N | | |
| | | PHOTRB1007 | 1ST FLOOR JANITOR CL | A | Y | N | | |
| | | PHOTRB1008 | 2ND FLOOR MENS ROOM | A | Y | N | | |
| | | PHOTRB1009 | 2ND FLOOR MENS ROOM | A | Y | N | | |
| | | PHOTRB1010 | 2ND FLOOR LADIES ROO | A | Y | N | | |
| | | PHOTRB1011 | 2ND FLOOR LADIES ROO | A | Y | N | | |
| | | PHOTRB1012 | CONFERENCE ROOM SINK | A | Y | N | | |
| | | PHOTRB1013 | 2ND FLOOR MENS ROOM | A | Y | N | | |
| | | PHOTRB1014 | 2ND FLOOR MENS ROOM | A | Y | N | | |
| | | PHOTRB1015 | 2ND FLOOR LADIES ROO | A | Y | N | | |
| | | PHOTRB1016 | 2ND FLOOR LADIES ROO | A | Y | N | | |
| | | PHOTRB1017 | 2ND FLOOR JANITOR CL | A | Y | N | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 57906 | WELL | 2 | WELL | A | | | | |
| 60836 | ATMOSPHERIC STORAGE TANK | | | | | | | |

Certified Operator Information

| | | | |
|--|----------------------|-------------------------|---------------------------------|
| Water System Facility: DISTRIBUTION (WSF ID: 00600) | | | |
| Facility Classification: SMALL WATER SYSTEM | | | |
| <i>Operator Name</i> | <i>Operator Type</i> | <i>Certification(s)</i> | <i>Certification Expiration</i> |
| | | | |

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.

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

| | | | | | | | |
|----------------------------------|------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189973 | PHOTRONICS, INC. BUILDING 1 | NTNC | 110 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 15 SECOR ROAD | | | | 1 | | | |

Towns Served: BROOKFIELD

Certified Operator Information

Water System Facility: **DISTRIBUTION (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|--------------------|-------------------|---|--------------------------|
| BLACK, RON W. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 |
| GIORDANO, DAVID S. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2020 |

Contact Information

| | | | | | | |
|-----------------------------|-----------|--------------------------|--------------|-----------------|----------------------|----------|
| Name | | Organization | | | Job Title | |
| Ms. Richelle E. Burr | | Photronics, Inc | | | Vice President | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 15 Secor Road | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 203-740-5285 | 5285 | 203-775-5601 | | 203-482-1323 | rburr@photronics.com | |

Contact Role(s): **Legal Contact**

| | | | | | | |
|--------------------------|-----------|--------------------------|--------------|-----------------|------------------------|----------|
| Name | | Organization | | | Job Title | |
| Mr. John Gedney | | Photronics Inc | | | | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 15 Secor Road | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 203-740-5346 | | | | 203-948-9526 | jgedney@photronics.com | |

Contact Role(s): **Administrative 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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-----------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189983 | PHOTRONICS, INC. BUILDING 2 | NTNC | 110 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 15 SECOR ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Asbestos (1094) 1 routine (RT) per nine years

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|---|-------------------|-------------------|-------------------|
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/28 | | |

Total Coliform (3100) 1 routine (RT) per quarter

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|---|--------------------|-------------------|-------------------|
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Lead And Copper (PBCU) 5 routine (RT) per three years

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|---|-------------------|-------------------|-------------------|
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/21 | 6/1-9/30 | |
| | 1/1/22 - 12/31/24 | 6/1-9/30 | |

Physical Parameters (PPS) 1 routine (RT) per quarter

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|---|--------------------|-------------------|-------------------|
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: ENTRY POINT (WSF ID: 00700)

Inorganic Chemicals (IOCS) 1 routine (RT) per three years

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/18 - 12/31/20 | | |
| | 1/1/21 - 12/31/23 | | |

Nitrate And Nitrite (NOX) 1 routine (RT) per year

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |

Pesticides, Herbicides and PCBs - Phase II & V (SOCS) 1 (RT) per three years

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | 1/1-12/31 | Waiver |

Pesticides, Herbicides and PCBs - Phase II & V (SOCS) 1 routine (RT) per three years

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

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.

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

| | | | | | | | |
|----------------------------------|------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189983 | PHOTRONICS, INC. BUILDING 2 | NTNC | 110 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 15 SECOR ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Monitoring Requirements

| | | | |
|---|--------------------------|---------------------------------------|--------------------------|
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | |
| Organic Chemicals (VOCS) | | 1 routine (RT) per three years | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION EXEMPTION | 3/1/2024 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION | A | | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | PHOTRB2001 | LOBBY LAVATORY | A | Y | N | | |
| | | PHOTRB2002 | KITCHENETTE SINK | A | Y | N | | |
| | | PHOTRB2003 | 1ST FLOOR LADIES ROO | A | Y | N | | |
| | | PHOTRB2004 | 1ST FLOOR LADIES ROO | A | Y | N | | |
| | | PHOTRB2005 | 1ST FLOOR MENS ROOM | A | Y | N | Y | |
| | | PHOTRB2006 | 1ST FLOOR MENS ROOM | A | Y | N | Y | |
| | | PHOTRB2007 | CUSTODIAN CLOSET | A | Y | N | | |
| | | PHOTRB2008 | 2ND FLOOR LADIES ROO | A | Y | N | | |
| | | PHOTRB2009 | 2ND FLOOR LADIES ROO | A | Y | N | | |
| | | PHOTRB2010 | 2ND FLOOR MENS ROOM | A | Y | N | | |
| | | PHOTRB2011 | 2ND FLOOR MENS ROOM | A | Y | N | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 57935 | WELL | 2 | WELL | A | | | | |

Certified Operator Information

| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
|---|----------------------|---|---------------------------------|
| Facility Classification: SMALL WATER SYSTEM | | | |
| <i>Operator Name</i> | <i>Operator Type</i> | <i>Certification(s)</i> | <i>Certification Expiration</i> |
| BLACK, RON W. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 |
| GIORDANO, DAVID S. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2020 |

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.

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

| | | | | | | | |
|----------------------------------|------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189983 | PHOTRONICS, INC. BUILDING 2 | NTNC | 110 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 15 SECOR ROAD | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Contact Information

| | | | | | | | | |
|-----------------------------|-----------|--------------|--------------------------|-----------------|----------------------|------------|----------------|----------|
| Name | | | | Organization | | | Job Title | |
| Ms. Richelle E. Burr | | | | Photronics, Inc | | | Vice President | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 15 Secor Road | | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-740-5285 | 5285 | 203-775-5601 | | 203-482-1323 | rburr@photronics.com | | | |

Contact Role(s): **Legal Contact**

| | | | | | | | | |
|--------------------------|-----------|-----|--------------------------|-----------------|------------------------|------------|-----------|----------|
| Name | | | | Organization | | | Job Title | |
| Mr. John Gedney | | | | Photronics Inc | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 15 Secor Road | | | | | | Brookfield | CT | 06804 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-740-5346 | | | | 203-948-9526 | jgedney@photronics.com | | | |

Contact Role(s): **Administrative 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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189993 | 31 OLD ROUTE SEVEN | NTNC | 50 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 31 OLD ROUTE 7 | | | | 1 | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| | | | | | |
|---|--------------------------|---|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| Total Coliform (3100) | | 1 routine (RT) per month | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 12/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 1/31/20 | | Complete | | |
| | 2/1/20 - 2/29/20 | | | | |
| | 3/1/20 - 3/31/20 | | | | |
| | 4/1/20 - 4/30/20 | | | | |
| | 5/1/20 - 5/31/20 | | | | |
| | 6/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 7/31/20 | | | | |
| | 8/1/20 - 8/31/20 | | | | |
| | 9/1/20 - 9/30/20 | | | | |
| Total Coliform (3100) | | 3 repeat (RP) per period | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 9/7/19 - 9/12/19 | | | | |
| | 11/1/19 - 11/6/19 | | Complete | | |
| | 11/1/19 - 11/6/19 | | Complete | | |
| | 11/28/19 - 12/3/19 | | Complete | | |
| | 11/28/19 - 12/3/19 | | Complete | | |
| Total Coliform (3100) | | 3 temporary routine (TR) per month | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 10/1/19 - 10/31/19 | | Complete | | |
| | 11/1/19 - 11/30/19 | | Complete | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per six months | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 12/31/20 | | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 11/30/19 | 10/1-11/30 | Complete | | |

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189993 | 31 OLD ROUTE SEVEN | NTNC | 50 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 31 OLD ROUTE 7 | | | | 1 | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| Physical Parameters (PPS) | 1 routine (RT) per month | | |
|---|--------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points | 12/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 1/31/20 | | Complete |
| | 2/1/20 - 2/29/20 | | |
| | 3/1/20 - 3/31/20 | | |
| | 4/1/20 - 4/30/20 | | |
| | 5/1/20 - 5/31/20 | | |
| | 6/1/20 - 6/30/20 | | |
| | 7/1/20 - 7/31/20 | | |
| | 8/1/20 - 8/31/20 | | |
| | 9/1/20 - 9/30/20 | | |

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

| Inorganic Chemicals (IOCS) | 1 routine (RT) per three years | | |
|---|--------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/21 | | |
| | 1/1/22 - 12/31/24 | | |

| Nitrate And Nitrite (NOX) | 1 routine (RT) per year | | |
|---|--------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | |
| | 1/1/20 - 12/31/20 | | |
| | 1/1/21 - 12/31/21 | | |

| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | 1 routine (RT) per quarter | | |
|---|----------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

| Organic Chemicals (VOCS) | 1 routine (RT) per quarter | | |
|---|----------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: **WELL #1 (WSF ID: 61240)**

| E. Coli (3014) | 1 triggered (TG) per period | | |
|---|-----------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL #1 (2) | 9/6/19 - 9/12/19 | | |

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189993 | 31 OLD ROUTE SEVEN | NTNC | 50 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 31 OLD ROUTE 7 | | | | 1 | | | |

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **WELL #1 (WSF ID: 61240)**

| E. Coli (3014) | 1 triggered (TG) per period | | |
|---|-----------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 10/31/19 - 11/6/19 | | Complete |
| | 10/31/19 - 11/6/19 | | Complete |
| | 11/27/19 - 12/3/19 | | Complete |
| | 11/27/19 - 12/3/19 | | Complete |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 3/30/2020 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | AHCS-BR | AHCS-BATHROOM | A | Y | | | |
| | | AHCS-K | AHCS-KITCHEN | A | Y | N | | |
| | | APC-HB | APC HALL BATHROOM | A | Y | | | |
| | | APC-K | APC-KITHEN | A | Y | N | | |
| | | APC-SBR | APC STAFF BATHROOM | A | Y | | | |
| | | APC-SW | APC SINK WASHUP | A | Y | | | |
| | | APWC-BKRM | APWC-BREAKROOM | A | Y | N | | |
| | | APWC-EBR | AWPC-EMPLOYEE BR | A | Y | | | |
| | | APWC-EX4 | AWPC- EXAM ROOM 4 | A | Y | | | |
| | | APWC-EX5 | AWPC-EXAM ROOM 5 | A | Y | | | |
| | | APWC-PBR | AWPC-PATIENT BR | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | PTA-BR | PTA BATHROOM | A | Y | | | |
| | | PTA-SE | PTA SINK BY ENTRANCE | A | Y | N | | |
| | | PTA-SH | PTA SINK BY HALL | A | Y | N | | |
| | | SA-HS | SA-HALL SINK | A | Y | | | |
| | | SA-K | SA-KITCHEN | A | Y | N | | |
| | | SA-LBR | SA-LEFT BATHROOM | A | Y | | | |
| | | SA-RBR | SA-RIGHT BATHROOM | A | Y | | | |
| | | UC-BBR | UC BILLING BATHROOM | A | Y | | | |
| | | UC-DSR | UC-DRUG SCREEN ROOM | A | | | | |
| | | UC-EBR | UC-EMPLOYEE BR | A | Y | | | |
| | | UC-EK | UC-EMPLOYEE KITCHEN | A | Y | N | | |
| | | UC-PRR | UC-PATIENT RESTROOM | A | Y | | | |

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.

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

| | | | | | | | |
|----------------------------------|---------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0189993 | 31 OLD ROUTE SEVEN | NTNC | 50 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 31 OLD ROUTE 7 | | | | 1 | | | |
| Towns Served: BROOKFIELD | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 61240 | WELL #1 | 2 | WELL #1 | A | | | | |
| 61424 | TREATMENT PLANT | | | | | | | |

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification:

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|-----------------|----------------|---|--------------------------|
| HURLBUT, ANDREW | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |

Contact Information

| | | | | | | |
|--------------------------|-----------|----------------------------|--------------|-----------------|----------------------------|----------|
| Name | | Organization | | | Job Title | |
| Ms. Andrea Scalzo | | Scalzo Property Management | | | | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 2 Stony Hill Rd | | Suite 201 | | Bethel | CT | 06801 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 203-790-6888 | 691 | 203-790-9390 | | 203-790-6888 | ascalzo@scalzoproperty.com | |

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

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