		*	ent of Public			0			
	Wate	er Quality I	Monitoring a	nd Con	nplia	nce S	chedul	e	
PWS ID	PWS Name				Classif	ication P	opulation	Owner Type	Primary Source
CT0250024	CHESHIRE PUBLIC I	PARK WELL (LOCH	(12)		N	IC	27	L	GW
Local Address ((where applicable)		Service	Residen	tial Co	mmercial	Industri	al Combine	ed Agricultural
487 NORTH BR	OOKSVALE ROAD		Connectio	ns				3	
Towns Served:	CHESHIRE								
		1	Monitoring Re	quireme	nts				
Water System	n Facility: DISTRIB	UTION SYSTEM	(WSF ID: 00600)						
Total Colifor	m (3100)						1	routine (RT) per quarter
Sampling	Point (Sampling Point	nt ID)		Monitori	ng Peri	od Col	llection Pe	riod Com	oliance Status
Select from	m Inventory of Active	Sampling Points		7/1/19 -	9/30/1	.9			Complete
				10/1/19 -	12/31/	1 9		(Complete
				4/1/20 -					
				7/1/20 -	9/30/2	20			
-	ameters (PPS)							=) per quarter
	Point (Sampling Poin			Monitori			llection Pe	-	oliance Status
Select from	m Inventory of Active	Sampling Points		7/1/19 -					Complete
				10/1/19 -					Complete
				4/1/20 -					
	- 111			7/1/20 -	9/30/2	20			
•	n Facility: ENTRY F	POINT (WSF ID:	: 00700)						
	Nitrite (NOX)								(RT) per year
	Point (Sampling Point	nt ID)		Monitori			llection Pe	-	oliance Status
ENTRY PO	DINT (3)			1/1/19 -					Complete
				1/1/20 -					
				1/1/21 -		21			
		0	ther Complian	ce Sched	lules				
	hedule Activity			Due Date					
SEASONAL STA	RT UP COMPLETION				4/1/202	20			
		Pub	lic Notification	Require	emen	ts			
			Compliance	Notice	· <u>!</u>	Public Not	tification	PN C	ertification
Violation/Situa			Period	Tier		quired	Performe		
Repeat Total Co	oliform M&R Violatio	n	7/1/05 - 9/30/0	5 2	2/	9/2006		2/19/200	6
	W	Vater System	n Facility and S	ampling	Poin	t Inven	tory		
Water						Tot	al Lead	and	
	to a Country of English	Sampli	ng Point Sampling			Colife			Stage
System Wat	ter System Facility		ID Description	n	Sto	itus Ru	Ie Rule	Tier Asbesto	s WQP 2 DBPR
System Wat Facility ID			•						
System Wate Facility ID	TRIBUTION SYSTEM		4 DISTRIBUT	ION SYSTEM	۱ /	A Y	,		
System Wat Facility ID 00600 DIST 00700 ENT	FRIBUTION SYSTEM		4 DISTRIBUT 3 ENTRY POI	ION SYSTEM	l /	A			
System Wate Facility ID	FRIBUTION SYSTEM		4 DISTRIBUT 3 ENTRY POI 2 WELL	ION SYSTEM NT	l ,				
System Wat Facility ID 00600 DIST 00700 ENT	FRIBUTION SYSTEM		4 DISTRIBUT 3 ENTRY POI	ION SYSTEM NT	l ,	A			-
System Wat Facility ID 00600 DIST 00700 ENT	FRIBUTION SYSTEM		4 DISTRIBUT 3 ENTRY POI 2 WELL	ION SYSTEM NT	l ,	A		Job Title	
System Water Facility ID 00600 DIST 00700 ENT 22778 WEL	TRIBUTION SYSTEM TRY POINT		4 DISTRIBUT 3 ENTRY POI 2 WELL Contact Info	ION SYSTEM NT ormation	l ,	A	Director	Job Title	
System Water Facility ID 00600 DIST 00700 ENT 22778 WEL	TRIBUTION SYSTEM TRY POINT LL Dewatne		4 DISTRIBUT 3 ENTRY POI 2 WELL Contact Info Organization	ION SYSTEM NT ormation	l ,	A		Job Title	e Zip Code
System Wate Facility ID 00600 DIST 00700 ENT 22778 WEL Name Mr. George No	TRIBUTION SYSTEM TRY POINT LL Dewatne ss Line One		4 DISTRIBUT 3 ENTRY POI 2 WELL Contact Info Organization Town of Ches	ION SYSTEM NT ormation	l ,	A	Director City		
System Water Facility ID 00600 DIST 00700 ENT 22778 WEL Name Mr. George No Mailing Addres	TRIBUTION SYSTEM TRY POINT LL Dewatne SS Line One St		4 DISTRIBUT 3 ENTRY POI 2 WELL Contact Info Organization Town of Ches	ION SYSTEM NT ormation	l ,	A A Cheshire	Director 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.

	dofficed beparament of rabble fleath brinking water bection											
Water Quality Monitoring and Compliance Schedule												
PWS ID PWS Name					ssification	Population	Owner Type	Primary Source				
CT0250024	CHESHIRE PUBLIC PARK WELL (LOCK 12)				NC	27	L	GW				
Local Address (v	Service	Residen	ntial Commerci		al Industri	al Combine	ed Agricultural					
487 NORTH BRO	Connections					3						

Connecticut Department of Public Health Drinking Water Section

Towns Served: CHESHIRE

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.

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

End of schedule

Schedule Generation Date: 3/10/2020

Connecticut Departmen	t of Public H	ealth D	rinkir	ng Water S	Section			
Water Quality Mo	onitoring and	l Comp	liance	Schedule	;			
PWS ID PWS Name		Cla		n Population C		-		
CT0250044 HICKORY HILL ORCHARDS			NC	25	Р	GW		
Local Address (where applicable)	Service	Residential	Comme	rcial Industrial	Combined	Agricultural		
351 SOUTH MERIDEN ROAD	Connections	1				1		
Towns Served: CHESHIRE								
	onitoring Requ	irement	S					
Water System Facility: DISTRIBUTION SYSTEM (V	WSF ID: 00600)							
Total Coliform (3100)					utine (RT) per quarter			
Sampling Point (Sampling Point ID)		Monitoring I		Collection Perio		Compliance Status		
Select from Inventory of Active Sampling Points		7/1/19 - 9/3				nplete		
		10/1/19 - 12,	•		Cor	nplete		
		7/1/20 - 9/3	30/20		()	_		
Physical Parameters (PPS)					outine (RT) p	-		
Sampling Point (Sampling Point ID)		Monitoring I		Collection Perio		ince Status		
Select from Inventory of Active Sampling Points		7/1/19 - 9/3				nplete		
		10/1/19 - 12			Cor	nplete		
MALLO COLOR FOLIDA FAITRA POINT (MICE ID OC		7/1/20 - 9/3	30/20					
Water System Facility: ENTRY POINT (WSF ID: 00	1700)			_		_		
Nitrate (1040)	,				outine (RT) p	-		
Sampling Point (Sampling Point ID)		Monitoring		Collection Perio		ince Status		
ENTRY POINT (3)		7/1/19 - 9/3	-			nplete		
		10/1/19 - 12			Cor	nplete		
NV (1 - /4044)		7/1/20 - 9/3	30/20		4 12 /5	=\		
Nitrite (1041)		Manitarina	Daviad	Collection Perio	1 routine (R			
Sampling Point (Sampling Point ID)		Monitoring Period				ince Status		
ENTRY POINT (3)		1/1/19 - 12/			Cor	nplete		
		1/1/20 - 12/ 1/1/21 - 12/						
Water System Facility: WELL 1 (STORE) (WSF ID:		1/1/21 - 12/	31/21					
	23017)			1	autina (DT) s			
E. Coli (3014)		Manitarina	Daviad		outine (RT) p	•		
Sampling Point (Sampling Point ID) WELL 1 (2)		Monitoring		Collection Perio	oa Compila	ince Status		
WELL I (2)		7/1/19 - 9/3 10/1/19 - 12			Cor	nplete		
		7/1/20 - 9/3	•		COI	пріссе		
Otho	er Compliance		•					
Compliance Schedule Activity			Date	Achieve	ed Date			
RESPOND TO SANITARY SURVEY)/2017	Acmeve	.u Dute			
	Notification B							
Public	Notification R	-				•		
Violation / Cituation	Compliance Period	Notice		Notification	PN Certi			
Violation/Situation E. Coli M&R Violation	7/1/19 - 9/30/19	Tier 3	Require 12/9/202		Due to DPH 12/19/2020	Received		
					12/13/2020			
Water System F	acility and San	npling Po	oint inv					
Water Custom Mator System English Campling	Doint Committee Defe	•	_	Total Lead a		Ct.		
System Water System Facility Sampling I Facility ID ID	Point Sampling Point Description	IL		oliform Coppe Rule Rule Ti	er ier Asbestos I	Stage		
00600 DISTRIBUTION SYSTEM 4	DISTRIBUTION	I CVCTENA	Status A	Y Kule II	ו מונטענים ו	VQI ZUDPK		
4	אוטווטפואונוט	JIJIEW	^	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			Classif	ication P	opulation	Owner Type	Primary Source
CT0250044	HICKORY HILL ORCHARDS			N	IC	25	Р	GW
Local Address (where applicable)		Service	Resider	itial Co	mmercial	Industri	al Combine	ed Agricultural
351 SOUTH M	ERIDEN ROAD	Connections	1					1

Towns Served: CHESHIRE

	Wa	iter System Facili	ity and Sampl	ing Point I	nvento	ry			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00700	ENTRY POINT	3	ENTRY POINT	Α					
23017	WELL 1 (STORE)	2	WELL 1	Α					
60244	WELL 2 (HOUSE)	2	WELL 2 (HOUSE)	А					

			Contact Inf	ormation						
			Organization				Job Title			
lish										
Mailing Address Line One				Mailing Address Line Two				Zip Code		
363 South Meriden Road					Cheshire		СТ	06410		
Extension	Fax		Mobile Phone	Emergency Phone	Email Address					
				203-272-3824	fredkudish@gmail.com					
1	e One Road	ne One Road	ne One Mailing Road	Organization ish e One Mailing Address Line Two Road	ish e One Mailing Address Line Two Road Extension Fax Mobile Phone Emergency Phone	Organization ish ie One Mailing Address Line Two Road Cheshire Extension Fax Mobile Phone Emergency Phone Email Address Address Address Cheshire	Organization ish e One Mailing Address Line Two City Road Cheshire Extension Fax Mobile Phone Emergency Phone Email Address	Organization Job Title ish ie One Mailing Address Line Two City State Road Cheshire CT Extension Fax Mobile Phone Emergency Phone Email Address		

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.
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End of schedule

Schedule Generation Date: 3/10/2020

PWS ID	Water Qua	ility Mo	mitor	ing an		_		T		wner Type Pr	imary Source		
CT0250054	MIXVILLE PARK						NC	2	25	L	GW		
Local Address (w	here applicable)		Se	rvice	Resident	tial (Commerc	ial II	ndustrial	Combined	Agricultural		
NOTCH ROAD			Co	nnections			1						
Towns Served: Cl	HESHIRE												
		Mo	nitori	ng Requ	iiremer	nts							
Water System F	acility: DISTRIBUTION S	SYSTEM (V	VSF ID: 0	00600)									
Total Coliform	(3100)			-					1 r	outine (RT) p	er quarter		
	oint (Sampling Point ID)				Monitorir	ng Pe	riod (Collect	ion Perio		ance Status		
	Inventory of Active Samplin	g Points			7/1/19 -						mplete		
	· ·	<u>-</u>			10/1/19 -	12/3	1/19				mplete		
					4/1/20 -		•				•		
					7/1/20 -		'						
Physical Param	neters (PPS)								1 r	outine (RT) p	er quarter		
-	oint (Sampling Point ID)				Monitorin	ng Pe	riod (Collect	ion Perio		ance Status		
Select from	Inventory of Active Samplin	g Points			7/1/19 -	9/30,	/19			Cor	mplete		
					10/1/19 -	12/3	1/19			Cor	mplete		
					4/1/20 -	6/30,	/20				<u> </u>		
					7/1/20 -	9/30,	/20						
Water System F	acility: ENTRY POINT (WSF ID: 00	700)										
Nitrate And Ni	trite (NOX)									1 routine (R	T) per year		
Sampling Po	oint (Sampling Point ID)				Monitorir	ng Pe	riod (Collect	ion Perio	d Complia	ance Status		
ENTRY POIN	IT (3)				1/1/19 - 1	12/31	/19			Cor	mplete		
					1/1/20 - 1	12/31	/20						
					1/1/21 - 1	12/31	/21						
		Othe	er Com	pliance	Sched	ules	S						
Compliance Sche	dule Activity				D	Due D	ate		Achieve	d Date			
-	Γ UP COMPLETION				5	5/1/2	020						
		Public	Notifi	cation R	equire	me	nts						
				pliance	Notice		Public N	lotific	ation	PN Certi	ification		
Violation/Situati	ion		-	riod	Tier	F	Required		formed	Due to DPH	Received		
Distribution Turb	oidity MCL Violation		4/1/04	- 6/30/04	2		3/5/2004		,	8/15/2004			
Physical Paramet	ters M&R Violation		7/1/04	- 9/30/04	3	1	/3/2006			1/13/2006			
	Water 9	System Fa	acility	and Sar	npling	Poi	nt Inve	ento	rv				
Water		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,					otal	Lead ar	nd			
	r System Facility	Sampling P	Point Sa	mpling Poi	nt			ota. Iiform			Stage		
-		ID	De	scription		S		Rule		er Asbestos	_		
Facility ID	IBUTION SYSTEM	4	DIS	STRIBUTION	N SYSTEM		Α	Υ					
		DOWNSTD	EAM WI	ITHIN 5 SER	VICE CON	I	Α						
		DOMINSTR					۸						
		UPSTREA	M WI	ITHIN 5 SER	VICE CON	l	Α						
00600 DISTRI	Y POINT			THIN 5 SER		l 	A						
00600 DISTRI		UPSTREA	EN			l							
00600 DISTRI		UPSTREA 3 2	EN WI	TRY POINT ELL #1			Α						
00600 DISTRI 00700 ENTRY 23041 WELL		UPSTREA 3 2	EN WI Conta	TRY POINT ELL #1 ct Inforr		l	Α			Joh Title			
00600 DISTRI	#1	UPSTREA 3 2	EN WI Conta Organ	TRY POINT ELL #1	mation		A	Dir	ector	Job Title			

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	Wa	ter Qual	lity Moni	itoring a	nd Con	nplia	nce S	Schedul	le		
PWS ID	PWS Name	Classification Populat			Owner Type Primary So		mary Source				
CT0250054	0250054 MIXVILLE PARK							25	L	L GW	
Local Address (w	Service	ervice Residen		mmerci	al Industri	l Combined		Agricultural			
NOTCH ROAD	Connection	าร		1							
Towns Served: Cl	HESHIRE			·	·						
84 South Main St						Cheshi	re	СТ		06410	
Business Phone	Extension	Fax	Mol	bile Phone	Emergence	y Phone	e Email Address				
203-271-6650 203-271-6659							gnoew	gnoewatne@cheshirect.org			

Connecticut Department of Public Health Drinking Water Section

Contact Role(s): Administrative Contact, Legal Contact

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End of schedule