| Connecticut Department of Publi                           | c Health Drinki          | ng Water Se              | ction                  |
|---|--------------------------|--------------------------|------------------------|
| Water Quality Monitoring                                  |                          | - C                      |                        |
| PWS ID PWS Name   |                          |                          | er Type Primary Source |
| CT0261001 AARON MANOR NURSING & REHAB CENTER              | C                        | 81                       | P GW                   |
| Local Address (where applicable)  Service                 | Residential Comme        |                          | Combined Agricultural  |
| 3 SOUTH WIG HILL RD Connect                               |                          |                          | 7.8.100.101.01         |
| Towns Served: CHESTER                                     | _                        |                          |                        |
| Monitoring R  | equirements              |                          |                        |
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600 | •                        |                          |                        |
| Asbestos (1094)   |                          | 1 routine                | e (RT) per nine years  |
| Sampling Point (Sampling Point ID)                        | <b>Monitoring Period</b> | <b>Collection Period</b> | Compliance Status      |
| Select from Inventory of Active Sampling Points           | 1/1/13 - 12/31/21        |                          |                        |
| Total Coliform (3100)                                     |                          | 3 re                     | peat (RP) per period   |
| Sampling Point (Sampling Point ID)                        | <b>Monitoring Period</b> | <b>Collection Period</b> | Compliance Status      |
| Select from Inventory of Active Sampling Points           | 9/25/19 - 10/1/19        |                          | Complete               |
| Total Coliform (3100)                                     |                          | 1 rou                    | itine (RT) per month   |
| Sampling Point (Sampling Point ID)                        | <b>Monitoring Period</b> | <b>Collection Period</b> | Compliance Status      |
| 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         |                          | Complete               |
|   | 3/1/20 - 3/31/20         |                          | Complete               |
|   | 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   |
| Sampling Point (Sampling Point ID)                        | Monitoring Period        | Collection Period        | Compliance Status      |
| 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 rou                    | itine (RT) per month   |
| Sampling Point (Sampling Point ID)                        | Monitoring Period        | Collection Period        | Compliance Status      |
| 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         |                          | Complete               |
|   | 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

Page 1

Schedule Generation Date: 3/10/2020

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

|               | Connecticut Departm             | ent of Public H        | lealth     | Dri     | nking      | Water       | Section     | ı                |
|---------------|---------------------------------|------------------------|------------|---------|------------|-------------|-------------|------------------|
|               | Water Quality                   | Monitoring an          | d Com      | plia    | ance So    | chedul      | e           |                  |
| PWS ID        | PWS Name                        |                        |            | Classi  | fication P | opulation   | Owner Type  | Primary Source   |
| CT0261001     | AARON MANOR NURSING & REHA      | B CENTER               |            |         | С          | 81          | Р           | GW               |
| Local Address | (where applicable)              | Service                | Resident   | tial Co | ommercial  | Industria   | al Combin   | ned Agricultural |
| 3 SOUTH WIG   | HILL RD                         | Connections            | 2          |         |            |             |             |                  |
| Towns Served  | l: CHESTER                      |                        |            |         |            |             |             |                  |
|               |                                 | <b>Monitoring Requ</b> | ıiremei    | nts     |            |             |             |                  |
| Water Syste   | m Facility: ENTRY POINT (WSF ID | : 00700)               |            |         |            |             |             |                  |
| Net Gross A   | lpha (4000)                     |                        |            |         |            | 1 rou       | tine (RT) p | er three years   |
| Sampling      | g Point (Sampling Point ID)     |                        | Monitorii  | ng Per  | riod Col   | lection Per | riod Con    | npliance Status  |
| ENTRY P       | OINT (3)                        |                        | 1/1/17 - 3 | 12/31/  | /19        |             |             | Complete         |
|               |                                 |                        | 1/1/20 - 3 | 12/31/  | /22        |             |             |                  |
|               |                                 |                        | 1/1/23 - 3 | 12/31/  | /25        |             |             |                  |
| Uranium (4    | 1006)                           |                        |            |         |            | 1 rou       | tine (RT) p | er three years   |
| Sampling      | g Point (Sampling Point ID)     |                        | Monitorii  | ng Per  | riod Col   | lection Per |             | npliance Status  |
| ENTRY P       | OINT (3)                        |                        | 1/1/17 - 3 | 12/31/  | /19        |             |             | Complete         |
|               |                                 |                        | 1/1/20 - 3 | 12/31/  | /22        |             |             |                  |
|               |                                 |                        | 1/1/23 - 1 | 12/31/  | /25        |             |             |                  |

1/1/23 - 12/31/25 Combined Radium-226/228 (4010) 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 **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 **Compliance Status** Sampling Point (Sampling Point ID) **Monitoring Period Collection Period 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** 1/1/17 - 12/31/19 Waiver **ENTRY POINT (3)** 1/1-12/31 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 **Organic Chemicals (VOCS)** 1 routine (RT) per year Sampling Point (Sampling Point ID) **Collection Period Compliance Status Monitoring Period 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: 745) E. Coli (3014) 1 triggered (TG) per period **Collection Period Compliance Status** Sampling Point (Sampling Point ID) **Monitoring Period** 9/24/19 - 10/1/19 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 De                    | partment of<br>uality Monit |                           |               |          |                           |                 | ection        |                        |
|--------------------------------|-----------------------------------|-----------------------------|---------------------------|---------------|----------|---------------------------|-----------------|---------------|------------------------|
| DIA(C ID                       |                                   | uanty Monit                 | orning a                  |               | <u> </u> |                           |                 | T D           |                        |
| PWS ID                         | PWS Name                          | IC O DELLAD CENTER          | •                         |               |          | -                         |                 |               | rimary Source          |
| CT026100                       |                                   | IG & KEHAB CENTER           | Service                   | Resident      | C        |                           | 81<br>ndustrial | P<br>Combined | GW<br>A swise alternal |
|                                | ress (where applicable)           |                             | Connection                |               | iai Comi | merciai ii                | nuustriai       | Combined      | Agricultural           |
|                                | WIG HILL RD<br>rved: CHESTER      |                             | connection                | ns 2          |          |                           |                 |               |                        |
| TOWIIS SEI                     | veu. Chestek                      |                             |                           | •             |          |                           |                 |               |                        |
| Water Sv                       | stem Facility: WELL 5 (WSI        |                             | oring Ke                  | quiremer      | its      |                           |                 |               |                        |
| E. Coli (                      | ,                                 | -,                          |                           |               |          |                           | 1 trigg         | gered (TG)    | per period             |
| -                              | pling Point (Sampling Point ID)   |                             |                           | Monitorin     | a Period | Collect                   | tion Period     | -             | ance Status            |
| _                              | L 5 (2)                           |                             |                           | 9/24/19 -     |          |                           |                 |               | mplete                 |
|                                |                                   | Other C                     | omplian                   | ce Sched      |          |                           |                 |               | <u>'</u>               |
| Complian                       | ce Schedule Activity              |                             |                           | D             | ue Date  |                           | Achieved        | Date          |                        |
| DISTRIBUT                      | TION SYSTEM MATERIALS EVALU       | JATION                      |                           | 8/            | 31/2019  |                           |                 |               |                        |
| CROSS CO                       | NNECTION SURVEY REPORT            |                             |                           | 3             | /1/2020  |                           |                 |               |                        |
| SUBMIT C                       | CR TO THE DEPARTMENT              |                             |                           | 6/            | 30/2020  |                           |                 |               |                        |
| SUBMIT C                       | CR CERTIFICATION FORM             |                             |                           | 8             | /9/2020  |                           |                 |               |                        |
|                                | Wate                              | r System Facili             | ity and S                 | ampling       | Point I  | nvento                    | ry              |               |                        |
| Water<br>System<br>Facility ID | Water System Facility             | Sampling Point<br>ID        | Sampling I<br>Description |               | Statu    | Total<br>Coliform<br>Rule |                 | Asbestos      | Stage<br>WQP 2 DBPR    |
| 00600                          | DISTRIBUTION SYSTEM               | 4                           | GENERIC D                 | ISTRIBUTION   |          | Y                         |                 |               |                        |
|                                |                                   | AM601                       | HOME/AGI                  | ED KITCHEN    | Α        | Υ                         | N               |               |                        |
|                                |                                   | AM602                       | MAIN KITC                 | HEN           | Α        | Υ                         | N               |               |                        |
|                                |                                   | AM603                       | EMPLOYEE                  | CAFETERIA     | Α        | Υ                         | N               |               |                        |
|                                |                                   | AM604                       | COPY ROO                  | M BATHROO     | м а      | Υ                         | N               |               |                        |
|                                |                                   | AM605                       | OFFICE BA                 | ГНКООМ        | Α        | Υ                         | N               |               |                        |
|                                |                                   | AM606                       | OCC THERA                 | APY ROOM      | Α        | Υ                         | N               |               |                        |
|                                |                                   | AM607                       | ROTUNDA                   | 2F SERV SINK  | ( A      | Υ                         | N               |               |                        |
|                                |                                   | AM608                       | REC THERA                 | λPY           | Α        | Υ                         | N               | Υ             |                        |
|                                |                                   | DOWNSTREAM                  | WITHIN 5 S                | SERVICE CON   | Α        |                           |                 |               |                        |
|                                |                                   | UPSTREAM                    | WITHIN 5 S                | SERVICE CON   | Α        |                           |                 |               |                        |
| 00700                          | ENTRY POINT                       | 3                           | ENTRY POI                 | NT            | Α        |                           |                 |               |                        |
| 52775                          | ATMOSPHERIC STORAGE               |                             |                           |               |          |                           |                 |               |                        |
| 745                            | WELL 4                            | 2                           | WELL 4                    |               | Α        |                           |                 |               |                        |
| 748                            | WELL 5                            | 2                           | WELL 5                    |               | Α        |                           |                 |               |                        |
|                                |                                   | Certified                   | Operato                   | r Informa     | ation    |                           |                 |               |                        |
| Water Sy                       | stem Facility: <b>DISTRIBUTIO</b> | N SYSTEM (WSF II            | D: 00600)                 |               |          |                           |                 |               |                        |
| Facility Cl                    | assification: SMALL WATER SYS     | TEM                         |                           |               |          |                           |                 |               | Certification          |
| Operator                       | Name                              | Operator Typ                | e                         | Certification | n(s)     |                           |                 |               | Expiration             |
| COSSETTE                       | , EVAN J                          | CHIEF OPERATO               | )R                        | WATER TREA    | ATMENT   | PLANT OPE                 | ERATOR - CI     | LASS IV       | 6/30/2021              |
|                                |                                   |                             |                           | DISTRIBUTIO   | N SYSTE  | M OPERAT                  | OR IN TRAII     | NING          | 6/30/2021              |
|                                |                                   |                             |                           | DISTRIBUTIO   | N SYSTE  | M OPERAT                  | OR - CLASS      | II            | 9/30/2021              |
|                                |                                   |                             |                           | rmation       |          |                           |                 |               |                        |
| Name                           |                                   | O                           | rganization               |               |          |                           |                 | Job Title     |                        |
| Mr. Robe                       |                                   |                             |                           |               | 1        |                           | ner             |               |                        |
|                                | ddress Line One                   | Mailing Address             |                           |               |          |                           | ity             | State         | Zip Code               |

|                    | onnectic        | ut Depa   | rtmen     | nt of  | Public     | Health    | Drii     | nking     | Water     | Sec     | tion     |                |
|--------------------|-----------------|-----------|-----------|--------|------------|-----------|----------|-----------|-----------|---------|----------|----------------|
|                    | Wa              | ter Qua   | lity Mo   | onito  | oring a    | nd Con    | nplia    | nce S     | chedul    | e       |          |                |
| PWS ID P           | WS Name         |           |           |        |            |           | Classif  | ication P | opulation | Owne    | r Type   | Primary Source |
| CT0261001 A        | ARON MANOR      | NURSING & | REHAB CI  | ENTER  |            |           | (        | 2         | 81        | F       | )        | GW             |
| Local Address (wh  | ere applicable) |           |           |        | Service    | Resider   | ntial Co | mmercial  | Industri  | al Co   | ombine   | d Agricultural |
| 3 SOUTH WIG HILI   | . RD            |           |           |        | Connection | ns 2      |          |           |           |         |          |                |
| Towns Served: CH   | ESTER           |           |           |        |            |           |          |           |           |         |          |                |
| 3 South Wig Hill R | oad             |           |           |        |            |           |          | Chester   |           |         | СТ       | 06412          |
| Business Phone     | Extension       | Fax       |           | Mobile | e Phone    | Emergency | y Phone  | Email Ad  | dress     |         |          |                |
| 860-526-5316       |                 | 860-526-2 | 2436      |        |            |           |          |           |           |         |          |                |
| Contact Role(s):   | egal Contact, ( | Owner     |           |        |            |           |          |           |           |         |          |                |
| Name               |                 |           |           | Org    | ganization |           |          |           |           | J       | ob Title |                |
| Ms. Debbie Bradle  | ey              |           |           | Aar    | on Manor   |           |          |           |           |         |          |                |
| Mailing Address Li | ne One          |           | Mailing A | ddress | Line Two   |           |          |           | City      |         | State    | Zip Code       |
| 3 South Wig Hill R | b               |           |           |        |            |           |          | Chester   |           |         | CT       | 06412          |
| Business Phone     | Extension       | Fax       |           | Mobile | e Phone    | Emergency | y Phone  | Email Ac  | ldress    |         |          |                |
| 860-526-5316       |                 |           |           |        |            | 860-526   | -2512    | dbradley  | ∕@aaron-n | nanor.ı | 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 H    | ealth I  | Orin    | kins     | g W    | /atei    | r Se  | ection    |               |      |
|----------------------|--|-------------|--|---------|----------|--------|----------|-------|-----------|---------------|------|
|                      | Water Quality Monit                    |             |  |         | `        | _      |          |       |           |               |      |
| PWS ID               | PWS Name                               | oring and   |  |         |          | _      |          |       | ner Type  | Primary Sou   | rce  |
| CT0261031            | CTWC - SHORELINE REGION-CHESTER SYSTEM | /I          |  | C       |          | -      | ,030     |       | P         | SW            |      |
|                      | where applicable)                      | Service     | Residentia   |         | nmerc    |        | Industr  | rial  | Combine   |               | ıral |
| ,                    |  | Connections | 2,002  |         | 264      |        | 24       |       |           |               |      |
| Towns Served:        | CHESTER, DEEP RIVER, ESSEX             | 1           |  |         |          |        |          |       |           |               |      |
|                      | Monito                                 | oring Requ  | iremen   | ts      |          |        |          |       |           |               |      |
| Water System         | Facility: DISTRIBUTION SYSTEM (WSF II  | D: 00600)   |  |         |          |        |          |       |           |               |      |
| <b>Chlorine Resi</b> | idual (1012)                           |             |  |         |          |        |          | 6 rc  | outine (R | T) per mon    | th   |
| Sampling             | Point (Sampling Point ID)              |             | Monitoring   | g Perio | od C     | Collec | ction Pe | eriod | Comp      | oliance Statu | IS   |
| Select fror          | m Inventory of Active Sampling Points  |             | 10/1/19 - 1  |         |          |        |          |       |           | Complete      |      |
|                      |  |             | 11/1/19 - 1  |         |          |        |          |       |           | Complete      |      |
| <u> </u>             |  |             | 12/1/19 - 1  |         |          |        |          |       |           | Complete      |      |
|                      |  |             | 1/1/20 - 1   |         |          |        |          |       |           | Complete      |      |
|                      |  |             | 2/1/20 - 2   |         |          |        |          |       | (         | Complete      |      |
|                      |  |             | 3/1/20 - 3   |         |          |        |          |       |           |               |      |
|                      |  |             | 4/1/20 - 4   |         |          |        |          |       |           |               |      |
|                      |  |             | 5/1/20 - 5   |         |          |        |          |       |           |               |      |
|                      |  |             | 6/1/20 - 6   |         |          |        |          |       |           |               |      |
|                      |  |             | 7/1/20 - 7   |         |          |        |          |       |           |               |      |
|                      |  |             | 8/1/20 - 8 <sub>2</sub><br>9/1/20 - 9 <sub>2</sub> |         |          |        |          |       |           |               |      |
| Asbestos (10         | 104)                                   |             | 9/1/20 - 9/  | /30/20  | <i>J</i> |        | 1 r      | outi  | no (PT) n | er nine yea   | rc   |
| -                    | Point (Sampling Point ID)              |             | Monitoring   | n Perio | nd (     | Collec | ction Pe |       |           | oliance Statu |      |
|                      | m Inventory of Active Sampling Points  |             | 1/1/12 - 12  |         |          |        |          | 21104 | Comp      | mance Stata   | ,    |
| 00.0000.             |  |             | 1/1/21 - 12  | -       |          |        |          |       |           |               |      |
| Total Coliforn       | m (3100)                               |             | _, _,  | ,, -    | <u>-</u> |        |          | 6 rc  | outine (R | T) per mon    | th   |
|                      | Point (Sampling Point ID)              |             | Monitoring   | g Perio | od C     | Collec | ction Pe |       | =         | oliance Statu |      |
| Select fror          | m Inventory of Active Sampling Points  |             | 10/1/19 - 1  | 0/31/2  | 19       |        |          |       | (         | Complete      |      |
|                      |  | ,           | 11/1/19 - 1  | 1/30/2  | 19       |        |          |       | (         | Complete      |      |
|                      |  |             | 12/1/19 - 1  | 2/31/2  | 19       |        |          |       | (         | Complete      |      |
|                      |  |             | 1/1/20 - 1   | /31/20  | )        |        |          |       | (         | Complete      |      |
|                      |  |             | 2/1/20 - 2   | /29/20  | )        |        |          |       | (         | Complete      |      |
|                      |  |             | 3/1/20 - 3   |         |          |        |          |       |           |               |      |
|                      |  | _           | 4/1/20 - 4   | /30/20  | )        |        |          |       |           |               |      |
|                      |  |             | 5/1/20 - 5   |         |          |        |          |       |           |               |      |
|                      |  |             | 6/1/20 - 6   |         |          |        |          |       |           |               |      |
|                      |  |             | 7/1/20 - 7   |         |          |        |          |       |           |               |      |
|                      |  |             | 8/1/20 - 8   | -       |          |        |          |       |           |               |      |
|                      |  |             | 9/1/20 - 9   | /30/20  | J        |        |          |       |           |               |      |
|                      | Byproducts - TTHM & HAA5 (DBP)         |             | n a tr - t   |         |          | C-!!   |          |       | -         | ) per quart   |      |
|                      | Point (Sampling Point ID)              |             | Monitoring   |         |          |        | tion Pe  |       |           | oliance Statu | 5    |
| CH21K MC             | OBIL 201 MSX (1150)                    |             | 7/1/19 - 9   |         |          |        | /1-9/30  |       |           | Complete      |      |
|                      |  |             | 10/1/19 - 1  |         |          |        | /1-12/3  |       | (         | Complete      |      |

1/1/20 - 3/31/20

4/1/20 - 6/30/20

7/1/20 - 9/30/20 7/1/19 - 9/30/19 3/1-3/31

6/1-6/30 9/1-9/30

9/1-9/30

Schedule Generation Date: 3/10/2020

**DENLAR SAMP STATION (11908)** 

Complete

| Connecticut Department of Public  |  | 0                 | ection                                    |
|---|--|-------------------|---|
| Water Quality Monitoring a  | *  |                   |   |
| PWS ID PWS Name   | Classificat                                | -                 | ner Type Primary Source                   |
| CTU261031 CTWC - SHORELINE REGION-CHESTER SYSTEM                                | С  | 5,030             | P SW                                      |
| Local Address (where applicable)  Service                                       | Residential Comm                           |                   | Combined Agricultural                     |
| Connection  | ons 2,002 26                               | 54 24             |   |
| Towns Served: CHESTER, DEEP RIVER, ESSEX  |  |                   |   |
| Monitoring Re   | equirements                                |                   |   |
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)                      |  | 2 40              | utino (DT) non auguston                   |
| Disinfectant Byproducts - TTHM & HAA5 (DBP)  Sampling Point (Sampling Point ID) | Monitoring Period                          | Collection Period | utine (RT) per quarter  Compliance Status |
| Sumpling Form (Sumpling Form 12)  | 10/1/19 - 12/31/19                         | 12/1-12/31        | Complete                                  |
|   | 1/1/20 - 3/31/20                           | 3/1-3/31          | Complete                                  |
|   | 4/1/20 - 6/30/20                           | 6/1-6/30          |   |
|   | 7/1/20 - 9/30/20                           |                   |   |
| Load And Connon (DDCII)   | 7/1/20 - 9/30/20                           | 9/1-9/30          | a (DT) was there a vector                 |
| Lead And Copper (PBCU)  Sampling Point (Sampling Point ID)                      | Monitoring Period                          | 20 routin         | e (RT) per three years  Compliance Status |
| Select from Inventory of Active Sampling Points                                 | 1/1/18 - 12/31/20                          | 6/1-9/30          | Complete                                  |
| Select from inventory of Active Sampling Points                                 | 1/1/19 - 12/31/21                          | 6/1-9/30          | Complete                                  |
|   | 1/1/22 - 12/31/24                          | 6/1-9/30          |   |
| Physical Parameters (PPS)   | 1/1/22 - 12/31/24                          |                   | outine (RT) per month                     |
| Sampling Point (Sampling Point ID)  | Monitoring Period                          | Collection Period | · · ·                                     |
| Select from Inventory of Active Sampling Points                                 | 10/1/19 - 10/31/19                         | Collection Feriou | Complete                                  |
| Select from inventory of Active Sampling Points                                 | 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                           |                   | Complete                                  |
|   | 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                           |                   |   |
| Motor System Facility DENNISON WELL WITH ENTRY BOUNT (W                         | 9/1/20 - 9/30/20                           |                   |   |
| Water System Facility: DENNISON WELL WTP ENTRY POINT (WS                        | 2F ID: 00/01)                              | 4 11.             | (07)                                      |
| Net Gross Alpha (4000)  | Advistantino Dested                        |                   | e (RT) per three years                    |
| Sampling Point (Sampling Point ID)  | Monitoring Period                          | Collection Period |   |
| EP - DENNISON TP (3)  | 1/1/17 - 12/31/19                          |                   | Complete                                  |
|   | 1/1/20 - 12/31/22                          |                   |   |
| Uranium (400C)  | 1/1/23 - 12/31/25                          | 4                 | a /DT) was there a vector                 |
| Uranium (4006) Sampling Point (Sampling Point ID)                               | Monitoring Poried                          | 1 routin          | e (RT) per three years  Compliance Status |
| EP - DENNISON TP (3)  | <i>Monitoring Period</i> 1/1/17 - 12/31/19 | Conection Period  | Complete                                  |
| EL - DEMINISON IF (3)   | 1/1/20 - 12/31/22                          |                   | Complete                                  |
|   | 1/1/20 - 12/31/22                          |                   |   |
| Combined Redium 226/229 (4040)  | 1/1/25 - 12/31/25                          | 4                 | o (DT) non three was                      |
| Combined Radium-226/228 (4010)  | Monitoring Daried                          |                   | e (RT) per three years  Compliance Status |
| Sampling Point (Sampling Point ID)  EP - DENNISON TP (3)                        | <i>Monitoring Period</i> 1/1/17 - 12/31/19 | Collection Period | Complete                                  |
| LF - DEININGON IF (3)   | 1/1/20 - 12/31/22                          |                   | Complete                                  |
|   | 1/1/20-12/31/22                            |                   |   |

| Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule                     |                |
|---|----------------|
| PWS ID PWS Name Classification Population Owner Type  | Primary Source |
| CT0261031 CTWC - SHORELINE REGION-CHESTER SYSTEM C 5,030 P  | SW             |
| Local Address (where applicable)  Service Residential Commercial Industrial Combine   |                |
| Connections 2,002 264 24  | 8 11 11        |
| Towns Served: CHESTER, DEEP RIVER, ESSEX  |                |
| Monitoring Requirements   |                |
| Water System Facility: DENNISON WELL WTP ENTRY POINT (WSF ID: 00701)  |                |
| Combined Radium-226/228 (4010) 1 routine (RT) pe  | r three years  |
|   | liance Status  |
| 1/1/23 - 12/31/25   |                |
| Inorganic Chemicals (IOCS) 1 routine (RT) pe  | r three years  |
| Sampling Point (Sampling Point ID)  Monitoring Period Collection Period Comp  | liance Status  |
| EP - DENNISON TP (3) 1/1/18 - 12/31/20  | omplete        |
| 1/1/21 - 12/31/23   |                |
|   | RT) per year   |
|   | liance Status  |
|   | omplete        |
| 1/1/20 - 12/31/20   |                |
| 1/1/21 - 12/31/21  Posticides Harbicides and PCPs. Phase H.S. V. (SOCS).  | u thung wagus  |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS)  Sampling Point (Sampling Point ID)  Monitoring Period Collection Period Comp | liance Status  |
|   | omplete        |
| 1/1/20 - 12/31/22   | ompiete        |
| 1/1/23 - 12/31/25   |                |
| Organic Chemicals (VOCS) 1 routine (RT) pe  | r three vears  |
|   | liance Status  |
| EP - DENNISON TP (3) 1/1/20 - 12/31/22  |                |
| 1/1/23 - 12/31/25   |                |
| Water System Facility: WILLIAMS WTP ENTRY POINT (WSF ID: 00703)   |                |
| Net Gross Alpha (4000) 1 routine (RT) pe  | r three years  |
| Sampling Point (Sampling Point ID) Monitoring Period Collection Period Comp   | liance Status  |
| · · · · · · · · · · · · · · · · · · ·   | omplete        |
| 1/1/20 - 12/31/22   |                |
| 1/1/23 - 12/31/25   |                |
| Uranium (4006) 1 routine (RT) pe  | -              |
|   | liance Status  |
|   | omplete        |
| 1/1/20 - 12/31/22   |                |
| 1/1/23 - 12/31/25  Combined Padium 236/238 (4010)  1 routine (PT) no  | r thron waars  |
| Combined Radium-226/228 (4010) 1 routine (RT) pe  Sampling Point (Sampling Point ID) Monitoring Period Collection Period Comp       | liance Status  |
|   | omplete        |
| 1/1/20 - 12/31/22   |                |
| 1/1/23 - 12/31/25   |                |
| Gross Beta Particle Activity (4100) 1 routine (RT) pe   | r three vears  |
| •   | liance Status  |
| Sampling Point (Sampling Point ID)  Monitoring Period Collection Period Comp  |                |

| Connecticut Department of Publi                          | ic Health Drinki         | ng Water Sec             | rtion                    |
|--|--------------------------|--------------------------|--------------------------|
| Water Quality Monitoring                                 |                          | - C                      | 201011                   |
| PWS ID PWS Name  |                          |                          | er Type Primary Source   |
| CT0261031 CTWC - SHORELINE REGION-CHESTER SYSTEM         | C                        | 5,030                    | P SW                     |
| Local Address (where applicable)  Service                | Residential Comm         |                          | Combined Agricultural    |
| Connect  |                          |                          | Agricultural             |
| Towns Served: CHESTER, DEEP RIVER, ESSEX                 | 2,002 20                 | 4 24                     |                          |
| Monitoring R   | equirements              |                          |                          |
| Water System Facility: WILLIAMS WTP ENTRY POINT (WSF ID: | 00703)                   |                          |                          |
| Gross Beta Particle Activity (4100)                      |                          | 1 routine                | (RT) per three years     |
| Sampling Point (Sampling Point ID)                       | Monitoring Period        | Collection Period        | Compliance Status        |
|  | 1/1/20 - 12/31/22        |                          |                          |
|  | 1/1/23 - 12/31/25        |                          |                          |
| Man-Made Beta Particle & Photon Emitters (4101)          |                          | 1 routine                | (RT) per three years     |
| Sampling Point (Sampling Point ID)                       | <b>Monitoring Period</b> | <b>Collection Period</b> | <b>Compliance Status</b> |
| EP - WILLIAMS TP (3)                                     | 1/1/17 - 12/31/19        |                          | Complete                 |
|  | 1/1/20 - 12/31/22        |                          |                          |
|  | 1/1/23 - 12/31/25        |                          |                          |
| Tritium (4102)   |                          | 1 routine                | (RT) per three years     |
| Sampling Point (Sampling Point ID)                       | <b>Monitoring Period</b> | <b>Collection Period</b> | <b>Compliance Status</b> |
| EP - WILLIAMS TP (3)                                     | 1/1/17 - 12/31/19        |                          | Complete                 |
|  | 1/1/20 - 12/31/22        |                          |                          |
|  | 1/1/23 - 12/31/25        |                          |                          |
| Strontium-90 (4174)                                      |                          | 1 routine                | (RT) per three years     |
| Sampling Point (Sampling Point ID)                       | <b>Monitoring Period</b> | <b>Collection Period</b> | Compliance Status        |
| EP - WILLIAMS TP (3)                                     | 1/1/17 - 12/31/19        |                          | Complete                 |
|  | 1/1/20 - 12/31/22        |                          |                          |
|  | 1/1/23 - 12/31/25        |                          |                          |
| Inorganic Chemicals (IOCS)                               |                          | 1 r                      | outine (RT) per year     |
| Sampling Point (Sampling Point ID)                       | <b>Monitoring Period</b> |                          | Compliance Status        |
| EP - WILLIAMS TP (3)                                     | 1/1/19 - 12/31/19        |                          | Complete                 |
|  | 1/1/20 - 12/31/20        |                          | •                        |
|  | 1/1/21 - 12/31/21        |                          |                          |
| Nitrate And Nitrite (NOX)                                |                          | 1 rout                   | ine (RT) per quarter     |
| Sampling Point (Sampling Point ID)                       | Monitoring Period        | <b>Collection Period</b> | Compliance Status        |
| EP - WILLIAMS TP (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 & V (SOCS)    |                          | 2 routine                | (RT) per three years     |
| Sampling Point (Sampling Point ID)                       | Monitoring Period        | Collection Period        | Compliance Status        |
| EP - WILLIAMS TP (3)                                     | 1/1/18 - 12/31/20        |                          | Complete                 |
| . ,  | 1/1/21 - 12/31/23        |                          | - p - 79                 |
| Organic Chemicals (VOCS)                                 | , , -, -, -, -           | 1 r                      | outine (RT) per year     |
| Sampling Point (Sampling Point ID)                       | Monitoring Period        | Collection Period        | Compliance Status        |
| EP - WILLIAMS TP (3)                                     | 1/1/19 - 12/31/19        |                          | Complete                 |
| (-)  | 1/1/20 12/31/20          |                          |                          |

1/1/20 - 12/31/20 1/1/21 - 12/31/21

|                 | Connecticut Departm           | nent of Public H       | lealth l                   | Drinkii                               | ng '  | Water       | Se   | ction      |               |
|-----------------|-------------------------------|------------------------|----------------------------|---------------------------------------|-------|-------------|------|------------|---------------|
|                 | <b>↑</b>                      | Monitoring an          |                            |                                       | _     |             |      |            |               |
| PWS ID          | PWS Name                      |                        | (                          | Classificatio                         | n Po  | opulation   | Owr  | ner Type P | rimary Source |
| CT0261031       | CTWC - SHORELINE REGION-CHEST | TER SYSTEM             |                            | С                                     |       | 5,030       |      | Р          | SW            |
| Local Address ( | where applicable)             | Service                | Residenti                  | al Comme                              | rcial | Industria   | ıl   | Combined   | Agricultural  |
|                 |                               | Connections            | 2,002                      | 264                                   |       | 24          |      |            |               |
| Towns Served:   | CHESTER, DEEP RIVER, ESSEX    |                        |                            | I                                     |       |             |      |            |               |
|                 |                               | <b>Monitoring Requ</b> | iiremen                    | ts                                    |       |             |      |            |               |
| Water System    | Facility: DENNISON WELL (WS   | F ID: 1410)            |                            |                                       |       |             |      |            |               |
| E. Coli (3014   | )                             |                        |                            |                                       |       | 1           | l ro | utine (RT) | per month     |
| Sampling        | Point (Sampling Point ID)     |                        | Monitorin                  | g Period                              | Coll  | ection Per  |      |            | iance Status  |
| DENNISON        | N WELL (2)                    |                        | 10/1/19 - 1                | .0/31/19                              |       |             |      | Co         | mplete        |
|                 |                               |                        | 11/1/19 - 1                | 1/30/19                               |       |             |      | Out        | of Service    |
|                 |                               |                        | 5/1/20 - 5                 |                                       |       |             |      |            |               |
|                 |                               |                        | 6/1/20 - 6                 |                                       |       |             |      |            |               |
|                 |                               |                        | 7/1/20 - 7                 |                                       |       |             |      |            |               |
|                 |                               |                        | 8/1/20 - 8                 |                                       |       |             |      |            |               |
|                 |                               |                        | 9/1/20 - 9                 |                                       |       |             |      |            |               |
| Water System    | Facility: LOWER CHESTER RESE  | RVOIR (WSF ID: 2087    |                            | , , -                                 |       |             |      |            |               |
| Total Alkalini  | •                             | (1101 121 2001         | ,                          |                                       |       | 1           | roi  | utine (RT) | per month     |
|                 | Point (Sampling Point ID)     |                        | Monitoring                 | a Period                              | Coll  | lection Per |      |            | iance Status  |
|                 | HESTER RESERVOIR (1)          |                        | 10/1/19 - 1                |                                       | COII  |             | , Ou |            | mplete        |
| LOWERCH         | TESTER RESERVOIR (1)          |                        | 10/1/19 - 1<br>11/1/19 - 1 |                                       |       |             |      |            | mplete        |
|                 |                               |                        | 12/1/19 - 1<br>12/1/19 - 1 |                                       |       |             |      |            | mplete        |
|                 |                               |                        | 1/1/20 - 1                 |                                       |       |             |      |            | mplete        |
|                 |                               |                        | 2/1/20 - 2                 | · · · · · · · · · · · · · · · · · · · |       |             |      |            | mplete        |
|                 |                               |                        | 3/1/20 - 3                 |                                       |       |             |      | CC         | implete       |
|                 |                               |                        |                            |                                       |       |             |      |            |               |
|                 |                               |                        | 4/1/20 - 4                 |                                       |       |             |      |            |               |
|                 |                               |                        | 5/1/20 - 5                 |                                       |       |             |      |            |               |
|                 |                               |                        | 6/1/20 - 6                 |                                       |       |             |      |            |               |
|                 |                               |                        | 7/1/20 - 7                 |                                       |       |             |      |            |               |
|                 |                               |                        | 8/1/20 - 8                 |                                       |       |             |      |            |               |
|                 | 0 1 (2000)                    |                        | 9/1/20 - 9                 | /30/20                                |       |             |      | />-        |               |
| _               | Carbon (2920)                 |                        | Manite                     | a Douis I                             | Call  |             |      |            | per month     |
|                 | Point (Sampling Point ID)     |                        | Monitoring                 | _                                     | COII  | lection Per | ioa  |            | iance Status  |
| LOWER CH        | HESTER RESERVOIR (1)          |                        | 10/1/19 - 1                |                                       |       |             |      |            | mplete        |
|                 |                               |                        | 11/1/19 - 1                |                                       |       |             |      |            | mplete        |
|                 |                               |                        | 12/1/19 - 1                |                                       |       |             |      |            | mplete        |
|                 |                               |                        | 1/1/20 - 1                 |                                       |       |             |      |            | mplete        |
|                 |                               |                        | 2/1/20 - 2                 |                                       |       |             |      | Cc         | mplete        |
|                 |                               |                        | 3/1/20 - 3                 |                                       |       |             |      |            |               |
|                 |                               |                        | 4/1/20 - 4                 |                                       |       |             |      |            |               |
|                 |                               |                        | 5/1/20 - 5                 |                                       |       |             |      |            |               |
|                 |                               |                        | 6/1/20 - 6                 |                                       |       |             |      |            |               |
|                 |                               |                        | 7/1/20 - 7                 |                                       |       |             |      |            |               |
|                 |                               |                        | 8/1/20 - 8                 |                                       |       |             |      |            |               |
|                 |                               |                        | 9/1/20 - 9                 | /30/20                                |       |             |      |            |               |
| Total Coliforn  |                               |                        |                            | _                                     |       |             |      |            | per quarter   |
| Sampling        | Point (Sampling Point ID)     |                        | Monitorin                  | g Period                              | Coll  | lection Per | iod  | Compl      | iance Status  |

| Water Quality Monitoring and Compliance Schedule  Crossidation   Population   Owner Type   Primary Source   Crossidation   Cross-Good   Crossidation   Owner Type   Primary Source   Crossidation   Crossidation   Cross |                     | Connecticut Departme                 |          |                     |           |               |             | _    |            |      | ection         |                |
|--|---------------------|--------------------------------------|----------|---------------------|-----------|---------------|-------------|------|------------|------|----------------|----------------|
| Crope   Service   Connections   Content   Complete   Connections   Content   |                     |                                      | Ionite   | oring and           | a Con     |               |             |      |            |      |                |                |
|  | PWS ID              | PWS Name                             |          |                     |           | Clas          | ssification | Pc   |            | Ow   |                |                |
| Connection   Con   | CT0261031           |                                      | R SYSTEN |                     |           |               | _           |      | -          |      | -              | _              |
| Monitoring Requirements   Monitoring Requirements  | Local Address       | (where applicable)                   |          |                     |           |               |             | cial |            | al   | Combined       | d Agricultural |
| Monitoring Requirements   Monitoring Requirements  |                     |                                      |          | Connections         | 2,002     | 2             | 264         |      | 24         |      |                |                |
| Total Coliform   100   Monitoring Period   Collection Period   Complete  | Towns Served        | : CHESTER, DEEP RIVER, ESSEX         |          |                     |           |               |             |      |            | _    |                |                |
| Sampling Point (Sampling Point ID)   |                     | N                                    | /lonite  | oring Requ          | ireme     | nts           | ;           |      |            |      |                |                |
| Compling Point (Sompling Point ID)   | Water Syster        | m Facility: LOWER CHESTER RESER      | VOIR (V  | <b>VSF ID: 2087</b> | )         |               |             |      |            |      |                |                |
| LOWER CHESTER RESERVOIR (1)  | <b>Total Colifo</b> | rm (3100)                            |          |                     |           |               |             |      | 1          | ro   | utine (RT)     | per quarter    |
| 10/1/19 - 12/31/19   Complete   1/1/20 - 3/31/20   Complete   1/1/20 - 1/2/31/20   Complete   1/1/20 - 3/31/20   Complete   1/1/20 - 1/3/31/20   Complete   1/1/20 - 3/31/20   Complete    |                     | •                                    |          |                     | Monitori  | ing P         | Period      | Coll |            |      |                | •              |
| 1/1/20 - 3/31/20   Complete   4/1/20 - 6/30/20   | LOWER C             | CHESTER RESERVOIR (1)                |          |                     | 7/1/19 -  | 9/3           | 0/19        |      |            |      | C              | omplete        |
| A   1/20 - 6/30/20   7/1/20 - 9/30/20   7/1/20 - 9/30/20   |                     |                                      |          |                     | 10/1/19 - | 12/           | 31/19       |      |            |      | C              | omplete        |
| A   1/20 - 6/30/20   7/1/20 - 9/30/20   7/1/20 - 9/30/20   |                     |                                      |          |                     | 1/1/20 -  | 3/3           | 1/20        |      |            |      |                |                |
| Surface Water Inorganic Chemicals (RIOC)   |                     |                                      |          |                     |           |               |             |      |            |      |                | <u> </u>       |
| Surface Water Inorganic Chemicals (RIOC)         Monitoring Period         Collection Period         Compliance Status           LOWER CHESTER RESERVOIR (1)         1/1/19 - 12/31/19         Compliance Status           LOWER CHESTER RESERVOIR (2)         1/1/20 - 12/31/20         Complete           1/1/21 - 12/31/21         1/1/21 - 12/31/20         Toutime (RT) per quater           Surface Water Color and Turbidity (RPPS)         1 routime (RT) per quater           Sampling Point (Sampling Point ID)         Monitoring Period         Collection Period         Complete           LOWER CHESTER RESERVOIR (1)         1/1/19 - 9/30/19         Complete         Complete           LOWER CHESTER RESERVOIR (2)         1/1/20 - 3/31/20         Complete         Complete           Surface Water Pesticides (RSOC)         1/1/20 - 9/30/20         Turbine (RT) per year         Sompling Point (Sampling Point ID)         Monitoring Period         Collection Period         Complete           LOWER CHESTER RESERVOIR (1)         1/1/19 - 12/31/19         Complete   |                     |                                      |          |                     |           |               |             |      |            |      |                |                |
| Sampling Point (Sampling Point ID)   | Surface Wat         | ter Inorganic Chemicals (RIOC)       |          |                     |           |               |             |      |            | 1    | routine (      | RT) per year   |
| LOWER CHESTER RESERVOIR (1)  |                     |                                      |          |                     | Monitori  | ing P         | Period      | Coll | ection Pei |      | =              |                |
| Surface Water Color and Turbidity (RPPS)         1 routine (RT) per quarter compling Point (Sampling Point (IS ampling Poin                                  | LOWER (             | CHESTER RESERVOIR (1)                |          |                     | 1/1/19 -  | 12/3          | 31/19       |      |            |      | C              | omplete        |
| Surface Water Color and Turbidity (RPPS)         1 routine (RT) per quarter                                  |                     |                                      |          |                     | 1/1/20 -  | 12/3          | 31/20       |      |            |      |                |                |
| Sampling Point (Sampling Point ID)         Monitoring Period         Collection Period         Compliance Status           LOWER CHESTER RESERVOIR (1)         7/1/19 - 9/30/19         Complete           10/1/19 - 12/31/19         Complete           11/1/20 - 3/31/20         Complete           4/1/20 - 6/30/20         Complete           7/1/20 - 9/30/20         Toutine (RT) per year           Surface Water Pesticides (RSOC)         1 routine (RT) per year           Sampling Point (Sampling Point ID)         Monitoring Period         Collection Period         Complete           LOWER CHESTER RESERVOIR (1)         1/1/19 - 12/31/19         Complete           4/1/21 - 12/31/21         1/1/21 - 12/31/21         Toutine (RT) per month           Water System Facility: E. P. WILLIAMS WATER TREATMENT PLANT         (WSF ID: 33)         1 routine (RT) per month           Sampling Point (Sampling Point ID)         Monitoring Period         Collection Period         Complete           COMBINED FILTER EFFLUENT - WILLIAMS WTP (5)         10/1/19 - 10/31/19         Complete           11/1/19 - 11/30/19         Complete         11/1/19 - 11/30/19         Complete           11/1/20 - 1/31/20         Complete         2/1/20 - 2/29/20         Complete           11/1/20 - 1/31/20         Complete         3/1/20 - 3/31/20         Compl  |                     |                                      |          |                     | 1/1/21 -  | 12/3          | 31/21       |      |            |      |                |                |
| LOWER CHESTER RESERVOIR (1)  | Surface Wat         | ter Color and Turbidity (RPPS)       |          |                     |           |               |             |      | 1          | ro   | utine (RT)     | per quarter    |
| 10/1/19 - 12/31/19   Complete  | Sampling            | g Point (Sampling Point ID)          |          |                     | Monitori  | ing P         | Period      | Coll | ection Pe  | riod | Comp           | liance Status  |
| 1/1/20 - 3/31/20   Complete  | LOWER C             | CHESTER RESERVOIR (1)                |          |                     | 7/1/19 -  | 9/3           | 0/19        |      |            |      | C              | omplete        |
| 4/1/20 - 6/30/20   7/1/20 - 9/30/20  |                     |                                      |          | :                   | 10/1/19 - | 12/           | 31/19       |      |            |      | C              | omplete        |
| Surface Water Pesticides (RSOC)         1 routine (RT) per year sampling Point (Sampling Point (D)         Monitoring Period         Collection Period         Complete           LOWER CHESTER RESERVOIR (1)         1/1/19 - 12/31/19         Complete         Complete           1/1/20 - 12/31/20         1/1/21 - 12/31/21         Total Creation (Page 1)         1 routine (RT) per month           Sampling Point (Sampling Point ID)         Monitoring Period         Collection Period         Complete           COMBINED FILTER EFFLUENT - WILLIAMS WTP (5)         10/1/19 - 10/31/19         Complete           1/1/20 - 1/31/20         1/1/20 - 1/31/20         Complete           1/1/20  |                     |                                      |          |                     | 1/1/20 -  | 3/3           | 1/20        |      |            |      | C              | omplete        |
| Surface Water Pesticides (RSOC)         I routine (RT) per year Sampling Point (Sampling Point (D)         Monitoring Period Collection Period Compliance Status           LOWER CHESTER RESERVOIR (1)         1/1/19 - 12/31/19         Complete           1/1/20 - 12/31/20         1/1/21 - 12/31/21           Water System Facility: E. P. WILLIAMS WATER TREATMENT PLANT (WSF ID: 33)           Total Organic Carbon (2920)         1 routine (RT) per month Sampling Point (Sampling Point ID)         Monitoring Period Collection Period Collection Period Complete         Complete           COMBINED FILTER EFFLUENT - WILLIAMS WTP (5)         10/1/19 - 10/31/19         Complete           12/1/19 - 12/31/19         Complete         1/1/20 - 1/31/20         Complete           2/1/20 - 2/29/20         Complete         2/1/20 - 2/29/20         Complete           3/1/20 - 3/31/20         4/1/20 - 4/30/20         Complete         5/1/20 - 5/31/20           6/1/20 - 6/30/20         5/1/20 - 5/31/20         Complete         5/1/20 - 7/31/20         Complete           6/1/20 - 7/31/20         8/1/20 - 8/31/20         Complete         5/1/20 - 8/31/20         Complete   |                     |                                      |          |                     | 4/1/20 -  | 6/3           | 0/20        |      |            |      |                |                |
| Sampling Point (Sampling Point ID)         Monitoring Period         Collection Period         Compliance Status           LOWER CHESTER RESERVOIR (1)         1/1/19 - 12/31/19         Complete           1/1/20 - 12/31/20         1/1/21 - 12/31/21           Water System Facility: E.P. WILLIAMS WATER TREATMENT PLANT (WSF ID: 33)           Total Organic Carbon (2920)         1 routine (RT) per month Sampling Point (Sampling Point ID)         Monitoring Period         Collection Period         Complete           COMBINED FILTER EFFLUENT - WILLIAMS WTP (5)         10/1/19 - 10/31/19         Complete           11/1/19 - 11/30/19         Complete         12/1/19 - 12/31/19         Complete           2/1/20 - 2/29/20         Complete         2/1/20 - 2/29/20         Complete           3/1/20 - 3/31/20         4/1/20 - 4/30/20         Complete           5/1/20 - 5/31/20         5/1/20 - 5/31/20         Complete           6/1/20 - 6/30/20         7/1/20 - 7/31/20         Complete  |                     |                                      |          |                     | 7/1/20 -  | 9/3           | 0/20        |      |            |      |                |                |
| LOWER CHESTER RESERVOIR (1) 1/1/19 - 12/31/19 Complete 1/1/20 - 12/31/20 1/1/21 - 12/31/21   Water System Facility: E. P. WILLIAMS WATER TREATMENT PLANT (WSF ID: 33)  Total Organic Carbon (2920) 1 routine (RT) per month Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status  COMBINED FILTER EFFLUENT - WILLIAMS WTP (5) 10/1/19 - 10/31/19 Complete 11/1/19 - 11/30/19 Complete 12/1/19 - 12/31/19 Complete 12/1/19 - 12/31/19 Complete 1/1/20 - 1/31/20 Complete 1/1/20 - 1/31/20 Complete 1/1/20 - 2/29/20 Complete 3/1/20 - 3/31/20 4/1/20 - 3/31/20 Complete 3/1/20 - 3/31/20 Gomplete 1/1/20 - 1/31/20 Gomplete 3/1/20 - 3/31/20 Gomplete 3/1/20 Gomplete | Surface Wat         | ter Pesticides (RSOC)                |          |                     |           |               |             |      |            | 1    | routine (      | RT) per year   |
| 1/1/20 - 12/31/20   1/1/21 - 12/31/21  | Sampling            | g Point (Sampling Point ID)          |          |                     | Monitori  | ing P         | Period      | Coll | ection Pe  | riod | Comp           | liance Status  |
| 1/1/21 - 12/31/21     Water System Facility:   E. P. WILLIAMS WATER TREATMENT PLANT   (WSF ID: 33)     Total Organic Carbon (2920)   1 routine (RT) per month     Sampling Point (Sampling Point ID)   Monitoring Period   Collection Period   Compliance Status   | LOWER C             | CHESTER RESERVOIR (1)                |          |                     | 1/1/19 -  | 12/3          | 31/19       |      |            |      | C              | omplete        |
| Water System Facility:         E. P. WILLIAMS WATER TREATMENT PLANT (WSF ID: 33)           Total Organic Carbon (2920)         1 routine (RT) per month (RT)           Sampling Point (Sampling Point ID)         Monitoring Period         Collection Period         Compliance Status           COMBINED FILTER EFFLUENT - WILLIAMS WTP (5)         10/1/19 - 10/31/19         Complete           12/1/19 - 12/31/19         Complete           12/1/19 - 12/31/19         Complete           2/1/20 - 1/31/20         Complete           2/1/20 - 2/29/20         Complete           3/1/20 - 3/31/20         Complete           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         8/1/20 - 8/31/20  |                     |                                      |          |                     | 1/1/20 -  | 12/3          | 31/20       |      |            |      |                |                |
| Total Organic Carbon (2920)         1 routine (RT) per month           Sampling Point (Sampling Point ID)         Monitoring Period         Collection Period         Compliance Status           COMBINED FILTER EFFLUENT - WILLIAMS WTP (5)         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         Complete           3/1/20 - 3/31/20         Complete           4/1/20 - 4/30/20         Formula           5/1/20 - 5/31/20         Formula           6/1/20 - 6/30/20         Formula           7/1/20 - 7/31/20         Resident of the period Collection Period Complete           10/1/19 - 10/31/19         Complete           12/1/19 - 12/31/19         Complete           2/1/20 - 2/29/20         Complete           3/1/20 - 3/31/20         Complete  |                     |                                      |          |                     | 1/1/21 -  | 12/3          | 31/21       |      |            |      |                |                |
| Sampling Point (Sampling Point ID)         Monitoring Period         Collection Period         Compliance Status           COMBINED FILTER EFFLUENT - WILLIAMS WTP (5)         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         Complete           3/1/20 - 3/31/20         Complete           4/1/20 - 4/30/20         5/1/20 - 5/31/20           6/1/20 - 6/30/20         6/1/20 - 6/30/20           7/1/20 - 7/31/20         8/1/20 - 8/31/20   | Water Syster        | m Facility: E. P. WILLIAMS WATER     | TREATM   | IENT PLANT          | (WSF IE   | ): <b>3</b> 3 | 3)          |      |            |      |                |                |
| COMBINED FILTER EFFLUENT - WILLIAMS WTP (5)  10/1/19 - 10/31/19  11/1/19 - 11/30/19  Complete  12/1/19 - 12/31/19  Complete  12/1/20 - 1/31/20  Complete  1/1/20 - 1/31/20  Complete  2/1/20 - 2/29/20  Complete  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   | <b>Total Organ</b>  | ic Carbon (2920)                     |          |                     |           |               |             |      | :          | 1 rc | outine (RT     | ) per month    |
| $\begin{array}{cccccccccccccccccccccccccccccccccccc$   | Sampling            | g Point (Sampling Point ID)          |          |                     | Monitori  | ing P         | Period      | Coll |            |      | · <del>-</del> | - •            |
| $\begin{array}{cccccccccccccccccccccccccccccccccccc$   | COMBIN              | ED FILTER EFFLUENT - WILLIAMS WTP (5 | 5)       | :                   | 10/1/19 - | 10/           | 31/19       |      |            |      | C              | omplete        |
| 1/1/20 - 1/31/20 Complete 2/1/20 - 2/29/20 Complete 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  |                     |                                      |          | :                   | 11/1/19 - | 11/           | 30/19       |      |            |      | C              | omplete        |
| 2/1/20 - 2/29/20 Complete  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  |                     |                                      |          | :                   | 12/1/19 - | 12/           | 31/19       |      |            |      | C              | omplete        |
| 3/1/20 - 3/31/20<br>4/1/20 - 4/30/20<br>5/1/20 - 5/31/20<br>6/1/20 - 6/30/20<br>7/1/20 - 7/31/20<br>8/1/20 - 8/31/20   |                     |                                      |          |                     | 1/1/20 -  | 1/3           | 1/20        |      |            |      | C              | omplete        |
| 4/1/20 - 4/30/20<br>5/1/20 - 5/31/20<br>6/1/20 - 6/30/20<br>7/1/20 - 7/31/20<br>8/1/20 - 8/31/20   |                     |                                      |          |                     | 2/1/20 -  | 2/2           | 9/20        |      |            |      | C              | omplete        |
| 5/1/20 - 5/31/20<br>6/1/20 - 6/30/20<br>7/1/20 - 7/31/20<br>8/1/20 - 8/31/20   |                     |                                      |          |                     | 3/1/20 -  | 3/3           | 1/20        |      |            |      |                |                |
| 6/1/20 - 6/30/20<br>7/1/20 - 7/31/20<br>8/1/20 - 8/31/20   |                     |                                      |          |                     | 4/1/20 -  | 4/3           | 0/20        |      |            |      |                |                |
| 7/1/20 - 7/31/20<br>8/1/20 - 8/31/20   |                     |                                      |          |                     | 5/1/20 -  | 5/3           | 1/20        |      |            |      |                |                |
| 8/1/20 - 8/31/20   |                     |                                      |          |                     | 6/1/20 -  | 6/3           | 0/20        |      |            |      |                |                |
|  |                     |                                      |          |                     | 7/1/20 -  | 7/3           | 1/20        |      |            |      |                |                |
| 9/1/20 - 9/30/20   |                     |                                      |          |                     | 8/1/20 -  | 8/3           | 1/20        |      |            |      |                |                |
|  |                     |                                      |          |                     | 9/1/20 -  | 9/3           | 0/20        |      |            |      |                |                |

| C                 |                   | cticut Department of I                |              |                                | `              |                                 |          | on      |                    |
|-------------------|-------------------|---------------------------------------|--------------|--------------------------------|----------------|---------------------------------|----------|---------|--------------------|
|                   |                   | Water Quality Monito                  | ring and     | d Compi                        | liance         | Schedul                         | e        |         |                    |
| PWS ID P          | WS Name           |                                       |              | Cla                            | ssification    | Population                      | Owner T  | ype Pr  | imary Source       |
| CT0261031 C       | TWC - SH          | ORELINE REGION-CHESTER SYSTEM         |              |                                | С              | 5,030                           | Р        |         | SW                 |
| ocal Address (who | ere applic        | -                                     | Service      | Residential                    | Commerc        | ial Industria                   | l Com    | bined   | Agricultura        |
|                   |                   |                                       | Connections  | 2,002                          | 264            | 24                              |          |         |                    |
| owns Served: CH   | ESTER, DE         | EEP RIVER, ESSEX                      |              |                                |                |                                 |          |         |                    |
|                   | Mon               | thly Water System Facilit             | y (WSF) L    | evel Mo                        | nitoring       | Requirer                        | nents    |         |                    |
| Water System Fa   | acility: D        | DENNISON TREATMENT PLANT (            | WSFID: 32)   |                                |                |                                 |          |         |                    |
| Analyte           |                   | <b>Monitoring Requirement (Summar</b> | y Type)      | Operati                        | ng Limit       |                                 | Sam      | ples Re | q/Month            |
| Chlorine          |                   | Entry Point Chlorine Residual Monit   | toring (CHLR | ) Minimu                       | m: 0.2 MG      | /L                              |          | Dai     | ly                 |
| Start Date: 1/    | /1/2004           |                                       | Complia      | nce History:                   | O              | perating Limit                  | t M      | onitori | ing                |
|                   |                   |                                       | Monitor      | ing Period                     | -              | mpliance Sta                    |          | omplia  | nce Status:        |
|                   |                   |                                       | 10/1/20      | 19 - 10/31/20                  | )19            |                                 |          |         |                    |
|                   |                   |                                       | 11/1/20      | 19 - 11/30/20                  | )19            |                                 |          |         |                    |
|                   |                   |                                       |              | 19 - 12/31/20                  |                |                                 |          |         |                    |
|                   |                   |                                       |              | 0 - 1/31/2020                  |                |                                 |          |         |                    |
|                   |                   |                                       |              | 0 - 2/29/2020                  |                |                                 |          |         |                    |
| Analyte           |                   | Monitoring Requirement (Summar        | y Type)      | -                              | ng Limit       |                                 | Sam      | ples Re | q/Month            |
| рН                |                   | Entry Point pH Monitoring (PHRD)      |              |                                | m: 7.0 PH      |                                 |          | Dail    | ly                 |
| Start Date: 1/    | /1/2004           |                                       | -            | nce History:                   | O              | perating Limit                  |          | onitori | _                  |
|                   |                   |                                       |              | ing Period                     |                | mpliance Sta                    | tus: Co  | omplia  | nce Status:        |
|                   |                   |                                       |              | 19 - 10/31/20                  |                |                                 |          |         |                    |
|                   |                   |                                       |              | 19 - 11/30/20                  |                |                                 |          |         |                    |
|                   |                   |                                       |              | 19 - 12/31/20                  |                |                                 |          |         |                    |
|                   |                   |                                       |              | 0 - 1/31/2020                  |                |                                 |          |         |                    |
|                   |                   |                                       |              | 0 - 2/29/2020                  |                |                                 |          |         | /n.a1              |
| Analyte           |                   | Monitoring Requirement (Summar        |              | -                              | ng Limit       | h                               | Sam      |         | q/Month            |
| Phosphate (as     |                   | Entry Point Phosphate Monitoring      |              |                                | m: 0.1 MG      |                                 |          | 2       |                    |
| Start Date: 10    | 0/1/2012          |                                       |              | nce History:<br>ing Period     | U              | perating Limit                  | •        | onitori | ing<br>nce Status: |
|                   |                   |                                       |              | 119 - 10/31/20                 |                | mpliance Sta                    | itus: Co | mpiiai  | ice Status.        |
|                   |                   |                                       |              | 19 - 10/31/20<br>19 - 11/30/20 |                |                                 |          |         |                    |
|                   |                   |                                       |              | 19 - 11/30/20<br>19 - 12/31/20 |                |                                 |          |         |                    |
|                   |                   |                                       |              | ) - 1/31/2020<br>) - 1/31/2020 |                |                                 |          |         |                    |
|                   |                   |                                       |              | 0 - 1/31/2020<br>0 - 2/29/2020 |                |                                 |          |         |                    |
|                   | acility: <b>F</b> | . P. WILLIAMS WATER TREATME           |              |                                |                |                                 |          |         |                    |
| Analyte           | cilicy. L         | Monitoring Requirement (Summar        |              | -                              | ng Limit       |                                 | Sami     | nlos Po | q/Month            |
| Chlorine          |                   | Entry Point RDC (EPRD)                | y Type)      | •                              | m: 0.2 MG      | /1                              | Jaiii    | Dail    | -                  |
| Start Date: 1/    | /1/2004           | Entry Former Noc (EFRO)               | Complia      | nce History:                   |                | •                               |          | onitori | •                  |
| Start Date. 17    | 1/2004            |                                       | -            | ing Period                     | υ <sub> </sub> | perating Limit<br>Impliance Sta | •        |         | nce Status:        |
|                   |                   |                                       |              | 19 - 10/31/20                  |                | Y                               | itus.    | piidi   |                    |
|                   |                   |                                       |              | 19 - 11/30/20                  |                | Y                               |          |         |                    |
|                   |                   |                                       |              | 19 - 12/31/20                  |                | Y                               |          |         |                    |
|                   |                   |                                       |              | ) - 1/31/2020                  |                | Υ                               |          |         |                    |
|                   |                   |                                       |              | 0 - 2/29/2020                  |                |                                 |          |         |                    |
|                   |                   |                                       | , ,          | . ,                            |                |                                 |          |         |                    |

|                  |              | cticut Department of P              |                    |                          |           |           |                            |             |                |
|------------------|--------------|-------------------------------------|--------------------|--------------------------|-----------|-----------|----------------------------|-------------|----------------|
| D1446.45         |              | Water Quality Monitor               | ing and            |                          | _         |           |                            |             |                |
| PWS ID           | PWS Name     |                                     |                    |                          |           | ation Po  | -                          |             | Primary Source |
| CT0261031        |              | ORELINE REGION-CHESTER SYSTEM       |                    | D : 1 :                  | C         |           | 5,030                      | P           | SW             |
| Local Address (\ | vnere applic | ,                                   | rvice<br>nnections | Resident                 |           | nmercial  | Industria                  | l Combined  | l Agricultural |
| Towns Samuel:    | CHECTED DI   | EEP RIVER, ESSEX                    | ATTICCCIONS        | 2,002                    |           | 264       | 24                         |             |                |
|                  | · ·          | . P. WILLIAMS WATER TREATMEN        | ΙΤ ΡΙ ΔΝΤ          | /WSFID:                  | 33)       |           |                            |             |                |
| Analyte          | racinty. L   | Monitoring Requirement (Summary     |                    | -                        | ating Lir | mit       |                            | Samples R   | teq/Month      |
| pH               |              | Entry Point pH Monitoring (PHRD)    | Турсу              |                          | num: 7.   |           |                            | -           | aily           |
| Start Date:      | 1/1/2004     | Entry Forme pri Monitoring (Frind)  | Complia            | nce Histo                |           |           | _41111                     |             | -              |
| Start Bate.      | 1, 1, 2004   |                                     | -                  | ng Period                | -         | -         | ating Limit<br>oliance Sta |             | ance Status:   |
|                  |              |                                     |                    | 9 - 10/31                |           | Com       | Jilanice Sta               | itus.       |                |
|                  |              |                                     |                    | 9 - 11/30                |           |           |                            |             |                |
|                  |              |                                     |                    | 9 - 12/31                | -         |           |                            |             |                |
|                  |              |                                     |                    | ) - 1/31/20              | -         |           |                            |             |                |
|                  |              |                                     | 2/1/2020           | ) - 2/29/20              | 020       |           |                            |             |                |
| Analyte          |              | Monitoring Requirement (Summary     | Туре)              | Oper                     | ating Lir | mit       |                            | Samples R   | Req/Month      |
| Phosphate (      | as PO4)      | Entry Point Phosphate Monitoring (P | HOS)               | Minir                    | num: 0    | .1 MG/L   |                            |             | 2              |
| Start Date:      | 10/1/2012    |                                     | Complia            | nce Histo                | ry:       | Oper      | ating Limit                | Monito      | ring           |
|                  |              |                                     | Monitori           | ng Period                | l         |           | oliance Sta                |             | ance Status:   |
|                  |              |                                     | 10/1/201           | 9 - 10/31                | /2019     |           |                            |             |                |
|                  |              |                                     | 11/1/201           | .9 - 11/30               | /2019     |           |                            |             |                |
|                  |              |                                     |                    | .9 - 12/31               |           |           |                            |             |                |
|                  |              |                                     |                    | ) - 1/31/20              |           |           |                            |             |                |
|                  |              |                                     |                    | ) - 2/29/20              |           |           |                            |             |                |
| Analyte          |              | Monitoring Requirement (Summary     | Type)              | -                        | ating Lir |           |                            | Samples R   | leq/Month      |
| Turbidity        |              | CFE Maximum Turbidity (MAXT)        |                    |                          | mum: 1    | NTU       |                            |             | 86             |
| Start Date:      | 1/1/2004     |                                     | _                  | nce Histo                | -         |           | ating Limit                |             | _              |
|                  |              |                                     |                    | ng Period                |           | Com       | oliance Sta                | tus: Compli | ance Status:   |
|                  |              |                                     |                    | .9 - 10/31<br>.9 - 11/30 |           |           | Y                          |             |                |
|                  |              |                                     |                    | .9 - 11/30<br>.9 - 12/31 | -         |           | Y                          |             |                |
|                  |              |                                     |                    | ) - 1/31/20              | -         |           | Y                          |             |                |
|                  |              |                                     |                    | ) - 2/29/20              |           |           | •                          |             |                |
| Analyte          |              | Monitoring Requirement (Summary     |                    |                          | ating Lir | mit       |                            | Samples R   | Req/Month      |
| Turbidity        |              | CFE 95% Turbidity (95PT)            | .,,,,              |                          | _         | y Limit:( | 0.3 NTU                    | _           | 86             |
| Start Date:      | 1/1/2004     | , (,                                | Complia            | nce Histo                |           | -         | ating Limit                |             |                |
|                  | , ,          |                                     |                    | ng Period                |           |           | oliance Sta                |             | ance Status:   |
|                  |              |                                     |                    | .9 - 10/31               |           |           | Υ                          |             |                |
|                  |              |                                     |                    | 9 - 11/30                |           |           | Υ                          |             |                |
|                  |              |                                     | 12/1/201           | 9 - 12/31                | /2019     |           | Υ                          |             |                |
|                  |              |                                     | 1/1/2020           | ) - 1/31/20              | 020       |           | Υ                          |             |                |
|                  |              |                                     | 2/1/2020           | ) - 2/29/20              | 020       |           |                            |             |                |
|                  |              | Other Com                           | pliance            | Sched                    | ules      |           |                            |             |                |
| Compliance Sch   | edule Activ  | ity                                 |                    | D                        | ue Date   | ?         | Achiev                     | ed Date     |                |
| DISTRIBUTION S   | SYSTEM MA    | TERIALS EVALUATION                  |                    | 8/                       | /31/2019  | 9         |                            |             |                |
| RESPOND TO SA    | NITARY SUI   | RVEY                                |                    | 11                       | /30/201   | .9        | 1/7,                       | /2020       |                |
| CROSS CONNEC     | TION SURVI   | EY REPORT                           |                    | 3                        | /1/2020   | )         |                            |             |                |

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

| PWS ID PWS Name CI |  |             |         | Cla   | ssification | Population  | Owner Type | Primary Source  |
|--------------------|--|-------------|---------|-------|-------------|-------------|------------|-----------------|
| CT0261031          | CTWC - SHORELINE REGION-CHESTER SYSTEM | Л           |         |       | С           | 5,030       | Р          | SW              |
| Local Address (v   | vhere applicable)                      | Service     | Resider | ntial | Commerci    | al Industri | al Combine | ed Agricultural |
|                    |  | Connections | 2,002   | 2     | 264         | 24          |            |                 |

Towns Served: CHESTER, DEEP RIVER, ESSEX

| Other Compliance Schedules               |            |               |  |  |  |  |  |  |  |  |
|--|------------|---------------|--|--|--|--|--|--|--|--|
| Compliance Schedule Activity             | Due Date   | Achieved Date |  |  |  |  |  |  |  |  |
| WATERSHED SURVEY REPORT                  | 3/1/2020   | 2/27/2020     |  |  |  |  |  |  |  |  |
| SUBMIT CCR TO THE DEPARTMENT             | 6/30/2020  |               |  |  |  |  |  |  |  |  |
| SUBMIT CCR CERTIFICATION FORM            | 8/9/2020   |               |  |  |  |  |  |  |  |  |
| CORRECTIVE ACTION/CORRECTIVE ACTION PLAN | 12/31/2020 |               |  |  |  |  |  |  |  |  |

|            | Wat                   | er System Facili | ity and Sampling Po  | oint Ir | iventoi  | У         |          |          |
|------------|-----------------------|------------------|----------------------|---------|----------|-----------|----------|----------|
| Water      |                       |                  |                      |         | Total    | Lead and  |          |          |
| System     | Water System Facility |                  | Sampling Point       |         | Coliform | Copper    |          | Stag     |
| acility ID |                       | ID               | Description          | Status  | Rule     | Rule Tier | Asbestos | WQP 2 DB |
| 00600      | DISTRIBUTION SYSTEM   | 1150             | CHSTR MOBIL 201 MSX  | Α       | Υ        |           |          | Υ        |
|            |                       | 1150 C           | TWC-SHORELINE CHEST  | Α       | Υ        |           |          |          |
|            |                       | 1151             | DEEP RIVER TOWN HALL | Α       | Υ        |           |          |          |
|            |                       | 1152             | CTRBRK GULF 82 MAIN  | Α       | Υ        |           | Υ        |          |
|            |                       | 1153             | CHRCTRS RST 107 MAIN | Α       | Υ        |           |          |          |
|            |                       | 1154             | ESSES TOWN HALL      | Α       | Υ        |           |          |          |
|            |                       | 1157             | 212 MIDDLESEX, CHEST | Α       |          |           |          | Υ        |
|            |                       | 1157 C           | TWC-SHORELINE CHEST  | Α       | Υ        |           |          |          |
|            |                       | 11801            | 24 ELM ST DR         | Α       |          | 3         |          |          |
|            |                       | 11802            | 7 JOHNSON RD CH      | Α       |          | 3         |          |          |
|            |                       | 11803            | 10 HICKORY HILL CH   | Α       |          | N         |          |          |
|            |                       | 11804            | 31 SUMMITT ST IVRYTN | Α       |          | 3         |          |          |
|            |                       | 11805            | 8 HICKORY HILL CH    | Α       |          | 1         |          |          |
|            |                       | 11806            | 109 MAIN ST CH       | Α       |          | 3         |          |          |
|            |                       | 11807            | 28 ESSEX ST DR       | Α       |          | 3         |          |          |
|            |                       | 11808            | 16 LAFAYETTE AV DR   | Α       |          | 1         |          |          |
|            |                       | 11809            | 11 GOOSE HILL RD CH  | Α       |          | 3         |          |          |
|            |                       | 11810            | 7 HICKORY HILL CH    | Α       |          | 1         |          |          |
|            |                       | 11811            | 14 CHENEY ST IVRYTN  | Α       |          | 1         |          |          |
|            |                       | 11812            | 17 CHENEY ST IVRYTN  | Α       |          | 1         |          |          |
|            |                       | 11813            | 30 LIBERTY ST CH     | Α       |          | N         |          |          |
|            |                       | 11814            | 26 OLD DEPOT ST CH   | Α       |          | 1         |          |          |
|            |                       | 11815            | 36 BRIDGE ST DR      | Α       |          | 3         |          |          |
|            |                       | 11816            | 21 DEEP RVR RD CTBRK | Α       |          | 3         |          |          |
|            |                       | 11817            | 24 MAPLE AV ESSX     | Α       |          | 3         |          |          |
|            |                       | 11818            | 50 PROSPECT ST DR    | Α       |          | N         |          |          |
|            |                       | 11819            | 76 MAIN ST CH        | Α       |          | 3         |          |          |
|            |                       | 11820            | 8 TERRACE LN IVRYTN  | Α       |          | 3         |          |          |
|            |                       | 11821            | 69 ELM ST DR         | Α       |          | 3         |          |          |
|            |                       | 11822            | 15 HIGH ST CH        | Α       |          | 3         |          |          |
|            |                       | 11823            | 6 TERRACE LN IVRYTN  | A       |          | 3         |          |          |
|            |                       | 11824            | 156 MDDLSX AVE CH    | A       |          | 1         |          |          |

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

|                 |                               |             |         | _              |              |            |                 |
|-----------------|-------------------------------|-------------|---------|----------------|--------------|------------|-----------------|
| PWS ID          | PWS Name                      |             |         | Classification | Population   | Owner Type | Primary Source  |
| CT0261031       | CTWC - SHORELINE REGION-CHEST | ER SYSTEM   |         | С              | 5,030        | Р          | SW              |
| Local Address ( | where applicable)             | Service     | Residen | ntial Commerc  | ial Industri | al Combine | ed Agricultural |
|                 |                               | Connections | 2.002   | 2 264          | 24           |            |                 |

| Towns Served: CHESTER, DEEP RIVER, ES            | SSEX            |                                 |         |                           |                    |          |     |                 |
|--|-----------------|---------------------------------|---------|---------------------------|--------------------|----------|-----|-----------------|
| Wate   | er System Facil | ity and Sampling Po             | oint Ir | vento                     | У                  |          |     |                 |
| Water System Water System Facility Facility ID   | -               | Sampling Point Description      |         | Total<br>Coliform<br>Rule | Lead and<br>Copper | Asbestos | WOP | Stage<br>2 DBPR |
|  | 11825           | 12 RAILROAD AVE CH              | A       |                           | 1                  |          |     |                 |
|  | 11826           | 12 LAUREL RD ESSEX              | Α       |                           | 1                  |          |     |                 |
|  | 11827           | 37 MAIN ST CBK                  | Α       | Υ                         | 1                  |          |     |                 |
|  | 11828           | 2-3 WESTBROOK RD CBK            | Α       | Y                         | 1                  |          |     |                 |
|  | 11829           | 7 HICKORY HILL RD CH            | Α       | Υ                         | 1                  |          |     |                 |
|  | 11830           | 8 HICKORY HILL RD CH            | Α       | Υ                         | 1                  |          |     |                 |
|  | 11831           | 9 HICKORY HILL RD CH            | Α       | Υ                         | 1                  |          |     |                 |
|  | 11832           | 17 HIGH ST CH                   | Α       | Υ                         | 1                  |          |     |                 |
|  | 11833           | 24 KINGS HWY CH                 | Α       | Υ                         | 1                  |          |     |                 |
|  | 11834           | 10 LIBERTY ST CH                | Α       | Υ                         | 1                  |          |     |                 |
|  | 11835           | 29 LIBERTY ST CH                | Α       | Y                         | 1                  |          |     |                 |
|  | 11836           | 44 MAIN ST CH                   | Α       | Υ                         | 1                  |          |     |                 |
|  | 11837           | 1 MARINA VIEW DR CH             | Α       | Υ                         | 1                  |          |     |                 |
|  | 11838           | 2 MARINA VIEW DR CH             | Α       | Y                         | 1                  |          |     |                 |
|  | 11839           | 3 MARINA VIEW DR CH             | Α       | Y                         | 1                  |          |     |                 |
|  | 11840           | 4 MARINA VIEW DR CH             | Α       | Y                         | 1                  |          |     |                 |
|  | 11841           | 6 MARINA VIEW DR CH             | Α       | Y                         | 1                  |          |     |                 |
|  | 11842           | 37 MIDDLESEX AVE CH             | Α       | Y                         | 1                  |          |     |                 |
|  | 11843           | 67 MIDDLESEX AVE CH             | Α       | Y                         | 1                  |          |     |                 |
|  | 11844           | 24 OLD DEPOT RD CH              | Α       | Y                         | 1                  |          |     |                 |
|  | 11845           | 26 OLD DEPOT RD CH              | Α       | Y                         | 1                  |          |     |                 |
|  | 11846           | 28 OLD DEPOT RD CH              | A       | Y                         | 1                  |          |     |                 |
|  | 11847           | 12 RAILROAD AVE                 | Α       | Y                         | 1                  |          |     |                 |
|  | 11848           | 55 RAILROAD AVE CH              | Α       | Y                         | 1                  |          |     |                 |
|  | 11849           | 24 RIDGE RD CH                  | Α       | Y                         | 1                  |          |     |                 |
|  | 11850           | 59 BRIDGE ST DR                 | Α       | Y                         | 1                  |          |     |                 |
|  | 11851           | 49 SX ST DR                     | Α       | Υ                         | 1                  |          |     |                 |
|  | 11852           | 53 SX ST DR                     | Α       | Y                         | 1                  |          |     |                 |
|  | 11853           | 16 LAFAYETTE AVE DR             | Α       | Y                         | 1                  |          |     |                 |
|  | 11854           | 119 MAIN ST DR                  | Α       | Y                         | 1                  |          |     |                 |
|  | 11855           | 9 ROGERS LN DR                  | Α       | Y                         | 1                  |          |     |                 |
|  | 11856           | 32 SPRING ST DR                 | Α       | Y                         | 1                  |          |     |                 |
|  | 11857           | 57 SPRING ST DR                 | A       | Y                         | 1                  |          |     |                 |
|  | 11858           | 152 UNION ST DR                 | A       | Y                         | 1                  |          |     |                 |
|  | 11859           | 14 W BRIDGE LN DR               | A       | Y                         | 1                  |          |     |                 |
|  | 11860           | 65 WINTER AVE DR                | A       | Y                         | 1                  |          |     |                 |
|  | 11861           | 1 BUSHNELL ST SX                | A       | Y                         | 1                  |          |     |                 |
|  | 11862           | 9 CHAMPLIN SQ SX                | A       | Y                         | 1                  |          |     |                 |
|  | 11863           | 22 GRANDVIEW TER SX             | A       | Y                         | 1                  |          |     |                 |
| NOTE: This information has been provided to bole |                 | nublic water systems maintain s |         |                           |                    |          |     |                 |

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  |
| CT0261031       | CTWC - SHORELINE REGION-CHEST | ER SYSTEM   |         | С              | 5,030        | Р          | SW              |
| Local Address ( | where applicable)             | Service     | Residen | ntial Commerc  | ial Industri | al Combine | ed Agricultural |
|                 |                               | Connections | 2.002   | 2 264          | 24           |            |                 |

| 11864   16   HILTOP AVE SX  | Towns Served: CHESTER, DEEP RIVER, ES | SSEX            |                      |         |                   |                    |          |      |         |
|---|---------------------------------------|-----------------|----------------------|---------|-------------------|--------------------|----------|------|---------|
| System   Water System Facility   Sampling Point   Description   Status   Rule   Rule   Tier   Asbestos WQP 2 DBP  | Wate                                  | er System Facil | ity and Sampling P   | oint Ir | vento             | У                  |          |      |         |
| 11864 16 HILLTOP AVE SX A Y 1 11865 30 KINGS IN SX A Y 1 11866 12 LAUREL RD SX A Y 1 11867 6 MAPLE AVE SX A Y 1 11868 22 N MAIN ST SX A Y 1 11869 50 N MAIN ST SX A Y 1 11870 68 N MAIN ST SX A Y 1 11871 81 N MAIN ST SX A Y 1 11872 25 NEW CITY ST SX A Y 1 11873 2 PROSPECT ST SX A Y 1 11874 11 RIVERVIEW ST SX A Y 1 11875 35 S MAIN ST SX A Y 1 11876 39 S MAIN ST SX A Y 1 11877 69 SAYBROOK RD SX A Y 1 11878 5 SCHOLES IN SX A Y 1 11879 42 WEST AVE SX A Y 1 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE ST IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 26 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 16 BLAKE ST IVR A Y 1 11889 18 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 63 COMSTOCK AVE IVR A Y 1 11889 11889 1 FALSRIVER A Y 1 11889 1 FALSRIVER TI N A Y 1 11889 1 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 18 FALLS RIVER CIR I A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11899 3 MAIN ST IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1  | Water<br>System Water System Facility | Sampling Point  | Sampling Point       |         | Total<br>Coliform | Lead and<br>Copper | Ashestos | WOP  | Stage   |
| 11865 30 KINGS LN SX A Y 1 11866 12 LAUREL RD SX A Y 1 11867 6 MAPLE AVE SX A Y 1 11868 22 N MAIN ST SX A Y 1 11868 22 N MAIN ST SX A Y 1 11869 50 N MAIN ST SX A Y 1 11870 68 N MAIN ST SX A Y 1 11871 81 N MAIN ST SX A Y 1 11872 25 NEW CITY ST SX A Y 1 11872 25 NEW CITY ST SX A Y 1 11873 11 RIVERVIEW ST SX A Y 1 11874 11 RIVERVIEW ST SX A Y 1 11875 35 S MAIN ST SX A Y 1 11876 39 S MAIN ST SX A Y 1 11877 69 SAYBROOK RD SX A Y 1 11878 5 SCHOLES LN SX A Y 1 11879 69 SAYBROOK RD SX A Y 1 11879 69 SAYBROOK RD SX A Y 1 11889 5 SCHOLES LN SX A Y 1 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE ST IVR A Y 1 11882 15 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 7 PB LAKE ST IVR A Y 1 11888 16 BLAKE ST IVR A Y 1 11889 18 BLAKE ST IVR A Y 1 11881 5 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 7 PB LAKE ST IVR A Y 1 11889 18 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 18 FALLS RIVER CIR I A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11899 3 MAIN ST IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1  | ruently 10                            |                 |                      |         |                   |                    | ASDESTOS | VVQI | Z DDF N |
| 11866 12 LAUREL RD SX A Y 1 11867 6 MAPLE AVE SX A Y 1 11868 22 N MAIN ST SX A Y 1 11869 50 N MAIN ST SX A Y 1 11870 68 N MAIN ST SX A Y 1 11871 81 N MAIN ST SX A Y 1 11872 25 NEW CITY ST SX A Y 1 11873 2 PROSPECT ST SX A Y 1 11873 12 PROSPECT ST SX A Y 1 11874 11 RIVERVIEW ST SX A Y 1 11876 39 S MAIN ST SX A Y 1 11876 39 S MAIN ST SX A Y 1 11877 69 SAYBROOK RD SX A Y 1 11878 5 SCHOLES IN SX A Y 1 11879 42 WEST AVE SX A Y 1 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE SR IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 36 SCOMSTOCK AVE IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR I A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11899 3 MAIN ST IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1  |                                       |                 |                      |         |                   |                    |          |      |         |
| 11867 6 MAPLE AVE SX A Y 1 11868 22 N MAIN ST SX A Y 1 11869 50 N MAIN ST SX A Y 1 11870 68 N MAIN ST SX A Y 1 11871 81 N MAIN ST SX A Y 1 11872 25 NEW CITY ST SX A Y 1 11872 25 NEW CITY ST SX A Y 1 11873 22 PROSPECT ST SX A Y 1 11874 11 RIVERVIEW ST SX A Y 1 11875 35 S MAIN ST SX A Y 1 11876 69 SAYBROOK RD SX A Y 1 11877 69 SAYBROOK RD SX A Y 1 11878 5 SCHOLES IN SX A Y 1 11878 15 SCHOLES IN SX A Y 1 11880 15 BLAKE ST IVR A Y 1 11881 5 BLAKE ST IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LIN IVR A Y 1 11888 5 BRACKET LIN IVR A Y 1 11889 8 BRACKET LIN IVR A Y 1 11889 8 BRACKET LIN IVR A Y 1 11889 17 CHENEY ST IVR A Y 1 11890 3 COMSTOCK AVE IVR A Y 1 11890 4 COMSTOCK AVE IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11894 8 FALLS RIVER CIR I A Y 1 11894 8 FALLS RIVER CIR I A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1  |                                       |                 |                      |         |                   |                    |          |      |         |
| 11868   |                                       |                 |                      |         |                   |                    |          |      |         |
| 11869 50 N MAIN ST SX A Y 1 11870 68 N MAIN ST SX A Y 1 11871 81 N MAIN ST SX A Y 1 11872 25 NEW CITY ST SX A Y 1 11873 2 PROSPECT ST SX A Y 1 11873 2 PROSPECT ST SX A Y 1 11874 11 RIVERVIEW ST SX A Y 1 11875 35 S MAIN ST SX A Y 1 11876 39 S MAIN ST SX A Y 1 11877 69 SAYBROOK RD SX A Y 1 11878 5 SCHOLES LN SX A Y 1 11879 42 WEST AVE SX A Y 1 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR I A Y 1 11895 10 FALLS RIVER A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11899 14 FALLS RIVER CIR I A Y 1 11900 14 MAIN ST IVR A Y 1 |                                       |                 |                      |         |                   |                    |          |      |         |
| 11870 68 N MAIN ST SX A Y 1 11871 81 N MAIN ST SX A Y 1 11872 25 NEW CITY ST SX A Y 1 11873 2 PROSPECT ST SX A Y 1 11874 11 RIVERVIEW ST SX A Y 1 11875 35 S MAIN ST SX A Y 1 11876 39 S MAIN ST SX A Y 1 11876 39 S MAIN ST SX A Y 1 11877 69 SAYBROOK RD SX A Y 1 11878 5 SCHOLES LN SX A Y 1 11887 5 SCHOLES LN SX A Y 1 11889 1 S BLAKE ST IVR A Y 1 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE ST IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 7 BLAKE ST IVR A Y 1 11888 15 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 63 COMSTOCK AVE IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR I A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11899 3 MAIN ST IVR A Y 1 11899 14 FALLS RIVER CIR I A Y 1 11900 14 MAIN ST IVR A Y 1      |                                       |                 |                      |         |                   |                    |          |      |         |
| 11871 81 N MAIN ST SX A Y 1 11872 25 NEW CITY ST SX A Y 1 11873 2 PROSPECT ST SX A Y 1 11874 11 RIVERVIEW ST SX A Y 1 11875 35 S MAIN ST SX A Y 1 11876 39 S MAIN ST SX A Y 1 11877 69 SAYBROOK RD SX A Y 1 11878 5 SCHOLES LN SX A Y 1 11878 5 SCHOLES LN SX A Y 1 11879 42 WEST AVE SX A Y 1 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE ST IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11896 11 FALLS RIVER CIR IV A Y 1 11896 11 FALLS RIVER CIR IV A Y 1 11896 14 FALLS RIVER CIR IV A Y 1 11896 14 FALLS RIVER CIR IV A Y 1 11896 14 FALLS RIVER CIR IV A Y 1 11896 14 FALLS RIVER CIR IV A Y 1 11896 14 FALLS RIVER CIR IV A Y 1 11896 14 FALLS RIVER CIR IV A Y 1 11896 14 FALLS RIVER CIR IV A Y 1 11897 12 FALLS RIVER CIR IV A Y 1 11899 3 MAIN ST IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1  |                                       |                 |                      |         |                   |                    |          |      |         |
| 11872 25 NEW CITY ST SX A Y 1 11873 2 PROSPECT ST SX A Y 1 11874 11 RIVERVIEW ST SX A Y 1 11875 35 S MAIN ST SX A Y 1 11876 39 S MAIN ST SX A Y 1 11877 69 SAYBROOK RD SX A Y 1 11878 5 SCHOLES LN SX A Y 1 11879 42 WEST AVE SX A Y 1 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 6 S COMSTOCK AVE IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER IN A Y 1 11896 11 FALLS RIVER CIR IV A Y 1 11896 14 FALLS RIVER CIR IV A Y 1 11896 14 FALLS RIVER CIR IV A Y 1 11896 14 FALLS RIVER CIR IV A Y 1 11896 14 FALLS RIVER CIR IV A Y 1 11896 14 FALLS RIVER CIR IV A Y 1 11896 14 FALLS RIVER CIR IVR A Y 1 11896 14 FALLS RIVER CIR IVR A Y 1 11896 14 FALLS RIVER CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11899 14 FALLS RIVER CIR IVR A Y 1 11890 14 HALLS RIVER CIR IVR A Y 1 11890 14 FALLS RIVER CIR IVR A Y 1 11890 14 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1   |                                       |                 |                      |         |                   |                    |          |      |         |
| 11873 2 PROSPECT ST SX A Y 1 11874 11 RIVERVIEW ST SX A Y 1 11875 35 S MAIN ST SX A Y 1 11876 39 S MAIN ST SX A Y 1 11877 69 SAYBROOK RD SX A Y 1 11878 5 SCHOLES LN SX A Y 1 11879 42 WEST AVE SX A Y 1 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE ST IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11889 5 BRACKET LN IVR A Y 1 11889 65 COMSTOCK AVE IVR A Y 1 11890 14 CHENCY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11894 8 FALLS RIVER IN A Y 1 11895 10 FALLS RIVER IN A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 11899 14 FALLS RIVER CIR I A Y 1 11899 14 FALLS RIVER CIR I A Y 1 11899 14 FALLS RIVER CIR I A Y 1 11899 14 FALLS RIVER CIR I A Y 1 11899 14 FALLS RIVER CIR I A Y 1 11899 14 FALLS RIVER CIR I A Y 1 11899 14 HABIN ST IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1   |                                       |                 |                      |         |                   |                    |          |      |         |
| 11874   |                                       |                 |                      |         |                   |                    |          |      |         |
| 11875 35 S MAIN ST SX A Y 1 11876 39 S MAIN ST SX A Y 1 11877 69 SAYBROOK RD SX A Y 1 11878 5 SCHOLES LN SX A Y 1 11879 42 WEST AVE SX A Y 1 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE SR IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR I A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11899 3 MAIN ST IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1   |                                       |                 |                      |         |                   |                    |          |      |         |
| 11876 39 S MAIN ST SX A Y 1 11877 69 SAYBROOK RD SX A Y 1 11878 5 SCHOLES IN SX A Y 1 11879 42 WEST AVE SX A Y 1 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE ST IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 17 CHENEY ST IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR IV A Y 1 11896 11 FALLS RIVER CIR IV A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 11 FALLS RIVER CIR I A Y 1 11899 12 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11899 3 MAIN ST IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1  |                                       |                 |                      |         |                   |                    |          |      |         |
| 11877 69 SAYBROOK RD SX A Y 1 11878 5 SCHOLES LN SX A Y 1 11879 42 WEST AVE SX A Y 1 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE ST IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR I A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1   |                                       |                 |                      |         |                   |                    |          |      |         |
| 11878 5 SCHOLES LN SX A Y 1 11879 42 WEST AVE SX A Y 1 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE SR IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11899 3 MAIN ST IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11890 14 MAIN ST IVR A Y 1 11899 3 MAIN ST IVR A Y 1  |                                       |                 |                      |         |                   |                    |          |      |         |
| 11879 42 WEST AVE SX A Y 1 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE SR IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR I A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1  |                                       |                 |                      |         |                   |                    |          |      |         |
| 11880 2 BLAKE ST IVR A Y 1 11881 5 BLAKE SR IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR I A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR I A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1  |                                       |                 |                      |         |                   |                    |          |      |         |
| 11881 5 BLAKE SR IVR A Y 1 11882 10 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11901 35 MAIN ST IVR A Y 1   |                                       |                 |                      |         |                   |                    |          |      |         |
| 11882 10 BLAKE ST IVR A Y 1 11883 15 BLAKE ST IVR A Y 1 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR IV A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1   |                                       |                 |                      |         |                   |                    |          |      |         |
| 11883   |                                       |                 |                      |         |                   |                    |          |      |         |
| 11884 16 BLAKE ST IVR A Y 1 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RVR CIR IVR A Y 1 11898 14 FALLS RVR CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1  |                                       |                 |                      |         |                   |                    |          |      |         |
| 11885 19 BLAKE ST IVR A Y 1 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A Y 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1   |                                       |                 |                      |         |                   |                    |          |      |         |
| 11886 26 BLAKE ST IVR A Y 1 11887 27 BLAKE ST IVR A 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RVR CIR IVR A Y 1 11898 14 FALLS RVR CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11901 35 MAIN ST IVR A Y 1  |                                       |                 |                      |         |                   |                    |          |      |         |
| 11887 27 BLAKE ST IVR A 1 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11898 14 FALLS RVR CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1  |                                       |                 |                      |         |                   |                    |          |      |         |
| 11888 5 BRACKET LN IVR A Y 1 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RIVER CIR I A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11898 14 FALLS RIVER CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1  |                                       |                 |                      |         |                   |                    |          |      |         |
| 11889 8 BRACKET LN IVR A Y 1 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RVR CIR IVR A Y 1 11898 14 FALLS RVR CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11901 35 MAIN ST IVR A Y 1   |                                       |                 |                      |         | Υ                 |                    |          |      |         |
| 11890 14 CHENEY ST IVR A Y 1 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RVR CIR IVR A Y 1 11898 14 FALLS RVR CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11901 35 MAIN ST IVR A Y 1  |                                       |                 |                      |         | Υ                 |                    |          |      |         |
| 11891 17 CHENEY ST IVR A Y 1 11892 63 COMSTOCK AVE IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RVR CIR IVR A Y 1 11898 14 FALLS RVR CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1  |                                       |                 |                      |         | Υ                 |                    |          |      |         |
| 11892 63 COMSTOCK AVE IVR A Y 1 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RVR CIR IVR A Y 1 11898 14 FALLS RVR CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11901 35 MAIN ST IVR A Y 1  |                                       |                 |                      | _       | Υ                 | 1                  |          |      |         |
| 11893 65 COMSTOCK AVE IVR A Y 1 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RVR CIR IVR A Y 1 11898 14 FALLS RVR CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11901 35 MAIN ST IVR A Y 1  |                                       |                 |                      | Α       | Υ                 | 1                  |          |      |         |
| 11894 8 FALLS RIVER CIR IV A Y 1 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RVR CIR IVR A Y 1 11898 14 FALLS RVR CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11901 35 MAIN ST IVR A Y 1  |                                       |                 |                      | Α       | Υ                 | 1                  |          |      |         |
| 11895 10 FALLS RIVER CIR I A Y 1 11896 11 FALLS RIVER CIR I A Y 1 11897 12 FALLS RVR CIR IVR A Y 1 11898 14 FALLS RVR CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11901 35 MAIN ST IVR A Y 1   |                                       | 11894           |                      | Α       | Υ                 | 1                  |          |      |         |
| 11897 12 FALLS RVR CIR IVR A Y 1 11898 14 FALLS RVR CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11901 35 MAIN ST IVR A Y 1   |                                       | 11895           | 10 FALLS RIVER CIR I | Α       | Υ                 | 1                  |          |      |         |
| 11897 12 FALLS RVR CIR IVR A Y 1 11898 14 FALLS RVR CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11901 35 MAIN ST IVR A Y 1   |                                       |                 |                      | Α       | Υ                 | 1                  |          |      |         |
| 11898 14 FALLS RVR CIR IVR A Y 1 11899 3 MAIN ST IVR A Y 1 11900 14 MAIN ST IVR A Y 1 11901 35 MAIN ST IVR A Y 1  |                                       |                 |                      | Α       | Υ                 | 1                  |          |      |         |
| 11900 14 MAIN ST IVR A Y 1<br>11901 35 MAIN ST IVR A Y 1  |                                       |                 |                      | Α       | Υ                 | 1                  |          |      |         |
| 11901 35 MAIN ST IVR A Y 1  |                                       | 11899           |                      | Α       | Υ                 | 1                  |          |      |         |
| 11901 35 MAIN ST IVR A Y 1  |                                       | 11900           | 14 MAIN ST IVR       | Α       | Υ                 | 1                  |          |      |         |
|   |                                       | 11901           | 35 MAIN ST IVR       | Α       | Υ                 | 1                  |          |      |         |
| 11902 151 MAIN ST IVR A Y 1   |                                       | 11902           | 151 MAIN ST IVR      | Α       | Υ                 | 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.

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

| PWS ID        | PWS Name                     |             |         | Cla   | ssification | Population  | Owner Type | Primary Source  |
|---------------|------------------------------|-------------|---------|-------|-------------|-------------|------------|-----------------|
| CT0261031     | CTWC - SHORELINE REGION-CHES | TER SYSTEM  |         |       | С           | 5,030       | Р          | SW              |
| Local Address | (where applicable)           | Service     | Resider | ntial | Commercia   | al Industri | al Combine | ed Agricultural |
|               |                              | Connections | 2.00    | 2     | 264         | 24          |            |                 |

Towns Served: CHESTER, DEEP RIVER, ESSEX

| Water System Facility and Sampling Point Inventory |   |                      |                            |        |                           |                                 |          |  |              |  |
|--|---|----------------------|----------------------------|--------|---------------------------|---------------------------------|----------|--|--------------|--|
| Water<br>System<br>acility ID                      | Water System Facility                   | Sampling Point<br>ID | Sampling Point Description | Status | Total<br>Coliform<br>Rule | Lead and<br>Copper<br>Rule Tier | Asbestos |  | Stage<br>DBP |  |
|  |   | 11903                | 2 OAK ST IVR               | A      | Y                         | 1                               |          |  |              |  |
|  |   | 11904                | 13 SUMMIT ST IVR           | A      | Y                         | 1                               |          |  |              |  |
|  |   | 11905                | 27 SUMMIT ST IVR           | Α      | Υ                         | 1                               |          |  |              |  |
|  |   | 11906                | 39 SUMMIT ST IVR           | Α      | Y                         | 1                               |          |  |              |  |
|  |   | 11907                | 44 SUMMIT ST IVR           | Α      | Υ                         | 1                               |          |  |              |  |
|  |   | 11908                | DENLAR SAMP STATION        | Α      | Υ                         |                                 |          |  | Υ            |  |
|  |   | 4                    | GENERIC DISTRIBUTION       | Α      | Υ                         |                                 |          |  |              |  |
|  |   | DOWNSTREAM           | WITHIN 5 SERVICE CON       | Α      |                           |                                 |          |  |              |  |
|  |   | UPSTREAM             | WITHIN 5 SERVICE CON       | Α      |                           |                                 |          |  |              |  |
| 00701  | DENNISON WELL WTP ENTRY<br>POINT        | 3                    | EP - DENNISON TP           | Α      |                           |                                 |          |  |              |  |
| 00703  | WILLIAMS WTP ENTRY POINT                | 3                    | EP - WILLIAMS TP           | Α      |                           |                                 |          |  |              |  |
| 1410   | DENNISON WELL                           | 2                    | DENNISON WELL              | Α      |                           |                                 |          |  |              |  |
| 2083   | TURKEY HILL RESERVOIR                   | 1                    | RESERVOIR                  | Α      |                           |                                 |          |  |              |  |
| 2084   | WILCOX RESERVOIR                        | 1                    | RESERVOIR                  | Α      |                           |                                 |          |  |              |  |
| 2085   | DEUSES POND                             | 1                    | RESERVOIR                  | Α      |                           |                                 |          |  |              |  |
| 2086   | UPPER CHESTER RESERVOIR                 | 1                    | UPPER CHESTER RESERV       | Α      |                           |                                 |          |  |              |  |
| 2087   | LOWER CHESTER RESERVOIR                 | 1                    | LOWER CHESTER RESERV       | Α      |                           |                                 |          |  |              |  |
| 30020  | TURKEY HILL RESERVOIR INTAKE            |                      |                            |        |                           |                                 |          |  |              |  |
| 30021  | WILCOX RESERVOIR INTAKE                 |                      |                            |        |                           |                                 |          |  |              |  |
| 30022  | UPPER CHESTER RESERVOIR INTAKE          |                      |                            |        |                           |                                 |          |  |              |  |
| 30023  | DUESES POND INTAKE                      |                      |                            |        |                           |                                 |          |  |              |  |
| 30024  | LOWER CHESTER RESERVOIR INTAKE          |                      |                            |        |                           |                                 |          |  |              |  |
| 32   | DENNISON TREATMENT PLANT                | 3                    | EP - DENNISON TP           | Α      |                           |                                 |          |  |              |  |
| 33   | E. P. WILLIAMS WATER<br>TREATMENT PLANT | 3                    | ENTRY POINT - WILLIA       | Α      |                           |                                 |          |  |              |  |
|  |   | 5                    | COMBINED FILTER EFFL       | Α      |                           |                                 |          |  |              |  |
| 50353  | ESSEX TANK                              |                      |                            |        |                           |                                 |          |  |              |  |
| 50355  | CHESTER BOOSTER STATION                 |                      |                            |        |                           |                                 |          |  |              |  |
| 50357  | CHESTER BOOSTER HYDROPNEUMATIC TANK     |                      |                            |        |                           |                                 |          |  |              |  |
| 52062  | WILLIAMS CLEARWELL 1                    |                      |                            |        |                           |                                 |          |  |              |  |
| 52064  | WILLIAMS CLEARWELL 2                    |                      |                            |        |                           |                                 |          |  |              |  |

#### 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.

|                      | Connectic             |             |                |                      |                    |         | U              |                 | ection      |                |
|----------------------|-----------------------|-------------|----------------|----------------------|--------------------|---------|----------------|-----------------|-------------|----------------|
|                      |                       | ter Qua     | lity Monit     | coring a             |                    |         |                |                 |             |                |
| PWS ID               | PWS Name              |             |                |                      | (                  | Classif | ication F      | -               | wner Type I | Primary Source |
| CT0261031            | CTWC - SHOREL         | INE REGION- | CHESTER SYSTE  |                      |                    |         |                | 5,030           | Р           | SW             |
| Local Address (v     | vhere applicable)     |             |                | Service<br>Connectio | Residenti<br>2,002 | al Co   | mmercia<br>264 | I Industrial 24 | Combined    | d Agricultura  |
| Towns Served: C      | CHESTER, DEEP RI      | VER, ESSEX  |                |                      |                    |         |                |                 |             |                |
|                      |                       |             | Certified      | Operato              | or Informa         | ation   | 1              |                 |             |                |
| Water System         | Facility: DISTR       | IBUTION SY  | STEM (WSF I    | D: 00600)            |                    |         |                |                 |             |                |
| Facility Classific   | ation: CLASS 2 D      | ISTRIBUTION | SYSTEM         |                      |                    |         |                |                 |             | Certification  |
| <b>Operator Name</b> |                       |             | Operator Typ   | e                    | Certification      | (s)     |                |                 |             | Expiration     |
| JARISH, KEVIN        |                       |             | CHIEF OPERATO  | OR                   | DISTRIBUTIO        | N SYS   | тем оре        | RATOR - CLAS    | S II        | 3/31/2021      |
| FUNK, CHRISTOF       | PHER B.               |             | ASSIGNED OPE   | RATOR                | DISTRIBUTIO        | N SYS   | ТЕМ ОРЕ        | RATOR - CLAS    | S II        | 6/30/2022      |
|                      |                       |             |                |                      | WATER TREA         | TMEN    | IT PLANT       | OPERATOR -      | CLASS II    | 6/30/2022      |
| MIEZEJESKI, WA       | LTER B.               |             | ASSIGNED OPE   | RATOR                | DISTRIBUTIO        | N SYS   | ТЕМ ОРЕ        | RATOR - CLAS    | S II        | 6/30/2021      |
| Water System         | Facility: <b>DENN</b> | ISON TREA   | TMENT PLANT    | (WSF ID:             | 32)                |         |                |                 |             |                |
| -                    | ation: CLASS 1 TI     |             |                | •                    | •                  |         |                |                 |             | Certification  |
| Operator Name        |                       |             | Operator Typ   | e                    | Certification      | ı(s)    |                |                 |             | Expiration     |
| FUNK, CHRISTOR       |                       |             | CHIEF OPERATO  |                      |                    |         | TEM OPE        | RATOR - CLAS    | S II        | 6/30/2022      |
| ,                    |                       |             |                |                      | WATER TREA         | ATMEN   | IT PLANT       | OPERATOR -      | CLASS II    | 6/30/2022      |
| Water System         | Facility: E. P. V     | VILLIAMS W  | VATER TREATI   | MENT PLAN            | NT (WSF ID:        | 33)     |                |                 |             |                |
| •                    | ation: CLASS 4 TI     |             |                |                      | (                  |         |                |                 |             | Certification  |
| Operator Name        |                       |             | Operator Typ   | ne e                 | Certification      | ı(s)    |                |                 |             | Expiration     |
| ANDREWS, PAU         |                       |             | CHIEF OPERATO  |                      |                    |         | TEM OPE        | RATOR - CLAS    | S II        | 6/30/2020      |
| ŕ                    |                       |             |                |                      |                    |         |                | OPERATOR -      |             | 12/31/2021     |
|                      |                       |             | Con            | ntact Info           | ormation           |         |                |                 |             |                |
| Name                 |                       |             | 0              | rganization          |                    |         |                |                 | Job Title   |                |
| Mr. Craig J. Patl    | a                     |             | C              | onnecticut V         | Water Compa        | ny      |                | Vp, Service [   | Delivery    |                |
| Mailing Address      | Line One              |             | Mailing Addres | s Line Two           | ·                  |         |                | City            | State       | Zip Code       |
| 93 West Main St      | treet                 |             |                |                      |                    |         | Clinton        |                 | СТ          | 06413          |
| Business Phon        | e Extension           | Fax         | Mob            | ile Phone            | Emergency I        | Phone   | Email Ad       | ddress          |             |                |
| 860-664-6140         | )                     |             |                |                      | 800-391-1          | 924     | cpatla@        | ctwater.com     |             |                |
| Contact Role(s):     | Legal Contact         | 1           | 1              |                      | 1                  |         | <u>'</u>       |                 |             |                |
| Name                 | ,                     |             | 0              | rganization          |                    |         |                |                 | Job Title   |                |
| Mr. David Conn       | ors                   |             | C              | onnecticut V         | Water Compa        | ny      |                | Director, Ser   | vice De     |                |
| Mailing Address      | Line One              |             | Mailing Addres | s Line Two           |                    |         |                | City            | State       | Zip Code       |
| 93 West Main St      | t                     |             |                |                      |                    |         | Clinton        |                 | СТ          | 06413          |
| Business Phon        | e Extension           | Fax         | Mob            | ile Phone            | Emergency I        | Phone   | Email A        | ddress          |             |                |
| 860-664-6142         | L                     |             |                |                      | 860-227-4          | 902     | dconnoi        | rs@ctwater.co   | om          |                |
| Contact Role(s):     | Administrative        | Contact     |                |                      |                    |         |                |                 |             |                |
| Please note the      | following:            |             |                |                      |                    |         |                |                 |             |                |

Connecticut Department of Public Health Drinking Water Section

#### 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                       | of Public H | Iealth               | Dr   | inking  | g Water      | r S   | ection       |              |
|---|-------------|----------------------|------|---------|--------------|-------|--------------|--------------|
| Water Quality Moni                              | toring an   | d Con                | lgr  | iance S | Schedu       | le    |              |              |
| PWS ID PWS Name                                 | 8 8         |                      | _    |         |              | _     | vner Type Pr | imary Source |
| CT0261081 CTWC - SHORELINE REG-CHESTER VLLG WE  | ST          |                      | С    |         | 216          |       | P            | GW           |
| Local Address (where applicable)                | Service     | Residential Comm     |      |         | al Industr   | ial   | Combined     | Agricultural |
|   | Connections | 105                  |      |         |              |       |              |              |
| Towns Served: CHESTER                           |             |                      |      |         |              |       |              |              |
| Moni  | toring Requ | ıireme               | nts  |         |              |       |              |              |
| Water System Facility: DISTRIBUTION SYSTEM (WSF | ID: 00600)  |                      |      |         |              |       |              |              |
| Chlorine Residual (1012)                        |             |                      |      |         |              | 1 r   | outine (RT)  | per month    |
| Sampling Point (Sampling Point ID)              |             | Monitori             | ng P | eriod C | ollection Pe | eriod | l Complic    | ance Status  |
| Select from Inventory of Active Sampling Points |             | 10/1/19 -            | 10/3 | 31/19   |              |       | Cor          | mplete       |
|   |             | 11/1/19 -            | 11/3 | 30/19   |              |       | Cor          | mplete       |
|   |             | 12/1/19 -            |      |         |              |       |              | mplete       |
|   |             | 1/1/20 -             |      |         |              |       |              | mplete       |
|   |             | 2/1/20 -             |      |         |              |       | Cor          | mplete       |
|   |             | 3/1/20 -             |      | -       |              |       |              |              |
|   |             | 4/1/20 -             |      | -       |              |       |              |              |
|   |             | 5/1/20 -             |      |         |              |       |              |              |
|   |             | 6/1/20 -             |      |         |              |       |              |              |
|   |             | 7/1/20 -<br>8/1/20 - |      | -       |              |       |              |              |
|   |             | 9/1/20 -             |      |         |              |       |              |              |
| Asbestos (1094)                                 |             | 3/1/20-              | 3/30 | 0/20    | 1 r          | outi  | ne (RT) per  | nine vears   |
| Sampling Point (Sampling Point ID)              |             | Monitori             | na P | eriod C | ollection Pe |       |              | ance Status  |
| Select from Inventory of Active Sampling Points |             | 1/1/13 -             |      |         |              |       |              |              |
| Total Coliform (3100)                           |             | _, _, _,             | ,-   |         |              | 1 r   | outine (RT)  | per month    |
| Sampling Point (Sampling Point ID)              |             | Monitori             | ng P | eriod C | ollection Pe |       |              | ance Status  |
| Select from Inventory of Active Sampling Points |             | 10/1/19 -            | 10/3 | 31/19   |              |       | Cor          | mplete       |
|   |             | 11/1/19 -            | 11/3 | 30/19   |              |       | Cor          | mplete       |
|   |             | 12/1/19 -            | 12/3 | 31/19   |              |       | Cor          | mplete       |
|   |             | 1/1/20 -             | 1/31 | 1/20    |              |       | Cor          | mplete       |
|   |             | 2/1/20 -             | 2/29 | 9/20    |              |       | Cor          | mplete       |
|   |             | 3/1/20 -             | 3/31 | 1/20    |              |       |              |              |
|   |             | 4/1/20 -             | 4/30 | 0/20    |              |       |              |              |
|   |             | 5/1/20 -             | 5/31 | 1/20    |              |       |              |              |
|   |             | 6/1/20 -             | 6/30 | 0/20    |              |       |              |              |
|   |             | 7/1/20 -             | 7/31 | 1/20    |              |       |              |              |
|   |             | 8/1/20 -             |      |         |              |       |              |              |
|   |             | 9/1/20 -             | 9/30 | 0/20    |              |       |              |              |
| Disinfectant Byproducts - TTHM & HAA5 (DBP)     |             |                      |      |         |              |       | routine (R   |              |
| Sampling Point (Sampling Point ID)              |             | Monitori             |      |         | ollection Pe |       |              | ance Status  |
| CVW 317 W MAIN ST (1155)                        |             | 1/1/19 -             |      |         | 8/1-8/31     |       | Cor          | mplete       |
|   |             | 1/1/20 -             |      |         | 8/1-8/31     |       |              |              |
|   |             | 1/1/21 -             | 12/3 | 1/21    | 8/1-8/31     |       | (07)         | 1            |
| Lead And Copper (PBCU)                          |             |                      |      |         | 5 ro         | utin  | e (RT) per t | nree years   |

**Monitoring Period** 

1/1/18 - 12/31/20

1/1/21 - 12/31/23

**Collection Period** 

6/1-9/30

6/1-9/30

Schedule Generation Date: 3/10/2020

Sampling Point (Sampling Point ID)

Select from Inventory of Active Sampling Points

**Compliance Status** 

| Connecticut Department of                          | Public H    | lealth    | Dr     | inkin      | g W     | /ater    | Se   | ection      |              |
|--|-------------|-----------|--------|------------|---------|----------|------|-------------|--------------|
| Water Quality Monito                               | oring and   | d Con     | ıpli   | ance       | Sch     | iedul    | e    |             |              |
| PWS ID PWS Name                                    |             |           | Clas   | sification | Pop     | ulation  | Ow   | ner Type Pr | imary Source |
| CT0261081 CTWC - SHORELINE REG-CHESTER VLLG WEST   | •           |           |        | С          |         | 216      |      | Р           | GW           |
| Local Address (where applicable)                   | Service     | Residen   | tial   | Commerc    | ial     | Industri | al   | Combined    | Agricultural |
|  | Connections | 105       |        |            |         |          |      |             |              |
| Towns Served: CHESTER                              |             |           |        |            |         |          |      |             |              |
| Monito   | ring Requ   | iireme    | nts    |            |         |          |      |             |              |
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID |             |           |        |            |         |          |      |             |              |
| Physical Parameters (PPS)                          |             |           |        |            |         |          | 1 rc | outine (RT) | per month    |
| Sampling Point (Sampling Point ID)                 |             | Monitori  | ng Pe  | eriod (    | Collec  | tion Pe  | riod | Compli      | ance Status  |
| Select from Inventory of Active Sampling Points    |             | 10/1/19 - | 10/3   | 1/19       |         |          |      | Co          | mplete       |
|  |             | 11/1/19 - |        |            |         |          |      | Co          | mplete       |
|  | :           | 12/1/19 - |        |            |         |          |      |             | mplete       |
|  |             | 1/1/20 -  |        | •          |         |          |      |             | mplete       |
|  |             | 2/1/20 -  |        |            |         |          |      | Co          | mplete       |
|  |             | 3/1/20 -  |        |            |         |          |      |             |              |
|  |             | 4/1/20 -  |        | •          |         |          |      |             |              |
|  |             | 5/1/20 -  |        |            |         |          |      |             |              |
|  |             | 6/1/20 -  |        |            |         |          |      |             |              |
|  |             | 7/1/20 -  |        |            |         |          |      |             |              |
|  |             | 8/1/20 -  |        |            |         |          |      |             |              |
|  |             | 9/1/20 -  | 9/30   | /20        |         |          |      |             |              |
| Water System Facility: ENTRY POINT (WSF ID: 00700) |             |           |        |            |         |          |      |             |              |
| Net Gross Alpha (4000)                             |             |           |        |            |         |          |      |             | er quarter   |
| Sampling Point (Sampling Point ID)                 |             | Monitori  |        |            | Collec  | tion Pe  | riod | -           | ance Status  |
| ENTRY POINT (3)                                    |             | 7/1/19 -  |        | •          |         |          |      |             | mplete       |
|  | :           | 10/1/19 - |        |            |         |          |      |             | mplete       |
|  |             | 1/1/20 -  |        | •          |         |          |      | Co          | mplete       |
|  |             | 4/1/20 -  |        |            |         |          |      |             |              |
|  |             | 7/1/20 -  | 9/30   | /20        |         |          |      |             |              |
| Uranium (4006)                                     |             |           | _      |            | - "     |          |      |             | er quarter   |
| Sampling Point (Sampling Point ID)                 |             | Monitori  |        |            | Collec  | tion Pe  | riod |             | ance Status  |
| ENTRY POINT (3)                                    |             | 7/1/19 -  |        |            |         |          |      |             | mplete       |
|  |             | 10/1/19 - |        |            |         |          |      |             | mplete       |
|  |             | 1/1/20 -  |        |            |         |          |      | Co          | mplete       |
|  |             | 4/1/20 -  |        |            |         |          |      |             |              |
| 0 II ID II 000/000 (1000)                          |             | 7/1/20 -  | 9/30   | /20        |         |          |      | /           |              |
| Combined Radium-226/228 (4010)                     |             | 0.0 - 1:  |        |            | C- !!   |          |      |             | per quarter  |
| Sampling Point (Sampling Point ID)                 |             | Monitori  |        |            | Lolled  | tion Pe  | rıod |             | ance Status  |
| ENTRY POINT (3)                                    |             | 7/1/19 -  |        |            |         |          |      |             | mplete       |
|  |             | 10/1/19 - |        |            |         |          |      |             | mplete       |
|  |             | 1/1/20 -  |        |            |         |          |      | Col         | mplete       |
|  |             | 4/1/20 -  |        |            |         |          |      |             |              |
| Learning Chamitala (1996)                          |             | 7/1/20 -  | 9/30   | /20        |         | _        |      | - (DT)      |              |
| Inorganic Chemicals (IOCS)                         |             | Manit     | m c: D | nuia d     | Co.II - |          |      |             | three years  |
| Sampling Point (Sampling Point ID)                 |             | Monitori  |        |            | Joiled  | tion Pe  | riod | -           | ance Status  |
| ENTRY POINT (3)                                    |             | 1/1/18 -  |        |            |         |          |      | Col         | mplete       |
|  |             | 1/1/21 -  | 12/3   | 1/23       |         |          |      |             |              |

| Connecticut Department of                             | Public H    | lealth    | Dr   | inkin      | g V   | Vater    | Se   | ection       |              |
|---|-------------|-----------|------|------------|-------|----------|------|--------------|--------------|
| Water Quality Monite                                  | oring an    | d Con     | npl  | iance      | Scl   | hedul    | e    |              |              |
| PWS ID PWS Name                                       |             |           | Clas | sification | Po    | pulation | Ow   | ner Type Pr  | imary Source |
| CTU261081 CTWC - SHORELINE REG-CHESTER VLLG WEST      | <b>T</b>    |           |      | С          |       | 216      |      | Р            | GW           |
| Local Address (where applicable)                      | Service     | Residen   | tial | Commerc    | cial  | Industri | al   | Combined     | Agricultural |
|   | Connections | 105       |      |            |       |          |      |              |              |
| Towns Served: CHESTER                                 |             |           |      |            |       |          |      |              |              |
| Monito  | oring Requ  | iireme    | nts  |            |       |          |      |              |              |
| Water System Facility: ENTRY POINT (WSF ID: 00700)    |             |           |      |            |       |          |      |              |              |
| Nitrate And Nitrite (NOX)                             |             |           |      |            |       |          | 1    | routine (R   | T) per year  |
| Sampling Point (Sampling Point ID)                    |             | Monitori  | ng P | eriod (    | Colle | ction Pe |      | =            | ance Status  |
| ENTRY POINT (3)                                       |             | 1/1/19 -  |      |            |       |          |      |              | mplete       |
|   |             | 1/1/20 -  |      |            |       |          |      |              |              |
|   |             | 1/1/21 -  | 12/3 | 1/21       |       |          |      |              |              |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) |             | -         | -    |            |       | 1 rou    | ıtin | e (RT) per t | hree years   |
| Sampling Point (Sampling Point ID)                    |             | Monitori  | ng P | eriod (    | Colle | ction Pe |      |              | ance Status  |
| ENTRY POINT (3)                                       |             | 1/1/17 -  |      |            |       |          |      |              | mplete       |
|   |             | 1/1/20 -  | 12/3 | 1/22       |       |          |      |              |              |
|   |             | 1/1/23 -  | 12/3 | 1/25       |       |          |      |              |              |
| Organic Chemicals (VOCS)                              |             |           |      |            |       |          | 1    | routine (R   | T) per year  |
| Sampling Point (Sampling Point ID)                    |             | Monitori  | ng P | eriod (    | Colle | ction Pe |      | =            | ance Status  |
| ENTRY POINT (3)                                       |             | 1/1/19 -  | 12/3 | 1/19       |       |          |      | Соі          | mplete       |
|   |             | 1/1/20 -  | 12/3 | 1/20       |       |          |      | Coi          | mplete       |
|   |             | 1/1/21 -  | 12/3 | 1/21       |       |          |      |              |              |
| Water System Facility: WELL 9 (WSF ID: 733)           |             |           |      |            |       |          |      |              |              |
| E. Coli (3014)  |             |           |      |            |       |          | 1 rc | outine (RT)  | per month    |
| Sampling Point (Sampling Point ID)                    |             | Monitori  | ng P | eriod (    | Colle | ction Pe |      |              | ance Status  |
| WELL 9 (2)  |             | 10/1/19 - | 10/3 | 31/19      |       |          |      | Coi          | mplete       |
|   |             | 11/1/19 - | 11/3 | 30/19      |       |          |      | Coi          | mplete       |
|   |             | 12/1/19 - | 12/3 | 31/19      |       |          |      | Coi          | mplete       |
|   |             | 1/1/20 -  | 1/31 | 1/20       |       |          |      | Coi          | mplete       |
|   |             | 2/1/20 -  | 2/29 | 9/20       |       |          |      | Coi          | mplete       |
|   |             | 3/1/20 -  | 3/31 | 1/20       |       |          |      |              |              |
|   |             | 4/1/20 -  | 4/30 | 0/20       |       |          |      |              |              |
|   |             | 5/1/20 -  | 5/31 | 1/20       |       |          |      |              |              |
|   |             | 6/1/20 -  | 6/30 | 0/20       |       |          |      |              |              |
|   |             | 7/1/20 -  | 7/31 | 1/20       |       |          |      |              |              |
|   |             | 8/1/20 -  | 8/31 | 1/20       |       |          |      |              |              |
|   |             | 9/1/20 -  | 9/30 | 0/20       |       |          |      |              |              |
| Water System Facility: WELL 8 (WSF ID: 735)           |             |           |      |            |       |          |      |              |              |
| E. Coli (3014)  |             |           |      |            |       |          | 1 rc | outine (RT)  | per month    |
| Sampling Point (Sampling Point ID)                    |             | Monitori  | ng P | eriod (    | Colle | ction Pe |      |              | ance Status  |
| WELL 8 (2)  |             | 10/1/19 - | 10/3 | 31/19      |       |          |      | Соі          | mplete       |
|   |             | 11/1/19 - | 11/3 | 30/19      |       |          |      | Coi          | mplete       |
|   |             | 12/1/19 - | 12/3 | 31/19      |       |          |      | Coi          | mplete       |
|   |             | 1/1/20 -  | 1/31 | 1/20       |       |          |      | Coi          | mplete       |
|   |             | 2/1/20 -  | 2/29 | 9/20       |       |          |      | Соі          | mplete       |
|   |             | 3/1/20 -  | 3/31 | 1/20       |       |          |      |              |              |
|   |             | 4/1/20 -  | 4/30 | 0/20       |       |          |      |              |              |
|   | -           |           |      |            |       |          |      |              |              |

|               | Connecticut I             | Department of           | Public Healt         | th Drin     | nking W   | ater Se      | ction       |              |
|---------------|---------------------------|-------------------------|----------------------|-------------|-----------|--------------|-------------|--------------|
|               |                           | Quality Monit           |                      |             | <u> </u>  |              |             |              |
| PWS ID        | PWS Name                  | Quality Mont            | oring and co         |             |           | ulation Own  | er Tyne Pri | imary Source |
| CT0261081     |                           | EG-CHESTER VLLG WES     | т                    | Classiii    | -         | 216          | P           | GW           |
|               | (where applicable)        |                         |                      | ential Co   |           |              | Combined    | Agricultura  |
|               | (more approxim)           |                         |                      | 05          |           |              |             |              |
| Towns Served  | : CHESTER                 |                         |                      |             |           |              |             |              |
|               |                           | Monito                  | oring Requirem       | nents       |           |              |             |              |
| Water Syster  | m Facility: WELL 8 (V     | VSF ID: 735)            |                      |             |           |              |             |              |
| E. Coli (301  | 4)                        |                         |                      |             |           | 1 rou        | utine (RT)  | per month    |
| Sampling      | g Point (Sampling Point I | D)                      | Monit                | oring Perio | od Collec | tion Period  | Complia     | ınce Status  |
|               |                           |                         | 5/1/2                | 0 - 5/31/2  | 0         |              |             |              |
|               |                           |                         | 6/1/2                | 0 - 6/30/2  | 0         |              |             |              |
|               |                           |                         | 7/1/2                | 0 - 7/31/2  | 0         |              |             |              |
|               |                           |                         | 8/1/2                | 0 - 8/31/2  | 0         |              |             |              |
|               |                           |                         | 9/1/2                | 0 - 9/30/2  | 0         |              |             |              |
|               | Monthly Wa                | ter System Facil        | ity (WSF) Level      | Monit       | oring Re  | quireme      | nts         |              |
| Water Syster  | m Facility: ENTRY POI     | NT (WSFID: 00700)       |                      |             |           |              |             |              |
| Analyte       | Monitorin                 | g Requirement (Summa    | ary Type) O          | perating L  | imit      |              | Samples Re  | q/Month      |
| Chlorine      | Entry Poin                | t Chlorine Residual Mor | nitoring (CHLR) N    | linimum: (  | 0.2 MG/L  |              | Dail        | У            |
| Start Date    | : 7/1/2003                |                         | Compliance Hi        | istory:     | Operat    | ing Limit    | Monitori    | ng           |
|               |                           |                         | Monitoring Pe        | riod        |           | ance Status: | Compliar    | nce Status:  |
|               |                           |                         | 10/1/2019 - 10       | /31/2019    |           |              |             |              |
|               |                           |                         | 11/1/2019 - 11       | /30/2019    |           |              |             |              |
|               |                           |                         | 12/1/2019 - 12       | /31/2019    |           |              |             |              |
|               |                           |                         | 1/1/2020 - 1/3       | 1/2020      |           |              |             |              |
|               |                           |                         | 2/1/2020 - 2/2       | 9/2020      |           |              |             |              |
|               |                           | Other Co                | ompliance Sch        | edules      |           |              |             |              |
| Compliance So | chedule Activity          |                         |                      | Due Dat     | te        | Achieved L   | Date        |              |
| SUBMIT LEAD   | CONSUMER NOTICE CER       | TIFICATE                |                      | 12/29/20    | 14        |              |             |              |
| DISTRIBUTION  | SYSTEM MATERIALS EV       | ALUATION                |                      | 8/31/202    | 19        |              |             |              |
| CROSS CONNE   | ECTION SURVEY REPORT      |                         |                      | 3/1/202     | .0        |              |             |              |
|               | TO THE DEPARTMENT         |                         |                      | 6/30/202    |           |              |             |              |
| SUBMIT CCR C  | CERTIFICATION FORM        |                         |                      | 8/9/202     | .0        |              |             |              |
|               | Wa                        | ter System Facili       | ity and Samplir      | ng Point    | t Invento | ry           |             |              |
| Water         |                           |                         |                      |             | Total     | Lead and     |             |              |
| -             | ater System Facility      |                         | Sampling Point       |             | Coliform  |              |             | Stage        |
| Facility ID   | TRIBLITION CYCTT          | <i>ID</i>               | <b>Description</b>   | <u>Sta</u>  |           | Kule Tier    | Aspestos    | WQP 2 DBP    |
| 00600 DIS     | STRIBUTION SYSTEM         | 1155                    | CVW 317 W MAIN S     | _           |           | 2            |             | Y            |
|               |                           | 11551                   | APT 6105             | Α           |           | 3            |             |              |
|               |                           | 11552                   | APT 6105             | Α           |           | 3            |             |              |
|               |                           | 11553                   | APT 2201             | NST F       |           | 3            |             |              |
|               |                           | 11554                   | KITCHEN 317 WMAI     |             |           | 3            |             |              |
|               |                           | 11555                   | HK ROOM              | F           |           | 3<br>N       |             |              |
|               |                           | 11556<br>11557          | APT 1101<br>APT 1102 | F           |           | N<br>N       |             |              |
|               |                           |                         |                      |             |           |              |             |              |
|               |                           | 11558                   | APT 1103             | A           | 1 I       | N            |             |              |

Υ

Ν

APT 1104

11559

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

| PWS ID           | PWS Name                              |             |         | Clas  | ssification | Population  | Owner Type | Primary Source  |
|------------------|---------------------------------------|-------------|---------|-------|-------------|-------------|------------|-----------------|
| CT0261081        | CTWC - SHORELINE REG-CHESTER VLLG WES | Т           |         |       | С           | 216         | Р          | GW              |
| Local Address (v | where applicable)                     | Service     | Resider | ntial | Commerci    | al Industri | al Combine | ed Agricultural |
|                  |                                       | Connections | 105     |       |             |             |            |                 |

| Towns Served: CHESTER                          |                            |                            | ,                   | 1                         | "                  |                |          |                 |
|--|----------------------------|----------------------------|---------------------|---------------------------|--------------------|----------------|----------|-----------------|
| Wat  | ter System Facili          | ty and Samp                | ling Point Ir       | ventor                    | У                  |                |          |                 |
| Water System Water System Facility Facility ID | -                          | Sampling Point Description | Status              | Total<br>Coliform<br>Rule | Lead and<br>Copper | Asbestos       |          | Stage<br>2 DBPR |
|  | 11560                      | APT 1105                   | A                   |                           | N                  |                |          |                 |
|  | 11561                      | APT 1201                   | A                   | Υ                         | N                  |                |          |                 |
|  | 11562                      | APT 1202                   | A                   | Y                         | N                  |                |          |                 |
|  | 11563                      | APT 1203                   | А                   | Υ                         | N                  |                |          |                 |
|  | 11564                      | APT 1204                   | А                   | Υ                         | N                  |                |          |                 |
|  | 11565                      | APT 1205                   | А                   | Υ                         | N                  |                |          |                 |
|  | 11566                      | APT 2101                   | А                   | Υ                         | N                  |                |          |                 |
|  | 11567                      | APT 2102                   | А                   | Υ                         | N                  |                |          |                 |
|  | 11568                      | APT 2103                   | А                   | Υ                         | N                  |                |          |                 |
|  | 11569                      | APT 2105                   | А                   |                           | N                  |                |          |                 |
|  | 11570                      | APT 2202                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11571                      | APT 2203                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11572                      | APT 2204                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11573                      | APT 2205                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11574                      | APT 3101                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11575                      | APT 3102                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11576                      | APT 3103                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11577                      | APT 3104                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11578                      | APT 3105                   | А                   | Υ                         | N                  |                |          |                 |
|  | 11579                      | APT 3201                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11580                      | APT 3202                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11581                      | APT 3203                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11582                      | APT 3204                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11583                      | APT 3205                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11584                      | APT 4101                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11585                      | APT 4102                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11586                      | APT 4103                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11587                      | APT 4104                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11588                      | APT 4105                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11589                      | APT 4201                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11590                      | APT 4202                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11591                      | APT 4203                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11592                      | APT 4204                   | А                   | Υ                         | N                  |                |          |                 |
|  | 11593                      | APT 4205                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11594                      | APT 5101                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11595                      | APT 5102                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11596                      | APT 5103                   | Α                   | Υ                         | N                  |                |          |                 |
|  | 11597                      | APT 5104                   | А                   | Υ                         | N                  |                |          |                 |
|  | 11598                      | APT 5105                   | Α                   | Υ                         | N                  |                |          |                 |
| NOTF: This information has been provided to be | In owners and operators of | nublic water systems n     | agintain compliance | with drinki               | a water ava        | litu manitarir | a roquir | omonto          |

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                               |             |         | Clas  | sification | Population  | Owner Type | Primary Source  |
|------------------|--|-------------|---------|-------|------------|-------------|------------|-----------------|
| CT0261081        | CTWC - SHORELINE REG-CHESTER VLLG WEST | r           |         |       | С          | 216         | Р          | GW              |
| Local Address (v | vhere applicable)                      | Service     | Residen | ntial | Commerci   | al Industri | al Combine | ed Agricultural |
|                  |  | Connections | 105     |       |            |             |            |                 |

| Towns Served: CHESTER                           |                  |                            |               | ,                 | "                  |               |     |        |
|---|------------------|----------------------------|---------------|-------------------|--------------------|---------------|-----|--------|
| Wat   | er System Facili | ty and Samp                | ling Point Ir | ventor            | У                  |               |     |        |
| Water System Water System Facility Facility ID  | -                | Sampling Point Description |               | Total<br>Coliform | Lead and<br>Copper | Asbestos      |     | Stage  |
| raciity ID                                      |                  |                            | Status        |                   |                    | ASDESIOS      | WQP | Z DDPK |
|   | 11599            | APT 5201                   | A             | Y                 | N                  |               |     |        |
|   | 11600            | APT 5202                   | A             | Y                 | N                  |               |     |        |
|   | 11601            | APT 5203                   | A             | Y                 | N                  |               |     |        |
|   | 11602            | APT 5204                   | A             | Y                 | N                  |               |     |        |
|   | 11603            | APT 5205                   | A             | Y                 | N                  |               |     |        |
|   | 11604            | APT 6101                   | Α             | Y                 | N                  |               |     |        |
|   | 11605            | APT 6102                   | Α             | Y                 | N                  |               |     |        |
|   | 11606            | APT 6103                   | Α             | Υ                 | N                  |               |     |        |
|   | 11607            | APT 6104                   | Α             | Υ                 | N                  |               |     |        |
|   | 11608            | APT 3201                   | Α             | Υ                 | N                  |               |     |        |
|   | 11609            | APT 6202                   | Α             | Υ                 | N                  |               |     |        |
|   | 11610            | APT 6203                   | Α             | Υ                 | N                  |               |     |        |
|   | 11611            | APT 6204                   | Α             | Υ                 | N                  |               |     |        |
|   | 11612            | APT 6205                   | Α             | Υ                 | N                  |               |     |        |
|   | 11613            | APT 7101                   | Α             | Υ                 | N                  |               |     |        |
|   | 11614            | APT 7102                   | Α             | Υ                 | N                  |               |     |        |
|   | 11615            | APT 7103                   | Α             | Υ                 | N                  |               |     |        |
|   | 11616            | APT 7104                   | Α             | Υ                 | N                  |               |     |        |
|   | 11617            | APT 7105                   | Α             | Υ                 | N                  |               |     |        |
|   | 11618            | APT 7201                   | Α             | Υ                 | N                  |               |     |        |
|   | 11619            | APT 7203                   | Α             | Υ                 | N                  |               |     |        |
|   | 11620            | APT 7204                   | Α             | Υ                 | N                  |               |     |        |
|   | 11621            | APT 7205                   | Α             | Υ                 | N                  |               |     |        |
|   | 11622            | APT 8101                   | Α             | Υ                 | N                  |               |     |        |
|   | 11623            | APT 8102                   | Α             | Υ                 | N                  |               |     |        |
|   | 11624            | APT 8103                   | Α             | Υ                 | N                  |               |     |        |
|   | 11625            | APT 8104                   | Α             | Υ                 | N                  |               |     |        |
|   | 11626            | APT 8105                   | Α             | Υ                 | N                  |               |     |        |
|   | 11627            | APT 8201                   | Α             | Υ                 | N                  |               |     |        |
|   | 11628            | APT 8202                   | Α             | Υ                 | N                  |               |     |        |
|   | 11629            | APT 8203                   | Α             | Υ                 | N                  |               |     |        |
|   | 11630            | APT 8204                   | Α             | Υ                 | N                  |               |     |        |
|   | 11631            | APT 8205                   | A             | Υ                 | N                  |               |     |        |
|   | 11632            | APT 9101                   | A             | Υ                 | N                  |               |     |        |
|   | 11633            | APT 9102                   | A             | Ϋ́                | N                  |               |     |        |
|   | 11634            | APT 9102<br>APT 9103       | A             | Y                 | N                  |               |     |        |
|   | 11635            | APT 9103<br>APT 9104       | A             | ı                 | N                  |               |     |        |
|   | 11636            | APT 9104<br>APT 9105       |               |                   | N                  |               |     |        |
|   | 11637            | APT 9105<br>APT 9201       | A<br>A        | Υ                 | N                  |               |     |        |
| NOTF: This information has been provided to hel |                  |                            |               |                   |                    | tan manatan d |     |        |

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 Do           | epartment of      | Public Healt       | h D    | rinki   | ng W     | ater Se   | ection      |               |
|-------------|--------------------------|-------------------|--------------------|--------|---------|----------|-----------|-------------|---------------|
|             |                          | •                 | oring and Co       |        |         | _        |           |             |               |
| PWS ID      | PWS Name                 | guarrey 1.10111e  | ornig and do       |        |         |          |           | ner Type Pi | rimary Source |
| CT026108    |                          | -CHESTER VLLG WES | т                  | Cit    | C       |          | 16        | P           | GW            |
|             | lress (where applicable) |                   | Service Resid      | ential | Comme   |          | ndustrial | Combined    | Agricultural  |
|             |                          |                   | Connections 10     |        |         |          |           |             |               |
| Towns Se    | rved: CHESTER            |                   |                    |        |         |          |           |             |               |
|             | Wate                     | er System Facili  | ity and Samplin    | ıg Po  | oint In | vento    | ry        |             |               |
| Water       |                          | -                 |                    |        |         | Total    | Lead and  |             |               |
| System      | Water System Facility    |                   | Sampling Point     |        |         | Coliform | Copper    |             | Stage         |
| Facility IE |                          | ID                | Description        |        | Status  | Rule     | Rule Tier | Asbestos    | WQP 2 DBPR    |
|             |                          | 11638             | APT 9202           |        | Α       | Υ        | N         |             |               |
|             |                          | 11639             | APT 9203           |        | Α       | Υ        | N         |             |               |
|             |                          | 11640             | APT 9204           |        | Α       | Υ        | N         |             |               |
|             |                          | 11641             | APT 9205           |        | Α       | Υ        | N         |             |               |
|             |                          | 11642             | HOME #1101         |        | Α       | Υ        | N         |             |               |
|             |                          | 11643             | HOME #1102         |        | Α       | Υ        | N         |             |               |
|             |                          | 11644             | HOME #1103         |        | Α       | Υ        | N         |             |               |
|             |                          | 11645             | HOME #1104         |        | Α       | Υ        | N         |             |               |
|             |                          | 11646             | HOME #1105         |        | Α       | Υ        | N         |             |               |
|             |                          | 11647             | HOME #1106         |        | Α       | Υ        | N         |             |               |
|             |                          | 11648             | HOME #1107         |        | Α       | Υ        | N         |             |               |
|             |                          | 11649             | HOME #1108         |        | Α       | Υ        | N         |             |               |
|             |                          | 11650             | HOME #1109         |        | Α       | Υ        | N         |             |               |
|             |                          | 11651             | HOME #1110         |        | Α       | Υ        | N         |             |               |
|             |                          | 11652             | HOME #1111         |        | Α       | Υ        | N         |             |               |
|             |                          | 11653             | HOME #1112         |        | Α       | Υ        | N         |             |               |
|             |                          | 11654             | HOME #1113         |        | Α       | Υ        | N         |             |               |
|             |                          | 11655             | HOME #1114         |        | Α       | Υ        | N         |             |               |
|             |                          | 11656             | HOME #1115         |        | Α       | Υ        | N         |             |               |
|             |                          | 4                 | DISTRIBUTION SYSTE | M      | Α       | Υ        |           |             |               |
|             |                          | DOWNSTREAM        | WITHIN 5 SERVICE C | ON     | Α       |          |           |             |               |
|             |                          | UPSTREAM          | WITHIN 5 SERVICE C | ON     | Α       |          |           |             |               |
| 00700       | ENTRY POINT              | 3                 | ENTRY POINT        |        | Α       |          |           |             |               |
| 329         | CVW TREATMENT PLANT      |                   |                    |        |         |          |           |             |               |
| 51165       | ATMOSPHERIC TANKS        |                   |                    |        |         |          |           |             |               |
| 51168       | HYDROPNEUMATIC TANKS     |                   |                    |        |         |          |           |             |               |
| 52082       | PUMP STATION             |                   |                    |        |         |          |           |             |               |
| 733         | WELL 9                   | 2                 | WELL 9             |        | Α       |          |           |             |               |
| 735         | WELL 8                   | 2                 | WELL 8             |        | Α       |          |           |             |               |
|             |                          | Contified         | Operator Infor     |        | ion     |          |           |             |               |

### **Certified Operator Information**

| Ш | Motor Customs Fasility | DICTRIBUTION CYCTEM | (MICE ID: OOCOO) |
|---|------------------------|---------------------|------------------|
| Ш | Water System Facility: | DISTRIBUTION SYSTEM | (WZF ID: 00600)  |

| Facility Classification: DISTRIBUT | TION SYSTEM    |   | Certification |
|------------------------------------|----------------|---|---------------|
| Operator Name                      | Operator Type  | Certification(s)                          | Expiration    |
| ANDREWS, PAUL M.                   | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II   | 6/30/2020     |
|                                    |                | WATER TREATMENT PLANT OPERATOR - CLASS IV | 12/31/2021    |

|   | Wat              | ter Qua    | lity Mor    | nitoring a    | and C    | ompl     | iance S    | chedu      | le        |       |                |
|---|------------------|------------|-------------|---------------|----------|----------|------------|------------|-----------|-------|----------------|
| PWS ID P                                  | WS Name          |            |             |               |          |          |            |            |           | ype F | Primary Source |
| CT0261081 C                               | TWC - SHORELII   | NE REG-CHE | STER VLLG W | /EST          |          |          | С          | 216        | Р         |       | GW             |
| Local Address (who                        | ere applicable)  |            |             | Service       | Resi     | dential  | Commercia  | l Industri | al Con    | bined | d Agricultural |
|   |                  |            |             | Connectio     | ons      | 105      |            |            |           |       |                |
| Towns Served: CH                          | ESTER            |            |             |               | '        | '        |            |            | <u> </u>  |       |                |
|   |                  |            | Certifie    | ed Operate    | or Info  | rmatio   | on         |            |           |       |                |
| Water System Fa                           | cility: CVW T    | REATMEN    | T PLANT (V  | VSF ID: 329)  |          |          |            |            |           |       |                |
| Facility Classificat                      | ion: CLASS 1 TR  | EATMENT P  | LANT        |               |          |          |            |            |           |       | Certification  |
| Operator Name                             |                  |            | Operator 1  | Гуре          | Certific | ation(s) |            |            |           |       | Expiration     |
| FUNK, CHRISTOPH                           | ER B.            |            | CHIEF OPERA | ATOR          | DISTRIB  | UTION S  | YSTEM OP   | RATOR - CI | ASS II    |       | 6/30/2022      |
| WATER TREATMENT PLANT OPERATOR - CLASS II |                  |            |             |               |          |          |            |            |           |       | 6/30/2022      |
|   |                  |            | C           | ontact Info   | ormati   | ion      |            |            |           |       |                |
| Name                                      |                  |            |             | Organization  | 1        |          |            |            | Job       | Title |                |
| Mr. Craig J. Patla                        |                  |            |             | Connecticut   | Water Co | mpany    |            | Vp, Servi  | e Deliver | У     |                |
| Mailing Address Li                        | ne One           |            | Mailing Add | ress Line Two |          |          |            | City       | St        | ate   | Zip Code       |
| 93 West Main Stre                         | et               |            |             |               |          |          | Clinton    |            | (         | T     | 06413          |
| Business Phone                            | Extension        | Fax        | М           | obile Phone   | Emerge   | ency Pho | ne Email A | ddress     | ·         | ·     |                |
| 860-664-6140                              |                  |            |             |               | 800-3    | 391-1924 | cpatla@    | ctwater.co | m         |       |                |
| Contact Role(s):                          | egal Contact     |            |             |               |          |          |            |            |           |       |                |
| Name                                      |                  |            |             | Organization  | 1        |          |            |            | Job       | Title |                |
| Mr. David Connor                          | s                |            |             | Connecticut ' | Water Co | mpany    |            | Director,  | Service D | е     |                |
| Mailing Address Li                        | ne One           |            | Mailing Add | ress Line Two |          |          |            | City       | St        | ate   | Zip Code       |
| 93 West Main St                           |                  |            |             |               |          |          | Clinton    |            | (         | T     | 06413          |
| <b>Business Phone</b>                     | Extension        | Fax        | М           | obile Phone   | Emerge   | ency Pho | ne Email A | ddress     |           |       |                |
| 860-664-6141                              |                  |            |             |               | 860-2    | 227-4902 | dconno     | rs@ctwate  | r.com     |       |                |
| Contact Role(s):                          | Administrative ( | Contact    |             |               |          |          |            |            |           |       |                |

Connecticut Department of Public Health Drinking Water Section

### 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