	Connecticut Depa					<u> </u>			
	Water Qua	ality Mo	nitoring and		1				
PWS ID	PWS Name				Classific	ation P	opulation C	Wner Type P	rimary Source
СТ0280014	COLCHESTER BIBLE BAPTIST	T CHURCH			NC		26	Р	GW
	where applicable)		Service	Resident	ial Com	mercial	Industrial	Combined	Agricultural
34 CHESTNUT H	IILL ROAD		Connections			1			
Towns Served: (COLCHESTER								
		Mo	nitoring Requ	ireme	nts				
Water System	Facility: DISTRIBUTION	SYSTEM (W	/SF ID: 00600)						
Total Coliforn	n (3100)						1 r	outine (RT)	per quarter
Sampling I	Point (Sampling Point ID)			Monitorir	ng Perio	d Col	lection Perio	od Compli	ance Status
Select from	n Inventory of Active Samplin	ig Points		7/1/19 -	9/30/19			Co	mplete
			<u>`</u>	10/1/19 -	12/31/1	9		Со	mplete
				1/1/20 -				Со	mplete
				4/1/20 -					
				7/1/20 -	9/30/20				
Physical Para								outine (RT)	
	Point (Sampling Point ID)			Monitorir	-		lection Perio		ance Status
Select from	n Inventory of Active Samplin	ig Points		7/1/19 -					mplete
				10/1/19 -					mplete
				1/1/20 -				Co	mplete
				4/1/20 -					
			700)	7/1/20 -	9/30/20				
-	Facility: ENTRY POINT (WSF ID: UU	/00)					· · · · / •	-1
Nitrate And N	NITRITE (NOX) Point (Sampling Point ID)			Monitorir	na Dorio		lection Perio	1 routine (F	ance Status
ENTRY POI				1/1/19 - 1	-				mplete
LINIKI POI	int (3)			1/1/20 - 1					mplete
				1/1/21 - 1					mpiete
		Dublic	Notification R						
		Public		-			100 - 1		
Violation/Situa	ition		Compliance Period	Notice Tier			<u>ification</u>		tification Beneficial
	eters M&R Violation		1/1/19 - 3/31/19	3	-	uired /2020	Performed	Due to DPH 6/6/2020	Received
Total Coliform N			1/1/19 - 3/31/19	3		/2020		6/6/2020	
		Sustan F						0/0/2020	
			THE THE PARTY OF A LOCAL				lory		
1	water S	bystem r	acility and Sar	npling	Point		-		
Water		-	-		Point	Tote	al Lead a		Charac
System Wate	er System Facility	-	oint Sampling Poi			Toto Colifo	al Lead a form Coppe	er	Stage WOP 2 DBPR
System Wate Facility ID	er System Facility	Sampling F ID	oint Sampling Poin Description	nt	Stat	Toto Colifo _{US} Rul	al Lead a form Coppe	er	-
System Wate Facility ID		Sampling F ID 4	Point Sampling Point Description DISTRIBUTION	nt N SYSTEM	<u>Stat</u> A	Toto Colifo	al Lead a form Coppe	er	-
System Wate Facility ID	er System Facility	Sampling P ID 4 DOWNSTR	Point Sampling Point Description DISTRIBUTION EAM WITHIN 5 SER	nt N SYSTEM VICE CON	Stati A	Toto Colifo _{US} Rul	al Lead a form Coppe	er	-
System Wate Facility ID 00600 DIST	<i>er System Facility</i> RIBUTION SYSTEM	Sampling F ID 4 DOWNSTR UPSTREA	Point Sampling Point Description DISTRIBUTION EAM WITHIN 5 SER	nt N SYSTEM VICE CON	Stati A I A	Toto Colifo _{US} Rul	al Lead a form Coppe	er	-
System Wate Facility ID 00600 DIST 00700 ENTR	er System Facility RIBUTION SYSTEM RY POINT	Sampling P ID 4 DOWNSTR	Point Sampling Point Description DISTRIBUTION EAM WITHIN 5 SER	nt N SYSTEM VICE CON	Stati A	Toto Colifo _{US} Rul	al Lead a form Coppe	er	-
System Wate Facility ID 00600 DIST 00700 ENTR	er System Facility RIBUTION SYSTEM RY POINT	Sampling F ID 4 DOWNSTR UPSTREA 3 2	Point Sampling Point Description DISTRIBUTION EAM WITHIN 5 SER M WITHIN 5 SER ENTRY POINT WELL	nt I SYSTEM VICE CON VICE CON	Stati A A A A	Toto Colifo _{US} Rul	al Lead a form Coppe	er	-
System Wate Facility ID 00600 DIST 00700 ENTF 20523 WEL	er System Facility RIBUTION SYSTEM RY POINT	Sampling F ID 4 DOWNSTR UPSTREA 3 2	Point Sampling Point Description DISTRIBUTION EAM WITHIN 5 SER M WITHIN 5 SER ENTRY POINT WELL Contact Inforr	nt I SYSTEM VICE CON VICE CON	Stati A A A A	Toto Colifo _{US} Rul	al Lead a form Coppe	er ier Asbestos	-
System Wate Facility ID 00600 DIST 00700 ENTF 20523 WELL Name	er System Facility RIBUTION SYSTEM RY POINT	Sampling F ID 4 DOWNSTR UPSTREA 3 2	Point Sampling Point Description DISTRIBUTION EAM WITHIN 5 SER M WITHIN 5 SER ENTRY POINT WELL Contact Inform Organization	nt I SYSTEM VICE CON VICE CON NICE CON	Stat A A A A A	Toto Colifo <u>us</u> Rul Y	al Lead a rm Coppe e Rule T	er	-
System Wate Facility ID 00600 DIST 00700 ENTR 20523 WELT Name Mr. Mark Love	er System Facility RIBUTION SYSTEM RY POINT L	Sampling F ID 4 DOWNSTR UPSTREA 3 2	Point Sampling Point Description DISTRIBUTION EAM WITHIN 5 SER M WITHIN 5 SER ENTRY POINT WELL Contact Inform Organization Colchester Bible	nt I SYSTEM VICE CON VICE CON NICE CON	Stat A A A A A	Toto Colifo <u>us</u> Rul Y	Pastor	er ier Asbestos Job Title	WQP 2 DBPR
System Wate Facility ID 00600 DIST 00700 ENTF 20523 WELL Name	er System Facility RIBUTION SYSTEM RY POINT L s Line One	Sampling F ID 4 DOWNSTR UPSTREA 3 2	Point Sampling Point Description DISTRIBUTION EAM WITHIN 5 SER M WITHIN 5 SER ENTRY POINT WELL Contact Inform Organization	nt I SYSTEM VICE CON VICE CON NICE CON	Stat A A A A A	Toto Colifo <u>us</u> Rul Y	Al Lead a Arm Coppe le Rule T Pastor City	er ier Asbestos	Stage WQP 2 DBPR Zip Code 06415

	-	· · · ·	-)	0		I ⁻			-		
PWS ID	PWS Name					Classi	fication	Population	Owner T	ype l	Primary Source
СТ0280014	COLCHESTER BI	BLE BAPTIST	CHURCH				NC	26	Р		GW
Local Address (w	here applicable)			Service	Resider	ntial C	ommerci	ial Industri	al Com	bine	d Agricultural
34 CHESTNUT H	LL ROAD			Connection	ıs		1				
Towns Served: C	OLCHESTER										
Dusiness Filon	e Extension	Гал		le Phone	Emergenc	y Phone		Audress			
860-537-1050)						PASTO	R@COLCHE	STERBIBL	E.ORC	3
Contact Role(s):	Administrative	Contact, Leg	al Contact								
Name			Ог	rganization					Job	Title	
Colchester Bible	Baptist Church										
Mailing Address	Line One		Mailing Address	s Line Two				City	St	ate	Zip Code
34 Chestniut Hill	Rd						Colche	ster	(т	06415
Business Phon	e Extension	Fax	Mobi	le Phone	Emergency	y Phon	e Email /	Address	I		
Contact Role(s):	Owner	1		I			-				
Please note the	following:										
1. The residual d	isinfectant concen	tration must b	e measured at the	e same locatio	on and time a	as each	total colif	orm sample.			
2. If a Collection	Period is specified	, all water qua	lity samples must	be collected o	during the sp	pecified	period.				
3. Depending on	results, additional	monitoring m	ay be required (i.e	e. repeat or co	onfirmation	samples). This sc	hedule is subj	ect to cha	nge, a	nd any related
corresponden	ce sent by the DW	S on or after t	he generation date	e of this sched	lule will have	e preceo	dence ove	r what is con	tained in tl	nis sch	nedule.

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

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(Connectio	cut Department of	Public H	ealth	Drin	nkin	ng W	/ater	Se	ction	
	Wa	iter Quality Monit	oring and	d Com	plia	nce	Sch	edul	e		
PWS ID F	PWS Name				Classifi	icatior	n Pop	ulation	Own	er Type Pr	imary Source
СТ0280024 9	STATE POLICE F	LEET MAINTENANCE			N	IC		25		S	GW
Local Address (wh	nere applicable)	Service	Resident	ial Co	mmer	cial	Industri	al	Combined	Agricultural
MILL HILL ROAD			Connections			1					
Towns Served: CC	DLCHESTER										
		Monito	oring Requ	iremer	nts						
Water System F	acility: DIST	RIBUTION SYSTEM (WSF I	D: 00600)								
Total Coliform	(3100)							1	. rou	tine (RT) p	oer quarter
Sampling Po	oint (Sampling	Point ID)		Monitorir	ng Perio	od	Collec	tion Pe	riod	Complie	ance Status
Select from I	nventory of Ac	tive Sampling Points		7/1/19 -	9/30/1	.9				Со	mplete
			-	.0/1/19 -	12/31/	/19				Со	mplete
				1/1/20 -	3/31/2	20				Со	mplete
				4/1/20 -	6/30/2	20					
				7/1/20 -	9/30/2	20					
Physical Param											oer quarter
	oint (Sampling		I	Monitorir	-		Collec	tion Pe	riod	-	ance Status
Select from I	nventory of Ac	tive Sampling Points		7/1/19 -							mplete
				.0/1/19 -							mplete
				1/1/20 -						Со	mplete
				4/1/20 -							
				7/1/20 -	9/30/2	20					
		TMENT PLANT (WSF ID: 0	0700)								
Nitrate And Nit	• •						C - II			-	T) per year
	oint (Sampling	Point ID)		Monitorir	-		Collec	tion Pe	rioa	-	ance Status
IREATIVIENT	PLANT EP (3)			1/1/19 - 1							mplete
				1/1/20 - 1 1/1/21 - 1						Col	mplete
	84	Mater Content Fast					- D -	• • •			
		y Water System Facil		evel iv	Ιοπιτ	orin	g ke	quire	mer	nts	
	•	TMENT PLANT (WSFID: 00	•								
Analyte		itoring Requirement (Summa			ating L					Samples Re	q/Month
рН		y Point pH Monitoring(PHRD			mum: 1	7.0 PH	1			4	
Start Date: 4	/1/2013			nce Histo	-			ing Lim		Monitor	-
				i <mark>ng Perioc</mark> 19 - 10/31			Compli	ance St	atus:	Compila	nce Status:
				19 - 10/31 19 - 11/30							
				19 - 11/30	-						
) - 1/31/2	-						
) - 2/29/2							
		Other C	ompliance								
Compliance Sche	dule Activity	Utiler Ci	omphance		uies Due Dat	to		Achie	wod I	Date	
CROSS CONNECTI		PORT			/1/202			Aune	veu L		
		Water System Facili	ity and Sar				ento	orv			
Water		trater system radin	ty und Sal	-Pinig			Total	Lead	and		
	System Facilit	y Sampling Point	Sampling Poir	nt			oliforn				Stage
Facility ID		ID	Description		Sta		Rule			Asbestos	WQP 2 DBPR
	BUTION SYSTEI	VI 4	DISTRIBUTION	SYSTEM	A		Y				

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWSID PWS Name** Classification Population Owner Type Primary Source CT0280024 STATE POLICE FLEET MAINTENANCE NC 25 S GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections MILL HILL ROAD 1 Towns Served: COLCHESTER Water System Facility and Sampling Point Inventory Water **Total** Lead and Sampling Point Sampling Point Water System Facility Coliform System Copper Stage Facility ID ID Description Rule Rule Tier Asbestos WQP 2 DBPR Status DOWNSTREAM WITHIN 5 SERVICE CON Α UPSTREAM WITHIN 5 SERVICE CON Δ TREATMENT PLANT EP 00700 TREATMENT PLANT А 3 2 58246 WELL 1A WELL 1A А 58249 ATMOSPHERIC TANK **Contact Information** Name Organization Job Title Mr. Robert Cody CT Dept of Emergency Services Mailing Address Line One Mailing Address Line Two State Zip Code City 1111 Country Club Road Middletown 06457 CT **Business Phone** Extension Mobile Phone Emergency Phone Email Address Fax 860-685-8935 860-685-8475 860-250-7676 Robert.Cody@ct.gov Contact Role(s): Administrative Contact Name Job Title Organization Mr. James Rovella Despp Commissioner Mailing Address Line One Mailing Address Line Two State City Zip Code Despp 1111 Country Club Road Middletown CT 06457 **Business Phone** Extension Fax **Mobile Phone** Emergency Phone Email Address 860-258-5800 james.rovella@ct.gov Contact Role(s): Legal Contact Please note the following: 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample. 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.

3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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	Connecticut De	partmei	nt of	f Public	Health I	Drin	king	Water S	Section	
	Water Q	uality M	onit	oring a	nd Com	pliar	nce Se	chedule		
PWS ID	PWS Name	<i>J</i>		0						Primary Source
СТ0280044	DAY POND S.P./BEACHW	/ELL				NC		83	S	GW
Local Addre	ess (where applicable)			Service	Residenti	al Con	nmercial	Industrial	Combine	d Agricultural
DAY POND	ROAD			Connection	s 1					
Towns Serv	ed: COLCHESTER									
		Μ	onit	oring Req	Juiremen	ts				
Water Syst	tem Facility: DISTRIBUTIO	N SYSTEM (WSF I	D: 00600)						
Total Coli	form (3100)							1 r	outine (RT)	per quarter
Sampl	ing Point (Sampling Point ID)				Monitoring	g Perio	d Col	lection Perio	od Comp	liance Status
Select	from Inventory of Active Samp	ling Points			7/1/19 - 9				C	omplete
					4/1/20 - 6					
					7/1/20 - 9	/30/20)			
-	arameters (PPS)									per quarter
	ing Point (Sampling Point ID) from Inventory of Active Samp	ling Doints			Monitoring	-		lection Perio		liance Status
Select	from inventory of Active Samp	ang Points			7/1/19 - 9 4/1/20 - 6				Ľ	omplete
					7/1/20 - 9					
Water Syst	tem Facility: ENTRY POINT		0700)	I	771720 5	750720	,			
	nd Nitrite (NOX)	(1051 10.0	07007						1 routine (RT) per year
	ing Point (Sampling Point ID)				Monitorin	a Perio	d Col	lection Perio		liance Status
	POINT (3)				1/1/19 - 12	-		4/1-9/30		omplete
					1/1/20 - 12	2/31/20	0	4/1-9/30		
					1/1/21 - 12	2/31/22	1	4/1-9/30		
		Oth	ier C	ompliand	e Schedu	ıles				
Compliance	Schedule Activity			•		ue Date	2	Achieve	ed Date	
	START UP COMPLETION				4/	/1/2020)			
		Public	: Not	tification	Requirer	nent	s			
			1	ompliance	Notice	-		tification	PN Ce	rtification
Violation/S	ituation			Period	Tier		uired	Performed	Due to DPI	H Received
Distributior	Turbidity MCL Violation			/12 - 6/30/12		9/7/	/2012		9/17/2012	2
Physical Par	rameters M&R Violation		7/1,	/14 - 9/30/14	3	11/23	1/2015		12/1/2015	;
	Wate	r System I	Facil	ity and Sa	ampling F	Point	Inven	tory		
Water							Tot		nd	
	Nater System Facility		Point	Sampling Po Description			Colife			Stage
Facility ID		ID				Stat			er Aspesto	s WQP 2 DBPR
00600 1	DISTRIBUTION SYSTEM			DISTRIBUTIO		A A	Y			
		UPSTRE		WITHIN 5 SI		A				
00700	ENTRY POINT	3		ENTRY POIN		A				
	WELL	2		WELL		A				
		_	Con	tact Info	rmation					
Name				rganization	mation				Job Title	
Mr. David (`ooley			rganization eep-Engineer	ing Unit			Supv Civil E		
	fress Line One	Mailing 4		s Line Two	ть опп			City	State	Zip Code
163 Great H							Portland	,	CT	06480
Business		Fax	Mobi	ile Phone	Emergency P					
				-	0 1	-				

						Г				
PWS ID	PWS Name					Cla	ssification	Population	Owner Type	Primary Source
СТ0280044	DAY POND S.P.	/BEACHWELL					NC	83	S	GW
Local Address (w	vhere applicable)		Service	Resider	ntial	Commerci	al Industri	al Combin	ed Agricultural
DAY POND ROAI	D			Connections	1					
Towns Served: C	COLCHESTER				·			·		
860-342-2215	5	860-344-2560	860-2	05-7552	860-424	-333	3 david.	cooley@ct.g	ov	
Contact Role(s):	Administrative	e Contact, Legal Conta	act, Own	er						
Please note the	following:									
1. The residual d	lisinfectant conce	ntration must be measur	red at the	same location	and time	as ea	ch total colif	orm sample.		
2. If a Collection	Period is specifie	d, all water quality samp	les must	be collected du	ring the sp	pecifi	ed period.			
		al monitoring may be req VS on or after the genera								
		have any questions,								

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	Connecticut D)epartment	of Public H	lealth	Dr	inking	Wat	er S	Section	
		Quality Mor				0				
PWS ID	PWS Name	Quality Mol	into ing an							Primary Source
CT028008		REGATIONAL CHUR	СН		Clas	NC	25		P	GW
	ress (where applicable)		Service	Residen	tial	Commercia		strial	Combine	
	9 & CEMETARY ROAD		Connections	Residen	ciui	1			combine	
	ved: COLCHESTER					-				
		Mor	nitoring Requ	iromo	ntc					
Water Sy	stem Facility: DISTRIBUT I		• •	meme	1113	_	_		_	_
Total Col	liform (3100)							1 r	outine (RT) per quarter
Samp	oling Point (Sampling Point IL)		Monitori	ing P	eriod Co	ollection	Perio	od Com	oliance Status
Selec	t from Inventory of Active Sar	mpling Points		7/1/19 -	9/30)/19				Complete
				10/1/19 -	12/3	31/19				Complete
				1/1/20 -	3/31	L/20				Complete
				4/1/20 -						
				7/1/20 -	9/30	0/20				
-	Parameters (PPS)								-) per quarter
-	oling Point (Sampling Point IL			Monitori	-		ollection	Perio		oliance Status
Selec	t from Inventory of Active Sar	mpling Points		7/1/19 -						Complete
				10/1/19 -						Complete
				1/1/20 -						Complete
				4/1/20 -						
			1	7/1/20 -	9/30	0/20				
	stem Facility: ENTRY POI	NI (WSFID:007	00)							<i>.</i>
	And Nitrite (NOX)	-1								(RT) per year
	oling Point (Sampling Point IL)		Monitori	_		ollection	Perio		oliance Status
ENTR	Y POINT (3)			1/1/19 -						Complete
				1/1/20 -						Complete
				1/1/21 -						
			lotification R	equire	eme				1	
			Compliance	Notice		<u>Public No</u>				ertification
Violation/			Period	Tier		Required	Perfor	med		
Distributio	n Color MCL Violation		0/1/12 - 12/31/12			3/23/2013			4/2/2013	5
	Wat	er System Fa	cility and Sai	npling	Po	int Inve	ntory			
Water								ad aı		
System	Water System Facility		int Sampling Poi	nt				oppe		Stage
Facility ID		ID	Description			Julus		lie II	ler Asbesto	s WQP 2 DBP
00600	DISTRIBUTION SYSTEM						Y			
			AM WITHIN 5 SEF			A				
00700		UPSTREAN			N	A				
00700	ENTRY POINT	3	ENTRY POINT			A				
20529		2	WELL			A				
56863	TREATMENT PLANT									
		C	ontact Infori	nation						
Name			Organization						Job Title	5
Mr. Karl O	stberg		Westchester Cor	ng Church	۱		Minist	er		
Mailing Ac	Idress Line One	Mailing Add	ress Line Two				City		State	Zip Code
95 Comoto	ery Road					Colches	ster		СТ	06415
JJ Cemete			ahila Dhana E							

				• • • • •			P -			· · ·	
PWS ID	PV	/S Name					Cla	ssification	Population	Owner Type	Primary Source
СТ0280084	W	ESTCHESTER C	ONGREGATIONA	L CHURCH				NC	25	Р	GW
Local Address	(whe	re applicable)			Service	Resider	ntial	Commerc	ial Industri	al Combine	ed Agricultural
ROUTE 149 &	CEME	TARY ROAD			Connectio	ons		1			
Towns Served	: COL	CHESTER									·
DUSITIESS PTIC	one	EXTENSION	гах		e Phone	Emergency	урпс		Audress		
860-267-04	80					860-267	-048	0			
Contact Role(s	5): A	dministrative	Contact, Legal Co	ntact		÷					
Please note th	ne fol	owing:									
1. The residua	l disin	fectant concen	tration must be mea	asured at the	e same locati	ion and time a	as ea	ch total colif	orm sample.		
2. If a Collection	on Per	iod is specified,	all water quality sa	imples must	be collected	during the sp	pecifi	ed period.			
			monitoring may be S on or after the ger							0,	'

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

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S14 Westchester Rd. Business Phone Extension 860-267-2625 Contact Role(s): Administrative Contact	x Mobi							
	x Mobi	le Flione						
JIH WESILIESIEI RU.		ile Phone	Emergency	Phone	Email Ado	dress	I	
514 Westchester Rd.					Colcheste		CT	06415
Mailing Address Line One	Mailing Addres	s Line Two				City	State	Zip Code
Name Ms. Nancy Khybery	0	rganization					Job Title	
		tact Info	mation				Laboration	
	Cor	tact Info	rmation					
58331 TREATMENT PLANT	2	**		~				
20530 WELL	2	WELL		A				
00700 ENTRY POINT	UPSTREAM 3	ENTRY POIL		А А				
	DOWNSTREAM UPSTREAM		SERVICE CON					
00600 DISTRIBUTION SYSTEM			ON SYSTEM	A				
System Water System Facility Facility ID	Sampling Point ID	Description	า	Stat				Stage 5 WQP 2 DBF
Water					Tota			
Water	System Facil	ity and S	ampling	Point	Inven	tory		
			1/1/21 - 1	2/31/2	1			
			1/1/20 - 1	2/31/2	0		C	omplete
ENTRY POINT (3)			1/1/19 - 1	-			-	omplete
Sampling Point (Sampling Point ID)			Monitorin	g Perio	d Coll	ection Period	-	liance Status
Nitrate And Nitrite (NOX)							routine (RT) per year
Water System Facility: ENTRY POINT			//1/20-9	5/ SU/ 2U	,			
			4/1/20 - 6 7/1/20 - 9					
			1/1/20 - 3				C	omplete
			10/1/19 - 1					omplete
Select from Inventory of Active Samplin	ng Points		7/1/19 - 9					omplete
Sampling Point (Sampling Point ID)			Monitorin	-		ection Perio	-	liance Status
Physical Parameters (PPS)						1 rc		per quartei
			7/1/20 - 9	9/30/20)			
			4/1/20 - 6	5/30/20)			
			1/1/20 - 3					omplete
	0		10/1/19 - 1					omplete
Select from Inventory of Active Sampling	ng Points		7/1/19 - 9	-			-	omplete
Total Coliform (3100) Sampling Point (Sampling Point ID)			Monitorin	a Porio	d Coll	1 rc ection Period) per quarter <i>liance Status</i>
Water System Facility: DISTRIBUTION	SYSTEM (WSFT	D: 00600)				4	utine (DT)	
			quiremer	ITS				
owns Served: COLCHESTER		· .	•					
14 WESTCHESTER ROAD		Connection	ns		1			
ocal Address (where applicable)		Service	Resident	ial Cor	nmercial	Industrial	Combine	d Agricultura
CT0280094 KHYBERY KASSEM, MD				NC	2	26	Р	GW
WS ID PWS Name			(Classific	cation Po	opulation Ov	vner Type	Primary Sourc
Water Qu	ality Monit	coring a	nd Com	plia	nce Sc	chedule		
Connecticut Dep					0		ection	
	Tremant A	r punne		I I I I I I	VING	W JTAR S	action	

Schedule Generation Date: 3/10/2020

		· ·	<i>J</i>	0		1				
PWS ID	PWS Name					Class	ification	Population	Owner Type	Primary Source
СТ0280094	KHYBERY KASSE	M, MD					NC	26	Р	GW
Local Address (w	here applicable)			Service	Resider	ntial C	Commerci	ial Industri	al Combin	ed Agricultural
514 WESTCHEST	ER ROAD			Connectio	ins		1			
Towns Served: C	OLCHESTER			·					1	
Name				Organization					Job Titl	е
Mr. Kassem Khy	bery							Physician		
Mailing Address	Line One		Mailing Add	ress Line Two				City	State	Zip Code
514 West Cheste	er Road						Colche	ster	СТ	06415
Business Phone	e Extension	Fax	М	obile Phone	Emergency	y Phon	e Email /	Address		
860-267-2625		860-267-	0491				kkhybe	ery@aol.con	า	
Contact Role(s):	Legal Contact, C	Owner								
Diagon note the	fellowing									

Please note the following:

The residual disinfectant concentration must be measured at the same location and time as each total coliform sample. 1

If a Collection Period is specified, all water quality samples must be collected during the specified period. 2.

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.

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		ter Qua		omu	or mg a								D :	6
WS ID	PWS Name	C DI774							n Pop		Owr	ner Type		
CT0280104	PAPA-ZS & SON	-			Corruiso	Residen		IC	eial .	39	ial	P		GW
'13 MIDDLETOV	here applicable)				Service Connection			ommer 1	CIAI	Industri	Idi	Combine	eu Ag	gricultura
Towns Served: C								T						
owns served. C	OLCHESTER		M	onite	oring Red	nuiromo	nts							
Nater System	Facility: DIST					quirente	int5							
Total Coliform					D. 00000)		_			1	1 rou	tine (RT	') ner	quarte
	oint (Sampling I	Point ID)				Monitori	na Peri	iod	Collec	tion Pe		-		e Status
	Inventory of Act		Points			7/1/19 -	-						Compl	
	,		·										Compl	
						1/1/20 -							Compl	
						4/1/20 -	6/30/2	20						
						7/1/20 -	9/30/2	20						
Physical Parar										1	1 rou	tine (RT		-
	oint (Sampling I					Monitori	ng Per	iod	Collec	tion Pe	riod	Com	pliance	e <mark>Status</mark>
Select from	Inventory of Act	ive Sampling	Points			7/1/19 -							Compl	
						10/1/19 -							Compl	
						1/1/20 -						(Compl	ete
						4/1/20 -								
						7/1/20 -	9/30/2	20						
-	Facility: ENTR	Y POINT (V	VSF ID: 0	0700)									()	
Nitrate And N	• •								~ "			routine		-
	oint (Sampling F	oint ID)				Monitori 1/1/19 -	-		Collec	tion Pe	eriod			e Status
ENTRY POI	NT (3)												Compl	
						1/1/20 - 1/1/21 -						,	Compl	ele
		Water Sy	ustom (acili	ity and S				onto	n rv				
Water		vvalei S	ystemi	aciii	ity and S	amping	FUII		Total	Lead	and			
	r System Facility	,	Sampling	Point	Sampling F	Point			oliforn					Stage
Facility ID			. J		Description		Sto	atus	Rule			Asbesto	s WQ	
00600 DISTR	BUTION SYSTEM	Λ	4		DISTRIBUTI	ON SYSTEM		A	Y					
			DOWNST	REAM	WITHIN 5 S	SERVICE COM	۱. I	A						
			UPSTRE	AM	WITHIN 5 S	SERVICE COM	۱.	A						
00700 ENTR	Y POINT		3		ENTRY POI	NT		A						
20531 WELL			2		WELL			A						
58329 TREA	TMENT PLANT													
				Con	tact Info	rmation								
Name				0	rganization							Job Title	5	
Vir. Zisis N. Alve	ras			Pa	apa-Zs & Sor	ns Pizza								
Mailing Address	Line One		Mailing A	ddres	s Line Two					City		State	Zip	o Code
0 Hartford Rd								Saler				СТ	0	6420
Business Phon	e Extension	Fax		Mobi	le Phone	Emergency	Phone	e Emai	il Addr	ess				
860-267-1518														
Contact Role(s):	Administrative	Contact, Leg	al Contac	t										

Schedule Generation Date: 3/10/2020

		~	<i>J</i>	0		1				
PWS ID	PWS Name					Cla	assification	Population	Owner Type	Primary Source
СТ0280104	PAPA-ZS & SONS	PIZZA					NC	39	Р	GW
Local Address (w	here applicable)			Service	Resi	dential	Commerc	ial Industri	ial Combin	ed Agricultural
713 MIDDLETOW	/N RD			Connect	tions		1			
Towns Served: C	OLCHESTER									÷
Name				Organizatio	n				Job Titl	e
Dr. Kassem M Kł	yberry									
Mailing Address	Line One		Mailing Add	ress Line Two	0			City	State	Zip Code
514 Westchester	Rd						Colche	ester	СТ	06415
Business Phone	e Extension	Fax	M	obile Phone	Emerge	ency Ph	one Email	Address		
Contact Role(s):	Legal Contact, O	wner					·			
Please note the	following:									

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.

If a Collection Period is specified, all water quality samples must be collected during the specified period. 2.

Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related 3. 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.

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	Connecticut De	^				0			
	Water Q	uality Mon	itoring an	d Con	iplia	nce So	chedul	e	
PWS ID	PWS Name				Classifi	cation P	opulation	Owner Type	Primary Source
СТ0280114	STRIP MALL ON MIDDLE	TOWN ROAD			N	2	25	Р	GW
Local Addr	ess (where applicable)		Service	Residen	tial Cor	nmercial	Industria	al Combin	ed Agricultura
738 MIDDL	ETOWN ROAD		Connections			1			
Towns Serv	ved: COLCHESTER								
		Moni	toring Requ	iireme	nts				
Water Sys	stem Facility: DISTRIBUTIO	N SYSTEM (WSF	ID: 00600)						
Total Col	iform (3100)						1	routine (R ⁻	() per quarter
Samp	ling Point (Sampling Point ID)			Monitori	ng Perio	d Col	lection Per	iod Com	pliance Status
Select	from Inventory of Active Samp	ling Points		7/1/19 -	9/30/19)			Complete
				10/1/19 -	12/31/2	19			Complete
				1/1/20 -	3/31/20)			Complete
				4/1/20 -	6/30/20)			
				7/1/20 -	9/30/20)			
-	Parameters (PPS)						1	routine (R	「) per quarter
	ling Point (Sampling Point ID)			Monitori			lection Per	iod Com	pliance Status
Select	from Inventory of Active Samp	ling Points		7/1/19 -					Complete
				10/1/19 -					Complete
				1/1/20 -					Complete
				4/1/20 -					
				7/1/20 -	9/30/20)			
Water Sys	stem Facility: ENTRY POINT	(WSF ID: 0070	D)						
	nd Nitrite (NOX)								(RT) per year
	ling Point (Sampling Point ID)			Monitori			lection Per		pliance Status
ENTRY	Y POINT (3)			1/1/19 -					Complete
				1/1/20 -					Complete
				1/1/21 -					
		Public No	otification R	equire	ement	S			
			Compliance	Notice	P	ublic Not	tification	PN C	ertification
Violation/S	Situation		Period	Tier	Red	quired	Performed	d Due to Di	PH Received
	rameters M&R Violation		1/19 - 3/31/19	3	5/27	7/2020		6/6/202	0
Total Colifo	orm M&R Violation	1/	1/19 - 3/31/19	3	5/27	7/2020		6/6/202)
	Wate	r System Fac	ility and Sar	npling	Point	Inven	tory		
Water						Tot	al Lead	and	
	Water System Facility	Sampling Poir	nt Sampling Poi	nt		Colife			Stage
Facility ID		ID	Description		Stat	tus Ru	le Rule	Tier Asbest	os WQP 2 DBP
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	SYSTEM	A	Y			
			M WITHIN 5 SEF						
		UPSTREAM	WITHIN 5 SEF	VICE CON	N A				
00700	ENTRY POINT	3	ENTRY POINT		A				
20532	WELL	2	WELL		A				
		Co	ntact Inform	nation					
Name			Organization					Job Titl	e
	el Malinosky		Quik Stop Conve	nience St	ore		Owner		
	dress Line One	Mailing Addro			-		City	State	Zip Code
268 Sunflo		5				Marco Is		FL	34145
Business	Dhono Extension formation has been provided to belo	Eav Ma	hilo Dhono Er	noraoncu	Dhana	Email Ac	Idrocc		

			C	<u> </u>	0		1				1
PWS ID	P۷	VS Name					Clas	ssification	Population	Owner Type	Primary Source
СТ0280114	ST	RIP MALL ON	MIDDLETOWN	ROAD				NC	25	Р	GW
Local Addre	ss (whe	re applicable)			Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
738 MIDDL	8 MIDDLETOWN ROAD					ns		1			
Towns Serve	ed: COL	CHESTER					·		·		
Business	none	Extension	гах		le Phone	Linergenc	у впо		Audress		
239-394-	7363		239-394-736	63				75Ben	z@comcast.	net	
Contact Rol	e(s): A	dministrative	Contact, Legal	Contact, Own	ner						
Please note	the fol	lowing:									
1. The resid	dual disir	fectant concent	ration must be r	neasured at the	e same locatio	on and time a	as eac	ch total colif	orm sample.		
2. If a Colle	ction Pe	riod is specified,	all water quality	samples must	be collected	during the sp	pecifie	ed period.			
	-		monitoring may S on or after the								and any related chedule.

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

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	Water Quality Mo	moring an		ipnance	SCI	icuui	C		
PWS ID	PWS Name			Classification	n Pop	oulation	Ow	ner Type Pr	imary Sour
T0280124	TWO BROTHERS WINE & SPIRIT			NC		37		Р	GW
ocal Address (w	vhere applicable)	Service	Residen	tial Comme	rcial	Industri	al	Combined	Agricultur
11 MIDDLETOV	WN ROAD	Connections		1					
owns Served: C	COLCHESTER								
	Мо	nitoring Requ	lireme	nts					
Vater System	Facility: DISTRIBUTION SYSTEM (W	/SF ID: 00600)							
Total Coliform						1	roi	utine (RT) p	per quarte
	Point (Sampling Point ID)		Monitori	ng Period	Colle	- ction Pe			ance Status
	Inventory of Active Sampling Points			7/31/19				-	mplete
Total Coliform			.,_,	.,,			1 ro	utine (RT)	-
	Point (Sampling Point ID)		Monitori	ng Period	Colle	ction Pe		• •	ance Status
	Inventory of Active Sampling Points			11/30/19					
				12/31/19				Со	mplete
				1/31/20					mplete
				2/29/20					mplete
				3/31/20					•
				4/30/20					
				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					
Physical Parar	meters (PPS)					1	rou	utine (RT) p	per quarte
Sampling P	Point (Sampling Point ID)		Monitori	ng Period	Colle	ction Pe	riod	Complie	ance Status
Select from	Inventory of Active Sampling Points		7/1/19 -	9/30/19				Со	mplete
Physical Parar	meters (PPS)						1 ro	utine (RT)	per montl
Sampling P	Point (Sampling Point ID)		Monitori	ng Period	Colle	ction Pe	riod	Complie	ance Status
Select from	n Inventory of Active Sampling Points		11/1/19 -	11/30/19					
			12/1/19 -	12/31/19				Со	mplete
			1/1/20 -	1/31/20				Со	mplete
			2/1/20 -	2/29/20				Со	mplete
			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					
Vater System	Facility: ENTRY POINT (WSF ID: 002	700)							
Nitrate And N	litrite (NOX)						1	routine (R	T) per yea
Sampling P	Point (Sampling Point ID)		Monitori	ng Period	Colle	ction Pe	riod	Complie	ance Status
	NT (3)		1/1/19 -	12/31/19				Cor	mplete
ENTRY POI			1/1/20	1 2/21/20				Col	mplete
ENTRY POI			1/1/20-	12/31/20				001	

Co	nnoctic	ut Dopo	rtmont	of Dublic	Hoolth	Drir	lzinc	, τ <i>λ</i> 7.	ator S	oction	
			rtment o				<u> </u>	-			
	Wa	ter Qual	lity Mon	itoring a							
PWS ID PW	/S Name					Classifi	cation	Popu	lation Ow	ner Type P	rimary Source
CT0280124 TW	O BROTHERS	WINE & SPI	RIT			N	C	3	7	Р	GW
Local Address (wher	re applicable)			Service	Resident	ial Co	nmerci	al In	dustrial	Combined	Agricultural
711 MIDDLETOWN	ROAD			Connectio	ons		1				
Towns Served: COLO	CHESTER			÷		·					
			Moni	toring Re	quiremer	nts					
Water System Fac	ility: WELL	(WSF ID: 2	0533)		-						
E. Coli (3014)									1 ro	utine (RT)	per quarter
Sampling Poin	t (Sampling P	oint ID)			Monitorir	ng Perio	od C	ollect	ion Period		iance Status
WELL (2)					10/1/19 -	12/31/	19			Co	omplete
					1/1/20 -						mplete
					4/1/20 -						
					7/1/20 -						
		Water Sy	stem Fac	ility and S				nto	ſy		
Water		-		-			Тс	otal	Lead and	1	
System Water Sy	stem Facility	9	Sampling Poin	nt Sampling	Point		Coli	iform	Copper		Stage
Facility ID			ID	Descriptio	n	Sta	tus R	lule	Rule Tie	r Asbestos	WQP 2 DBPR
00600 DISTRIBU	ITION SYSTEM	1	4	DISTRIBUT	ION SYSTEM	А		Y			
			DOWNSTREAM	M WITHIN 5	SERVICE CON	А					
			UPSTREAM	WITHIN 5	SERVICE CON	A					
00700 ENTRY P0	DINT		3	ENTRY POI	INT	А					
20533 WELL			2	WELL		A					
56285 TREATMI	ENT PLANT										
			Со	ntact Info	ormation						
Name				Organization						Job Title	
Mr. Ray Beckus				Allstate Agen	t						
Mailing Address Line	e One		Mailing Addre	ess Line Two				Ci	ty	State	Zip Code
711 Middletown Ro	ad						Colche	ster		СТ	06415
Business Phone	Extension	Fax	Мо	bile Phone	Emergency	Phone	Email A	Addres	SS	I	
Contact Role(s): O	wner				1						
Name				Organization						Job Title	
Mr. Zisis Alevras								Ow	ner		
Mailing Address Line	e One		Mailing Addre	ess Line Two				Ci		State	Zip Code
711 Middletown Rd			0				Colche			СТ	06415
Business Phone	Extension	Fax	Мо	bile Phone	Emergency	Phone	Email A	Addres	SS		
Contact Role(s): Le	gal Contact, (Owner									
Name				Organization						Job Title	
Mr. Alex Alevras				Two Brothers	Wine And Sp	orit					
Mailing Address Line	e One		Mailing Addre	ess Line Two				Ci	ty	State	Zip Code
713 Middletown Ro	bad						Colche	ster		СТ	06415
Business Phone	Extension	Fax	Мо	bile Phone	Emergency	Phone	Email A	Addres	SS		
860-267-4014					860-267-2	2478	alexale	vras@	sbcgloba	.net	
Contact Role(s): Ac	ministrative	Contact, Leg	al Contact, Ov	wner							

	C J	0		L			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
СТ0280124	TWO BROTHERS WINE & SPIRIT			NC	37 P GW		
Local Address	(where applicable)	Service	Residen	tial Commerc	ial Industri	al Combine	ed Agricultura
711 MIDDLET	OWN ROAD	Connections		1			
Towns Served	: COLCHESTER						·
Please note t	he following:						
1. The residu	al disinfectant concentration must be measure	d at the same location	and time a	as each total coli	form sample.		
2. If a Collect	ion Period is specified, all water quality sample	es must be collected du	ring the sp	ecified period.			
	; on results, additional monitoring may be requ dence sent by the DWS on or after the generati			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0,	,

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

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	Connecticut Departm	nent of Public H	ealth	Dr	rinking	Water	Section	
	Water Ouality	Monitoring and	d Com	lgı	iance S	chedule	Ē	
PWS ID	PWS Name	0					Owner Type P	rimary Source
СТ0280144	HUNG WON II, LLC				NC	25	P	GW
Local Address ((where applicable)	Service	Resident	tial	Commercia	l Industria	l Combined	Agricultural
232 NEW LONE		Connections			1			
Towns Served:	COLCHESTER							
		Monitoring Requ	ireme	nts				
Water System	n Facility: DISTRIBUTION SYSTE							
Total Colifor						1	routine (RT)	per quarter
	Point (Sampling Point ID)		Monitorii	_		llection Peri		ance Status
Select from	m Inventory of Active Sampling Poin		7/1/19 -					mplete
			10/1/19 -		-			mplete
			1/1/20 -				Co	mplete
			4/1/20 -					
			7/1/20 -	9/30	0/20			
•	ameters (PPS)						routine (RT)	• •
	Point (Sampling Point ID)		Monitorii	_		llection Peri		ance Status
Select from	m Inventory of Active Sampling Poin		7/1/19 -					mplete
			1/1/19 -					mplete
			1/1/20 -				LC	mplete
			4/1/20 - 7/1/20 -		-			
Mator Systom	n Facility: ENTRY POINT (WSF I	0,00700)	//1/20-	9/30	5/20			
-	, , , , , , , , , , , , , , , , , , , ,	D. 00700j					1	
	Nitrite (NOX) Point (Sampling Point ID)		Monitoriı	na D	ariad Ca	llection Peri	1 routine (F	ance Status
ENTRY PO			1/1/19 - 1	_				mplete
ENTRITO	(S)		1/1/20 - 1					mplete
			1/1/21 - 1		-			Inpiete
Water System	n Facility: WELL (WSF ID: 2053		1/1/21 .	12/5	1/21			
E. Coli (3014		,				1	routine (RT)	ner quarter
•	Point (Sampling Point ID)		Monitoriı	na P	eriod Co	llection Peri	• •	ance Status
WELL (2)			7/1/19 -	_				mplete
			10/1/19 -					mplete
			1/1/20 -					mplete
			4/1/20 -					
			7/1/20 -					
		Other Compliance						
Compliance Sc	hedule Activity		L	Due	Date	Achiev	ed Date	
	ANITARY SURVEY		9	/27/	2015			
	Pu	blic Notification R	equire	me	ents			
		Compliance	Notice		Public No	tification	PN Cer	ification
Violation/Situe		Period	Tier		Required	Performed		Received
	neters M&R Violation	1/1/19 - 3/31/19	3		5/27/2020		6/6/2020	
	M&R Violation	1/1/19 - 3/31/19	3	_	5/27/2020		6/6/2020	
E. Coli M&R Vio	olation	1/1/19 - 3/31/19	3	5	5/27/2020		6/6/2020	

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWS Name** Classification Population Owner Type Primary Source PWS ID Р CT0280144 HUNG WON II, LLC NC 25 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 232 NEW LONDON ROAD 1 Towns Served: COLCHESTER Water System Facility and Sampling Point Inventory Water **Total** Lead and Sampling Point Sampling Point Water System Facility Coliform System Copper Stage Facility ID ID Description Rule Tier Asbestos WQP 2 DBPR Rule Status 00600 DISTRIBUTION SYSTEM 4 DISTRIBUTION SYSTEM Υ Α DOWNSTREAM WITHIN 5 SERVICE CON Δ UPSTREAM WITHIN 5 SERVICE CON А 00700 ENTRY POINT 3 ENTRY POINT Α 2 WELL А 20535 WELL TREATMENT PLANT 57419 **Contact Information** Organization Job Title Name Mr. Chun-Oi (Jim) Chan Hung Wong li, LLC Owner Mailing Address Line One Mailing Address Line Two City State Zip Code 2 Serafin Terrace СТ 06424 East Hampton **Business Phone** Extension Fax **Mobile Phone** Emergency Phone Email Address 860-267-8822 860-205-9008 Contact Role(s): Legal Contact, Owner Name Organization Job Title Ms. Jennifer Marozzi Fresca Bar And Grill Owner / Manager Mailing Address Line One Mailing Address Line Two City State Zip Code Fresca Bar And Grill 232 New London Rd Colchester CT 06415 **Business Phone Mobile Phone** Emergency Phone Email Address Extension Fax 860-531-9234 jennifer.marozzi@yahoo.com 860-918-1302 Contact Role(s): Administrative Contact Please note the following: The residual disinfectant concentration must be measured at the same location and time as each total coliform sample. 1. 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.

3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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Water Quality Monitoring a		Drinki	0			
	nd Con	1				
PWS ID PWS Name			on Po			Primary Source
CT0280164 SALMON RIVER STATE PARK		NC		25	S	GW
Local Address (where applicable) Service	Residen	tial Comme	ercial	Industrial	Combined	d Agricultural
GULF ROAD Connection	IS	1				
Towns Served: COLCHESTER						
Monitoring Red	quireme	nts				
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)						
Total Coliform (3100)				1 r	outine (RT)	per quarter
Sampling Point (Sampling Point ID)	Monitori	ng Period	Coll	ection Perio	od Comp	liance Status
Select from Inventory of Active Sampling Points	7/1/19 -	9/30/19			C	omplete
	10/1/19 -	12/31/19			C	omplete
	1/1/20 -	3/31/20				
	4/1/20 -	6/30/20				
	7/1/20 -	9/30/20				
Physical Parameters (PPS)				1 r	outine (RT)	per quarter
Sampling Point (Sampling Point ID)	Monitori	ng Period	Coll	ection Perio	od Comp	liance Status
Select from Inventory of Active Sampling Points	7/1/19 -	9/30/19			C	omplete
	10/1/19 -	12/31/19			C	omplete
		3/31/20				
	4/1/20 -	6/30/20				
	7/1/20 -	9/30/20				
Water System Facility: ENTRY POINT (WSF ID: 00700)						
Nitrate And Nitrite (NOX)					-	RT) per year
Sampling Point (Sampling Point ID)		ng Period	Coll	ection Perio	od Comp	liance Status
ENTRY POINT (3)	1/1/19 -	12/31/19				
					C	omplete
		12/31/20			С	omplete
	1/1/21 -	12/31/21			C	omplete
Public Notification	1/1/21 -	12/31/21			C	omplete
Public Notification	1/1/21 -	12/31/21 ments	c Noti	fication		omplete rtification
	1/1/21 - Require	12/31/21 ments		fication Performed	PN Ce	rtification
Violation/SituationCompliance PeriodTotal Coliform M&R Violation7/1/15 - 9/30/11	1/1/21 - Require Notice Tier	12/31/21 ments <u>Publi</u>	ed	-	PN Ce	r <u>tification</u> 1 Received
Violation/Situation Compliance	1/1/21 - Require Notice Tier 5 2	12/31/21 ments Publi Require	ed	-	<u>PN Ce</u> Due to DPF	r <u>tification</u> I Received
Violation/SituationCompliance PeriodTotal Coliform M&R Violation7/1/15 - 9/30/11	1/1/21 - Require Notice Tier 5 2 5 3	12/31/21 ments Publi Require 1/17/20 12/17/20	ed) 16 016	Performed	<u>PN Ce</u> Due to DPF 1/27/2016	r <u>tification</u> I Received
Violation/SituationCompliance PeriodTotal Coliform M&R Violation7/1/15 - 9/30/11Physical Parameters M&R Violation7/1/15 - 9/30/11	1/1/21 - Require Notice Tier 5 2 5 3	12/31/21 ments Publi Require 1/17/20 12/17/20	ed) 16 016	Performed	<u>PN Cer</u> Due to DPH 1/27/2016 12/27/2010	r <u>tification</u> I Received
Violation/SituationCompliance PeriodTotal Coliform M&R Violation7/1/15 - 9/30/11Physical Parameters M&R Violation7/1/15 - 9/30/11Water System Facility and SWater System Water System FacilitySampling Point Sampling F	1/1/21 - Require Notice Tier 5 2 5 3 ampling Point	12/31/21 ments Publi Require 1/17/20 12/17/20 Point In	ed 016 016 ven t	Performed tory Il Lead ar rm Coppe	<u>PN Ce</u> Due to DPF 1/27/2016 12/27/2010 nd	r <u>tification</u> 1 Received
Violation/SituationCompliance PeriodTotal Coliform M&R Violation7/1/15 - 9/30/11Physical Parameters M&R Violation7/1/15 - 9/30/11Water System Facility and SWater System Facility and S	1/1/21 - Require Notice Tier 5 2 5 3 ampling Point	12/31/21 ments Publi Require 1/17/20 12/17/20 Point In	ed) 16 016 016 Ven t <i>Tota</i>	Performed tory Il Lead ar rm Coppe	<u>PN Ce</u> Due to DPF 1/27/2016 12/27/2010 nd	r <u>tification</u> 1 Received
Violation/SituationCompliance PeriodTotal Coliform M&R Violation7/1/15 - 9/30/11Physical Parameters M&R Violation7/1/15 - 9/30/11Water System Facility and SWater System Water System FacilitySampling Point Sampling F	1/1/21 - Require Notice Tier 5 2 5 3 ampling Point	12/31/21 ments Publi Require 1/17/20 12/17/20 Point In Status	ed 016 016 Ven t Tota Colifo	Performed tory Il Lead ar rm Coppe	<u>PN Ce</u> Due to DPF 1/27/2016 12/27/2010 nd	r <u>tification</u> 1 Received
Violation/SituationCompliance PeriodTotal Coliform M&R Violation7/1/15 - 9/30/11Physical Parameters M&R Violation7/1/15 - 9/30/11Water System Facility and SWater System Water System FacilitySampling PointSampling PFacility IDID00600DISTRIBUTION SYSTEM4DISTRIBUTI DOWNSTREAMDOWNSTREAMWITHIN 5 S	1/1/21 - Require Notice Tier 5 2 5 3 ampling point ON SYSTEM	12/31/21 ments Publi Require 1/17/20 12/17/20 Point In Status A	ed 016 016 Vent Tota Colifol Rule	Performed tory Il Lead ar rm Coppe	<u>PN Ce</u> Due to DPF 1/27/2016 12/27/2010 nd	r <u>tification</u> I Received
Violation/SituationCompliance PeriodTotal Coliform M&R Violation7/1/15 - 9/30/11Physical Parameters M&R Violation7/1/15 - 9/30/11Water System Facility and SWaterSystem Water System FacilitySystem Water System FacilitySampling PointFacility IDID00600DISTRIBUTION SYSTEM4DISTRIBUTION	1/1/21 - Require Notice Tier 2 3 ampling point ON SYSTEM ERVICE COM	12/31/21 ments Publi Require 1/17/20 12/17/20 Point In Status A N A	ed 016 016 Vent Tota Colifol Rule	Performed tory Il Lead ar rm Coppe	<u>PN Ce</u> Due to DPF 1/27/2016 12/27/2010 nd	r <u>tification</u> 1 Received
Violation/SituationCompliance PeriodTotal Coliform M&R Violation7/1/15 - 9/30/11Physical Parameters M&R Violation7/1/15 - 9/30/11Water System Facility and SWater System Water System FacilitySampling PointSampling PointFacility IDID00600DISTRIBUTION SYSTEM4DISTRIBUTI DOWNSTREAMDOWNSTREAMWITHIN 5 S	1/1/21 - Require Notice Tier 5 2 3 ampling coint ON SYSTEM ERVICE COM	12/31/21 ments Publi Require 1/17/20 12/17/20 Point In Status A N A	ed 016 016 Vent Tota Colifol Rule	Performed tory Il Lead ar rm Coppe	<u>PN Ce</u> Due to DPF 1/27/2016 12/27/2010 nd	r <u>tification</u> 1 Received
Violation/Situation Compliance Period Total Coliform M&R Violation 7/1/15 - 9/30/11 Physical Parameters M&R Violation 7/1/15 - 9/30/11 Water System Facility Sampling Point Sampling F Violation 1D Description 00600 DISTRIBUTION SYSTEM 4 DISTRIBUTI DOWNSTREAM WITHIN 5 SUPSTREAM WITHIN 5	1/1/21 - Require Notice Tier 5 2 3 ampling coint ON SYSTEM ERVICE COM	12/31/21 ments <u>Publi</u> <u>Require</u> 1/17/20 12/17/20 Point In <u>Status</u> A N A N A	ed 016 016 Vent Tota Colifol Rule	Performed tory Il Lead ar rm Coppe	<u>PN Ce</u> Due to DPF 1/27/2016 12/27/2010 nd	r <u>tification</u> 1 Received
Violation/SituationCompliance PeriodTotal Coliform M&R Violation7/1/15 - 9/30/11Physical Parameters M&R Violation7/1/15 - 9/30/11Water System Facility and SWaterSampling PointSampling FSystemWater System FacilityIDPacility IDIDDescription00600DISTRIBUTION SYSTEM4DISTRIBUTIDOWNSTREAMWITHIN 5 SUPSTREAMWITHIN 5 S00700ENTRY POINT3ENTRY POINT	1/1/21 - Require Notice Tier 5 2 3 ampling coint CON SYSTEM ERVICE COM ERVICE COM	12/31/21	ed 016 016 Vent Tota Colifol Rule	Performed tory Il Lead ar rm Coppe	<u>PN Ce</u> Due to DPF 1/27/2016 12/27/2010 nd	r <u>tification</u> 1 Received
Violation/Situation Compliance Period Total Coliform M&R Violation 7/1/15 - 9/30/19 Physical Parameters M&R Violation 7/1/15 - 9/30/19 Water System Facility and S Water Sampling Point Sampling P System Water System Facility Sampling Point Sampling P 00600 DISTRIBUTION SYSTEM 4 DISTRIBUTION 00600 DISTRIBUTION SYSTEM 4 DISTRIBUTION 00700 ENTRY POINT 3 ENTRY POINT 22902 WELL #1 2 WELL #1	1/1/21 - Require Notice Tier 5 2 3 ampling coint CON SYSTEM ERVICE COM ERVICE COM	12/31/21	ed 016 016 Vent Tota Colifol Rule	Performed tory Il Lead ar rm Coppe	PN Ce Due to DPF 1/27/2016 12/27/2010 nd r fer Asbestos	r <u>tification</u> 1 Received
Violation/SituationCompliance PeriodTotal Coliform M&R Violation7/1/15 - 9/30/11Physical Parameters M&R Violation7/1/15 - 9/30/11Water System Facility and SWaterSystem Water System FacilitySampling PointSampling PFacility IDIDDescription00600DISTRIBUTION SYSTEM4DISTRIBUTIDOWNSTREAMWITHIN 5 SUPSTREAMWITHIN 5 S00700ENTRY POINT3ENTRY POIN22902WELL #12WELL #1Contact InfoNameOrganization	1/1/21 - Require Notice Tier 5 2 3 ampling coint CON SYSTEM ERVICE CON ERVICE CON NT	12/31/21	ed 016 016 Vent Tota Colifor Rule Y	Performed tory Il Lead ar rm Coppe e Rule Ti	PN Ce Due to DPF 1/27/2016 12/27/2010 nd rr fer Asbestos	r <u>tification</u> 1 Received
Violation/SituationCompliance PeriodTotal Coliform M&R Violation7/1/15 - 9/30/11Physical Parameters M&R Violation7/1/15 - 9/30/11Water System Facility and SWaterSampling PointSampling FSystemWater System FacilitySampling PointSampling FFacility IDIDDescription00600DISTRIBUTION SYSTEM4DISTRIBUTIDOWNSTREAMWITHIN 5 SUPSTREAMWITHIN 5 S00700ENTRY POINT3ENTRY POIN22902WELL #12WELL #1Contact InfoNameOrganizationMr. David CooleyDeep-Enginee	1/1/21 - Require Notice Tier 5 2 3 ampling coint CON SYSTEM ERVICE CON ERVICE CON NT	12/31/21	ed 016 016 Vent Tota Colifor Rule Y	Performed tory Il Lead ar rm Coppe	PN Ce Due to DPF 1/27/2016 12/27/2010 nd rr fer Asbestos	rtification H Received
Violation/SituationCompliance PeriodTotal Coliform M&R Violation7/1/15 - 9/30/11Physical Parameters M&R Violation7/1/15 - 9/30/11Water System Facility and SWaterSystem Water System FacilitySampling PointSampling PFacility IDIDDescription00600DISTRIBUTION SYSTEM4DISTRIBUTIDOWNSTREAMWITHIN 5 SUPSTREAMWITHIN 5 S00700ENTRY POINT3ENTRY POIN22902WELL #12WELL #1Contact InfoNameOrganization	1/1/21 - Require Notice Tier 5 2 3 ampling coint CON SYSTEM ERVICE CON ERVICE CON NT	12/31/21 ments <u>Publi</u> <u>Require</u> 1/17/20 12/17/20 Point In Status A N A N A N A A A A	ed 016 016 Vent Tota Colifor Rule Y	Performed tory I Lead ar rm Coppe e Rule Ti	PN Cen Due to DPH 1/27/2016 12/27/2010 nd rr fer Asbestos Job Title	r <u>tification</u> I Received

				0						
PWS ID	PWS Name					Cla	ssification	Population	Owner Type	Primary Source
СТ0280164	SALMON RIVER	STATE PARK				NC	25	S GW Istrial Combined Agricultu	GW	
Local Address (v	vhere applicable)		Service Connections Residential Commercial Industrial Combined Agricultural Noble Fride Emergency Fride Email Address 560 860-205-7552 860-424-3333 david.cooley@ct.gov al Contact, Owner Emergency Fride Emergency Fride							
GULF ROAD		N RIVER STATE PARK NC 25 S GW olicable) Service Residential Commercial Industrial Combined Agricultural connections 1 Industrial Combined Agricultural TER Industrial NOULE FILORE Entergency Filore Entergency Filore Entergency Filore Entergency Filore 860-344-2560 860-205-7552 860-424-3333 david.cooley@ct.gov Image: Contact, Legal Contact, Owner								
Towns Served: 0	COLCHESTER									
Dusiness Filor	LATENSION	гах	MODII	ernone	Lineigenc	y Pin		Huuress		
860-342-221	5	860-344-2560	860-2	05-7552	860-424	-333	3 david.	cooley@ct.g	ov	
Contact Role(s):	Administrative	Contact, Legal Cont	act, Own	er						
Please note the	following:									
1. The residual of	lisinfectant concent	tration must be measu	red at the	e same locat	ion and time	as ea	ch total colif	orm sample.		
2. If a Collection	Period is specified,	, all water quality samp	oles must	be collected	I during the s	pecifi	ed period.			
3. Depending or	results, additional	monitoring may be re	quired (i.e	e. repeat or o	confirmation	samp	oles). This sc	hedule is subj	ect 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.

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	Со	nnecticut Depa	artment	of Public	Health	Drin	king	Water	Sect	tion		
		Water Qua	ality Mon	itoring a	ind Com	plia	nce So	chedul	e			
PWS ID	PW	S Name		0		1		opulation		Type P	rimary	Source
СТ028019	94 MA	RIAS PIZZA PALACE REST	TAURANT			N		25	Р		G١	
Local Add	ress (wher	e applicable)		Service	Resident	ial Co	mmercial	Industria	al Co	mbined	Agri	cultural
744 MIDD	LETOWN F	OAD		Connectio	ns		1					
Towns Sei	rved: COLC	HESTER										
			Mon	itoring Re	auiremer	nts						
Water Sy	/stem Faci	lity: DISTRIBUTION S		-	44							
	liform (3	-						1	routin			
-		(Sampling Point ID)			Monitorir	-		lection Per	riod	Compl		
Selec	ct from Inv	entory of Active Samplin	g Points		7/1/19 -						mplet	
					10/1/19 -						mplet	
					1/1/20 -					Co	mplet	е
					4/1/20 -							
					7/1/20 -	9/30/20	0					
-	Paramet								routin	• •	• •	
	_	(Sampling Point ID)			Monitorir	-		lection Pe	riod	Compl		
Selec	ct from Inv	entory of Active Samplin	g Points		7/1/19 -						mplet	
					10/1/19 -						mplet	
					1/1/20 -					Сс	mplet	е
					4/1/20 -							
				-1	7/1/20 -	9/30/20	0					
		lity: ENTRY POINT (WSF ID: 0070	0)								
	And Nitrit									utine (F		-
		(Sampling Point ID)			Monitorir			lection Pe	riod	Compl		
ENTE	RY POINT (3	3)			1/1/19 - 1					Сс	mplet	e
					1/1/20 - 1							
					1/1/21 - 1		!1					
			Other	Complian	ce Sched	ules						
Complian	ce Schedul	e Activity			Ľ	Due Dat	e	Achie	ved Dat	te		
CROSS CO	NNECTION	SURVEY REPORT			3	3/1/202	0					
		Water S	System Fac	ility and S	ampling	Point	t Inven	torv				
Water					10		Tot	•	and			
System	Water Sy	stem Facility	Sampling Poi	nt Sampling	Point		Colifo					Stage
Facility ID)		ID	Descriptio	n	Sta	tus Rul	le Rule	Tier As	sbestos	WQP	2 DBPR
00600	DISTRIBU	TION SYSTEM	4	DISTRIBUT	ION	A	۱					
			DOWNSTREA	M WITHIN 5 S	SERVICE CON	I A	\					
			UPSTREAM	WITHIN 5	SERVICE CON	I A	۱					
00700	ENTRY PC	DINT	3	ENTRY POI	NT	А	۱					
49127	WELL 1		2	WELL 1		А	\					
58241	TREATME	NT PLANT										
001.1	-		Co	ontact Info	ormation							
										1		
Name				Organization					10	b Title		
Name	a Sourvalis			Organization Maria's Pizza	Palace				10	b litle		
Name Ms. Maria	a Sourvalis ddress Line	One	Mailing Addr	Maria's Pizza	Palace			City		State	Zip C	Code
Name Ms. Maria Mailing Ad		One	Mailing Addr	Maria's Pizza	Palace		Colchest				Zip C 064	
Name Ms. Maria Mailing Ad 744 Midd	ddress Line	One Extension Fax		Maria's Pizza	Palace Emergency	Phone		er		State		

		tor guid				P			Ŭ	
PWS ID	PWS Name					Clas	sification	Population	Owner Type	Primary Source
СТ0280194 І	MARIAS PIZZA F	ALACE REST	AURANT				NC	25	Р	GW
Local Address (wi	nere applicable)			Service	Resider	ntial	Commerci	al Industri	al Combin	ed Agricultural
744 MIDDLETOW	N ROAD			Connection	S		1			
Towns Served: CO	DLCHESTER				·	·		·	·	
860-267-8722					860-267	-8722				
Contact Role(s):	Administrative	Contact, Leg	gal Contact, O	wner						
Name				Organization					Job Tit	e
Mr. Athanasoula	Sourvalis			Maria's Pizza				Property	Owner	
Mailing Address L	ine One		Mailing Addr	ess Line Two				City	State	Zip Code
744 Middletown	Rd						Colche	ster	СТ	06415
Business Phone	Extension	Fax	Mc	bile Phone	Emergency	/ Pho	ne Email /	Address	·	
Contact Role(s):	Legal Contact (Owner								
		Jwilei								
Please note the f	ollowing:									
1. The residual dis	sinfectant concen	tration must b	e measured at	the same locatio	n and time a	as eac	h total colif	orm sample.		
2. If a Collection F	Period is specified	, all water qua	lity samples mu	ust be collected d	uring the sp	ecifie	d period.			

3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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	Connecticut I	^					<u> </u>			ction		
	Water	Quality Monit	oring and	d Com	pli	anc	e Scl	nedu	le			
PWS ID	PWS Name				Class	ificatio	on Pop	oulation	Owr	ner Type	Primary	Source
CT0280214		STARD	1			NC		35		Р	G۷	
	ress (where applicable)		Service	Resident	tial C	Comme	ercial	Industri	al	Combined	d Agric	cultural
	LONDON ROAD		Connections			1						
Towns Serv	ved: COLCHESTER											
		Monito	oring Requ	ireme	nts							
Water Sys	stem Facility: DISTRIBUT	ION SYSTEM (WSF I	D: 00600)									
	liform (3100)							1	l rou	itine (RT)	per qu	larter
	oling Point (Sampling Point I			Monitori	_		Colle	ction Pe	riod	Сотр	liance S	tatus
Select	t from Inventory of Active Sa	mpling Points		7/1/19 -			_			C	omplete	5
				4/1/20 -								
				7/1/20 -	9/30/	/20						
-	Parameters (PPS)									itine (RT)	• •	
-	oling Point (Sampling Point I			Monitori			Colle	ction Pe	riod		liance S	
Select	t from Inventory of Active Sa	mpling Points		7/1/19 -						C	omplete	Ĵ
				4/1/20 -								
				7/1/20 -	9/30/	/20						
-	stem Facility: ENTRY POI	NT (WSF ID: 00700)										
	And Nitrite (NOX)				_					routine (-
-	oling Point (Sampling Point I	D)		Monitori	-		Colle	ction Pe	riod		liance S	
ENTR	Y POINT (3)			1/1/19 - 1						C	omplete	ŝ
				1/1/20 - 1								
				1/1/21 - 1	12/31	./21						
	stem Facility: DUG WELL	1 (WSF ID: 49138)										
E. Coli (3	=	- 1			_					itine (RT)	• •	
	oling Point (Sampling Point I	D)		Monitori	-		Colle	ction Pe	riod		liance S	
WELL	. 1 (2)			7/1/19 -						C	omplete	5
				4/1/20 -								
				7/1/20 -								
		Other Co	ompliance	Sched	ules	5						
Complianc	ce Schedule Activity			L	Due D	ate		Achie	ved	Date		
SEASONAL	START UP COMPLETION			2	4/1/20	020						
	Wat	ter System Facili	ity and Sar	npling	Poir	nt In	vent	ory				
Water							Total	Lead	and			
	Water System Facility	Sampling Point		nt		(Colifori	n Cop	per			Stage
Facility ID		ID	Description		St	tatus	Rule	Rule	Tier	Asbestos	WQP	2 DBPF
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION			А						
		DOWNSTREAM				А						
		UPSTREAM	WITHIN 5 SER	VICE CON	J	A						
	ENTRY POINT	3	ENTRY POINT			А						
	DUG WELL 1	2	WELL 1			А						
61312	TREATMENT PLANT											
		Con	tact Inforr	nation								
Name		01	rganization							Job Title		
Mr. Micha	el Haggerty	Sc	otties Frozen C	Custard			C	wner				
Mailing Ad	ldress Line One	Mailing Address	s Line Two				· · · ·	City		State	Zip C	ode

						- P -			•		1
PWS ID	PWS Name					Clas	ssification	Population	Owner Type	e Pri	imary Source
СТ0280214	SCOTTIES FROZE	N CUSTARD					NC	35	Р		GW
Local Address (w	here applicable)			Service	Resider	ntial	Commerc	ial Industri	al Combir	ied	Agricultural
327 NEW LONDO	N ROAD			Connection	IS		1				
Towns Served: C	OLCHESTER									-	
62 Slocum Terrad	ce						Groto	า	СТ		06340
Business Phone	e Extension	Fax	Mob	ile Phone	Emergency	y Pho	ne Email	Address			
860-235-0860							micha	elhaggerty@	sbcglobal.ne	ŧt	
Contact Role(s):	Owner									-	
Name			0)rganization					Job Tit	le	
Ms. Kathleen Ste	effens		S	cotties Frozer	n Custard			Owner			
Mailing Address	Line One		Mailing Addres	ss Line Two				City	State	1	Zip Code
62 Slocomb Terra	асе						Groto	า	СТ		06340
Business Phone	e Extension	Fax	Mob	ile Phone	Emergency	y Pho	ne Email	Address			
860-235-3135							micha	elhaggerty@	sbcglobal.ne	et	
Contact Role(s):	Administrative	Contact, Leg	al Contact, Ow	ner						-	
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.

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			0			
itoring and		•				
	(
					-	-
CT0226024 PILAM VINEYARDS NC 28 P GW Ocal Address (where applicable) Service Connections Residential Commercial Industrial Combined Agricultural 1 Service 1 Commercial Industrial Combined Agricultural Towns Served: COLCHESTER 1 Commercial Industrial Combined Agricultural Service DISTRIBUTION SYSTEM (WSF ID: 00600) I routine (RT) per quarter Service Complete Service Complete Service Complete Service Complete Service Complete Service Service Complete Service Complete Service Service Service Service Complete Service						
Water Quality Monitoring and Complian PWS ID PWS Name Classific CT0286024 PRIAM VINEYARDS No Local Address (where applicable) Service Residential Connections 11 SHAILOR HILL RD Connections Connections Connections Towns Served: COLCHESTER Monitoring Requirements Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Sampling Point (Sampling Point ID) Monitoring Periot 10/1/19 - 12/31/2 4/1/20 - 6/30/20 7/1/19 - 9/30/15 10/1/19 - 12/31/2 Select from Inventory of Active Sampling Points 7/1/19 - 9/30/20 4/1/20 - 6/30/20 Physical Parameters (PPS) Sampling Point (Sampling Point ID) Monitoring Periot Select from Inventory of Active Sampling Points 7/1/19 - 9/30/15 10/1/19 - 12/31/2 Vater System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) Monitoring Periot Sampling Point (3) 1/1/19 - 12/31/2 1/1/10 - 12/31/2 1/1/10 - 12/31/2 1/1/10 - 12/31/2 Cother Compliance Schedule Activity						
	_					
toring Requ	iremen	ts				
ID: 00600)						
				1 r	outine (RT) p	oer quarter
	Monitorin	g Period	Collecti	ion Perio	od Compli	ance Status
	7/1/19 - 9	/30/19			Co	mplete
	10/1/19 - 1	.2/31/19			Со	mplete
	4/1/20 - 6	5/30/20				
	7/1/20 - 9	/30/20				
				1 r	outine (RT) p	oer quarter
		_	Collect	ion Perio	od Compli	ance Status
						-
-					Со	nplete
	7/1/20 - 9	/30/20				
D)						
					1 routine (R	T) per year
	Monitorin	g Period	Collecti	ion Perio	od Compli	ance Status
					Со	mplete
	$1/1/21 - 1^{-1}$	2/31/21				
	1/1/21 1					
		ules				
	Schedu			Achieve	ed Date	
	Schedu	ue Date		Achieve	ed Date	
Compliance	Schedu Di 3/	ue Date /1/2020		Achieve	ed Date	
Compliance otification R	Schedu Di 3/ equirer	ue Date /1/2020 ments	Notifica			ification
Compliance Dtification R Compliance	Schedu Du 3/ equirer Notice	ue Date (1/2020 nents <u>Public</u>		ition	PN Cert	
Compliance Dtification R Compliance Period	Schedu Di 3/ equirer Notice Tier	ue Date (1/2020 ments <u>Public</u> Required	d Per	ition	<u>PN Cert</u> Due to DPH	
Compliance Dification R Compliance Period (1/16 - 9/30/16	Schedu Di 3/ equirer Notice Tier 3	ue Date (1/2020 ments <u>Public</u> Required 2/10/201	d Per	ition	<u>PN Cert</u> Due to DPH 2/20/2018	
Compliance Dification R Compliance Period (1/16 - 9/30/16 (1/16 - 9/30/16	Schedu Di 3/ equirer Notice Tier 3 3	Public Required 2/10/201	d Per	ition	<u>PN Cert</u> Due to DPH 2/20/2018 2/20/2018	
Compliance Dification R Compliance Period (1/16 - 9/30/16 (1/17 - 12/31/17	Schedu Di 3) equirer Notice Tier 3 3 3 3	Public Public Required 2/10/201 3/26/201	d Per .8 .8 .9	ition	PN Cert Due to DPH 2/20/2018 2/20/2018 4/5/2019	
Compliance Dification R Compliance Period (1/16 - 9/30/16 (1/16 - 9/30/16 1/17 - 12/31/17 (1/17 - 11/30/17	Schedu Di 3/ equirer Notice Tier 3 3 3 3 3 3 3	Public Public Required 2/10/201 3/26/201	d Per .8 .8 .9 .9	<u>ition</u> formed	PN Cert Due to DPH 2/20/2018 2/20/2018 4/5/2019	
Compliance Dification R Compliance Period (1/16 - 9/30/16 (1/16 - 9/30/16 1/17 - 12/31/17 (1/17 - 11/30/17	Schedu Di 3/ equirer Notice Tier 3 3 3 3 3 3 3	Public Public Required 2/10/201 3/26/201	d Per, .8 .8 .9 .9 .9 .9 .9	ntion formed	PN Cert Due to DPH 2/20/2018 2/20/2018 4/5/2019 4/5/2019	
Compliance otification R Compliance Period (1/16 - 9/30/16 (1/16 - 9/30/16 1/17 - 12/31/17 (1/17 - 11/30/17 ility and Sar ot Sampling Poin	Schedu Di 3/ equirer Notice Tier 3 3 3 3 3 3 9 npling I	ue Date (1/2020 ■ents Public Required 2/10/201 2/10/201 3/26/201 3/26/201 Soint Inv	d Per 8 8 9 9 7 entor Total	ition formed formed	PN Cert Due to DPH 2/20/2018 2/20/2018 4/5/2019 4/5/2019	Received
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Compliance otification R Compliance Period (1/16 - 9/30/16 (1/16 - 9/30/16 1/17 - 12/31/17 (1/17 - 11/30/17 ility and Sar ot Sampling Poin	Schedu Di 3/ equirer Notice Tier 3 3 3 3 3 mpling I	Public Public Required 2/10/201 3/26/201 3/26/201 3/26/201	d Per 8 8 9 9 vento 7 0 1 <i>j</i>	ttion formed formed formed formed formed formed formed formed formed formed formed formed	PN Cert Due to DPH 2/20/2018 2/20/2018 4/5/2019 4/5/2019	Received
Compliance Dtification R Compliance Period (1/16 - 9/30/16 (1/16 - 9/30/16 1/17 - 12/31/17 (1/17 - 11/30/17 ility and Sar Description	Schedu Di 3/ equirer Notice Tier 3 3 3 3 3 mpling I	ue Date (1/2020 Tents Public Required 2/10/201 3/26/201 3/26/201 3/26/201 Cont Inv	d Per 8 8 9 9 vento 7 0 1 <i>j</i>	ttion formed formed formed formed formed formed formed formed formed formed formed formed	PN Cert Due to DPH 2/20/2018 2/20/2018 4/5/2019 4/5/2019	Received
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	Service Connections toring Requ ID: 00600)	itoring and Com	Itoring and Compliance Classification NC Service Residential Connections 1 ID: 00600) 1 Monitoring Period 7/1/19 - 9/30/19 10/1/19 - 12/31/19 4/1/20 - 6/30/20 7/1/19 - 9/30/19 10/1/19 - 12/31/19 4/1/20 - 6/30/20 7/1/19 - 9/30/19 10/1/19 - 12/31/19 10/1/19 - 12/31/19 4/1/20 - 6/30/20 7/1/20 - 9/30/20	Original Compliance Schere Classification Popu NC 2 Service Residential Commercial In Connections 1 In toring Requirements ID: 00600) Monitoring Period Collection 7/1/19 - 9/30/19 10/1/19 - 12/31/19 4/1/20 - 6/30/20 Monitoring Period Collection 7/1/19 - 9/30/19 10/1/19 - 12/31/19 4/1/20 - 6/30/20 Monitoring Period Collection 7/1/19 - 9/30/19 10/1/19 - 12/31/19 10/1/19 - 12/31/19 Monitoring Period Collection 7/1/20 - 9/30/20 7/1/20 - 12/31/19 1/1/19 - 12/31/19 Monitoring Period Collection 1/1/19 - 12/31/19 1/1/19 - 12/31/19 1/1/19 - 12/31/19	Schedule Classification Population C Service Residential Commercial Industrial Connections 1 toring Requirements Ir Monitoring Period Collection Period 7/1/19 - 9/30/19 1 10/1/19 - 12/31/19 4/1/20 - 6/30/20 7/1/19 - 9/30/19 1 Monitoring Period Collection Period 7/1/19 - 9/30/19 1 Monitoring Period Collection Period 7/1/19 - 9/30/19 1 10/1/19 - 12/31/19 4/1/20 - 6/30/20 7/1/19 - 9/30/19 1 10/1/19 - 12/31/19 4/1/20 - 6/30/20 7/1/20 - 9/30/20 1 Monitoring Period Collection Period 1/1/19 - 12/31/19 1/1/19 - 12/31/19 1/1/19 - 12/31/19 1/1/20 - 12/31/20	itoring and Compliance Schedule Classification Population Owner Type Pr NC 28 P Service Residential Commercial Industrial Combined Connections 1 Combined Connections 1 Combined Troutine (RT) p Monitoring Period Collection Period Complia 7/1/19 - 9/30/19 Con 10/1/19 - 12/31/19 Con 4/1/20 - 6/30/20 7/1/20 - 9/30/20 Troutine (RT) p Monitoring Period Collection Period Complia 7/1/19 - 9/30/19 Con 1 routine (RT) p Monitoring Period Collection Period Complia 7/1/19 - 9/30/19 Con 1/1/19 - 12/31/19 Con 1/1/20 - 9/30/20 Troutine (RT) p Monitoring Period Collection Period Complia 7/1/20 - 9/30/20 Troutine (RT) p Con 1/1/20 - 12/31/19 Con 1/1/20 - 12/31/19 Con 1/1/20 - 12/31/19 Con

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWSID PWS** Name Classification Population Owner Type Primary Source Р CT0286024 PRIAM VINEYARDS NC 28 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections **11 SHAILOR HILL RD** 1 Towns Served: COLCHESTER **Contact Information** Organization Name Job Title Mr. James Melillo Mailing Address Line One Mailing Address Line Two City State Zip Code 11 Shailor Hill Rd Colchester СТ 06415 **Business Phone** Extension **Mobile Phone** Emergency Phone Email Address Fax 206-406-0772 jim@priamvineyards.com Contact Role(s): Administrative Contact, Legal Contact Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.

2. If a Collection Period is specified, all water quality samples must be collected during the specified period.

3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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

	Connecticut De	partment of	Public H	lealth	Drir	nkin	g Wa	ater	Sec	ction		
	Water Q	uality Monit	oring an	d Con	plia	nce	Sche	edul	е			
PWS ID	PWS Name	<u> </u>	0							er Type Pi	rimary Source	
СТ0286014	752 MIDDLETOWN ROAD	- COLCHESTER			N		-	25		P	GW	
Local Address (v	where applicable)		Service	Residen	tial Co	mmerc	ial In	ndustria		Combined	Agricultural	
752 MIDDLETO	WN ROAD - COLCHESTER		Connections			1						
Towns Served: (COLCHESTER											
		Monit	oring Requ	ireme	nts							
Water System	Facility: DISTRIBUTIO											
Total Coliforn	• •							1	rout	ine (RT)	per quarter	
	Point (Sampling Point ID)			Monitori	-		Collect	ion Per	iod		ance Status	
Select from	n Inventory of Active Samp	ling Points		7/1/19 -						Complete		
				10/1/19 -							mplete	
				1/1/20 -						Со	mplete	
				4/1/20 -								
				7/1/20 -	9/30/2	20						
Physical Para											per quarter	
	Point (Sampling Point ID)			Monitoring Period			Collect	ion Per	iod		ance Status	
Select from	n Inventory of Active Samp	ling Points		7/1/19 -							mplete	
				10/1/19 -							mplete	
				1/1/20 - 3/31/20						Со	mplete	
			4/1/20 -									
		·		7/1/20 -	9/30/2	20						
-	Facility: ENTRY POINT	(WSF ID: 00700)										
Nitrate And N	• •									-	T) per year	
	Point (Sampling Point ID)			Monitori	-		Collect	ion Per	IOd		ance Status	
ENTRY POI		1/1/19 - 12/31/19 1/1/20 - 12/31/20							mplete			
										Co	mplete	
a				1/1/21 -	12/31/2	21				• (27)		
Organic Chem											per quarter	
	Point (Sampling Point ID)			Monitori	-		Lollect	ion Per	iod		ance Status	
ENTRY POI	NT (3)			7/1/19 -							mplete	
				10/1/19 -							mplete	
				1/1/20 -						CO	mplete	
				4/1/20 -								
Motor Sustain				7/1/20 -	9/30/2	20						
	Facility: WELL 1 (WSF	10: 60529)								···· (P=)		
Organic Chem				Maril		and a	Coll				per quarter	
	ampling Point (Sampling Point ID)				<i>Monitoring Period</i> 7/1/19 - 9/30/19			ion Per	ιοα		ance Status	
WELL 1 (2)											mplete	
				10/1/19 -							mplete	
				1/1/20 -						CO	mplete	
				4/1/20 - 7/1/20 -								
	Water	System Facili	ity and Sar				ento	ry				
Water				. 3			otal	Lead a	and			
	er System Facility	Sampling Point		int			liform	Сорр	er		Stage	
Facility ID		ID	Description				Dula	Pulo 1	Tior	Achastas	WQP 2 DBPR	
		15	Description		Sta	itus ^l	Rule	Rule I	ilei	ASDESIUS	WQP Z DBPR	

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWSID PWS Name** Classification Population Owner Type Primary Source Р CT0286014 752 MIDDLETOWN ROAD - COLCHESTER NC 25 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 752 MIDDLETOWN ROAD - COLCHESTER 1 Towns Served: COLCHESTER Water System Facility and Sampling Point Inventory Water Total Lead and Sampling Point Sampling Point Coliform Water System Facility System Copper Stage Facility ID ID Description Rule Rule Tier Asbestos WQP 2 DBPR Status 00700 ENTRY POINT 3 ENTRY POINT Α 2 60529 WELL 1 WELL 1 Δ 60758 TREATMENT PLANT **Contact Information** Name Organization Job Title Mr. Robert Gagnon B & B Property Holdings, LLC Member Mailing Address Line One Mailing Address Line Two City State Zip Code Oakdale 627 Norwich Salem Turnpike Unit 5 CT 06370 **Business Phone Emergency Phone** Email Address Extension Fax **Mobile Phone** 860-892-8035 860-892-8074 860-303-6758 RGAGNON@COLCHESTERCONSTRUCTION.COM Contact Role(s): Legal Contact, Owner Name Organization Job Title Mr. Evan J Cossette Water Boy, LLC Chief Operator Mailing Address Line One Mailing Address Line Two City State Zip Code 70 Comstock Trail Water Bov. LLC East Hampton CT 06424 **Business Phone** Extension Fax Mobile Phone Emergency Phone Email Address 203-314-9343 waterbovllc@icloud.com Contact Role(s): Administrative Contact Name Organization Job Title Rg Land Developement, LLC Mailing Address Line One Mailing Address Line Two City State Zip Code 612 Church Street Amston CT 06231 **Mobile Phone** Emergency Phone Email Address **Business Phone** Extension Fax Contact Role(s): Owner Please note the following: The residual disinfectant concentration must be measured at the same location and time as each total coliform sample. 1.

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

	Connectic	ut Depa	rtment of	f Public F	Iealth	Dri	nkin	gW	ater	Se	ction		
		*	lity Monit					0					
PWS ID	PWS Name	tor Qua					fication				ner Type P	rimary Source	
СТ0286034	HOP CULTURE F	ARMS & BRE	W CO.			١	١C		25		P	GW	
Local Address (v	where applicable)			Service	Residen	tial Co	ommer	cial Ir	ndustria	al	Combined	Agricultural	
144 CATO CORN	IER ROAD	Connections			1								
Towns Served: (COLCHESTER			1									
			Monit	oring Requ	uireme	nts							
Water System	Facility: DISTR		STEM (WSFI	D: 00600)									
Total Coliform	n (3100)					1	rou	tine (RT)	per quarter				
Sampling F	Point (Sampling P	oint ID)			Monitori	iod	Collect	lection Period Con			iance Status		
Select from	n Inventory of Act	ive Sampling	Points		1/1/20 - 3/31/20 Complete							mplete	
					4/1/20 - 6/30/20								
					7/1/20 -	9/30/2	20						
Physical Para	meters (PPS)								1	rou	tine (RT)	per quarter	
Sampling F	Point (Sampling P	oint ID)			Monitori	ng Per	iod	Collect	ion Per	riod	Compliance Status		
Select from	n Inventory of Act	ive Sampling	Points		1/1/20 -	3/31/2	20				Co	omplete	
					4/1/20 -	6/30/2	20						
					7/1/20 -	9/30/2	20						
Water System	Facility: ENTRY	Y POINT (W	/SF ID: 00700)										
Nitrate And N	litrite (NOX)									1	routine (F	RT) per year	
Sampling F	Point (Sampling P	oint ID)			Monitori	Collect	ion Per	riod	Compl	iance Status			
ENTRY POI	NT (3)				1/1/20 - 12/31/20 Com						omplete		
					1/1/21 -	12/31/	'21						
	Monthly	Water S	ystem Facil	ity (WSF)	Level N	/lonit	toring	g Req	luirei	nei	nts		
Water System	Facility: TREAT	MENT PLAI	NT (WSFID: 61	L691)									
Analyte	Moni	itoring Requi	rement (Summ	ary Type)	Оре	rating	Limit				Samples R	eq/Month	
рН	Entry	Point pH Mo	onitoring (PHRE				7.0 PH				2	1	
Start Date:	1/1/2020								ng Limi	t	Monito	-	
					ring Perio	omplia	nce Sta	atus:	Complia	ince Status:			
					0 - 1/31/2								
				2/1/202	0 - 2/29/2	2020							
		Water Sy	stem Facil	ity and Sa	mpling	Poin	t Inv	ento	ry				
Water								Total	Lead				
	er System Facility		Sampling Point		int			oliform	Сорр			Stage	
Facility ID			ID	Description			atus	Rule	Rule	Tier	Asbestos	WQP 2 DBPR	
00600 DISTI	RIBUTION SYSTEM		4	DISTRIBUTIO			A	Y					
			DOWNSTREAM				A	Y					
00700			UPSTREAM	WITIN 5 SEVI			A	Y					
	RY POINT		3	ENTRY POINT			A						
61689 WELI			2	WELL 1			A						
61691 TREA	TMENT PLANT		-		_								
			Con	tact Infor	mation	l							
Name			0	rganization							Job Title		
Mr. Sam Wilson			O H	op Culture Far	ms & Brev	v Co.							
Mr. Sam Wilson Mailing Address	Line One		O Hi Mailing Addres	op Culture Far s Line Two	ms & Brev	v Co.			ity		State	Zip Code	
Mr. Sam Wilson	s Line One ms & Brew Co.	Fax	O H Mailing Addres 292 Prospect H	op Culture Far s Line Two ill Road	ms & Brev		Colch	ester				Zip Code 06415	

			C C			0									
PWS ID		PWS Name					(ssification	Population	Owner Type	Primary Source			
СТ028603	CT0286034 HOP CULTURE FARMS & BREW CO.							NC		25	Р	GW			
Local Address (where applicable)					Service	Resider	ntial	Commerci	ial Industri	al Combin	ed Agricultural				
144 CATO CORNER ROAD					Connections			1							
Towns Served: COLCHESTER															
									sam@hopculturefarms.com						
Contact F	Role(s):	Administrative	Contact, Ow	ner											
Please no	ote 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.															
	0	results, additional ce sent by the DW	0	'					,	,	0,	,			
		lf vou l	have any que	stions.	please co	ontact the L	Drinkina W	ater	Section at	(860) 509-73					

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