Facility ID  O0600 DISTRIBUTION SYSTEM  4 DISTRIBUTION SYSTEM A Y  DOWNSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  O0700 ENTRY POINT  3 ENTRY POINT  A  20544 WELL  2 WELL  A  Contact Information		Со		•	rtment o				•	_		ection	
CO300034   ROSEMAR LLC   Service   Residential   Commercial   Industrial   Combined   Agricultur   Service   Residential   Commercial   Industrial   Combined   Agricultur   Residential   Commercial   Industrial   Industrial   Combined   Residential   Commercial   Industrial   Indu	PWS ID	D/V/d		ci Quai	Tty MOII	itoring a	ind Coll			_		vner Tyne	Primary Source
Service   Commercial   Commercial   Commercial   Industrial   Combined   Agriculture   ROUTE 66   Comections   Touring Requirements										-			
Select from Inventory of Active Sampling Point ID						Service	Residen					-	_
Monitoring Requirements   Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)   Total Coliform (3100)   Monitoring Period   Collection Period   Complete   Complete   Complete   Complete   Complete   Complete   Complete   Complete   Complete   Collection Period   Complete   Complete   Complete   Complete   Collection Period   Complete   Compl			г аррпсавіс)					tiai co			idastriai	COMBINE	a /\gricarcara
Monitoring Requirements   Monitoring Requirements			MBIA										
Total Coliform (3100)  Total Coliform (3100)  Select from Inventory of Active Sampling Points  Flag Sampling Point (Sampling Point ID)  Monitoring Period  Collection Period  Complete  10/1/19 - 12/31/19  Complete  10/1/20 - 3/31/20  A/1/20 - 9/30/20  Total Complete  1/1/20 - 9/30/20  Physical Parameters (PPS)  Sampling Point (Sampling Point ID)  Monitoring Period  Select from Inventory of Active Sampling Points  Total Complete  10/1/19 - 12/31/19  Complete  Collection Period  Complete  Complete  Collection Period  Complete  Comple					Moni	toring Re	auireme	nts					
Sampling Point (Sampling Point ID)  Select from Inventory of Active Sampling Points  7/3/19 - 9/30/19  10/1/19 - 12/31/19  7/3/10 - 6/30/20  7/1/20 - 9/30/20  Physical Parameters (PPS)  Sampling Point (Sampling Point ID)  Select from Inventory of Active Sampling Point ID)  Select from Inventory of Active Sampling Point ID)  Select from Inventory of Active Sampling Point Inventory  Water System Facility  Water System Facility Sampling Point Sampling Point Inventory  Water System Facility Sampling Point Inventory  Sampling Point Inventory  Sampling Point Inventory  Water System Facility Sampling Point Inventory  Sampling Point Invent	Water Syst	tem Facil	lity: DISTR	IBUTION SY									
Select from Inventory of Active Sampling Points 7/3/19 - 9/30/19 Complete    10/1/19 - 12/33/19   Complete	Total Coli	form (31	100)								1 rc	utine (RT	) per quarter
10/1/19 - 12/31/19   Complete   1/1/20 - 3/31/20   Complete   1/	Sampl	ing Point	(Sampling Po	oint ID)			Monitori	ng Peri	od (	Collect		=	
1/1/20 - 3/31/20   Complete   4/1/20 - 6/30/20     Complete   4/1/20 - 6/30/20     Complete   4/1/20 - 6/30/20     Complete   Comp					Points		7/1/19 -	9/30/1	.9			(	Complete
Al/120 - 6/30/20   7/1/20 - 9/30/20   7/1/20 - 9/30/20							10/1/19 -	12/31/	19			(	Complete
Physical Parameters (PPS) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points T/1/19 - 9/30/19 10/1/19 - 12/31/19 10/1/19 - 12/31/19 10/1/19 - 12/31/19 10/1/19 - 3/31/20 10/1/19 - 3/31/20 10/1/20 - 3/31/20 10/1/20 - 3/31/20 10/1/20 - 9/30/20 10/1/20 - 9/30/20  Water System Facility: ENTRY POINT (WSF ID: 00700)  Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) Monitoring Period Mon							1/1/20 -	3/31/2	.0			(	Complete
Physical Parameters (PPS) Sampling Point (Sampling Point ID)  Monitoring Period Collection Period Complete Complete Complete Complete 1/1/20 - 3/31/20 Complete 1/1/20 - 3/20/20 Complete 1/1/20 - 3/20/							4/1/20 -	6/30/2	.0				
Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Complete  10/1/19 - 12/31/19 Complete 10/1/19 - 12/31/19 Complete 11/1/20 - 3/31/20 Complete 11/1/20 - 3/30/20 7/1/20 - 9/30/20  Water System Facility: ENTRY POINT (WSF ID: 00700)  Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status ENTRY POINT (3) 11/1/19 - 12/31/19 Complete 11/1/20 - 12/31/20 11/1/21 - 12/31/21  Water System Facility and Sampling Point Inventory  Water System Facility Sampling Point Sampling Point Coliform Copper Stage Facility ID 1D													
Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Complete  10/1/19 - 12/31/19 Complete  11/1/20 - 3/31/20 Complete  11/1/20 - 3/31/20 Complete  4/1/20 - 6/30/20 T/1/20 - 9/30/20  Water System Facility: ENTRY POINT (WSF ID: 00700)  Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status ENTRY POINT (3)  1/1/19 - 12/31/19 Complete  1/1/20 - 12/31/20 Complete  1/1/20 - 1/2/31/20 Complete  1/1/20 - 12/31/20 Complete  1/1/20 - 12/31	Physical P	aramete	ers (PPS)								1 rc	-	
10/1/19 - 12/31/19   Complete   1/1/20 - 3/31/20   Complete   1/1/20 - 3/31/20   Complete   1/1/20 - 3/31/20   Complete   1/1/20 - 3/31/20   Complete   4/1/20 - 6/30/20   T/1/20 - 9/30/20   Toutine (RT) per yea   Sampling Point (Sampling Point ID)   Monitoring Period   Collection Period   Compliance Status   ENTRY POINT (3)   1/1/19 - 12/31/19   Complete   1/1/20 - 12/31/20   T/1/21 - 12/31/21   Complete   T/1/20 - 12/31/20   T/1/21 - 12/31/21   Toutine (RT) per yea   Complete   T/1/20 - 12/31/20   T/1/21 - 12/31/21   Toutine (RT) per yea   Complete   T/1/20 - 12/31/20   T/1/21 - 12/31/21   Toutine (RT) per yea   Complete   T/1/20 - 12/31/20   T/1/21 - 12/31/21   Toutine (RT) per yea   Complete   T/1/20 - 12/31/20   T/1/21 - 12/31/21   Toutine (RT) per yea   Complete   T/1/20 - 12/31/20   T/1/21 - 12/31/21   Toutine (RT) per yea   Complete   T/1/20 - 12/31/20   T/1/20 - 12/31/	Sampl	ing Point	(Sampling Po	oint ID)			Monitori	ng Peri	od (	Collect	ion Perio	d Comp	oliance Status
1/1/20 - 3/31/20   Complete   4/1/20 - 6/30/20   T/1/20 - 9/30/20   T/1/20 - 12/31/19   Complience Status   ENTRY POINT (3)	Select	from Inve	entory of Acti	ve Sampling	Points		7/1/19 -	9/30/1	.9			(	Complete
A/1/20 - 6/30/20   T/1/20 - 9/30/20							10/1/19 -	12/31/	19			(	Complete
Water System Facility: ENTRY POINT (WSF ID: 00700)  Nitrate And Nitrite (NOX)  Sampling Point (Sampling Point ID)  Monitoring Period Collection Period Compliance Status  ENTRY POINT (3)  1/1/19 - 12/31/19  1/1/20 - 12/31/20  1/1/21 - 12/31/21  Water System Facility and Sampling Point Inventory  Water System Facility and Sampling Point Inventory  Water System Facility Sampling Point Sampling Point Inventory  Water System Water System Facility  ID Description  Status Rule Rule Tier Asbestos WQP 2 DBH  00600 DISTRIBUTION SYSTEM  4 DOWNSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  O0700 ENTRY POINT  3 ENTRY POINT  4 DOWNSTREAM WITHIN 5 SERVICE CON A  O0700 ENTRY POINT  3 ENTRY POINT  4 Organization  Organization  Organization  Owner  Mailing Address Line One  Mailing Address Line Two  City State Zip Code  North Haven  CT 06473  Business Phone Extension Fax Mobile Phone Emergency Phone Email Address							1/1/20 -	3/31/2	.0			(	Complete
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID)  Notate And Nitrite (NOX) Sampling Point (Sampling Point ID)  Notate And Nitrite (NOX) Sampling Point (Sampling Point ID)  Notate System Facility  Water System Facility and Sampling Point Inventory  Water System Facility and Sampling Point Inventory  Water System Facility  Notater Sys							4/1/20 -	6/30/2	.0				
Nitrate And Nitrite (NOX)  Sampling Point (Sampling Point ID)  Monitoring Period  Collection Period  Compliance Status  ENTRY POINT (3)  1/1/19 - 12/31/19  1/1/20 - 12/31/20  1/1/21 - 12/31/21  Water System Facility and Sampling Point Inventory  Water System Water System Facility  ID  Description  Status  Rule  Rule Tier  A Substos WQP 2 DBI  DOWNSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  O0700 ENTRY POINT  3 ENTRY POINT  3 ENTRY POINT  4 DOWNSTREAM WITHIN 5 SERVICE CON A  O0700 ENTRY POINT  3 ENTRY POINT  4 DOWNSTREAM WITHIN 5 SERVICE CON A  O0700 ENTRY POINT  3 ENTRY POINT  4 DOWNSTREAM WITHIN 5 SERVICE CON A  O0700 ENTRY POINT  BOMBE  Organization  Organization  Name  Mosiling Address Line One  Mailing Address Line One  Emergency Phone  Emergency Phone  Emergency Phone  Emergency Phone  Email Address  Compliance Status  Complete  Status  Status  Stag  Rule  Rule Tier Asbestos WQP 2 DBI  A Y  Stag  Rule  Rule Tier Asbestos WQP 2 DBI  A Y  Stag  Copper  Stag  Stag							7/1/20 -	9/30/2	.0				
Sampling Point (Sampling Point ID)  ENTRY POINT (3)  1/1/19 - 12/31/19  1/1/20 - 12/31/20  1/1/21 - 12/31/21  Water System Facility and Sampling Point Inventory  Water System Water System Facility  Sampling Point Sampling Point Coliform Copper Status  Water System Facility  ID Description Status  Noth Haven  Organization  Name  Organization  Mailing Address Line One  32 Belvedere Rd  Mobile Phone  Emergency Phone  Email Address  Compliance Status  Colliforn Period Collection Period Compliance Status  Complete  1/1/20 - 12/31/20  1/21 - 12/31/21  Lead and Coliform Copper Status  Rule Rule Tier Asbestos WQP 2 DBi  Status Rule Rule Tier Asbestos WQP 2 DBi  Coliform Copper Status  Rule Rule Tier Asbestos WQP 2 DBi  Coliform Copper Status  Rule Rule Tier Asbestos WQP 2 DBi  Coliform Copper Status  Rule Rule Tier Asbestos WQP 2 DBi  Coliform Copper Status  Rule Rule Tier Asbestos WQP 2 DBi  Coliform Copper Status  Status Rule Rule Tier Asbestos WQP 2 DBi  Coliform Copper Status  Rule Rule Tier Asbestos WQP 2 DBi  Coliform Copper Status  Status Rule Rule Tier Asbestos WQP 2 DBi  Coliform Copper Status  Rule Rule Tier Asbestos WQP 2 DBi  Coliform Copper Status  Coliform Copper Stat	Water Syst	tem Facil	lity: ENTRY	POINT (W	SF ID: 0070	0)							
ENTRY POINT (3)  1/1/19 - 12/31/19  1/1/20 - 12/31/20  1/1/21 - 12/31/21  Water System Facility  Water System Facility  Sampling Point  ID  Description  Status  Rule  Rule Tier Asbestos WQP 2 DBI  OCONO  DISTRIBUTION SYSTEM  4 DISTRIBUTION SYSTEM A Y  DOWNSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  OCOTOO ENTRY POINT  3 ENTRY POINT  4 DESCRIPTION  CONTACT Information  Name  Organization  Organization  Organization  Mailing Address Line One  Mailing Address Line One  Mailing Address Line One  Mobile Phone  Emergency Phone  Emergency Phone  Emergency Phone  Emergency Phone  Emergency Phone  Email Address			• •								:		
1/1/20 - 12/31/20   1/1/21 - 12/31/21   Water System Facility and Sampling Point Inventory   Water System Facility   Sampling Point   Description   Status   Rule   Rule Tier   Asbestos   WQP 2 DBH   O0600   DISTRIBUTION SYSTEM   4   DISTRIBUTION SYSTEM   A   Y   DOWNSTREAM   WITHIN 5 SERVICE CON   A   O0700   ENTRY POINT   3   ENTRY POINT   A   20544   WELL   2   WELL   A   A   WELL   2   WELL   A   Contact Information   Job Title   Mr. Mark Gregory   Rosmar, LLC   Owner   Mailing Address Line One   Mailing Address Line Two   City   State   Zip Code   Status   State	Sampl	ing Point	(Sampling Po	oint ID)						Collect	ion Perio	d Comp	oliance Status
Water System Facility and Sampling Point Inventory  Water System Water System Facility Sampling Point ID Description Status Rule Coliform Copper Stage Recility ID Description Status Rule Rule Tier Asbestos WQP 2 DBI DOWNSTREAM WITHIN 5 SERVICE CON A UPSTREAM WITHIN 5 SERVICE CON A UPSTREAM WITHIN 5 SERVICE CON A 2 DBI DOWNSTREAM WITHIN 5 SERVICE CON A 2 DBI DOWNST	ENTRY	POINT (3	5)				1/1/19 -	12/31/	19			(	Complete
Water System Facility and Sampling Point Inventory  Water System Water System Facility  Sampling Point Sampling Point Coliform Copper Stage Facility ID Description Status Rule Rule Tier Asbestos WQP 2 DBI  00600 DISTRIBUTION SYSTEM 4 DISTRIBUTION SYSTEM A Y  DOWNSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  00700 ENTRY POINT 3 ENTRY POINT A  20544 WELL 2 WELL A  Contact Information  Name Organization Job Title  Mr. Mark Gregory Rosmar, LLC Owner  Mailing Address Line One Mailing Address Line Two City State Zip Code 32 Belvedere Rd North Haven CT 06473  Business Phone Extension Fax Mobile Phone Emergency Phone Email Address													
Water System Water System Facility Facility ID  Description  A  Distribution System Water System Facility ID  Description  A  DOWNSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  DOWNSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  Contact Information  Name  Organization  Name  Mailing Address Line One  Mailing Address Line Two  Mailing Address Line Two  Emergency Phone  Emergency P							1/1/21 -	12/31/2	21				
System Water System Facility Facility ID  Description  Sampling Point Status Rule Rule Tier Asbestos WQP 2 DBI  O0600 DISTRIBUTION SYSTEM  4 DISTRIBUTION SYSTEM A Y  DOWNSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  O0700 ENTRY POINT  3 ENTRY POINT  2 WELL  A  Contact Information  Name Organization Organization Mailing Address Line One  Mailing Address Line One  Mailing Address Line Two  CT 06473  Business Phone Extension Fax Mobile Phone Emergency Phone Email Address				Water Sy	stem Fac	ility and S	Sampling	Poin	t Inve	ento	ry		
Facility ID  ID  Description  Status  Rule  Rule Tier Asbestos WQP 2 DBI  O0600 DISTRIBUTION SYSTEM  4 DISTRIBUTION SYSTEM A Y  DOWNSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  O0700 ENTRY POINT  3 ENTRY POINT  4 DOWNSTREAM WITHIN 5 SERVICE CON A  O0700 ENTRY POINT  3 ENTRY POINT  Contact Information  Name  Organization  Organization  Nowner  Mailing Address Line One  Mailing Address Line Two  City  State  Zip Code  North Haven  CT  O6473  Business Phone  Extension  Fax  Mobile Phone  Emergency Phone  Emergency Phone  Email Address													
00600 DISTRIBUTION SYSTEM  4 DISTRIBUTION SYSTEM A Y DOWNSTREAM WITHIN 5 SERVICE CON A UPSTREAM WITHIN 5 SERVICE CON A  00700 ENTRY POINT  3 ENTRY POINT A  20544 WELL  2 WELL  A  Contact Information  Name Organization Normation  Mailing Address Line One Mailing Address Line Two  City State Zip Code 32 Belvedere Rd North Haven CT 06473  Business Phone Extension Fax Mobile Phone Emergency Phone Email Address	*	Nater Sys	stem Facility	S						•			Stage
DOWNSTREAM WITHIN 5 SERVICE CON A  UPSTREAM WITHIN 5 SERVICE CON A  00700 ENTRY POINT 3 ENTRY POINT A  20544 WELL 2 WELL A  Contact Information  Name Organization Job Title  Mr. Mark Gregory Rosmar, LLC Owner  Mailing Address Line One Mailing Address Line Two City State Zip Code  32 Belvedere Rd North Haven CT 06473  Business Phone Extension Fax Mobile Phone Emergency Phone Email Address	-	NICTOID!	FLONI CVCTENA			•			tus		Kule He	r Aspesto	S WQP 2 DBPI
UPSTREAM WITHIN 5 SERVICE CON A  00700 ENTRY POINT 3 ENTRY POINT A  20544 WELL 2 WELL A  Contact Information  Name Organization Job Title  Mr. Mark Gregory Rosmar, LLC Owner  Mailing Address Line One Mailing Address Line Two City State Zip Code  32 Belvedere Rd North Haven CT 06473  Business Phone Extension Fax Mobile Phone Emergency Phone Email Address	00600 L	DISTRIBUT	IION SYSTEM		•					Y			
00700 ENTRY POINT 3 ENTRY POINT A  20544 WELL 2 WELL A  Contact Information  Name Organization Job Title  Mr. Mark Gregory Rosmar, LLC Owner  Mailing Address Line One Mailing Address Line Two City State Zip Code  32 Belvedere Rd North Haven CT 06473  Business Phone Extension Fax Mobile Phone Emergency Phone Email Address													
Contact Information  Name Organization Mr. Mark Gregory Rosmar, LLC Mailing Address Line One Mailing Address Line Two City State Zip Code North Haven CT 06473  Business Phone Extension Fax Mobile Phone Emergency Phone Email Address													
Contact Information       Name     Organization     Job Title       Mr. Mark Gregory     Rosmar, LLC     Owner       Mailing Address Line One     Mailing Address Line Two     City     State     Zip Code       32 Belvedere Rd     North Haven     CT     06473       Business Phone     Extension     Fax     Mobile Phone     Emergency Phone     Email Address			IIII I				IN I						
Name Organization Job Title  Mr. Mark Gregory Rosmar, LLC Owner  Mailing Address Line One Mailing Address Line Two City State Zip Code  32 Belvedere Rd North Haven CT 06473  Business Phone Extension Fax Mobile Phone Emergency Phone Email Address	20544 \	WELL							4				
Mr. Mark Gregory  Mailing Address Line One  Mailing Address Line Two  City  State  Zip Code  North Haven  CT  06473  Business Phone  Extension  Fax  Mobile Phone  Emergency Phone  Email Address													
Mailing Address Line One  Mailing Address Line Two  City State Zip Code  North Haven CT 06473  Business Phone Extension Fax Mobile Phone Emergency Phone Email Address	Name											Job Title	!
32 Belvedere Rd North Haven CT 06473  Business Phone Extension Fax Mobile Phone Emergency Phone Email Address				1									
Business Phone Extension Fax Mobile Phone Emergency Phone Email Address			One		Mailing Addre	ess Line Two							-
							T_					CT	06473
Contact Role(s): Owner	Business I	Phone	Extension	Fax	Mo	bile Phone	Emergency	Phone	Email	Addre	SS		
	Contact Rol	e(s): <b>O</b> w	ner										
	Contact Noi	-(J). <b>- (J)</b>											

	Lonnectic	ut Depa	rtment (	of Publi	IC H	lealtn	Drii	nking	g water	Sec	tion	
	Wa	ter Qua	lity Mon	itoring	an	d Com	ıplia	nce S	Schedul	.e		
PWS ID	PWS Name						Classif	ication	Population	Owne	r Type	Primary Source
СТ0300034	ROSEMAR LLC						N	IC	25		Р	GW
Local Address (w	here applicable)			Service		Resident	tial Co	mmerci	al Industri	al C	ombine	d Agricultural
9 ROUTE 66				Connect	tions			1				
Towns Served: Co	OLUMBIA								'	·		
Name				Organizatio	n						lob Title	
Rosmar LLC												
Mailing Address I	ine One		Mailing Addre	ess Line Two	0				City		State	Zip Code
32 Belvedere Rd								North I	Haven		CT	06473
Business Phone	Extension	Fax	Мо	bile Phone	Er	mergency	Phone	Email A	Address			
Contact Role(s):	Legal Contact, (	Owner										
Name				Organizatio	n						lob Title	
Mr. William H. R	ose								Operation	ıs Mar	nager	
Mailing Address I	ine One		Mailing Addre	ess Line Two	0				City		State	Zip Code
9 Rt 66 East								Columl	oia		CT	06237
Business Phone	Extension	Fax	Мо	bile Phone	Er	mergency	Phone	Email A	Address			
						860-336-9	9311					
Contact Role(s):	Administrative	Contact										

- 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 Departm	ent of Public F	lealth Di	inking	Water S	ection	
Water Quality			O		CCCIOII	
PWS ID PWS Name	Monitoring an			Population Ov	wpor Typo D	rimany Source
CT0300064 COLUMBIA CONGREGATIONAL CHI	IRCH	Clas	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercia		Combined	Agricultural
ROUTE 66 & ROUTE 87	Connections	residential	2	maastrar	Combined	7 Gricarcarar
Towns Served: COLUMBIA						
	Monitoring Requ	uirements				
Water System Facility: <b>DISTRIBUTION SYSTEM</b>						
Total Coliform (3100)				1 rc	outine (RT)	per quarter
Sampling Point (Sampling Point ID)		Monitoring P	eriod Co	ollection Perio		ance Status
Select from Inventory of Active Sampling Points	5	7/1/19 - 9/30	0/19			
		10/1/19 - 12/3	31/19			
		1/1/20 - 3/3	1/20			
		4/1/20 - 6/30	0/20			
		7/1/20 - 9/30	0/20			
Physical Parameters (PPS)					outine (RT)	-
Sampling Point (Sampling Point ID)		Monitoring P		ollection Perio	d Compli	ance Status
Select from Inventory of Active Sampling Points		7/1/19 - 9/30				
		10/1/19 - 12/3				
		1/1/20 - 3/3: 4/1/20 - 6/30				
		7/1/20 - 9/30				
Water System Facility: ENTRY POINT (WSF ID	· 00700)	7/1/20-9/30	3/20			
Nitrate And Nitrite (NOX)					1 routine (R	T) ner vear
Willate Alla Millite (NOA)					I Toutine (i	i / pei yeai
Samplina Point (Samplina Point ID)		Monitorina P	eriod Co	ollection Perio	d Compli	ance Status
Sampling Point (Sampling Point ID)  ENTRY POINT (3)		<b>Monitoring P</b> 1/1/19 - 12/3		ollection Perio		mplete
Sampling Point (Sampling Point ID) ENTRY POINT (3)		1/1/19 - 12/3	1/19	ollection Perio		mplete
			1/19 1/20	ollection Perio		
ENTRY POINT (3)	olic Notification F	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3	1/19 1/20 1/21	ollection Perio		
ENTRY POINT (3)	olic Notification F	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requireme	1/19 1/20 1/21 ents		Co	mplete
ENTRY POINT (3)	olic Notification F  Compliance Period	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3	1/19 1/20 1/21 ents	ollection Perio	Co	
ENTRY POINT (3)	Compliance	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requiremental Notice	1/19 1/20 1/21 <b>ents</b> <i>Public No</i>	otification	PN Cert	mplete ification
Pub Violation/Situation	Compliance Period	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requirement Notice Tier	1/19 1/20 1/21 ents Public No Required	otification	PN Cert Due to DPH	mplete ification
Pub  Violation/Situation  Physical Parameters M&R Violation  Total Coliform M&R Violation	Compliance Period 7/1/19 - 9/30/19 7/1/19 - 9/30/19	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requiremental Notice Tier	1/19 1/20 1/21 ents Public No Required 1/28/2021	otification Performed	PN Cert Due to DPH 2/7/2021	mplete ification
Pub  Violation/Situation  Physical Parameters M&R Violation  Total Coliform M&R Violation	Compliance Period 7/1/19 - 9/30/19	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requiremental Notice Tier	1/19 1/20 1/21 ents Public No Required 1/28/2021 1/28/2021 int Inve	otification Performed	PN Cert Due to DPH 2/7/2021 2/7/2021	mplete ification
Pub  Violation/Situation Physical Parameters M&R Violation Total Coliform M&R Violation  Water Syster  Water	Compliance Period 7/1/19 - 9/30/19 7/1/19 - 9/30/19	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requireme Notice Tier 3 3 mpling Po	1/19 1/20 1/21 ents Public No Required 1/28/2021 1/28/2021 int Invel	ntification Performed ntory	PN Cert Due to DPH 2/7/2021 2/7/2021	mplete ification
Pub  Violation/Situation  Physical Parameters M&R Violation  Total Coliform M&R Violation  Water Syster  Water	Compliance Period 7/1/19 - 9/30/19 7/1/19 - 9/30/19 m Facility and Sai	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requireme Notice Tier 3 3 mpling Po	1/19 1/20 1/21 ents Public No Required 1/28/2021 1/28/2021 int Inver	ntory ntal Lead an	PN Cert Due to DPH 2/7/2021 2/7/2021	ification Received
Pub  Violation/Situation  Physical Parameters M&R Violation  Total Coliform M&R Violation  Water Syster  Water  System Water System Facility Sample	Compliance Period 7/1/19 - 9/30/19 7/1/19 - 9/30/19 m Facility and Sai	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requireme Notice Tier 3 3 mpling Po	1/19 1/20 1/21 2nts Public No Required 1/28/2021 1/28/2021 int Inve	ntory ntal Lead an	PN Cert Due to DPH 2/7/2021 2/7/2021	ification Received
Pub  Violation/Situation  Physical Parameters M&R Violation  Total Coliform M&R Violation  Water System  Water System Water System Facility Sample Facility ID  00600 DISTRIBUTION SYSTEM  DOWN	Compliance Period  7/1/19 - 9/30/19  7/1/19 - 9/30/19  The Facility and Sampling Point Compliance Period  The Facility and Sampling Point Description  Under Sampling Point A DISTRIBUTION USTREAM WITHIN 5 SER	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requireme Notice Tier 3 3 mpling Po Int N SYSTEM RVICE CON	1/19 1/20 1/21 2nts Public No Required 1/28/2021 1/28/2021 int Inve	ntory stal Lead an form Copper	PN Cert Due to DPH 2/7/2021 2/7/2021	ification Received
Pub  Violation/Situation  Physical Parameters M&R Violation  Total Coliform M&R Violation  Water System  Water System Water System Facility Sample Facility ID  00600 DISTRIBUTION SYSTEM  DOWN	Compliance Period 7/1/19 - 9/30/19 7/1/19 - 9/30/19 The Facility and Sailing Point Sampling Point Description  DISTRIBUTION	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requireme Notice Tier 3 3 mpling Po Int N SYSTEM RVICE CON	1/19 1/20 1/21 ents Public No Required 1/28/2021 1/28/2021 int Inversional Coling Status	ntory stal Lead an form Copper	PN Cert Due to DPH 2/7/2021 2/7/2021	ification Received
Pub  Violation/Situation  Physical Parameters M&R Violation  Total Coliform M&R Violation  Water System  Water System Water System Facility Sample Facility ID  00600 DISTRIBUTION SYSTEM  DOWN	Compliance Period  7/1/19 - 9/30/19  7/1/19 - 9/30/19  The Facility and Sampling Point Compliance Period  The Facility and Sampling Point Description  Under Sampling Point A DISTRIBUTION USTREAM WITHIN 5 SER	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requireme Notice Tier 3 3 mpling Po Int N SYSTEM RVICE CON	1/19 1/20 1/21 2nts Public No. Required 1/28/2021 1/28/2021 int Inverses Colinates A A	ntory stal Lead an form Copper	PN Cert Due to DPH 2/7/2021 2/7/2021	ification Received
Pub  Violation/Situation  Physical Parameters M&R Violation  Total Coliform M&R Violation  Water Syster  Water System Water System Facility Sample Facility ID  00600 DISTRIBUTION SYSTEM  DOWN UPS	Compliance Period  7/1/19 - 9/30/19  7/1/19 - 9/30/19  TACILITY AND SAI  IN FACILITY AND SAI  Sampling Point Description  4 DISTRIBUTION  USTREAM WITHIN 5 SEE	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requireme Notice Tier 3 3 mpling Po Int N SYSTEM RVICE CON	1/19 1/20 1/21 2nts Public No Required 1/28/2021 1/28/2021 int Invel Colij Status A A	ntory stal Lead an form Copper	PN Cert Due to DPH 2/7/2021 2/7/2021	ification Received
Pub  Violation/Situation  Physical Parameters M&R Violation  Total Coliform M&R Violation  Water System  Water System Water System Facility Sample Facility ID  00600 DISTRIBUTION SYSTEM  DOWN  UPS	Compliance Period  7/1/19 - 9/30/19  7/1/19 - 9/30/19  The Facility and Sais ing Point Sampling Point Description  Under Stream WITHIN 5 SEETREAM WITHIN 5 S	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requireme Notice Tier 3 3 mpling Po Int N SYSTEM RVICE CON RVICE CON	int Inverse A A A A A A	ntory stal Lead an form Copper	PN Cert Due to DPH 2/7/2021 2/7/2021	ification Received
Pub  Violation/Situation  Physical Parameters M&R Violation  Total Coliform M&R Violation  Water System  Water System Water System Facility Sample Facility ID  00600 DISTRIBUTION SYSTEM  DOWN  UPS	Compliance Period  7/1/19 - 9/30/19  7/1/19 - 9/30/19  The Facility and Saising Point Description  A DISTRIBUTION DISTREAM WITHIN 5 SERTREAM WITHIN 5 SERTREAM  ENTRY POINT WELL	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requireme Notice Tier 3 3 mpling Po Int N SYSTEM RVICE CON RVICE CON	int Inverse A A A A A A	ntory stal Lead an form Copper	PN Cert Due to DPH 2/7/2021 2/7/2021	ification Received
Pub  Violation/Situation  Physical Parameters M&R Violation  Total Coliform M&R Violation  Water System  Water System Water System Facility Sample Facility ID  00600 DISTRIBUTION SYSTEM  DOWN  UPS  00700 ENTRY POINT  20546 WELL	Compliance Period  7/1/19 - 9/30/19  7/1/19 - 9/30/19  TACILITY AND SAIR  INTERIOR SAMPLING POINT  A DISTRIBUTION  STREAM WITHIN 5 SEE  TREAM WITHIN 5 SEE  BNTRY POINT  WELL  Contact Inform	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requireme Notice Tier 3 3 mpling Po Int N SYSTEM RVICE CON RVICE CON	1/19 1/20 1/21 2nts Public No Required 1/28/2021 1/28/2021 int Invel To Colij Status A A A A	ntory stal Lead an form Copper	PN Cert Due to DPH 2/7/2021 2/7/2021 d er Asbestos	ification Received
Pub  Violation/Situation Physical Parameters M&R Violation Total Coliform M&R Violation  Water Syster  Water System Water System Facility Sample Facility ID  00600 DISTRIBUTION SYSTEM  DOWN UPS  00700 ENTRY POINT 20546 WELL  Name  Mr. Tim Anderson  Mailing Address Line One  Mailing Address Line One	Compliance Period  7/1/19 - 9/30/19  7/1/19 - 9/30/19  The Facility and Sais and Sai	1/1/19 - 12/3 1/1/20 - 12/3 1/1/21 - 12/3 Requireme Notice Tier 3 3 mpling Po Int N SYSTEM RVICE CON RVICE CON	1/19 1/20 1/21 2nts Public No Required 1/28/2021 1/28/2021 int Invel To Colij Status A A A A	ntification Performed  ntory Ital Lead an form Copperule Rule Tie	PN Cert Due to DPH 2/7/2021 2/7/2021 d er Asbestos	ification Received

Rusiness Phane Extension Fax Mobile Phane Emergency Phane Email Address

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.

						_				
	Wa	ter Quality l	Monite	oring an	id Con	npli	iance S	Schedul	le	
PWS ID	PWS Name					Class	sification	Population	Owner Type	<b>Primary Source</b>
CT0300064	COLUMBIA CON	IGREGATIONAL CHU	JRCH				NC	25	Р	GW
Local Address (v	where applicable)			Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
ROUTE 66 & RO	UTE 87			Connections	i		2			
Towns Served: 0										
business Filor	ie Exterision	Гах	IVIODIII	e Pilone L	mergency	PHO	ie Liliali F	address		
860-228-930	6						ccchur	ch@snet.ne	t	
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.
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If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

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

End of schedule

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	Connectic	ut Depa	rtme	nt of	Public	Health	n Dr	inkir	ng W	ater	Se	ection		
	Wa	ter Qua	lity M	onit	oring a	and Cor	npli	iance	Sch	edul	le			
PWS ID	PWS Name						Class	sificatio	n Pop	ulation	Owi	ner Type	Primary	Source
CT0300074	HOP RIVER MOT	EL						NC		25		Р	G۷	N
Local Address (w	here applicable)				Service	Reside	ntial	Comme	rcial I	ndustri	al	Combine	d Agrid	cultural
152 ROUTE 66 EA	AST				Connectio	ons		1						
Towns Served: Co	OLUMBIA						·				,		'	
			M	lonite	oring Re	quireme	ents							
Water System F	acility: <b>DISTR</b>	IBUTION SY				•								
<b>Total Coliform</b>	• •											itine (RT		
	oint (Sampling P					Monito			Collec	tion Pe	riod		oliance S	
Select from	Inventory of Act	ive Sampling	Points			7/1/19	-						Complete	
						10/1/19						(	Complete	e
						1/1/20	-	-						
						4/1/20								
						7/1/20	- 9/30	/20						
<b>Physical Param</b>	• •											ıtine (RT		
	oint (Sampling P					Monito			Collec	tion Pe	riod		oliance S	
Select from	Inventory of Act	ive Sampling	Points			7/1/19	-	-					Complete	
						10/1/19						(	Complete	е
						1/1/20								
						4/1/20	-	•						
						7/1/20	- 9/30	/20						
Water System F	acility: <b>ENTR</b>	Y POINT (W	VSF ID: 0	0700)										
Nitrate And Ni	•											routine		-
	oint (Sampling P	oint ID)				Monito			Collec	tion Pe	riod		oliance S	
ENTRY POIN	T (3)					1/1/19						(	Complete	е
						1/1/20								
						1/1/21	- 12/3	1/21						
		Water Sy	ystem	Facili	ity and S	Sampling	g Poi	nt Inv	/ento					
Water	· Custom Fasilitu		Camanlina	. Doint	Campalina	Doint			Total	Lead				Charac
System Water Facility ID	System Facility	•	sampiing ID		Sampling Descriptio				oliform Rule			Asbesto	c WOD	Stage
	IBUTION SYSTEM	1	4			ON SYSTER		itatus A	Y	narc	1101	Assesto	3 1101	Z DDI K
00000 DISTRI	IDOTION SISILIV		· ·	DE A N A		SERVICE CO		A	'					
			UPSTR			SERVICE CO		A						
00700 ENTRY	POINT		3	LAIVI	ENTRY PO		'IN	A						
20547 WELL	FOINT		2		WELL	IIVI		A						
20347 WELL								A						
						ormatio	n							
Name					rganization							Job Title	)	
Mr. Harman Pate			T		op River Mo	otel			O۱	wner				
Mailing Address I	Line One		Mailing	Addres	s Line Two					City		State	Zip C	
152 Route 66 E									mbia			СТ	062	:37
Business Phone	Extension	Fax		Mobi	le Phone	Emergenc	y Phoi	ne Ema	il Addre	ess				
860-228-4972														
Contact Role(s):														

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

	200000			-r				
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
СТ0300074	HOP RIVER MOTEL				NC	25	Р	GW
Local Address (v	vhere applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
152 ROUTE 66 E	AST	Connections			1			

Towns Served: COLUMBIA

### Please note the following:

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

End of schedule

	Connect	•			f Public itoring ar			•	_			ction	
PWS ID CT0300104	PWS Name	OWN HALL						fication NC		ılation 25	Owr	ner Type P	rimary Sou GW
Local Address (	where applicab	e)			Service	Residen	tial Co	ommerc	ial Ir	ndustria	al	Combined	Agricult
ROUTE 87	• •				Connection	S		2					_
Towns Served:	COLUMBIA												
				Monit	oring Req	uireme	nts						
Water System	n Facility: DIS	TRIBUTION											
Total Colifor			<u> </u>	(555)						1	rou	tine (RT)	per quart
Sampling	Point (Sampling	g Point ID)				Monitori	ng Peri	iod (	Collect	ion Per	riod	Compl	iance Stati
Select fro	m Inventory of A	Active Samplir	ng Points	i		7/1/19 -						Co	mplete
						10/1/19 -						Co	omplete
						1/1/20 -							
						4/1/20 -							
						7/1/20 -	9/30/2	20					
_	ameters (PPS) Point (Sampling	r Point ID)				Monitori	na Per	ind (	Callect	1 ion Per			per quart iance Stati
	m Inventory of A	-	ng Points	:		7/1/19 -			Jonecu	.1011 1 61	iou		mplete
Sciect II of	in inventory or A	ctive Jampin	ig i Oilits	<u>'</u>		10/1/19 -							mplete
						1/1/20 -							mpiece
						4/1/20 -							
						7/1/20 -							
Water System	n Facility: <b>EN</b> 1	TRY POINT (	WSF ID	: 00700	)	7,1,20	3,30,2						
Nitrate And	Nitrite (NOX)										1	routine (I	RT) per ye
	Point (Sampling	g Point ID)				Monitori	ng Peri	iod (	Collect	ion Per		=	iance Stati
ENTRY PO	OINT (3)					1/1/19 -	12/31/	19				Co	mplete
						1/1/20 -	12/31/	20					
						1/1/21 -	12/31/	21					
		Water	Systen	n Facil	ity and Sa	ampling	Poin	t Inve	ento	ry			
Water									otal	Lead	and		
	ter System Facil	ity	_	_	Sampling Po	oint			liform				Sto
Facility ID				ID .	Description			itus	Rule	Rule	Tier	Asbestos	WQP 2 D
00600 DIST	TRIBUTION SYST	EM	5.0144	4	DISTRIBUTIO			A	Υ				
					I WITHIN 5 SE			A					
00700 5117			UPS	TREAM	WITHIN 5 SE			A					
	RY POINT			3	ENTRY POIN	[ ]		Α					
20549 WEI	LL			2	WELL			A					
					ntact Info	rmation							
Name					rganization							Job Title	
Mr. George Mi					own of Colum	ıbia				of Pub	lic W		<b>-</b>
Mailing Addres			Mailin	g Addres	ss Line Two					ity		State	Zip Code
	Frumbull Highwa						D.	Colum				СТ	06237
Business Pho				Mob	ile Phone	Emergency	Phone						
860-228-427		860-228	3-0327					gmurp	ny@c	olumbi	act.o	org	
Contact Role(s)	): Administrativ	ve Contact											

(	Lonnectic	ut Depa	irtme	ent of	Public	Health	ı D	rınkıng	g Water	Section	1	
	Wa	ter Qua	lity N	<b>Jonit</b>	oring a	nd Con	np)	liance S	Schedul	le		
PWS ID F	WS Name						Cla	ssification	Population	Owner Type	Pr	imary Source
CT0300104	COLUMBIA TOW	/N HALL						NC	25	Р		GW
Local Address (wh	ere applicable)				Service	Resider	ntial	Commerci	al Industri	al Combin	ned	Agricultural
ROUTE 87					ns		2					
Towns Served: CC	LUMBIA											
Name				Or	ganization					Job Tit	le	
Mr. Mark Walter				To	wn of Colun	nbia			Town Adr	ministrator		
Mailing Address L	ine One		Mailing	Address	Line Two				City	State	!	Zip Code
323 Jonathan Tru	mbull Highway							Colum	bia	СТ		06237
Business Phone	Extension	Fax		Mobil	e Phone	Emergency	y Pho	one Email A	Address			
860-228-0110		860-228-	1952					towna	dministrator	@columbiad	t.or	g
Contact Role(s):	Legal Contact											

CD 1-11- II- -1-1- D -1-1-1- IAI-1- - C

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

End of schedule

	Co	onnecticı Wat	•	rtment o					_			ction	
PWS ID	PV	VS Name	Q 0101		8							ner Type P	rimary Sou
CT0300114	l CA	MP ASTO WAI	MAH - LODG	ìE			N			.00		P	GW
Local Addr	ess (whe	re applicable)			Service	Residenti	al Co	mme	ercial I	ndustria	al	Combined	Agricultu
42 WEST R	OUTE 87				Connectio	ons		4					
Towns Serv	ved: COL	UMBIA			·		·		·		·		
				Moni	toring Re	quiremen	its						
Water Sys	stem Fac	cility: DISTRI	BUTION SY	STEM (WSF	ID: 00600)								
Total Col	iform (3	3100)								1	rou	tine (RT)	per quart
Samp	ling Poin	t (Sampling Po	oint ID)			Monitorin	g Perio	od	Collec	tion Per	riod	Compli	ance Statu
Select	from Inv	entory of Activ	ve Sampling	Points		7/1/19 - 9	9/30/1	.9				Co	mplete
						4/1/20 - 6	5/30/2	20					
						7/1/20 - 9	9/30/2	20					
Physical I	Paramet	ters (PPS)								1	rou	tine (RT)	per quart
		t (Sampling Po				Monitorin			Collec	tion Per	riod		ance Statu
Select	from Inv	entory of Activ	e Sampling	Points		7/1/19 - 9						Со	mplete
						4/1/20 - 6							
					•	7/1/20 - 9	9/30/2	20					
		cility: ENTRY	POINT (W	/SF ID: 00700	))								
		te (NOX)							o "			routine (F	
		t (Sampling Po	int ID)			Monitorin			Collec	tion Per	riod		ance Statu
ENIK	Y POINT (	(3)				1/1/19 - 1						Co	mplete
						1/1/20 - 1 1/1/21 - 1							
				Other (	Complian	nce Schedu		<u> </u>					
Complianc	e Schedu	ıle Δctivity		Other	compilar		ue Dai	te		Achie	ved I	Date	
•		P COMPLETION	J				/1/202			Herne	Jeu I		
				/stem Faci	lity and 9	·			vento	rv			
Water					-				Total	Lead (	and		
,	Water S	ystem Facility		Sampling Poin				(	Coliform				Sta
Facility ID	D. (CTD. D.	1710A1 0\10TEA 4		ID	Description			itus	Rule	Rule	Tier	Asbestos	WQP 2 DE
00600	DISTRIBU	JTION SYSTEM		4		FION SYSTEM		Α	Υ				
				DOWNSTREAM				A ^					
00700	ENTRY P	OINT		UPSTREAM 3	ENTRY PO	SERVICE CON		Α ^					
	WELL #2			2	WELL #2	TINI		A ^					
		PNEUMATIC TA	NIV		VV ELL #2		,	A					
5/031	HYDRO F	MEUIVIATIC TA	INK	0-		<b>* •</b>							
N.						ormation						1 1	
Name					Organization							Job Title	
Ms. Nancy						th Camp Asto	vvama	ın		mp Dire	ector		7in Cod-
Mailing Ad 42 West Ro		e One		Mailing Addre	22 FILLS LMO			Col.	ımbia	City		State	Zip Code 06237
Business		Extension	Fax	N/I ol	oile Phone	Emergency I	Dhono			acc		CI	00237
DUSINESS	FIIOHE	EXCENSION				Emergency I	попе	_					
860-228	2/20		860-647-7	7879   <u>Q</u> EN	-798-8098			ntm	aclean@	n)omail 4	com		

	Connectic	ut Depa	rtment (	or Public	Health	urii	nking	g vvater	, 2ec	ction		
	Wat	ter Qua	lity Mon	itoring a	nd Con	nplia	nce S	Schedul	le			
PWS ID	PWS Name					Classif	ication	Population	Owne	er Type	Prin	mary Source
CT0300114	CAMP ASTO WA	MAH - LODG	)E			N	IC	100		Р		GW
Local Address (w	here applicable)			Service	Residen	tial Co	mmerci	al Industri	al C	Combine	ed /	Agricultural
42 WEST ROUTE	87			Connection	ns		4					
Towns Served: C	OLUMBIA				·	·						
Name				Organization						Job Title	e	
First Church of C	hrist In Hartford											
Mailing Address	Line One		Mailing Addre	ess Line Two				City		State	Z	Zip Code
60 Gold Street							Hartfo	rd		CT		06103
Business Phone	e Extension	Fax	Мо	bile Phone	Emergency	/ Phone	Email A	Address				
860-249-5631												
Contact Role(s):	Owner		·									

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End of schedule

Connecticut Depa	artment of	Public F	Health D	rin	king	Water S	ection	
Water Qua	lity Monit	oring an	d Comp	liar	nce So	chedule		
PWS ID PWS Name			Cla	ssific	ation P	opulation Ov	vner Type P	rimary Source
CT0300194 MOTTAS PASTRY & BAKE SH	ЮР			NC	:	25	Р	GW
Local Address (where applicable)		Service	Residential	Com	nmercial	Industrial	Combined	Agricultural
244 ROUTE 6		Connections			1			
Towns Served: COLUMBIA								
	Monito	oring Requ	uirements	S				
Water System Facility: <b>DISTRIBUTION S</b>	YSTEM (WSF II	D: 00600)						
Total Coliform (3100)						1 ro	utine (RT)	per quarter
Sampling Point (Sampling Point ID)			Monitoring I	Perio	d Col	lection Period	d Compl	iance Status
Select from Inventory of Active Sampling	g Points		7/1/19 - 9/3	30/19	<u> </u>		Co	mplete
			10/1/19 - 12/	/31/1	9		Co	mplete
			1/1/20 - 3/3	31/20	1			
			4/1/20 - 6/3	30/20	)			
			7/1/20 - 9/3	30/20	1			
Physical Parameters (PPS)						1 ro	utine (RT)	per quarter
Sampling Point (Sampling Point ID)			Monitoring I	Perio	d Col	lection Period	d Compl	iance Status
Select from Inventory of Active Sampling	g Points		7/1/19 - 9/3	30/19	<u> </u>		Co	omplete
			10/1/19 - 12/	/31/1	.9		Co	omplete
			1/1/20 - 3/3	31/20	)			
			4/1/20 - 6/3	30/20	)			
			7/1/20 - 9/3	30/20	1			
Water System Facility: ENTRY POINT (\)	<b>NSF ID: 00700)</b>							
Nitrate And Nitrite (NOX)						1	L routine (I	RT) per year
Sampling Point (Sampling Point ID)			Monitoring I	Perio	d Col	lection Period	d Compl	iance Status
ENTRY POINT (3)			1/1/19 - 12/3	31/19	9		Co	mplete
			1/1/20 - 12/3	31/20	)			
			1/1/21 - 12/3	31/21	1			
Water S	ystem Facili	ty and Sa	mpling Po	oint	Inven	tory		
Water					Tota	al Lead and	d	
System Water System Facility	Sampling Point		int		Colifo			Stage
Facility ID	ID	Description		Stati			r Asbestos	WQP 2 DBPR
00600 DISTRIBUTION SYSTEM	4	DISTRIBUTIO		Α	Y			
	DOWNSTREAM			Α				
	UPSTREAM	WITHIN 5 SEI		Α				
00700 ENTRY POINT	3	ENTRY POINT	<u> </u>	Α				
20558 WELL	2	WELL		Α				
		tact Infor	mation					
Name		ganization					Job Title	
Mr. Santo Motta		otta's Bake Sh	юр					
Mailing Address Line One	Mailing Address	s Line Two				City	State	Zip Code
244 Route 6					Columbia		СТ	06237
Business Phone Extension Fax	Mobil	le Phone E	mergency Pho	one l	Email Ad	dress		
860-228-1226								
Contact Role(s): Administrative Contact, Le	gal Contact, Own	er						

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

		- 0		1			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
СТ0300194	MOTTAS PASTRY & BAKE SHOP			NC	25	Р	GW
Local Address (v	vhere applicable)	Service	Residen	tial Commerc	ial Industri	al Combine	ed Agricultural
244 ROUTE 6		Connections		1			

Towns Served: COLUMBIA

### Please note the following:

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

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

End of schedule

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	Connecticut Departmen	et of Dublic Hoo	lth Drinki	ng Water S	oction
	Connecticut Departmen			•	
	Water Quality Mo	onitoring and C			
PWS ID	PWS Name			-	wner Type Primary Source
CT0300214	SAINT COLUMBA CHURCH		NC	49	P GW
	(where applicable)		idential Comm		Combined Agricultural
	E 66 & ROUTE 87	Connections	2		
Towns Served:					
		onitoring Require	ments		
•	n Facility: <b>DISTRIBUTION SYSTEM (V</b>	WSF ID: 00600)			
Asbestos (1	•			1 rout	ine (RT) per nine years
	Point (Sampling Point ID)	Mon	itoring Period	Collection Perio	d Compliance Status
Select fro	m Inventory of Active Sampling Points	1/1/	11 - 12/31/11	1/1-12/31	
<b>Total Colifor</b>	m (3100)			1 r	outine (RT) per month
Sampling	Point (Sampling Point ID)	Mon	itoring Period	Collection Perio	d Compliance Status
Select fro	m 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		
Physical Par	ameters (PPS)			1 r	outine (RT) per month
Sampling	Point (Sampling Point ID)	Mon	itoring Period	Collection Perio	d Compliance Status
Select fro	m 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		
			/20 - 6/30/20		
			/20 - 7/31/20		
			/20 - 8/31/20		
			/20 - 9/30/20		
Water Syster	n Facility: ENTRY POINT (WSF ID: 00	700)			
Nitrate And	Nitrite (NOX)				1 routine (RT) per year
Sampling	Point (Sampling Point ID)	Mon	itoring Period	Collection Perio	
ENTRY PO	DINT (3)	1/1/	19 - 12/31/19		Complete
		1/1/	20 - 12/31/20		Complete
		4/4/	21 12/21/21		

Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status

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

Water System Facility: WELL (WSF ID: 10810)

E. Coli (3014)

1/1/21 - 12/31/21

1 routine (RT) per quarter

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

Schedule Generation Date: 3/10/2020

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	Connectic	it Depai	rtment of	Public	Health	Drin	king V	Nater	Section	l	
		•	ity Monit								
PWS ID	PWS Name								Owner Type	Primary	Source
CT0300214	SAINT COLUMBA	CHURCH				NO	2	49	Р	GV	V
Local Address (	where applicable)			Service	Resident	ial Cor	nmercial	Industria	l Combin	ed Agric	cultural
328 JCT. ROUTE	66 & ROUTE 87			Connectio	ns		2				
Towns Served:	COLUMBIA										
			Monito	oring Re	quireme	nts					
Water System	Facility: WELL	(WSF ID: 10	0810)								
E. Coli (3014	)							1	routine (R		
	Point (Sampling Po	oint ID)			Monitorii			ection Peri	iod Con	npliance S	
WELL (2)					7/1/19 -					Complete	
					10/1/19 -					Complete	
					1/1/20 -					Complete	<del>.</del>
					4/1/20 - 7/1/20 -						
			Other C	omplier			,				
			Otner C	ompiian	ce Sched				15:		
CDOSS CONNEC						Due Dat		Achiev	red Date		
CROSS CONNEC	CTION EXEMPTION		"		_	/1/2018					
		water Sy	stem Facili	ty and S	ampling	Point					
Water System Wat	er System Facility	c	ampling Point	Samplina	Doint		Tota Colifo				Ctago
Facility ID	er system rucinty	3	ID	Description		Stat	D. J		er Tier Asbest		Stage 2 DBPR
	RIBUTION SYSTEM		4	DISTRIBUT	ION SYSTEM	A	us				
		[	OOWNSTREAM	WITHIN 5 S	SERVICE CON	Α					
			MW001	BOYS RM U	JPSTAIRS	Α	Υ	N			
			MW002	GIRLS RM	UPSTAIRS	Α	Υ	N			
			MW003	KITCHEN		Α	Υ	N	Υ		
			MW004		DOWNSTAIRS		Υ	N			
			MW005		DOWNSTAIR:			N			
			UPSTREAM		SERVICE CON						
	RY POINT		3	ENTRY POI	NT	A					
10810 WEL			2	WELL		Α					
50895 WEL	L-X-TROL										
					ormation						
Name			Oı	ganization					Job Tit	ie	
St Columba Ch			NA 11: A 1 1	<del></del>				611	61.1	7: 6	
Mailing Address Route 87	s Line One		Mailing Address	s Line I wo			Columbia	City	State CT		
Business Pho	ne Extension	Fax	Mohi	le Phone	Emergency				CI	062	5/
Dusiness i no	TIC EXTENSION	Tax	IVIODI	ie i none	Lineigency	THORE	Lillali Aut	11 C33			
Contact Role(s)	: Owner				<u> </u>						

(	Connectic	ut Depa	rtment c	of Public	c Health	n Dri	nking	Water	Sect	tion	
	Wa	ter Qua	lity Moni	itoring a	and Cor	nplia	ince So	chedule	е		
PWS ID	PWS Name					Classi	fication P	opulation (	Owner	Type P	rimary Source
CT0300214	SAINT COLUMBA	A CHURCH				ſ	NC .	49	Р	,	GW
Local Address (wh	nere applicable)			Service	Resider	ntial Co	ommercial	Industria	l Co	mbined	Agricultural
328 JCT. ROUTE 6	6 & ROUTE 87			Connection	ons		2				
Towns Served: CO	DLUMBIA					,					
Name				Organization					Jo	ob Title	
Ms. Connie Mede	eiros		!	St Columbia	Church & Da	aycare		Trustee			
Mailing Address L	ine One		Mailing Addre	ess Line Two				City		State	Zip Code
P.O. Box 38							Columbia	a		СТ	06237
Business Phone	Extension	Fax	Mol	bile Phone	Emergenc	y Phone	Email Ad	dress		·	
860-228-1205		860-228-4	1236		860-428	-6285					
Contact Role(s):	Legal Contact		·								
Name				Organization	l				Jo	ob Title	
Father Michael P	hillippino			St. Columbia	Church			Pastor			
Mailing Address L	ine One		Mailing Addre	ess Line Two				City		State	Zip Code
328 Jct. Route 66	& Route 87						Columbia	a		CT	06237
Business Phone	Extension	Fax	Mol	bile Phone	Emergenc	y Phone	Email Ad	dress			
860-228-3727							phillippir	no.michael(	@gmai	il.com	
Contact Role(s):	Administrative	Contact, Leg	al Contact								

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

End of schedule

	Connecticut De	partment of	f Public F	lealth	Drir	nking	z Wa	ater	Se	ction		
		iality Monit				•						
PWS ID	PWS Name	201109 1 101110	,				1			ner Type	Primary 9	Source
CT0300254	RECREATION PARK					IC	2			L	GW	
Local Addres	s (where applicable)		Service	Residen	tial Co	mmerc	ial In	dustria	al	Combine	d Agricu	ultural
HENNEQUIN			Connections			1					0	
	d: COLUMBIA											
		Monite	oring Requ	ıireme	nts							
Water Syste	em Facility: DISTRIBUTION											
Total Colifo	orm (3100)							1	rou	tine (RT)	per qua	arter
	ng Point (Sampling Point ID)			Monitori	ng Peri	iod C	ollecti	on Per			liance St	
Select fr	om Inventory of Active Sampl	ling Points		7/1/19 -	9/30/1	.9				C	omplete	
	·			10/1/19 -							omplete	
				4/1/20 -								
				7/1/20 -								
Physical Pa	rameters (PPS)			., _, _ =	0,00,2			1	rou	tine (RT)	ner au:	arter
•	ng Point (Sampling Point ID)			Monitori	na Peri	ind (	allecti	ion Per			liance St	
-	rom Inventory of Active Sampl	ling Points		7/1/19 -			3.7000	3.7.7.67	.54		omplete	
30100111	on inventory of Active Jumpi	ing romes		10/1/19 -							omplete	
				4/1/20 -							ompiete	
				7/1/20 -								
Mator Custo	em Facility: ENTRY POINT	(\MSE ID: 00700\		7/1/20-	3/30/2	.0						
•	•	(WSF ID: 00700)								,	\	
	d Nitrite (NOX)									routine (		-
_	ng Point (Sampling Point ID)			Monitori				on Per			liance St	
ENTRY F	POINT (3)			1/1/19 -				12/31		C	omplete	
				1/1/20 -				12/31				
				1/1/21 -		21	4/1-	-12/31				
		Other C	ompliance	Sched	lules							
Compliance S	Schedule Activity				Due Da			Achie	ved l	Date		
SEASONAL ST	TART UP COMPLETION			4	4/1/202	20						
	Water	System Facili	ity and Sar	mpling	Poin	t Inve	entor	у				
Water							otal	Lead				
	ater System Facility	Sampling Point		nt			iform	Copp				Stage
Facility ID		ID	Description			itus	Rule	Kule	Her	Asbestos	WQP 2	DBPK
00600 DI	STRIBUTION SYSTEM	2254	CONSESSION			A	Υ					
		3254	WOMEN'S BA			A	Υ					
		4	DISTRIBUTION		, A	A	Υ					
		4254	MENS BATHR		A	A	Υ					
		5254	YARD HYDRAI			A	Υ					
		DOWNSTREAM				A						
		UPSTREAM	WITHIN 5 SER	RVICE CON	N A	A						
00700 EN	NTRY POINT	3	ENTRY POINT		A	A						
22928 W	'ELL #1	2	WELL		A	A						
60325 BL	ADDER STORAGE											
		Con	tact Inform	mation								
Name		Oi	rganization							Job Title		
Mr. George I	Murphy		own of Columb	ia			Dir	of Pub	lic W	orks/		
Mailing Addr	* *	Mailing Address	s Line Two				Ci	ty		State	Zip Co	de
T		-				+						

(	Connecticut	Depart	tment of	Public	Health	ı Drii	iking	, Water	Section	n	
	Wate	r Qualit	ty Monit	oring a	nd Con	nplia	nce S	Schedul	le		
PWS ID P	WS Name					Classif	ication	Population	Owner Typ	e Pr	imary Source
CT0300254 F	ECREATION PARK					N	С	25	L		GW
Local Address (wh	ere applicable)			Service	Resider	ntial Co	mmerci	al Industri	al Combi	ned	Agricultural
HENNEQUIN ROA	D			Connection	ns		1				
Towns Served: CC									•		
323 Jonathan Trui	mbull Highway						Columb	oia	СТ		06237
Business Phone	Extension	Fax	Mobil	le Phone	Emergency	/ Phone	Email A	ddress			
860-228-4270	:	860-228-032	27				gmurpl	ny@columb	iact.org		
Contact Role(s):	Administrative Cor	ntact					•				
Name			Or	rganization					Job Ti	tle	
Mr. Mark Walter			То	wn of Colur	mbia			Town Adr	ninistrator		
Mailing Address L	ine One	M	ailing Address	s Line Two				City	State	ة	Zip Code
323 Jonathan Trui	mbull Highway						Columb	oia	СТ		06237
Business Phone	Extension	Fax	Mobil	le Phone	Emergency	/ Phone	Email A	ddress			
860-228-0110	:	860-228-195	52				townac	dministrator	@columbia	ct.or	g
Contact Role(s):	Legal Contact						•				

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

Connecticut I			יוו מי	rr 1,1 r		1 . 1	IAT I C	4.5	
	•					_		ection	
Water	Quality N	Ionit	oring ar	nd Comp	oliai	ice So	chedule		
PWS ID PWS Name				Cl	lassific	ation Po	opulation Ow	ner Type F	rimary Source
CT0300264 COLUMBIA BEACH HC	DUSE				NC	;	25	L	GW
Local Address (where applicable)			Service	Residentia	l Con	nmercial	Industrial	Combined	l Agricultural
LAKE ROAD			Connection	S		1			
Towns Served: COLUMBIA									
	<b>N</b>	/lonite	oring Rea	uirement	ts				
Water System Facility: <b>DISTRIBUT</b>									
Total Coliform (3100)							1 ro	utine (RT)	per quarter
Sampling Point (Sampling Point I	D)			Monitoring	Perio	d Col	lection Period	Compl	iance Status
Select from Inventory of Active Sa	mpling Points			7/1/19 - 9/	/30/19	) <u> </u>		Co	omplete
				10/1/19 - 12	2/31/1	.9		Co	omplete
				1/1/20 - 3/	/31/20	)			
				4/1/20 - 6/	/30/20	)			
				7/1/20 - 9/	/30/20	)			
Physical Parameters (PPS)							1 ro	utine (RT)	per quarter
Sampling Point (Sampling Point I	D)			Monitoring			lection Period		iance Status
DISTRIBUTION SYSTEM (4)				7/1/19 - 9/	-			Co	omplete
				10/1/19 - 12				Co	omplete
				1/1/20 - 3/					
				4/1/20 - 6/					
				7/1/20 - 9/	/30/20	)			
Water System Facility: ENTRY PO	INT (WSF ID:	00700)							
Nitrate And Nitrite (NOX)							1	=	RT) per year
Sampling Point (Sampling Point I	(D)			Monitoring			lection Period		iance Status
ENTRY POINT (3)				1/1/19 - 12				Co	omplete
EITHE TOTAL (5)						<u> </u>			
ENTITY ON (5)				1/1/20 - 12					
LIVINI I GIVI (G)				1/1/20 - 12 1/1/21 - 12					
	ter System	Facili	ty and Sa	1/1/21 - 12	/31/2	1	tory		
Water				1/1/21 - 12 ampling P	/31/2	Inven	al Lead and	1	
Water System Water System Facility	Samplin	g Point	Sampling Po	1/1/21 - 12 ampling P	/31/2	Inven Toto Colifo	al Lead and rm Copper		Stage
Water System Water System Facility Facility ID	Samplin II	g Point D	Sampling Po Description	1/1/21 - 12 ampling P	/31/2 oint Stat	Inven Tota Colifo us Rul	al Lead and rm Copper		Stage WQP 2 DBPR
Water System Water System Facility	Samplin II 22	g Point D	Sampling Po Description LIFEGUARD	1/1/21 - 12 ampling P oint OFFICE	/31/2 oint Stat	Inven  Tota  Colifo	al Lead and rm Copper		_
Water System Water System Facility Facility ID	Samplin II 22 32	<b>19 Point</b> 10 64	Sampling Po Description LIFEGUARD WOMENS B	1/1/21 - 12 ampling P pint OFFICE ATHROOM	/31/2 oint Stat A A	Inven Toto Colifo us Rul	al Lead and rm Copper		_
Water System Water System Facility Facility ID	Samplin II 22 32	<b>19 Point 10 10 10 10 10 10 10 10</b>	Sampling Po Description LIFEGUARD WOMENS B. DISTRIBUTIO	1/1/21 - 12 ampling P  oint  OFFICE ATHROOM ON SYSTEM	/31/2 oint Stat A A A	Inven Tota Colifo Rul Y	al Lead and rm Copper		_
Water System Water System Facility Facility ID	Samplin 11 22 32 4 42	<b>g Point D</b> 64  64  1	Sampling Po Description LIFEGUARD WOMENS B DISTRIBUTION MENS BATH	1/1/21 - 12 ampling P  pint  OFFICE ATHROOM DN SYSTEM IROOM	Stat A A A A	Inven Toto Colifo us Rul	al Lead and rm Copper		_
Water System Water System Facility Facility ID	Samplin 12 22 32 42 DOWNS	g Point D 64 64 1 64 64 6TREAM	Sampling Po Description LIFEGUARD WOMENS B. DISTRIBUTIO MENS BATH WITHIN 5 SE	1/1/21 - 12 ampling P  oint  OFFICE ATHROOM ON SYSTEM IROOM ERVICE CON	Stat A A A A A	Inven Tota Colifo Rul Y	al Lead and rm Copper		_
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM	Samplin 11 22 32 42 DOWNS UPSTI	64 64 64 64 64 64 64 64 64 64 64 64 64 6	Sampling Po Description LIFEGUARD WOMENS B DISTRIBUTION MENS BATH WITHIN 5 SE	1/1/21 - 12 ampling P  pint  OFFICE ATHROOM DN SYSTEM IROOM ERVICE CON ERVICE CON	/31/2 oint  Stat  A  A  A  A  A	Inven Tota Colifo Rul Y	al Lead and rm Copper		_
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM  00700 ENTRY POINT	Samplin 11 22 32 42 42 DOWNS UPSTI	eg Point 0 64 64 1 64 64 6TREAM REAM	Sampling Popescription LIFEGUARD WOMENS B. DISTRIBUTIO MENS BATH WITHIN 5 SE WITHIN 5 SE	1/1/21 - 12 ampling P  pint  OFFICE ATHROOM DN SYSTEM IROOM ERVICE CON ERVICE CON	/31/2 oint  Stat  A  A  A  A  A  A	Inven Tota Colifo Rul Y	al Lead and rm Copper		_
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM	Samplin 11 22 32 42 42 DOWNS UPSTI	9 Point 0 64 64 1 64 64 6TREAM REAM 3	Sampling Po Description LIFEGUARD WOMENS B. DISTRIBUTIO MENS BATH WITHIN 5 SE WITHIN 5 SE ENTRY POIN WELL	1/1/21 - 12 ampling P  pint  OFFICE ATHROOM DN SYSTEM PROOM ERVICE CON ERVICE CON	/31/2 oint  Stat  A  A  A  A  A	Inven Tota Colifo Rul Y	al Lead and rm Copper		_
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM  00700 ENTRY POINT	Samplin 11 22 32 42 42 DOWNS UPSTI	9 Point 0 64 64 1 64 64 6TREAM REAM 3	Sampling Popescription LIFEGUARD WOMENS B. DISTRIBUTIO MENS BATH WITHIN 5 SE WITHIN 5 SE	1/1/21 - 12 ampling P  pint  OFFICE ATHROOM DN SYSTEM PROOM ERVICE CON ERVICE CON	/31/2 oint  Stat  A  A  A  A  A  A	Inven Tota Colifo Rul Y	al Lead and rm Copper	r Asbestos	_
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM  00700 ENTRY POINT 23012 WELL	Samplin 11 22 32 42 42 DOWNS UPSTI	g Point  64  64  64  64  6TREAM  REAM  3  Con	Sampling Popescription LIFEGUARD WOMENS BATH MENS BATH WITHIN 5 SE WITHIN 5 SE ENTRY POIN WELL tact Information	1/1/21 - 12 ampling P  pint  OFFICE ATHROOM DN SYSTEM PROOM ERVICE CON ERVICE CON IT	/31/2 oint  Stat  A  A  A  A  A  A	Inven Tota Colifo Rul Y Y Y	al Lead and orm Copper e Rule Tiel	Job Title	_
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM  00700 ENTRY POINT 23012 WELL  Name Mr. George Murphy	Samplin 11 22 32 42 DOWNS UPSTI	Point D 64 64 64 65 TREAM 8 2 Con To	Sampling Popescription LIFEGUARD WOMENS B. DISTRIBUTION MENS BATH WITHIN 5 SE WITHIN 5 SE ENTRY POIN WELL tact Information wn of Column	1/1/21 - 12 ampling P  pint  OFFICE ATHROOM DN SYSTEM PROOM ERVICE CON ERVICE CON IT	/31/2 oint  Stat  A  A  A  A  A  A	Inven Tota Colifo Rul Y Y Y	al Lead and rm Copper	Job Title	WQP 2 DBPR
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM  00700 ENTRY POINT 23012 WELL  Name Mr. George Murphy Mailing Address Line One	Samplin 11 22 32 42 DOWNS UPSTI	Point D 64 64 64 65 TREAM 8 2 Con To	Sampling Popescription LIFEGUARD WOMENS BATH MENS BATH WITHIN 5 SE WITHIN 5 SE ENTRY POIN WELL tact Information	1/1/21 - 12 ampling P  pint  OFFICE ATHROOM DN SYSTEM PROOM ERVICE CON ERVICE CON IT	/31/2 oint  Stat  A  A  A  A  A  A	Inven Tota Colifo Rul Y Y Y	al Lead and orm Copper e Rule Tiel	Job Title	_
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM  00700 ENTRY POINT 23012 WELL  Name Mr. George Murphy Mailing Address Line One 323 Jonathan Trumbull Highway	Samplin 11 22 32 42 DOWNS UPSTI	G Point  64  64  64  64  6TREAM  REAM  Or  To	Sampling Popescription LIFEGUARD WOMENS B. DISTRIBUTION MENS BATH WITHIN 5 SE WITHIN 5 SE ENTRY POIN WELL tact Information wn of Column S Line Two	1/1/21 - 12 ampling P  pint  OFFICE ATHROOM DN SYSTEM PROOM ERVICE CON ERVICE CON IT		Inven Tota Colifo Rul Y Y Y	Lead and crm Copper e Rule Ties  Dir of Public V	Job Title	WQP 2 DBPR
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM  00700 ENTRY POINT 23012 WELL  Name Mr. George Murphy Mailing Address Line One 323 Jonathan Trumbull Highway Business Phone Extension	Samplin 11 22 32 42 DOWNS UPSTI	G Point  64  64  64  64  6TREAM  REAM  Or  To	Sampling Popescription LIFEGUARD WOMENS B. DISTRIBUTION MENS BATH WITHIN 5 SE WITHIN 5 SE ENTRY POIN WELL tact Information wn of Column S Line Two	1/1/21 - 12 ampling P  pint  OFFICE ATHROOM DN SYSTEM PROOM ERVICE CON ERVICE CON IT	Stat A A A A A A	Inven Tota Colifo us Rul Y Y Y Y A	Dir of Public V	Job Title Works State CT	WQP 2 DBPR  Zip Code

(	Connectic	ut Depa	rtmen	t of I	Public	Health	D	rinking	g Water	Section	
	Wa	ter Qua	lity Mo	onito	ring a	nd Con	np	liance S	Schedul	le	
PWS ID	WS Name						Cla	ssification	Population	Owner Type	Primary Source
CT0300264	COLUMBIA BEAC	CH HOUSE						NC	25	L	GW
Local Address (wh	ere applicable)			S	Service	Resider	itial	Commerci	al Industri	al Combine	ed Agricultural
LAKE ROAD				C	Connection	ıs		1			
Towns Served: CO	LUMBIA					·			·		
Contact Role(s):	Administrative	Contact									
Name				Orga	anization					Job Title	9
Mr. Mark Walter				Tow	n of Colum	nbia			Town Adr	ministrator	
Mailing Address L	ine One		Mailing A	ddress L	ine Two				City	State	Zip Code
323 Jonathan Tru	mbull Highway							Colum	bia	СТ	06237
Business Phone	Extension	Fax		Mobile	Phone	Emergency	/ Ph	one Email A	Address		
860-228-0110		860-228-	1952					towna	dministrator	@columbiact	.org
Contact Role(s):	Legal Contact				·						

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

(	Connectic Wa		rtment of lity Monit						ection	
DIA/C ID		ter qua	iicy ivioiii	or mg c	iiia doii				T D	-i C
	PWS Name	OLLIN ADLA								rimary Source
	94 ROUTE 66 - C	OLUMBIA				NC		33	Р	GW
Local Address (wh	iere applicable)			Service	Residen	tial Com	nmercial	Industrial	Combined	Agricultural
				Connectio	ons		1			
Towns Served: CO	DLUMBIA									
					quireme	nts				
Water System F	•	RIBUTION S	YSTEM (WSF I	D: 00600)						
<b>Total Coliform</b>	(3100)							1 rou		per quarter
Sampling Po	int (Sampling P	Point ID)			Monitori	ng Period	d Colle	ection Period	Compl	iance Status
Select from I	nventory of Act	ive Sampling	Points		7/1/19 -	9/30/19			Co	mplete
					10/1/19 -	12/31/1	9		Co	mplete
					4/1/20 -	6/30/20				
					7/1/20 -	9/30/20				
Physical Param	eters (PPS)							1 rou	ıtine (RT)	per quarter
-	int (Sampling P	Point ID)			Monitori	ng Period	d Colle	ection Period		iance Status
ENTRY POIN		,				9/30/19				mplete
_	(-)				10/1/19 -		9			mplete
						6/30/20				
						9/30/20				
Water System F	acility: FNTR	Y POINT (W	/SF ID: 00700)		7,1,20	3,30,20				
Nitrate And Nit	•							1	routine (F	RT) per year
	int (Sampling P	Ogint ID)			Monitori	na Perio	d Colle	ction Period	=	iance Status
ENTRY POIN		ome ibj				12/31/19		/1-12/31		mplete
LIVINI POIN	1 (3)								CC	implete
						12/31/20		/1-12/31		
						12/31/21		/1-12/31		
		Water Sy	ystem Facil	ity and S	Sampling	Point	Invent	ory		
Water							Total	Lead and		
-,	System Facility	' .	Sampling Point				Colifor	m Copper		Stage
Facility ID			ID	Descriptio	n	Stati	<sub>us</sub> Rule	Rule Tier	Asbestos	WQP 2 DBPR
00600 DISTRI	BUTION SYSTEM	1	4	DISTRIBUT	ION SYSTEM	l A	Υ			
00700 ENTRY	POINT		3	ENTRY PO	INT	Α				
47980 WELL	<b>‡1</b>		2	WELL #1		Α				
			Con	tact Info	ormation	)				
Name			0	rganization					Job Title	
Mr. Steve Harring	gton		TI	he Main Mo	ose Restaur	ant				
Mailing Address L	ine One		Mailing Addres	s Line Two			I	City	State	Zip Code
94 Rt 66 East						(	Columbia	-	СТ	06237
Business Phone	Extension	Fax	Mob	ile Phone	Emergency			ress		
860-337-0113				250-8350	0: 10/			n@iafdinc.co	om	
		1								

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

### Please note the following:

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

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

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

End of schedule

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

	Co		•	rtment o								ction	
		Wa	ter Qua	lity Mon	itoring a	nd Com	plia	nce S	che	dule	e		
PWS ID	PW	/S Name					Classifi	ication P	opul	ation	Owne	er Type Pi	rimary Source
СТ0309094	ICA	DONUTS, LL	С				N	С	25	5		Р	GW
Local Addre	ess (wher	re applicable)			Service	Resident	ial Co	mmercial	Ind	dustria	l C	Combined	Agricultural
221 WILLIN	1ANTIC R	OAD			Connectio	ns		1					
Towns Serv	ed: COL	JMBIA											
					toring Re	quiremer	nts						
Water Sys	tem Fac	ility: DISTR	IBUTION S	YSTEM (WSF	ID: 00600)								
<b>Total Coli</b>	-	-								1	rout		per quarter
Sampl	ling Poin	t (Sampling P	oint ID)			Monitorir	ng Perio	od Co	llectio	on Peri	iod	Compli	ance Status
Select	from Inv	entory of Act	ive Sampling	Points		7/1/19 -	9/30/1	9			_	Со	mplete
						10/1/19 -	12/31/	19				Со	mplete
						1/1/20 -	3/31/2	0					
						4/1/20 -							
		(===)				7/1/20 -	9/30/2	0					
Physical P		• •											per quarter
•		t (Sampling P		D : 1		Monitorin			llectio	on Peri	ioa		ance Status
Select	from Inv	entory of Act	ive Sampling	Points		7/1/19 -							mplete
						10/1/19 -						Co	mplete
						1/1/20 -							
						4/1/20 -							
					a.\	7/1/20 -	9/30/2	U					
•		-	Y POINT (V	VSF ID: 0070	U)								
Nitrate A		• •										=	T) per year
_		t (Sampling P	oint ID)			Monitorir	_		llectio	on Peri	iod		ance Status
ENTRY	POINT (	3)				1/1/19 - 1						Со	mplete
						1/1/20 - 1							
						1/1/21 - 1			_		_		
			Water Sy	ystem Fac	ility and S	ampling	Point	t Inven	ntor	у			
Water								Tot		Lead o			
	Water Sy	stem Facility		Sampling Poir ID	nt Sampling I Description			Colife		Copp		Ashastas	Stage
Facility ID	DICTRIRI	ITIONI CVCTEN	A				Sta		ie	Kule I	ilei .	ASDESIOS	WQP 2 DBPR
00600 1	DISTRIBL	ITION SYSTEM		4	DISTRIBUT		A						
				DOWNSTREAM									
00700		OINT		UPSTREAM		SERVICE CON							
	ENTRY PO	JINI		3	ENTRY POI	N I	Α						
	WELL #1			2	WELL #1		A	4					
50444 I	BLADDEF	RIANKS					_		_	_			
					ntact Info	rmation							
Name					Organization							Job Title	
Ms. France					Ica Donuts, LL	.C, 221 Willin	nant	1	Owr				
Mailing Add		e One		Mailing Addre	ess Line Two				Cit	У		State	Zip Code
14 Grand Pl								Newtow				СТ	06470
Business		Extension	Fax	Мо	bile Phone	Emergency		Email Ac	ddres	S			
203-426-						203-509-0	)491						
Contact Rol	le(s): Le	gal Contact, (	Owner										

C	onnectic	ut Depa	rtme	nt of	Public	Health	Dri	nking	g water	Section	
	Wa	ter Qua	lity M	lonito	oring ar	nd Con	nplia	ince S	Schedul	le	
PWS ID PV	NS Name						Classi	fication	Population	Owner Type	Primary Sourc
CT0309094 IC	A DONUTS, LL	C					1	1C	25	Р	GW
Local Address (who	ere applicable)				Service	Resider	ntial Co	ommerci	al Industri	al Combine	ed Agricultura
221 WILLIMANTIC	ROAD				Connection	S		1			
Towns Served: COI	UMBIA										
Name				Org	anization					Job Titl	е
Mr. Richard D. Mc	Carthy			Ica	Donuts, LLC	;			Manager		
Mailing Address Lin	ne One		Mailing	Address	Line Two				City	State	Zip Code
100 East Main St								Plainvi	lle	СТ	06062
Business Phone	Extension	Fax		Mobile	Phone	Emergency	y Phone	Email A	Address		
860-793-6955	222	860-793-6	5896			860-793	-6955	rich@g	gadonut.com	1	
Contact Role(s):	dministrative	Contact									

nt of Dublic Hoolth Dubling Motor Coot

### Please note the following:

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

End of schedule

	Connecticut	Departmen	nt of Public H	lealth	Drink	king '	Water S	Section	
	Water	Quality M	onitoring an	d Com	ıplian	ce So	chedule	)	
PWS ID	PWS Name				Classifica	ation Po	opulation C	Owner Type Pi	imary Source
СТ030910	CAMP ASTO WAMA	H - INFIRMARY			NC		100	Р	GW
Local Add	ress (where applicable)		Service	Resident	tial Com	mercial	Industrial	Combined	Agricultural
42 WEST F	ROUTE 87		Connections			2			
Towns Ser	rved: COLUMBIA								
		M	onitoring Requ	ıiremei	nts				
Water Sy	stem Facility: DISTRIBU	TION SYSTEM (	WSF ID: 00600)						
<b>Total Co</b>	liform (3100)						1	routine (RT)	per month
Samı	pling Point (Sampling Point	ID)		Monitorii	ng Period	l Coll	ection Peri	od Compli	ance Status
Selec	ct from Inventory of Active S	Sampling Points		6/1/20 -	6/30/20				
				7/1/20 -	7/31/20				
				8/1/20 -	8/31/20				
-	Parameters (PPS)							routine (RT)	-
_	pling Point (Sampling Point			Monitorii		Coll	ection Peri	od Compli	ance Status
Selec	ct from Inventory of Active S	Sampling Points		6/1/20 -					
				7/1/20 -					
				8/1/20 -	8/31/20				
•	stem Facility: ENTRY PC	DINT (WSF ID: 0	0700)						
	And Nitrite (NOX)							1 routine (R	
	pling Point (Sampling Point	ID)		Monitorii			ection Peri	-	ance Status
ENTR	RY POINT (3)			1/1/19 - 1				Со	mplete
				1/1/20 - 1					
				1/1/21 - 1	12/31/21				
		Oth	er Compliance	Sched	ules				
Complian	ce Schedule Activity			E	Due Date		Achiev	ed Date	
SEASONAI	L START UP COMPLETION			ε	5/1/2020				
		Public	Notification R	Require	ments				
			Compliance	Notice	Pul	blic Not	<u>ification</u>	PN Cert	<u>ification</u>
Violation/	/Situation		Period	Tier	Requ	iired	Performed	Due to DPH	Received
E. Coli			8/1/18 - 8/31/18	3	11/13	/2019		11/23/2019	
	Wa	ater System I	Facility and Sai	mpling	Point	Inven	tory		
Water		•	•			Toto		nd	
System	Water System Facility	Sampling	Point Sampling Poi	nt		Colifo			Stage
Facility ID	)	ID	Description		Statu	ıs Rul	e Rule T	ier Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTIO	N	Α				
		DOWNST	REAM WITHIN 5 SEF	RVICE CON	I A				
		UPSTRE	AM WITHIN 5 SEF	RVICE CON	I A				
00700	ENTRY POINT	3	ENTRY POINT	•	Α				
47990	WELL 3	2	WELL 3		Α				
57640	BLADDER TANK								
			Contact Inform	mation					
Name			Organization					Job Title	
	y Maclean		Center Church C	amp Asto	Wamah		Camp Direc		
	ddress Line One	Mailing A	ddress Line Two	•			City	State	Zip Code
42 West R					С	Columbia		СТ	06237
Business		Fax	Mobile Phone E	mergency					
NOTE This			store of public water suct				rinking water		<del></del>

	Connecticut Department of Fublic Health Di linking Water Section												
	Water Quality Monitoring and Compliance Schedule												
PWS ID	PWS Name					Clas	ssification	Population	Owner Type	Primary Source			
CT0309104 CAMP ASTO WAMAH - INFIRMARY NC 100 P GW													
Local Address (v	where applicable)			Service	Residen	itial	Commerci	al Industri	al Combine	d Agricultural			
42 WEST ROUTI	E 87			Connections			2						
Towns Served:	COLUMBIA												
860-228-348	860-228-3489 860-647-7829 860-798-8098 ntmaclean@gmail.com												
Contact Role(s)	ontact Role(s): Administrative Contact, Legal Contact												

Connecticut Department of Public Health Drinking Water Section

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

End of schedule

		_							_		
	Connectic	•	rtment of ity Monit							ection	
PWS ID	PWS Name	ter Quar	ity Monit	ornig a						nor Typo P	rimary Source
CT0309114	CAMP ASTO WA	MAH HING	EDEODD		Ci	assiii N(		100	OII OW	P P	GW
	s (where applicable)	IVIAH - HUNG	ERFORD	Service	Residentia		mmercial		ctrial	Combined	_
42 WEST ROL				Connection		COI	2	muu	Striai	Combined	Agricultural
	d: COLUMBIA			33			2				
TOWIIS SELVE	u. COLOIVIBIA		D. 0 : 1	<b>:</b> D	•						
Water Syste	em Facility: <b>DISTR</b>	IBUTION SY			quirement	S					
Total Colife	orm (3100)								1 roı	utine (RT)	per quarter
	ng Point (Sampling Po	oint ID)			Monitoring	Perio	od Col	llection			ance Status
	rom Inventory of Acti		Points		7/1/19 - 9/						mplete
					4/1/20 - 6/	30/20	0				
					7/1/20 - 9/	30/20	0				
Physical Pa	rameters (PPS)								1 rou	utine (RT)	per quarter
=	ng Point (Sampling Po	oint ID)			Monitoring	Perio	od Col	llection	Period	Compl	ance Status
Select fr	rom Inventory of Acti	ive Sampling I	Points		7/1/19 - 9/	30/19	9			Co	mplete
					4/1/20 - 6/	30/20	0				
					7/1/20 - 9/	30/20	0				
Water Syste	em Facility: ENTRY	POINT (W	SF ID: 00700)								
Nitrate And	d Nitrite (NOX)								1	routine (F	RT) per year
Samplin	ng Point (Sampling Po	oint ID)			Monitoring	Perio	od Col	llection		<del>-</del> '	ance Status
ENTRY F	POINT (3)				1/1/19 - 12	/31/1	.9			Co	mplete
					1/1/20 - 12	/31/2	20				
					1/1/21 - 12	/31/2	21				
			Other Co	omplian	ce Schedu	les					
Compliance S	Schedule Activity				Du	e Dat	e	Ac	hieved	Date	
SEASONAL ST	TART UP COMPLETIO	N			6/1	L/202	0				
		Water Sy	stem Facili	ity and S	ampling P	oint	Inven	tory			
Water		_					Tot		ad and		
	ater System Facility	5	ampling Point				Colife		opper	A - l t	Stage
Facility ID	ICTRIBUTION OVERTER		ID .	Description		Stat		ie K	uie i ier	Aspestos	WQP 2 DBPR
00600 DI	ISTRIBUTION SYSTEM		4	DISTRIBUTI		A					
		L	OOWNSTREAM			A					
00700 FN	NTDV DOINT		UPSTREAM		SERVICE CON	Α					
	NTRY POINT		3	ENTRY POI	IN I	Α					
	ELL 4	NA 117	2	WELL 4		А	١				
57635 H	YDRO PNEUMATIC TA	AINK									
					rmation						
Name				rganization						Job Title	
Ms. Nancy M		Т	-		n Camp Asto W	/amal	h	-	Directo		
Mailing Addr		ſ	Mailing Address	s Line Two				City		State	Zip Code
42 West Rou							Columbi			СТ	06237
Business Pl		Fax		le Phone	Emergency Ph						
860-228-3		860-647-7		98-8098			ntmacle	an@gm	ail.com	1	
Contact Role	(s): Administrative	Contact, Lega	l Contact								

	Connectic	ut Depa	rtment o	of Public	Health	ı Dri	nkıng	g Water	Sec	ction		
	Address (where applicable)  Address (where applicable)  EST ROUTE 87  Service Connections											
PWS ID	PWS Name					Classi	fication	Population	Owne	er Type	Pri	mary Source
CT0309114	CAMP ASTO WA	MAH - HUNG	GERFORD			ı	NC	100		Р		GW
Local Address (wl	nere applicable)			Service	Residen	ntial C	ommerci	al Industri	al C	Combine	ed	Agricultural
42 WEST ROUTE	37			Connection	ns		2					
Towns Served: Co	WEST ROUTE 87 owns Served: COLUMBIA				·							
Name			(	Organization						Job Title	e	
First Church of Cl	nrist In Hartford											
Mailing Address I	ine One		Mailing Addre	ss Line Two				City		State		Zip Code
60 Gold Street							Hartfo	rd		СТ		06103
Business Phone	Extension	Fax	Mol	oile Phone	Emergency	/ Phone	e Email A	Address				
860-249-5631												
CAMP ASTO WAMAH - HUNGERFORD  Ocal Address (where applicable)  2 WEST ROUTE 87  Owns Served: COLUMBIA  Iame  Organization  Alling Address Line One  O Gold Street  Business Phone  Extension  NC  100  P  GW  Agricultural  Commercial  Industrial  Combined  Agricultural  Combined  Agricultural  Combined  Agricultural  Agricultural  Combined  Agricultural  Combined  Agricultural  Agricultural  Combined  Agricultural  Agricultural  Commercial  Industrial  Combined  Agricultural  Combined  Agricultural  Agricultural  Commercial  Industrial  Combined  Agricultural  Combined  Agricultural  Agricultural  Commercial  Industrial  Combined  Agricultural  Comb												

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End of schedule

C	onnecticut D	epartme	ent of	Public	Health	Dı	rinkin	ıg V	Vater	Se	ction	
	Water (	Quality N	Ionit	oring a	nd Con	ıpl	liance	Scl	hedul	e		
PWS ID PV	VS Name					Clas	ssification	n Po	pulation	Own	er Type I	Primary Source
CT0309124 52	ROUTE 66						NC		25		Р	GW
Local Address (whe	ere applicable)			Service	Residen	tial	Commer	cial	Industri	al	Combine	d Agricultural
				Connection	ns		1					
Towns Served: COL	UMBIA											
		r	<b>Monit</b> o	oring Red	quireme	nts	}					
Water System Fac	cility: DISTRIBUTION	ON SYSTEM	(WSF II	D: 00600)								
Total Coliform (	3100)								1	rou	tine (RT)	per quarter
Sampling Poir	nt (Sampling Point ID	)			Monitori	ng P	Period	Colle	ction Pe	riod	Comp	liance Status
Select from In	ventory of Active San	npling Points			7/1/19 -						C	omplete
					10/1/19 -	12/	31/19				С	omplete
					1/1/20 -							
					4/1/20 -							
					7/1/20 -	9/3	0/20					
Physical Parame	= =											per quarter
	nt (Sampling Point ID	-			Monitori			Colle	ction Pe	riod		liance Status
Select from In	ventory of Active Sam	npling Points			7/1/19 -							omplete
					10/1/19 -						C	omplete
					1/1/20 - 4/1/20 -							
					7/1/20 -							
Water System Fac	cility: ENTRY POIN	IT (WSF ID:	00700)		7/1/20-	9/3	0,20					
Nitrate And Nitr	,	. (113. 15.	00700,							1 1	routine (	RT) per year
	nt (Sampling Point ID	)			Monitori	na P	Period	Colle	ction Pe		-	liance Status
ENTRY POINT		<i>,</i>			1/1/19 -			conc	ction i ci	104		omplete
	(0)				1/1/20 -							
					1/1/21 -							
	Wate	er System	Facili	tv and S				ent	orv			
Water				-1	· I 0			Total		and		
	ystem Facility	Samplin	ng Point	Sampling F	Point			olifor				Stage
Facility ID		I	D	Description	1		Status	Rule	Rule	Tier	Asbestos	WQP 2 DBPR
00600 DISTRIBI	UTION SYSTEM	4	4	DISTRIBUTI	ON		Α					
		DOWNS	STREAM	WITHIN 5 S	SERVICE CON	١	Α					
		UPST	REAM	WITHIN 5 S	SERVICE CON	١	Α					
00700 ENTRY P	POINT		3	ENTRY POI	NT		Α					
53179 WELL 1			2	WELL 1			Α					
			Con	tact Info	rmation							
Name			Or	ganization							Job Title	
Mr. Albert P. Shifri	n							C	)wner			
Mailing Address Lin	ne One	Mailing	Address	Line Two					City		State	Zip Code
P.O. Box 132							Colui	mbia			СТ	06237
Business Phone	Extension	Fax	Mobil	e Phone	Emergency	Pho	one Emai	l Add	ress			
860-228-9343		-228-9556			860-228-	9343	3 usero	chick(	@aol.con	า		
Contact Role(s): A	dministrative Contac	ct, Legal Cont	act, Own	er								

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

			0		1				
PWS ID	PWS Name				Clas	sification	Population	Owner Type	Primary Source
CT0309124	<b>52 ROUTE 66</b>					NC	25	Р	GW
Local Address (v	where applicable)		Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
			Connections			1			

Towns Served: COLUMBIA

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End of schedule

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	Connectic	ut Departme	nt of	f Public	Η	ealth	Dı	rinkiı	ng V	Wate	r S	ection	
	Wat	ter Quality M	lonit	oring a	nc	l Com	ıbl	iance	e Sc	hedu	ıle		
PWS ID	PWS Name	to the second of		8 8								wner Type I	Primary Source
CT030913		CENTER						NC		25		L	GW
Local Add	ress (where applicable)			Service		Resident	tial	Comme	rcial	Indust	rial	Combined	d Agricultural
188 ROUT	E 66			Connectio	ns			1					
Towns Sei	rved: COLUMBIA							1					
		N	lonit	oring Re	aui	ireme	nts	}					
Water Sv	stem Facility: <b>DISTR</b>				•								
•	liform (3100)										1 rc	outine (RT)	per quarter
	pling Point (Sampling P	oint ID)			Λ	Monitorii	ng P	Period	Coll	ection P			liance Status
Selec	ct from Inventory of Acti	ive Sampling Points				7/1/19 -	9/3	0/19				C	omplete
					1	0/1/19 -	12/	31/19				С	omplete
						1/1/20 -	3/3	1/20					
						4/1/20 -	6/3	0/20					
						7/1/20 -	9/3	0/20					
Physical	Parameters (PPS)										1 rc	outine (RT)	per quarter
	pling Point (Sampling P	•				Monitorii			Coll	ection P	erio		liance Status
Selec	ct from Inventory of Act	ive Sampling Points				7/1/19 -		-					omplete
						0/1/19 -						С	omplete
						1/1/20 -							
						4/1/20 -		-					
		/ DOINE / 14/05 ID /	207001			7/1/20 -	9/3	0/20					
	stem Facility: ENTRY	Y POINT (WSFID:	(טט/טט									,	<b></b> \
	And Nitrite (NOX)	nint (D)				A - with - wi		) a wi a al	C-11	antinu D		-	RT) per year
	pling Point (Sampling Point (S)	טווונ וטן				<b>Monitori</b> i L/1/19 - 1			COII	ection P	erio	-	omplete
EINIF	RT POINT (5)					L/1/20 - :							ompiete
						L/1/20 - : L/1/21 - :							
		Dubli	a Nlat	ification									
		Publi		ification	ı re								
Violation	/Situation			ompliance Period		Notice Tier				<u>fication</u>			rtification
	nd Nitrite M&R Violation	1	1/1/	10 - 12/31/1	10	2		<i>Require</i> 4/7/201		Perform	ea	<b>Due to DPF</b> 4/17/2011	
With atte Ai		Water System					Do			tory		4/17/2011	
14/este u		water System	raciii	ity aliu 3	ali	ipiiiig	FU	THE III	Tota	=	d an	. al	
Water System	Water System Facility	Samplin	a Point	Sampling F	Poin	t			Colifo		a an ppei		Stage
Facility ID		IE		Description				Status	Rul				WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	1 4		DISTRIBUT	ION	SYSTEM		A	Υ				
		DOWNS	TREAM	WITHIN 5 S	SER\	ICE CON	J	Α					
		UPSTR	EAM	WITHIN 5 S	SER\	/ICE CON	J	Α					
00700	ENTRY POINT	3		ENTRY POI	NT			Α					
50011	WELL 1	2		WELL 1				Α					
			Con	tact Info	rn	nation							
Name			0	rganization								Job Title	
Mr. Georg	ge Murphy			own of Colur	mbia	a				Dir of Pu	ıblic	Works	
	ddress Line One	Mailing	Addres	s Line Two						City		State	Zip Code
323 Jonat	han Trumbull Highway							Colu	ımbia	l		СТ	06237
Busines	s Phone Extension	Fax	Mobi	le Phone	Em	ergency	Pho	ne Ema	il Ado	dress			
860-22	9_4270	960-229-0227						amu	ırnby	കടപപന	hiac	t ora	

	Connectic	ut Depa	rtme	ent of	f Public	Health	n Dri	nking	<mark>Water Water Water</mark>	Section	
	Wa	ter Qua	lity N	lonit	oring a	nd Con	nplia	ince S	Schedul	le	
PWS ID	PWS Name						Classi	fication	Population	Owner Type	Primary Sourc
CT0309134	BECKISH SENIOR	R CENTER					1	١C	25	L	GW
Local Address (w	here applicable)				Service	Resider	ntial Co	ommerci	al Industri	al Combine	ed Agricultura
188 ROUTE 66					Connection	าร		1			
Towns Served: C						·					
000-220-4270		800-228-0	3327					gilluip	пушсонины	iact.org	
Contact Role(s):	Administrative	Contact									
Name				Oı	rganization					Job Title	e
Ms. Carmen L. V	ance			To	own of Colur	nbia			First Selec	ctman	
Mailing Address	Line One		Mailing	Address	s Line Two				City	State	Zip Code
323 Jonathan Tru	umbull Highway		Route 8	37				Colum	oia	СТ	06237
Business Phone	e Extension	Fax		Mobi	ile Phone	Emergence	y Phone	Email A	Address		
860-228-0110		860-228-2	1952			860-336	-8119	cvance	@columbia	ct.org	
Contact Role(s):	Legal Contact										

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

End of schedule

C	onnectic	ut Depart	tment of	Public	Health	Drir	nking '	Water	Se	ction		
		ter Qualit										
PWS ID PV	VS Name	ter Quarre	y Monit	ornig a		_				er Type P	rimary So	urce
		OF COLUMBIA				N		193	OWI	P	GW	raice
Local Address (whe		OI COLONIDIA		Service	Resident		mmercial		al	Combined		tural
Local / taul cos (Wile	пе аррисавте)			Connection		iai co	1	maasen			7.8110411	
Towns Served: COL	.UMBIA											
			Monito	oring Red	quireme	nts						
Water System Fa	cility: DISTR	IBUTION SYST	TEM (WSF II	D: 00600)								
Total Coliform (	3100)							1	rou	tine (RT)	per quar	rter
Sampling Poir	nt (Sampling P	oint ID)			Monitorii	ng Peri	od Col	lection Pe	riod	Compl	iance Stat	tus
Select from In	ventory of Act	ive Sampling Po	oints		7/1/19 -	9/30/1	9			Co	mplete	
					10/1/19 -	12/31/	19			Co	mplete	
					1/1/20 -							
					4/1/20 -							
					7/1/20 -	9/30/2	0					
Physical Parame	= =									tine (RT)		
Sampling Poir		-	_		Monitorii			lection Pe	riod		iance Stat	tus
Select from In	ventory of Act	ive Sampling Po	oints		7/1/19 -						mplete	
					10/1/19 -					Cc	mplete	
					1/1/20 -							
					4/1/20 -							
Matax Customs Fo	ailia ENITO	V DOINT (MC	- ID. 00700\		7/1/20 -	9/30/2	U					
Water System Fa	-	Y POINT (WSF	F ID: 00700)						4.		)T)	
Nitrate And Nitr  Sampling Poin	• •	oint ID)			Monitorii	oa Bori	ad Cal	lection Pe		routine (I	kı) per yo iance Stat	
ENTRY POINT		oint ibj			1/1/19 - 1			ection Fe	iou		mplete	tus
LIVINI FOINT	(3)				1/1/20 - 1					CC	mpiete	
					1/1/21 - 1							
		Water Syst	tom Eacili	ity and S				tory				
14/mton		water 5ys	tem racm	ity alia 3	amping	r Oiii			d			
Water System Water S	ystem Facility	Sai	mpling Point	Samplina F	Point		Tota Colifo				St	tage
Facility ID	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ID	Description		Sta	D. J			Asbestos		_
00600 DISTRIB	UTION SYSTEM	1	4	DISTRIBUTI	ION SYSTEM	A						
		DC	OWNSTREAM	WITHIN 5 S	SERVICE CON	ı A	Ą					
		ι	JPSTREAM	WITHIN 5 S	SERVICE CON	ı A	Ą					
00700 ENTRY P	OINT		3	ENTRY POI	NT	A	4					
59456 WELL 1			2	WELL 1		A	4					
59637 TREATM	IENT PLANT											
			Con	tact Info	rmation							
Name				rganization						Job Title		
Ms. Laureen Mora	n											
Mailing Address Lir	ne One	Ma	ailing Address	s Line Two				City		State	Zip Code	e
106 Route 66 East							Columbia	3		СТ	06237	
Business Phone	Extension	Fax	Mobi	le Phone	Emergency	Phone	Email Ad	dress				
860-228-0194		860-228-269	94		860-208-2	1498	info@cro	ssroadspl	nysica	altherapy.	org	

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

Connecticut Department of Public Health	Drinking	g Water	Section	
Water Quality Monitoring and Con	npliance S	Schedul	e	

PWS ID	PWS Name					Cla	ssification	Population	Owner Type	Primary Source
СТ0309144	CORNERSTONE OF CO	.UMBIA	A				NC	193	Р	GW
Local Address	where applicable)			Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
				Connections			1			

Towns Served: COLUMBIA

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

End of schedule

Connection	cut Departr	nent o	f Public	Health	Dri	nking '	Water S	Section	
Wa	ater Quality	Monit Monit	coring a	nd Com	plia	ance So	chedule	<u> </u>	
PWS ID PWS Name	<u> </u>		0		_				rimary Source
CT0309154 HEARTSTONE F	ARM & WINERY, L	LC.				NC	25	Р	GW
Local Address (where applicable	)		Service	Resident	ial C	ommercial	Industrial	Combined	Agricultural
468 RT. 87, COLUMBIA			Connection	ıs				1	
Towns Served: COLUMBIA				'					-
		Monit	oring Rec	uiremer	nts				
Water System Facility: <b>DIST</b>	RIBUTION (WSF								
Total Coliform (3100)							1 r	outine (RT)	per quarter
Sampling Point (Sampling	Point ID)			Monitorin	ig Pei	riod Coll	lection Perio	od Compli	ance Status
Select from Inventory of Ac	tive Sampling Poir	nts		7/1/19 -	9/30/	19		Со	mplete
				10/1/19 -	12/31			Co	mplete
				4/1/20 -	6/30/	20			
				7/1/20 - 9	9/30/	20			
Physical Parameters (PPS)							1 r	outine (RT)	per quarter
Sampling Point (Sampling	Point ID)			Monitorin			lection Perio	od Compli	ance Status
DISTRIBUTION (4)				7/1/19 - 9	9/30/	19		Co	mplete
				10/1/19 -	12/31	./19		Co	mplete
				4/1/20 -	6/30/	20			
				7/1/20 - 9	9/30/	20			
Water System Facility: ENT	RY POINT (WSF I	D: 00700)							
Nitrate And Nitrite (NOX)								1 routine (R	T) per year
Sampling Point (Sampling	Point ID)			Monitorin	ig Pei	riod Coll	lection Perio	od Compli	ance Status
ENTRY POINT (3)	1/1/19 - 12/31/19 Complete					mplete			
		1/1/20 - 12/31/20							
				1/1/21 - 1	2/31	/21			
	Pu	ıblic Not	tification	Require	mer	nts			
		C	Compliance Period	Notice		<b>Public Not</b>	<u>ification</u>	PN Cert	<u>ification</u>
Violation/Situation			Tier	Required		Performed	Due to DPH	Received	
REVISED TOTAL COLIFORM RULE	(RTCR)	4/16	5/18 - 5/25/1	8 3	6,	/6/2019		6/16/2019	
	Water Syste	em Facil	ity and Sa	ampling	Poir	nt Inven	tory		
Water						Tota		nd	
System Water System Facilit	y Sam <sub>l</sub>	_	Sampling P			Colifo			Stage
Facility ID		ID	Description		St	atus Rul	e Rule T	ier Asbestos	WQP 2 DBPR
00600 DISTRIBUTION		4	DISTRIBUTION			Α			
	DOV	VNSTREAM	DISTRIBUTION	ON DOWNS	TR	A Y			
	UF	PSTREAM	DISTRIBUTION			A Y			
00700 ENTRY POINT		3	ENTRY POIN	IT		Α			
60665 WELL		2	WELL			Α			
		Con	tact Info	rmation					
Name		0	rganization					Job Title	
Mr. Walter A. Tabor		Н	eartstone Fai	rm & Winery	/ LLC				
Mailing Address Line One	Mai	ling Addres	s Line Two				City	State	Zip Code
544 Rt 87						Columbia	9	СТ	06237
Business Phone Extension	Fax	Mobi	ile Phone	Emergency	Phon	e Email Ad	dress		
860-933-1605				860-933-1	1099	walterata	abor@gmail	.com	
Contact Bolo/s): Administrative	Contact Local Co					-			

Schedule Generation Date: 3/10/2020

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

Connecticut D	epartment of Public H	ealth Drinking	g Water Section
Water (	Quality Monitoring and	l Compliance S	Schedule

						_ <u> </u>			
PWS ID	PWS Name					Classification	Population	Owner Type	Primary Source
СТ0309154	HEARTSTONE FARM 8	WINEF	RY, LLC			NC	25	Р	GW
Local Address (where applicable)		Service	Resider	ntial Commerc	ial Industri	Combined Agricultur			
468 RT. 87, COLUMBIA		Connections				1			

Towns Served: COLUMBIA

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End of schedule