(Connecticut D	*				0			ection	
		Quality Mon	itoring a		A					
_	PWS Name			(tion Ow		Primary Sourc
	-ELEVEN STORE				N	-	25		Р	GW
Local Address (wi			Service	Residenti	al Co	mmercia	l Indu	ustrial	Combine	d Agricultura
217 CLAPBOARD			Connectio	ons		1				
Towns Served: D	ANBURY									
			itoring Re	quiremen	ts					
Water System F	acility: DISTRIBUTI	ON SYSTEM (WS	F ID: 00600)							
Total Coliform	(3100)							1 rou	utine (RT)	per quarter
Sampling Po	int (Sampling Point ID)		Monitorin	g Perio	od Co	llectio	n Period	Сотр	liance Status
Select from	nventory of Active Sar	npling Points		7/1/19 - 9	9/30/1	9			C	omplete
				10/1/19 - 1	12/31/	19			C	omplete
				1/1/20 - 3	8/31/2	0			C	omplete
				4/1/20 - 6	5/30/2	0				
				7/1/20 - 9	9/30/2	0				
Physical Param	eters (PPS)							1 rou	utine (RT)) per quarter
Sampling Po	int (Sampling Point ID))		Monitorin	g Perio	od Co	llectio	n Period	Сотр	liance Status
Select from	nventory of Active Sar	npling Points		7/1/19 - 9	9/30/1	9			C	omplete
				10/1/19 - 1	12/31/	19			C	omplete
				1/1/20 - 3	8/31/2	0			C	omplete
				4/1/20 - 6	5/30/2	0				
				7/1/20 - 9	9/30/2	0				
Water System F	acility: ENTRY POI	NT (WSF ID: 0070	0)							
Nitrate And Nit	rite (NOX)							1	routine	RT) per year
Sampling Po	int (Sampling Point ID)		Monitorin	g Perio	od Co	llectio	n Period	Сотр	liance Status
ENTRY POIN	Т (3)			1/1/19 - 1	2/31/1	19			C	omplete
				1/1/20 - 1					C	omplete
				1/1/21 - 1	2/31/2	21				
	Wat	er System Fac	ility and S	Sampling I	Point	t Inver	ntory	,		
Water						Tot	al L	ead and	1	
·	System Facility		nt Sampling			Colife		Copper		Stage
Facility ID		ID	Descriptio		Sta			Rule Tier	Asbesto	s WQP 2 DBP
00600 DISTRI	BUTION SYSTEM	4	DISTRIBUT	ION SYSTEM	A	A Y	,			
		4-1	FRONT HA	ND SINK	A	A Y	,			
		DOWNSTREA	M WITHIN 5	SERVICE CON	A	4				
		UPSTREAM	WITHIN 5	SERVICE CON	A	4				
00700 ENTRY	POINT	3	ENTRY PO	INT	A	4				
20622 WELL		2	WELL		A	۹				
		Co	ontact Info	ormation						
Name			Organization						Job Title	
Mr. James Keesli	ng		7-Eleven				Facilit	ties Mgr		
Mailing Address L	ine One	Mailing Addr	ess Line Two				City		State	Zip Code
2711 Easton Road	I					Willow (Grove		PA	19090
Business Phone	Extension	Fax Mo	obile Phone	Emergency F	Phone	Email Ac	dress			
732-730-4569						James.K	eesling	g@7-11.c	com	
Contact Role(s):	Administrative Conta	ct								
		p owners and operators	- C - 11				duin lein n			

		~	5		0							
PWS ID	PWS Name						Cla	assification	Population	n Owr	ner Type	Primary Source
СТ0340024	7-ELEVEN STORE							NC	25		Р	GW
Local Address (w	nere applicable)				Service	Reside	ential	Commerc	ial Indust	rial	Combine	ed Agricultural
217 CLAPBOARD	RIDGE ROAD				Connectio	ns		1				
Towns Served: D	ANBURY					·		·				
Name				Or	ganization						Job Title	ē
Mr. Frank Catapa	ano			Gn	nc Group L	р			7-Elever	ı Rep		
Mailing Address I	ine One		Mailing Ad	dress	Line Two				City		State	Zip Code
Gmc Group Lp			3 Hickory P	ond I	Lane			Strath	am		NH	03885
Business Phone	e Extension	Fax	Ν	Nobil	e Phone	Emergen	cy Ph	one Email	Address			
781-223-7824												
Contact Role(s):	Legal Contact											
Please note the f	ollowing:											
1 The residual di	sinfectant concentra	tion must l	he measured	at the	same locati	on and time		ch total coli	form sample			

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.

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

Connecticut D Water (Quality Mon				<u> </u>	hedule		
PWS ID PWS Name	Zuanty Mon	itoring an	u con	*				rimary Source
CT0340034 7-ELEVEN STORE				NC		25	P	GW
Local Address (where applicable)		Service	Residen	-	ercial	Industrial	Combined	-
29 MILL PLAIN ROAD		Connections	Resident	1		maastnar	combined	Agriculturur
Towns Served: DANBURY				-	•			
	Moni	toring Requ	uiromo	ate				
Water System Facility: DISTRIBUTI				11.5				
Total Coliform (3100)						1 r	outine (RT)	per quarter
Sampling Point (Sampling Point ID)		Monitori	ng Period	Colle	ection Perio	od Compli	ance Status
Select from Inventory of Active San	npling Points		7/1/19 -	9/30/19			Co	mplete
			10/1/19 -	12/31/19			Cc	mplete
			1/1/20 -	3/31/20			Co	mplete
			4/1/20 -	6/30/20				
			7/1/20 -					
Physical Parameters (PPS)						1 r	outine (RT)	per quarter
Sampling Point (Sampling Point ID))		Monitori	ng Period	Colle	ection Perio		ance Status
Select from Inventory of Active San	npling Points		7/1/19 -	9/30/19			Co	mplete
			10/1/19 -	12/31/19			Co	mplete
			1/1/20	3/31/20			Co	mplete
			1/1/20-	5/51/20				inpiece
			4/1/20 -					inpiete
Water System Facility: ENTRY POIN	NT (WSF ID: 0070	0)		6/30/20				
Water System Facility: ENTRY POIN Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3)		-	4/1/20 -	6/30/20 9/30/20 ng Period 12/31/19	Colle	ection Peric	1 routine (F od Compli Cc	
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID			4/1/20 - 7/1/20 - Monitorii 1/1/19 -	6/30/20 9/30/20 ng Period 12/31/19 12/31/20	Colle	ection Peric	1 routine (F od Compli Cc	RT) per year ance Status mplete
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID)		4/1/20 - 7/1/20 - Monitori 1/1/19 - 1/1/20 - 1/1/21 -	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21	Colle	ection Peric	1 routine (F od Compli Cc	RT) per year ance Status mplete
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID)		4/1/20 - 7/1/20 - Monitori 1/1/19 - 1/1/20 - 1/1/21 -	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments		ection Perio	1 routine (F od Compli Cc Cc	RT) per year ance Status mplete
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID)	otification R	4/1/20 - 7/1/20 - Monitori 1/1/19 - 1/1/20 - 1/1/21 -	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments	ic Noti		1 routine (F od Compli Cc Cc	RT) per year ance Status mplete mplete
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3)) Public No	otification R Compliance	4/1/20 - 7/1/20 - Monitorii 1/1/19 - 1/1/20 - 1/1/21 - Require Notice	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments <u>Publ</u>	ic Noti red	fication	1 routine (F od Compli Co Co PN Cert	RT) per year ance Status mplete mplete
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3) Violation/Situation Total Coliform MCL Violation) Public No	Dtification R Compliance Period (1/15 - 9/30/15	4/1/20 - 7/1/20 - Monitori 1/1/19 - 1/1/20 - 1/1/21 - Sequire Notice Tier 2	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments Publ Requin 12/9/2	ic Noti red	<u>fication</u> Performed	1 routine (F od Compli Cc Cc <u>PN Cert</u> Due to DPH	RT) per year ance Status mplete mplete
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3) Violation/Situation Total Coliform MCL Violation	Public No 7/	Dtification R Compliance Period (1/15 - 9/30/15	4/1/20 - 7/1/20 - Monitori 1/1/19 - 1/1/20 - 1/1/21 - Sequire Notice Tier 2	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments Publ Requin 12/9/2	ic Noti red	fication Performed	1 routine (F od Compli Cc Cc Cc PN Cert Due to DPH 12/19/2015	RT) per year ance Status mplete mplete
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3) Violation/Situation Total Coliform MCL Violation Wat	Public No 7/ er System Fac	Dtification R Compliance Period (1/15 - 9/30/15	4/1/20 - 7/1/20 - Monitori 1/1/19 - 1/1/20 - 1/1/21 - Require Notice Tier 2 mpling	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments <u>Publ</u> Requin 12/9/2 Point Ir	ic Noti red 1 015 IVENI	<u>fication</u> Performed C Ory I Lead au rm Coppe	1 routine (F od Compli Cc Cc Cc <u>PN Cerr</u> <u>Due to DPH</u> 12/19/2015	RT) per year ance Status mplete mplete
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3) Violation/Situation Total Coliform MCL Violation Water System Water System Facility	Public No 7/ er System Fac Sampling Poir	otification R Compliance Period (1/15 - 9/30/15 ility and Sar at Sampling Poi	4/1/20 - 7/1/20 - Monitorii 1/1/19 - 1/1/20 - 1/1/21 - Require Notice Tier 2 mpling	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments Publ Requin 12/9/2	ic Noti, red l 015 IVENI Tota Colifoi	<u>fication</u> Performed C Ory I Lead au rm Coppe	1 routine (F od Compli Cc Cc Cc <u>PN Cerr</u> <u>Due to DPH</u> 12/19/2015	RT) per year ance Status mplete mplete tification Received Stage
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3) Violation/Situation Total Coliform MCL Violation Wat Water System Water System Facility Facility ID) Public No 7/ er System Fac Sampling Poir ID	Dtification R Compliance Period '1/15 - 9/30/15 ility and Sar It Sampling Poi Description	4/1/20 - 7/1/20 - 7/1/20 - 1/1/19 - 1/1/20 - 1/1/21 - Require Notice Tier 2 mpling nt	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments Publ Requin 12/9/2 Point Ir	ic Noti red 015 IVENI Tota Colifor Rule	<u>fication</u> Performed C Ory I Lead au rm Coppe	1 routine (F od Compli Cc Cc Cc <u>PN Cerr</u> <u>Due to DPH</u> 12/19/2015	RT) per year ance Status mplete mplete tification Received Stage
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3) Violation/Situation Total Coliform MCL Violation Wat Water System Water System Facility Facility ID) Public No 7/ er System Fac Sampling Poir ID 4	Dtification R Compliance Period (1/15 - 9/30/15 ility and Sar ility and Sar t Sampling Poi Description DISTRIBUTION	4/1/20 - 7/1/20 - 1/1/20 - 1/1/20 - 1/1/20 - 1/1/21 - Equire Notice Tier 2 mpling nt	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments Publ Requir 12/9/2 Point Ir Status A	ic Noti red I 015 IVENI Tota Colifor Rule Y	<u>fication</u> Performed C Ory I Lead au rm Coppe	1 routine (F od Compli Cc Cc Cc <u>PN Cerr</u> <u>Due to DPH</u> 12/19/2015	RT) per year ance Status mplete mplete tification Received Stage
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3) Violation/Situation Total Coliform MCL Violation Wat Water System Water System Facility Facility ID) Public No 7/ er System Fac Sampling Poir ID 4 4-1	Dtification R Compliance Period 1/15 - 9/30/15 ility and Sar ility and Sar Distribution Distribution Store Counte	4/1/20 - 7/1/20 - 7/1/20 - 1/1/19 - 1/1/20 - 1/1/21 - 3 equire Notice Tier 2 mpling nt N SYSTEM r Sink r Sink	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments Publ Requir 12/9/2 Point Ir Status A A	ic Noti red 015 IVENI Tota Colifor Rule Y Y	<u>fication</u> Performed C Ory I Lead au rm Coppe	1 routine (F od Compli Cc Cc Cc <u>PN Cerr</u> <u>Due to DPH</u> 12/19/2015	RT) per year ance Status mplete mplete tification Received Stage
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3) Violation/Situation Total Coliform MCL Violation Wat Water System Water System Facility Facility ID) Public No 7/ er System Fac Sampling Poir 1D 4 4 4-1 4-2	Dtification R Compliance Period '1/15 - 9/30/15 ility and Sar It Sampling Poi Description DISTRIBUTION Store Counte Store Counte	4/1/20 - 7/1/20 - 7/1/20 - 1/1/19 - 1/1/20 - 1/1/21 - 2 Cequire Notice Tier 2 mpling nt N SYSTEM r Sink r Sink r Sink	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments Publ Requin 12/9/2 Point Ir Status A A A	ic Noti red 1 015 IVENI Tota Colifor Rule Y Y Y Y	<u>fication</u> Performed C Ory I Lead au rm Coppe	1 routine (F od Compli Cc Cc Cc <u>PN Cerr</u> <u>Due to DPH</u> 12/19/2015	RT) per year ance Status mplete mplete tification Received Stage
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3) Violation/Situation Total Coliform MCL Violation Wat Water System Water System Facility Facility ID	Public No 7/ er System Fac Sampling Poir 1D 4 4 4-1 4-2 4-3	Dtification R Compliance Period (1/15 - 9/30/15 ility and Sar It Sampling Poi Description DISTRIBUTION Store Counte Store Counte Store Counte	4/1/20 - 7/1/20 - 7/1/20 - 1/1/19 - 1/1/20 - 1/1/21 - 2 Cequire Notice Tier 2 mpling nt N SYSTEM r Sink r Sink r Sink	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments Publ Requin 12/9/2 Point Ir Status A A A A A	ic Noti red 015 IVENI Tota Colifor Rule Y Y Y Y Y	<u>fication</u> Performed C Ory I Lead au rm Coppe	1 routine (F od Compli Cc Cc Cc <u>PN Cerr</u> <u>Due to DPH</u> 12/19/2015	RT) per year ance Status mplete mplete tification Received Stage
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3) Violation/Situation Total Coliform MCL Violation Wat Water System Water System Facility Facility ID)) Public No 7/ er System Fac Sampling Poin 1D 4 4 4-1 4-2 4-3 4-4 4-5	Dtification R Compliance Period (1/15 - 9/30/15 ility and Sar It Sampling Poi Description DISTRIBUTION Store Counte Store Counte Store Counte Store Counte Store Counte	4/1/20 - 7/1/20 - 7/1/20 - 1/1/19 - 1/1/20 - 1/1/21 - 3 Require Notice Tier 2 mpling nt N SYSTEM r Sink r Sink r Sink r Sink	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments Publ Requin 12/9/21 Point Ir Status A A A A A A A A A A	ic Noti red 015 IVENI Tota Colifor Rule Y Y Y Y Y Y	<u>fication</u> Performed C Ory I Lead au rm Coppe	1 routine (F od Compli Cc Cc Cc <u>PN Cerr</u> <u>Due to DPH</u> 12/19/2015	RT) per year ance Status mplete mplete tification Received Stage
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3) Violation/Situation Total Coliform MCL Violation Wat Water System Water System Facility Facility ID)) Public No 7/ er System Fac Sampling Poin 1D 4 4 4-1 4-2 4-3 4-4 4-5	Dtification R Compliance Period '1/15 - 9/30/15 ility and Sar Distribution DISTRIBUTION Store Counte Store Counte Store Counte Store Counte Store Counte Store Sink	4/1/20 - 7/1/20 - 7/1/20 - 1/1/19 - 1/1/20 - 1/1/21 - 2 Cequire Notice Tier 2 mpling nt N SYSTEM r Sink r Sink r Sink r Sink	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments Publ Requin 12/9/2 Point Ir Status A A A A A A A A A A A A A	ic Noti red 015 IVENI Tota Colifor Rule Y Y Y Y Y Y	<u>fication</u> Performed C Ory I Lead au rm Coppe	1 routine (F od Compli Cc Cc Cc <u>PN Cerr</u> <u>Due to DPH</u> 12/19/2015	RT) per year ance Status mplete mplete tification Received Stage
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID ENTRY POINT (3) Violation/Situation Total Coliform MCL Violation Wat Water System Water System Facility Facility ID	Public No 7/ er System Fac Sampling Poir 1D 4 4 4-1 4-2 4-3 4-4 4-3 4-4 4-5 DOWNSTREA	Diffication R Compliance Period 1/15 - 9/30/15 ility and Sar Distribution Distribution Store Counte Store Counte Store Counte Store Counte Store Counte Store Counte Store Sink WITHIN 5 SEF	4/1/20 - 7/1/20 - 7/1/20 - 1/1/19 - 1/1/20 - 1/1/21 - 2 Require Notice Tier 2 mpling nt N SYSTEM r Sink r Sink r Sink r Sink r Sink r Sink	6/30/20 9/30/20 ng Period 12/31/19 12/31/20 12/31/21 ments Publ Requin 12/9/2 Point Ir Status A A A A A A A A A A A A A	ic Noti red 015 IVENI Tota Colifor Rule Y Y Y Y Y Y	<u>fication</u> Performed C Ory I Lead au rm Coppe	1 routine (F od Compli Cc Cc Cc <u>PN Cerr</u> <u>Due to DPH</u> 12/19/2015	RT) per year ance Status mplete mplete tification Received Stage

						- P					
PWS ID	PWS Name					Classi	fication	Population	Owne	er Type	Primary Source
СТ0340034	7-ELEVEN STOR	E					NC	25		Р	GW
Local Address (w	vhere applicable)			Service	Residen	tial C	ommercia	al Industri	al C	Combine	ed Agricultural
29 MILL PLAIN R	OAD			Connections	5		1				
Towns Served: D	DANBURY				·	·		·			
			Cor	ntact Infor	mation)					
Name			0	rganization						Job Title	9
Mr. Richard Mu	rray		U	s Trust Co, Na	t. Assoc.			Sr Vice Pr	esider	nt	
Mailing Address	Line One		Mailing Addres	s Line Two				City		State	Zip Code
515 South Flowe	er Street		Suite 2700				Los Ang	gles		CA	90071-2291
Business Phon	e Extension	Fax	Mob	ile Phone E	Emergency	Phone	e Email A	ddress			
213-861-5065	5										
Contact Role(s):	Legal Contact, (Owner									
Name			0	rganization						Job Title	е
Mr. Richard M.	Warshany		7-	-Eleven Inc				Field Serv	ice Re	p.	
Mailing Address	Line One		Mailing Addres	s Line Two				City		State	Zip Code
10 Columbus Blv	/d						Hartfor	d		СТ	06106
Business Phon	e Extension	Fax	Mob	ile Phone E	Emergency	Phone	e Email A	ddress			
732-319-7897	7						Rich.W	arshany@F	mFacil	lityMain	ntenance.com
Contact Role(s):	Administrative	Contact									
Please note the	following:										
1. The residual d	lisinfectant concen	tration must b	pe measured at th	e same location	and time a	as each	total colifo	orm 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

	Connecticut De	•			U		ction	
	Water Qu	uality Monit	oring and Com	plianc	e Sche	edule		
PWS ID	PWS Name	-		Classificat	ion Popu	lation Owi	ner Type P	rimary Source
CT034007	4 AMBER ROOM			NC	2	25	Р	GW
Local Add	ress (where applicable)		Service Resident	tial Comm	nercial Ir	ndustrial	Combined	Agricultural
STACY RO	AD		Connections	1	L			
Towns Ser	ved: DANBURY							
		Monite	oring Requireme	nts				
Water Sy	stem Facility: DISTRIBUTIO		• •					
	liform (3100)							per quarter
	oling Point (Sampling Point ID)		Monitori	-	Collect	ion Period	-	ance Status
Selec	t from Inventory of Active Samp	ling Points	7/1/19 -					mplete
			10/1/19 -					mplete
			1/1/20 -				Co	mplete
			4/1/20 - 7/1/20 -					
Physical	Parameters (PPS)					1 rou	itine (RT)	per quarter
-	oling Point (Sampling Point ID)		Monitori	ng Period	Collect	ion Period		ance Status
Selec	t from Inventory of Active Samp	ling Points	7/1/19 -	9/30/19			Со	mplete
			10/1/19 -	12/31/19			Co	mplete
			1/1/20 -	3/31/20			Co	mplete
			4/1/20 -	6/30/20				
			7/1/20 -	9/30/20				
Water Sy	stem Facility: ENTRY POINT	(WSF ID: 00700)						
Nitrate A	And Nitrite (NOX)					1	routine (F	T) per year
	oling Point (Sampling Point ID)		Monitori	-	Collect	ion Period	Compli	ance Status
ENTR	Y POINT (3)		1/1/19 - 1				Со	mplete
			1/1/20 - 1				Со	mplete
			1/1/21 - 1	12/31/21				
	Water	System Facili	ty and Sampling	Point In	nvento	ry		
Water					Total	Lead and		
System	Water System Facility		Sampling Point		Coliform			Stage
Facility ID		ID	Description	Status		Rule Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM		Y			
		AR001	KIT SNK SINGLE FRONT		Y		Y	
		AR002	KIT HAND SNK FRONT	A	Y		Y	
		AR003	KIT SNK LARGE SINGLE	A	Y Y		Y	
		AR004 AR005	KIT SNK SMALL SINGLE KIT HAND SNK BACK	A	Y Y		Y Y	
		AR005	KIT SNK BACK SINGLE	A A	Y		Y	
		AR000	RR KITCHEN	A	Y		Y	
		AR007	RR MENS RR	A	Y		Y Y	
		AR008	RR LADY ROOM	A	Y		Y	
		AR010	SERVERS STATION	A	Ŷ		Ŷ	
		AR010	BAR SINK	A	Ŷ		Ŷ	
			WITHIN 5 SERVICE CON					
		UPSTREAM	WITHIN 5 SERVICE CON					
00700	ENTRY POINT	3	ENTRY POINT	. <u>, , , , , , , , , , , , , , , , , , ,</u>				
22817	WELL1	2	WELL #1	A				
,		-		/ `				

С		*	rtment o				<u> </u>	-			n	
	Wa	ter Qua	lity Moni	toring a	nd Con	nplia	nce S	Sch	edule	e		
PWS ID PV	NS Name					Classifi	cation	Popu	lation	Owner Typ	e Pr	imary Source
СТ0340074 А	MBER ROOM					Ν	С	2	25	Р		GW
Local Address (whe	ere applicable)			Service	Residen	tial Co	mmercia	al Ir	ndustria	l Comb	ined	Agricultural
STACY ROAD				Connection	าร		1					
Towns Served: DAI	NBURY											
		Water Sy	ystem Faci	lity and S	ampling	Point	t Inve	nto	ry			
Water System Water S Facility ID 22887 WELL2	System Facility		Sampling Poin ID 2	t Sampling F Descriptior WELL2		Sta A	Coli <u></u> tus R	otal iform ule		er	stos	Stage WQP 2 DBPR
	PHERIC STORA	GF TANK				-	-					
			Co	ntact Info	rmation							
Name				Drganization						Job T	itle	
Mr. Douglas Polist	ena			Amber Room				Dir	ector ()	perations		
Mailing Address Li			Mailing Addre						ity	Stat	P	Zip Code
1 Stacey Road							Danbu			СТ		06811
Business Phone	Extension	Fax	Mot	oile Phone	Emergency	Phone			SS			
203-748-3800	101	203-748-2	1472				doug@	thear	mberroo	om.net		
Contact Role(s):	dministrative	Contact, Leg	al Contact	I								
Name			C	Organization						Job T	itle	
Arc Properties LLC												
Mailing Address Li	ne One		Mailing Addre	ss Line Two				Ci	ity	Stat	e	Zip Code
14 Plumtrees Road							Danbu	ry		СТ		06810
Business Phone	Extension	Fax	Mot	oile Phone	Emergency	Phone	Email A	Addre	SS			
Contact Role(s):	-	Dwner										
Please note the fo	-											
1. The residual disi								orm sa	ample.			
 If a Collection Period Depending on re 								a a duil -	vic cubi-	et to choice	0 0 0 0	d any rolated
 Depending on re correspondence 												

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

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		ut Department				<u> </u>			ction	
		ter Quality Moi	hitoring an	a con						
PWS ID	PWS Name							Owi		rimary Source
CT0340144		RAFT CENTER, INC.			NC		25		Р	GW
	ess (where applicable)		Service	Residen	tial Com	nmercial	Industr	ial	Combined	Agricultura
81 KENOSI			Connections			1				
Towns Serv	ved: DANBURY									
		Mor	hitoring Requ	ireme	nts					
Water Sys	stem Facility: DISTR	RIBUTION SYSTEM (WS	SF ID: 00600)							
Total Col	iform (3100)						:	1 rou	itine (RT)	per quarter
Samp	ling Point (Sampling F	Point ID)		Monitori	ng Perio	d Coll	ection Pe	eriod	Compl	iance Status
Select	t from Inventory of Act	ive Sampling Points		7/1/19 -	9/30/19				Cc	omplete
				10/1/19 -						mplete
					3/31/20					mplete
					6/30/20					I
					9/30/20					
Physical	Parameters (PPS)							1 rou	itine (RT)	per quarter
-	ling Point (Sampling F	Point ID)		Monitori	ng Period	d Coll	ection Pe			iance Status
Select	t from Inventory of Act	ive Sampling Points		7/1/19 -	9/30/19				Cc	omplete
				10/1/19 -						mplete
					3/31/20					mplete
					6/30/20					
					9/30/20					
Water Svs	stem Facility: FNTR	Y POINT (WSF ID: 007	00)	.,_,	-,,					
	and Nitrite (NOX)	(_		_	_	1	routine (l	RT) per year
	ling Point (Sampling F	Point ID)		Monitori	na Perio	d Coll	ection Pe		-	iance Status
	Y POINT (3)			1/1/19 -	-			mou		omplete
LININ										omplete
				1/1/20 -					u	Inplete
		Other		1/1/21 -		L				
		Othe	r Compliance							
-	e Schedule Activity				Due Date		Achie	eved	Date	
RESPOND	TO SANITARY SURVEY				5/24/2018					
		Water System Fa	cility and Sa	npling	Point	Invent	tory			
Water						Tota	l Lead	l and		
	Water System Facility		oint Sampling Poi	nt		Colifo		-		Stage
Facility ID		ID	Description		Stati		e Rule	e Tier	Asbestos	WQP 2 DBP
00600	DISTRIBUTION SYSTEM	1 4	DISTRIBUTIO		I A	Y				
		BA001	KIT SNK LOW	ER LEVEL	А	Y			Y	
		BA002	SLOP SNK LL I	HANGER	А	Y			Y	
		BA003	RR LOWER LE	VEL 1	А	Y			Y	
		BA004	RR LOWER LE	VEL 2	А	Y			Y	
		BA005	RR 2ND FLOO	RR	А	Y			Y	
		BA006	RR 2ND FLOO	RL	А	Y			Y	
		DOWNSTRE	AM WITHIN 5 SEF		N A					
		UPSTREAM	WITHIN 5 SEF	VICE CON	N A					
00700	ENTRY POINT	3	ENTRY POINT		А					
	WELL	2	WELL		A					
	PRESSURE STORAGE									
33207										

					0			Γ-						
PWS ID	PWS Name							Clas	sification P	opulation	Owr	ner Type	Prim	ary Source
СТ0340144	BUSINESS AIRCR	AFT CENTER	R, INC.						NC	25		Р		GW
Local Address (wi	nere applicable)				Service	Reside	enti	ial	Commercial	Industri	al	Combine	d A	gricultural
81 KENOSIA AVE	NUE			(Connection	าร			1					
Towns Served: D	ANBURY													
			С	ont	act Info	rmatic	on							
Name				Org	anization							Job Title	3	
Mr. Scott Rousse	au			Bus	iness Aircra	aft Center	r, Ir	nc.		Manager				
Mailing Address L	ine One		Mailing Add	lress l	Line Two					City		State	Zi	ip Code
81 Kenosia Ave									Danbury			СТ	(06810
Business Phone	Extension	Fax	M	1obile	Phone	Emergen	ncy I	Pho	ne Email Ad	dress				
203-748-7000		203-790-	9000						scott@d	anburyavia	ation	.net		
Contact Role(s):	Administrative	Contact			i									
Name				Org	anization							Job Title	ž	
Mr. Santo Silvest	ro													
Mailing Address I	ine One		Mailing Add	lress l	Line Two					City		State	Zi	ip Code
81 Kenosia Ave.									Danbury			СТ	(06810
Business Phone	Extension	Fax	M	1obile	Phone	Emergen	ncy I	Pho	ne Email Ad	ldress				
203-748-7000														
Contact Role(s):	Owner				·									
Please note the f	ollowing:													
1. The residual di	sinfectant concent	tration must b	be measured a	t the s	same locatio	on and time	e as	eac	h total colifor	m sample.				
2. If a Collection I	Period is specified,	all water qua	ality samples m	nust b	e collected o	during the	spe	cifie	d period.					
3. Depending on	esults, additional	monitoring m	hay be required	d (i.e.	repeat or co	onfirmatio	n sa	mpl	es). This sche	dule is subj	ect to	change, a	and ar	ny 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 Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWS Name** Classification Population Owner Type Primary Source PWS ID Р CT0340234 **184 GREAT PLAIN ROAD** NC 36 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 184 GREAT PLAIN ROAD 1 Towns Served: DANBURY **Monitoring Requirements** Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) 1 routine (RT) per month **Compliance Status** Sampling Point (Sampling Point ID) **Monitoring Period Collection Period** Select from Inventory of Active Sampling Points 10/1/19 - 10/31/19 Complete 11/1/19 - 11/30/19 Complete 12/1/19 - 12/31/19 Complete 1/1/20 - 1/31/20 Complete 2/1/20 - 2/29/20 3/1/20 - 3/31/20 4/1/20 - 4/30/20 5/1/20 - 5/31/20 6/1/20 - 6/30/20 7/1/20 - 7/31/20 8/1/20 - 8/31/20 9/1/20 - 9/30/20 **Physical Parameters (PPS)** 1 routine (RT) per quarter Sampling Point (Sampling Point ID) Monitoring Period **Collection Period Compliance Status** Select from Inventory of Active Sampling Points 7/1/19 - 8/31/19 7/1-8/31 Complete **Physical Parameters (PPS)** 1 routine (RT) per month Sampling Point (Sampling Point ID) **Monitoring Period Collection Period Compliance Status** Select from Inventory of Active Sampling Points 10/1/19 - 10/31/19 Complete 11/1/19 - 11/30/19 Complete 12/1/19 - 12/31/19 Complete 1/1/20 - 1/31/20 Complete 2/1/20 - 2/29/20 3/1/20 - 3/31/20 4/1/20 - 4/30/20 5/1/20 - 5/31/20 6/1/20 - 6/30/20 7/1/20 - 7/31/20 8/1/20 - 8/31/20 9/1/20 - 9/30/20 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) 1 routine (RT) per quarter **Collection Period** Sampling Point (Sampling Point ID) **Compliance Status Monitoring Period** ENTRY POINT (3) 7/1/19 - 9/30/19 Complete 10/1/19 - 12/31/19 Complete 1/1/20 - 3/31/20 4/1/20 - 6/30/20 7/1/20 - 9/30/20

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
СТ0340234	184 GREAT PLAIN ROAD			NC	36	Р	GW
Local Address (w	here applicable)	Service	Residen	tial Commerci	al Industri	al Combine	ed Agricultural
184 GREAT PLAII	N ROAD	Connections		1			
Towns Served: D	ANBURY				·		

Public Notification Requirements

	Compliance	Notice	Public No	tification	PN Certi	fication
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received
Physical Parameters M&R Violation	9/1/19 - 9/30/19	3	12/8/2020		12/18/2020	
E. Coli M&R Violation	7/30/19 - 8/30/19	3	12/8/2020		12/18/2020	
E. Coli M&R Violation	7/30/19 - 8/30/19	3	12/8/2020		12/18/2020	
E. Coli M&R Violation	7/30/19 - 8/30/19	3	12/8/2020		12/18/2020	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	А	Y				
		DOWNSTREAM	WITHIN 5 SERVICE CON	А					
		UPSTREAM	WITHIN 5 SERVICE CON	А					
00700	ENTRY POINT	3	ENTRY POINT	А					
20628	WELL	2	WELL	А					

Name				Organization	1			Job Title	
Mr. Bruce Arnold				Ba Holdings	LLC		President		
Mailing Address Lin	e One	I	Mailing Ad	ddress Line Two			City	State	Zip Code
5 Cloverleaf Farm S	outh					Sherman		СТ	06784
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Add	dress		
917-681-0656		860-350-92	213			clarendor	n2200@gma	il.com	

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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Conne	ecticut Departmen	it of Public H	lealth	Dr	rinking	g Water S	Section	
	Water Quality Mo	onitoring and	d Con	ıpl	iance S	Schedule	•	
PWS ID PWS Nan	ne			Clas	sification	Population C	wner Type Pi	rimary Source
CT0340304 DAIRY &	ENERGY STOP				NC	25	Р	GW
Local Address (where app	licable)	Service	Residen	tial	Commerci	al Industrial	Combined	Agricultural
133 PADANARAM ROAD		Connections			1			
Towns Served: DANBURY								
	M	onitoring Requ	ireme	nts				
Water System Facility:	DISTRIBUTION SYSTEM (NSF ID: 00600)						
Total Coliform (3100)						1 r	outine (RT)	per quarter
Sampling Point (Sam	pling Point ID)		Monitori	ng P	eriod C	ollection Perio	od Compli	ance Status
Select from Inventory	y of Active Sampling Points		7/1/19 -	9/30	0/19		Со	mplete
			10/1/19 -	12/3	31/19		Co	mplete
			1/1/20 -	3/32	1/20		Со	mplete
			4/1/20 -					
			7/1/20 -					
Physical Parameters (PPS)					1 r	outine (RT)	per guarter
Sampling Point (Sam	-		Monitori	ng P	eriod C	ollection Perio	• • •	ance Status
	y of Active Sampling Points		7/1/19 -					mplete
		·	10/1/19 -					mplete
			1/1/20 -					mplete
			4/1/20 -					
			7/1/20 -					
Water System Facility:	ENTRY POINT (WSF ID: 00)700)	.,_,	-,-	-,			
Nitrate And Nitrite (N		,		-			1 routine (R	T) ner vear
Sampling Point (Sam	•		Monitori	na P	eriod C	ollection Perio		ance Status
	· · · · · · · · · · · · · · · · · · ·			-				
ENTRY POINT (3)			1/1/19 -					
ENTRY POINT (3)			1/1/19 - 1/1/20 -					mplete
ENTRY POINT (3)			1/1/20 -	12/3	1/20			
	WELL (WSE ID: 20631)			12/3	1/20			
Water System Facility:	WELL (WSF ID: 20631)		1/1/20 -	12/3	1/20	1.	Со	mplete
Water System Facility: E. Coli (3014)			1/1/20 - 1/1/21 -	12/3 12/3	1/20 1/21		Co routine (RT)	mplete per quarter
Water System Facility: E. Coli (3014) Sampling Point (Sam			1/1/20 - 1/1/21 - Monitori	12/3 12/3 ng P	1/20 1/21 eriod C	1 r ollection Perio	Co routine (RT) od Compli	mplete per quarter ance Status
Water System Facility: E. Coli (3014)			1/1/20 - 1/1/21 - Monitori 7/1/19 -	12/3 12/3 ng P 9/3(1/20 1/21 eriod C 0/19		Co routine (RT) od Compli Co	mplete per quarter ance Status mplete
Water System Facility: E. Coli (3014) Sampling Point (Sam			1/1/20 - 1/1/21 - Monitori 7/1/19 - 10/1/19 -	12/3 12/3 ng P 9/3(12/3	1/20 1/21 eriod C 0/19 31/19		Co routine (RT) od Compli Co Co	mplete per quarter ance Status mplete mplete
Water System Facility: E. Coli (3014) Sampling Point (Sam			1/1/20 - 1/1/21 - Monitori 7/1/19 - 10/1/19 - 1/1/20 -	12/3 12/3 ng P 9/3(12/3 3/32	1/20 1/21 eriod C D/19 31/19 1/20		Co routine (RT) od Compli Co Co	mplete per quarter ance Status mplete
Water System Facility: E. Coli (3014) Sampling Point (Sam			1/1/20 - 1/1/21 - Monitori 7/1/19 - 10/1/19 - 1/1/20 - 4/1/20 -	12/3 12/3 ng P 9/3(12/3 3/33	1/20 1/21 eriod C 0/19 31/19 1/20 0/20		Co routine (RT) od Compli Co Co	mplete per quarter ance Status mplete mplete
Water System Facility: E. Coli (3014) Sampling Point (Sam	ppling Point ID)		1/1/20 - 1/1/21 - Monitori 7/1/19 - 10/1/19 - 1/1/20 - 4/1/20 - 7/1/20 -	12/3 12/3 ng P 9/3(12/3 3/31 6/3(9/3(1/20 1/21 eriod C D/19 31/19 1/20 D/20 D/20		Co routine (RT) od Compli Co Co	mplete per quarter ance Status mplete mplete
Water System Facility: E. Coli (3014) Sampling Point (Sam WELL (2)	opling Point ID) Oth		1/1/20 - 1/1/21 - Monitori 7/1/19 - 10/1/19 - 1/1/20 - 4/1/20 - 7/1/20 -	12/3 12/3 ng P 9/3(12/3 3/31 6/3(9/3(1/20 1/21 eriod C D/19 31/19 1/20 D/20 D/20	ollection Perio	routine (RT) p od Compli Co Co Co	mplete per quarter ance Status mplete mplete
Water System Facility: E. Coli (3014) Sampling Point (Sam	opling Point ID) Oth		1/1/20 - 1/1/21 - Monitori 7/1/19 - 10/1/19 - 1/1/20 - 4/1/20 - 7/1/20 - Sched	12/3 12/3 12/3 9/30 12/3 3/32 6/30 9/30 9/30 Iule	1/20 1/21 eriod C 0/19 31/19 1/20 0/20 0/20 0/20 S Date		routine (RT) p od Compli Co Co Co	mplete per quarter ance Status mplete mplete
Water System Facility: E. Coli (3014) Sampling Point (Sam WELL (2)	opling Point ID) Oth		1/1/20 - 1/1/21 - Monitori 7/1/19 - 10/1/19 - 1/1/20 - 4/1/20 - 7/1/20 - Sched	12/3 12/3 12/3 9/30 12/3 3/32 6/30 9/30 9/30 Iule	1/20 1/21 eriod C D/19 31/19 1/20 D/20 D/20 es	ollection Perio	routine (RT) p od Compli Co Co Co	mplete per quarter ance Status mplete mplete
Water System Facility: E. Coli (3014) Sampling Point (Sam WELL (2) Compliance Schedule Action	opling Point ID) Oth ivity JRVEY		1/1/20 - 1/1/21 - Monitorii 7/1/19 - 10/1/19 - 1/1/20 - 4/1/20 - 7/1/20 - Sched	12/3 12/3 12/3 9/30 12/3 3/32 6/30 9/30 9/30 Ule Ule 12/	1/20 1/21 eriod C D/19 31/19 1/20 D/20 D/20 S Date 2016	ollection Perio	routine (RT) p od Compli Co Co Co	mplete per quarter ance Status mplete mplete
Water System Facility: E. Coli (3014) Sampling Point (Sam WELL (2) Compliance Schedule Acti RESPOND TO SANITARY SU	opling Point ID) Oth ivity JRVEY	er Compliance Notification R Compliance	1/1/20 - 1/1/21 - Monitorii 7/1/19 - 10/1/19 - 1/1/20 - 4/1/20 - 7/1/20 - Sched	12/3 12/3 12/3 9/30 12/3 3/3 6/30 9/30 9/30 0 10 10 10 10 10 10 11 1 /2/ 11 1 /2/ 12 /3	1/20 1/21 eriod C 0/19 31/19 1/20 0/20 0/20 ess Date 2016 ents	ollection Perio	Co Foutine (RT) od Compli Co Co Co Co	mplete per quarter ance Status mplete mplete
Water System Facility: E. Coli (3014) Sampling Point (Sam WELL (2) Compliance Schedule Action RESPOND TO SANITARY SU Violation/Situation	opling Point ID) Oth ivity JRVEY Public	er Compliance Notification R	1/1/20 - 1/1/21 - Monitorii 7/1/19 - 10/1/19 - 1/1/20 - 4/1/20 - 7/1/20 - Sched 6 equire	12/3 12/3 12/3 9/30 12/3 3/32 6/30 9/30 9/30 Ule 7/12/ 2:me	1/20 1/21 eriod C 0/19 31/19 1/20 0/20 0/20 ess Date 2016 ents	ollection Perio	Co routine (RT) od Compli Co Co Co Co Co	mplete per quarter ance Status mplete mplete mplete
Water System Facility: E. Coli (3014) Sampling Point (Sam WELL (2) Compliance Schedule Acti RESPOND TO SANITARY SU	opling Point ID) Oth ivity JRVEY Public	er Compliance Notification R Compliance	1/1/20 - 1/1/21 - Monitorii 7/1/19 - 10/1/19 - 1/1/20 - 4/1/20 - 7/1/20 - Sched 6 equire Notice	12/3 12/3 12/3 9/30 12/3 3/32 6/30 9/30 9/30 9/30 9/30 9/30 9/30 9/30 9	1/20 1/21 eriod C D/19 31/19 1/20 D/20 D/20 es Date 2016 ents Public N	ollection Perio Achieve otification	Co routine (RT) od Compli Co Co Co Co Co	mplete per quarter ance Status mplete mplete mplete
Water System Facility: E. Coli (3014) Sampling Point (Sam WELL (2) Compliance Schedule Action RESPOND TO SANITARY SU Violation/Situation	opling Point ID) Oth ivity JRVEY Public Dlation L Violation	er Compliance Notification R Compliance Period	1/1/20 - 1/1/21 - Monitori 7/1/19 - 1/1/20 - 4/1/20 - 7/1/20 - Sched 6 equire Notice Tier	12/3 12/3 12/3 9/30 12/3 3/32 6/30 9/30 9/30 9/30 9/30 9/30 9/30 9/30 9	1/20 1/21 eriod C 0/19 31/19 1/20 0/20 0/20 2016 ents Public N Required	ollection Perio Achieve otification	Co routine (RT) od Compli Co Co Co Co Co Co Co Co PN Cert Due to DPH	mplete per quarter ance Status mplete mplete mplete

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWSID PWS Name** Classification Population Owner Type Primary Source Р CT0340304 **DAIRY & ENERGY STOP** NC 25 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 133 PADANARAM ROAD 1 Towns Served: DANBURY Water System Facility and Sampling Point Inventory Total Water 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 Y 00600 DISTRIBUTION SYSTEM 4 DISTRIBUTION SYSTEM Α DOWNSTREAM WITHIN 5 SERVICE CON Δ UPSTREAM WITHIN 5 SERVICE CON А 00700 ENTRY POINT 3 ENTRY POINT A 2 WELL А 20631 WELL **DAIRY & ENERGY TREATMENT** 54202 SYSTEM 54204 **D&E BLADDER STORAGE TANK Contact Information** Organization Name Job Title Mr. Barry Connell Mailing Address Line One Mailing Address Line Two State City Zip Code 133 Padanaram Road 06811 Danbury CT **Business Phone** Extension Fax Mobile Phone Emergency Phone Email Address 203-798-0340 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

	Connecticut De	partme	nt of	f Public H	lealth	Dr	inki	ng V	Vater S	Section	
	Water Q	uality M	onit	coring an	d Con	npli	ianc	e Sc	hedule	<u>)</u>	
PWS ID	PWS Name					Clas	sificatio	on Po	pulation C	Owner Type P	rimary Source
СТ0340444	FEDERAL ROAD SUNOCO	I					NC		25	Р	GW
Local Address (where applicable)			Service	Residen	tial	Commo	ercial	Industrial	Combined	Agricultural
7 FEDERAL ROA	AD			Connections			1				
Towns Served:	DANBURY										
		Μ	onit	oring Requ	iireme	nts					
Water System	n Facility: DISTRIBUTIO	N SYSTEM (WSF I	D: 00600)							
Total Colifor	m (3100)								11	outine (RT)	per quarter
Sampling	Point (Sampling Point ID)				Monitori	ing Po	eriod	Colle	ection Peri	od Compli	ance Status
Select from	m Inventory of Active Samp	ling Points			7/1/19 -	9/30)/19	_		Co	mplete
					10/1/19 -	12/3	31/19			Со	mplete
					1/1/20 -	3/31	L/20			Со	mplete
					4/1/20 -		-				
					7/1/20 -	9/30	0/20				
-	ameters (PPS)									routine (RT)	•
	Point (Sampling Point ID)				Monitori			Colle	ection Perio		ance Status
Select from	m Inventory of Active Samp	ling Points			7/1/19 -						mplete
					10/1/19 -						mplete
					1/1/20 -					Со	mplete
					4/1/20 -		-				
					7/1/20 -	9/30	0/20				
-	n Facility: ENTRY POINT	(WSF ID: 0	0700)								
	Nitrite (NOX)							~ "		1 routine (R	
	Point (Sampling Point ID)				Monitori	-		Colle	ection Perio		ance Status
ENTRY PO	JINT (3)				1/1/19 -						mplete
					1/1/20 -					Co	mplete
		Dukt			1/1/21 -						
		Public	1	tification R	-						
			C	Compliance	Notice				fication		<u>ification</u>
Violation/Situa			0/4	Period	Tier		Requir		Performed		Received
Total Coliform Total Coliform				/05 - 9/30/05	2		0/19/2			10/29/2005	
	oliform M&R Violation			/05 - 10/31/05	2		1/19/2			11/29/2005	
Repeat Total Co				/05 - 10/31/05			4/12/20			4/22/2006	
	Wate	r System	Facil	ity and Sar	npling	PO	int In		-		
Water	tor Sustom Easility	Camplina	Doint	Sampling Poi	nt			Tota			Channe
System Wat	ter System Facility	Sampling ID	Point	Description	nı			Colifoı Rule		er ier Asbestos	Stage
-	TRIBUTION SYSTEM	4		DISTRIBUTION			<u>Status</u> A	Y	. nuic i		
00000 2131			ΒΕΔΜ	WITHIN 5 SER			A				
		FRSO		RR LOWER LE		v	A	Y		Y	
		FRSO		RR LADY RM I			A	Ŷ		Ŷ	
		FRSO		RR MENS RM			A	Ŷ		Ŷ	
		FRSO		UNISEX RR M		-	A	Ŷ		Ŷ	
		FRSO		KIT SNK			A	Ŷ		Ŷ	
		UPSTRI		WITHIN 5 SER		N	A	•			
00700 ENT	RY POINT	3		ENTRY POINT			A				
20636 WEI		3		ENTRY POINT WELL			A A	with dri	inking water	quality monitorin	a roquirom

(Connectic	ut Depa	rtme	ent of P	ublic F	Iealth	Dri	nking	ξW	Vater	Se	ction	
	Wa	ter Qual	lity N	I onitor	ing an	d Con	nplia	ance S	Scł	nedul	le		
PWS ID	PWS Name	Č									1	ner Type	Primary Sour
СТ0340444	FEDERAL ROAD	SUNOCO						NC		25		P	GW
Local Address (wl	here applicable)			Sei	rvice	Residen	tial C	ommerci	al	Industri	al	Combine	d Agricultur
7 FEDERAL ROAD				Со	nnections			1					
Towns Served: D	ANBURY												
		Water Sy	/stem	Facility	and Sa	mpling	Poir	nt Inve	nte	ory			
Water System Water Facility ID	System Facility			ng Point Sar D Des	mpling Poi scription	int	St	Col	otal iforr cule	n Cop	per	Asbesto	Stag s WQP 2 DB
				Contac	ct Infor	mation	1						
Name				Organ	ization							Job Title	9
Mr. Norbert E Mi	itchell			Nemc	o Limited I	Partnersh	ip.		V	ice-Presi	ident		
Mailing Address I	ine One		Mailing Address Line Two							City		State	Zip Code
P.O. Box 186								Danbu	ry			СТ	06813
Business Phone	e Extension	Fax		Mobile Pl	none E	mergency	Phone	e Email A	\ddr	ress			
203-744-0600		203-743-7	7978			203-948-	8561	nm3@	nem	nitchell.c	com		
Contact Role(s):	Legal Contact, C	Dwner											
Name				Organ	ization							Job Title	9
Mr. Matthew J. N	Mitchell			Norbe	ert E. Mitch	hell Co.			N	1anagem	nent		
Mailing Address I	ine One		Mailing	g Address Lin	e Two					City		State	Zip Code
PO Box 186								Danbu	ry			СТ	06813
Business Phone	e Extension	Fax		Mobile Pl	none E	mergency	Phone	e Email A	\ddr	ress			
203-744-0600		203-743-7	7978	203-948-	5788			mattm	@n	emitchel	ll.con	n	
Contact Role(s):	Administrative	Contact											
Please note the f	ollowing:												
1. The residual di	sinfectant concent	tration must b	e measu	red at the san	ne location	and time a	as each	total colif	orm	sample.			
2. If a Collection I	Period is specified,	all water qua	lity samp	oles must be c	ollected du	ring the sp	ecified	period.					
3 Depending on	results additional	monitoring m	av ho ro	auirad (i a rar	heat or con	firmation	amnles) This sel	hodu	lo is subi	oct to	change	and any related

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

	Connectic Wa	ut Departı ter Quality					0			ction	
PWS ID	PWS Name			-0 •						er Type P	rimary Source
CT0340614	KENTUCKY FRIEL	O CHICKEN OF DA	ANBURY,	INC.		N		25		P	GW
Local Address	(where applicable)			Service	Residen	tial Co	mmercial	Industri	al C	Combined	Agricultural
FEDERAL ROA	D			Connectio	ons		1				
Towns Served	: DANBURY										
			Mon	itoring Re	quireme	nts					
-	m Facility: DISTR	IBUTION SYSTE		•	•						
Total Colifo	• •										per quarter
	g Point (Sampling P				Monitori	-		llection Pe	riod		ance Status
Select fro	om Inventory of Act	ive Sampling Poir	nts		7/1/19 -						mplete
					10/1/19 -						mplete
					1/1/20 -					Со	mplete
					4/1/20 -						
					7/1/20 -	9/30/2	0				
-	rameters (PPS)									• •	per quarter
	g Point (Sampling P		- 4 -		Monitori			llection Pe	riod		ance Status
Select fro	om Inventory of Act	ive Sampling Poli	nts		7/1/19 -						mplete
					10/1/19 -						mplete
					1/1/20 -					Co	mplete
					4/1/20 -						
			ID. 0070	•	7/1/20 -	9/30/2	0				
	m Facility: ENTR	r POINT (WSF	ID: 0070	0)					-	/=	
	Nitrite (NOX)	a first (D)			Manifest	in a Davi	ad Ca	llestien De		-	RT) per year
ENTRY P	g Point (Sampling P				Monitori			llection Pe	rioa		ance Status mplete
ENTRY P					1/1/19 -						mpiete
					1/1/20 - 1/1/21 -						
		-	1.1								
		Ρι	IDIIC N	otificatio	n Require	ement	ts				
				Compliance	Notice		Public No	-			tification
Violation/Situ				Period	Tier		quired	Performe		ie to DPH	Received
Total Coliform	n M&R Violation			/1/10 - 3/31/2			9/2010		6/	/19/2010	
		Water Syste	em Fac	cility and S	Sampling	Poin	t Inver	tory			
Water		-					Tot				
	ater System Facility	Sam		nt Sampling			Colife			A a b a at a	Stage
Facility ID			ID	Descriptio		Sta			i ier	ASDESTOS	WQP 2 DBPR
00600 DIS	STRIBUTION SYSTEM		4 •/•••				А Ү ^				
				M WITHIN 5							
00700 51		U	PSTREAM		SERVICE CO						
			3	ENTRY PO		A					
20639 WE	<u> </u>		2	WELL		4	4				
				ontact Info							
Name				Organization						Job Title	
-	d Chicken of Danbu	-									
Mailing Addre		Mai	iling Addr	ess Line Two				City		State	Zip Code
P.O. Box 1015					-		Newbur	-		NY	12552
Business Ph	one Extension	Fax	Mo	bile Phone	Emergency	Phone	Email Ac	ldress			

		C			0		1					
PWS ID PV	WS Name						Classi	fication P	opulation	Owne	er Type	Primary Source
СТ0340614 К	ENTUCKY FRIE	D CHICKEN C	OF DANE	BURY, II	NC.		١	۱C	25		Р	GW
Local Address (whe	ere applicable)				Service	Resider	ntial Co	ommercial	Industri	al C	ombine	d Agricultural
FEDERAL ROAD					Connectior	ns		1				
Towns Served: DAI	NBURY								1			
Contact Role(s):	Dwner											
Name				C	Organization						Job Title	
Mr. Thomas N. Th	urber				(fc of Danbury	/, Inc.			Chair/Cec)		
Mailing Address Li	ne One	g Addre	Address Line Two				City		State	Zip Code		
P.O. Box 10150					Newburgh NY 1				12552			
Business Phone	Extension	Fax		Mot	Mobile Phone Emergency Pho			Email Ad	dress		l	
845-564-5250		845-564-	5261									
Contact Role(s):	egal Contact											
Name				C	Organization						Job Title	2
Mr. Carlos Calhou	n			k	۲fc				Area Man	ager		
Mailing Address Li	ne One		Mailing	g Addre	ss Line Two				City		State	Zip Code
One Federal Road								Danbury			СТ	06810
Business Phone	Extension	Fax		Mot	oile Phone	Emergency	y Phone	e Email Ad	ldress			
203-470-9901				516-775·	-3347	7 KFCNYCT@gmail.com						
Contact Role(s):	dministrative	Contact										
Please note the fo	llowing:											
1. The residual disi	nfectant concen	tration must b	pe measu	ired at th	he same locatio	on and time a	as each t	otal colifor	m 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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		/ater Qua		f Public toring a							,,,,		
PWS ID	PWS Name	atti Qua		toring a			ication				ne P	rimary	Source
CT0340894			F			N		2 2		P	рег	GW	
	ess (where applicat		<u> </u>	Service	Resident		mmercia		dustrial	Com	nined		
	HACK ROAD	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Connection			1		aastria	com	Jinea	7.8110	arcara
	ved: DANBURY						-						
			Monit	oring Rec	nuiromo	ntc							
Water Sys	stem Facility: DI	STRIBUTION S			laneme		_		_	_		_	
Total Col	iform (3100)								1 r	outine	(RT)	per qu	arter
Samp	ling Point (Samplin	g Point ID)			Monitori	ng Peri	od Co	ollecti	on Perio	od C	ompl	iance St	atus
Select	from Inventory of	Active Sampling	Points		7/1/19 -	9/30/1	.9				Сс	omplete	
					10/1/19 -	12/31/	'19				Сс	omplete	
					1/1/20 -	3/31/2	0				Сс	omplete	
					4/1/20 -	6/30/2	0						
					7/1/20 -	9/30/2	0						
-	Parameters(PPS ling Point (Samplin	-			Monitori	na Perio	od Co	ollecti	1 r on Perio	outine		per qua iance St	
	from Inventory of		Points		7/1/19 -	-						mplete	
	,				10/1/19 -							, mplete	
					1/1/20 -							, mplete	
					4/1/20 -								
					7/1/20 -								
Water Sys	stem Facility: EN	TRY POINT (V	VSF ID: 00700)										
Nitrate A	nd Nitrite (NOX)									1 routi	ne (I	RT) per	vear
	ling Point (Samplin				Monitori	ng Perio	od Co	ollecti	on Perio			iance St	-
ENTR	Y POINT (3)				1/1/19 - 1	12/31/1	19				Сс	mplete	
					1/1/20 - 1	12/31/2	20						
					1/1/21 -	12/31/2	21						
		Water S	ystem Facil	itv and Sa	ampling	Point	t Inve	ntor	'V				
Water System	Water System Faci		Sampling Point	-			То	tal form	Lead au Coppe				Cterro
Facility ID	water system raci	ncy	ID	Description		Cha		ule		ier Asbo	estos		Stage 2 DBP
-	DISTRIBUTION SYS	FM	4	DISTRIBUTI		<u>Sta</u>	lus	Y					
00000			DOWNSTREAM				-	•					
			UPSTREAM	WITHIN 5 S									
00700	ENTRY POINT		3	ENTRY POIN		 							
	WELL		2	WELL	-	, ,							
20010							<u>.</u>						
			1	ntact Info	rmation								
Name				rganization						Job	litle		
Ms. Maria				ichter Park G	olf Course				nager	-		7. 0	
	dress Line One		Mailing Addres	s Line I wo			Devil	Cit	ty	Sta		Zip Co	
100 Aunt H				ile Dhaire	Em ana an	Dham	Danbur	-		C	I	0681	.0
BUSINESS	Phone Extensio	203-792-4		ile Phone	Emergency	Phone	Email A	adres	iS				
	2000	203-792-4	т ут /										
203-792	ole(s): Administrat	ive Contact											

		~	<i>.</i>		0		1				
PWS ID	PWS Name						Class	fication	Population	Owner Type	Primary Source
СТ0340894	RICHTER PARK (GOLF COURS	E					NC	25	Р	GW
Local Address (w	here applicable)				Service	Resider	ntial C	ommerci	al Industri	al Combin	ed Agricultural
100 AUNT HACK	ROAD				Connectior	าร		1			
Towns Served: D	ANBURY						·		·		
Name				Or	ganization					Job Tit	le
Mr. Rob Dorsch				Richter Park Golf Course Superintendent							
Mailing Address	Line One		Mailing	iling Address Line Two					City	State	Zip Code
100 Aunt Hack R	oad							Danbu	ry	СТ	06811
Business Phone	e Extension	Fax		Mobil	le Phone	Emergenc	y Phon	e Email /	Address		
203-744-4482 203-791-2217							ROBDORSCH@SBCBLOBAL.NET				
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.

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.

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

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 CT0341034 ACLS PROPERTIES INC. NC 40 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections **132 FEDERAL ROAD** 3 Towns Served: DANBURY **Monitoring Requirements** Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) 1 routine (RT) per month **Compliance Status** Sampling Point (Sampling Point ID) **Monitoring Period Collection Period** Select from Inventory of Active Sampling Points 10/1/19 - 10/31/19 Complete 11/1/19 - 11/30/19 Complete 12/1/19 - 12/31/19 Complete 1/1/20 - 1/31/20 Complete 2/1/20 - 2/29/20 3/1/20 - 3/31/20 4/1/20 - 4/30/20 5/1/20 - 5/31/20 6/1/20 - 6/30/20 7/1/20 - 7/31/20 8/1/20 - 8/31/20 9/1/20 - 9/30/20 Total Coliform (3100) 3 repeat (RP) per period Sampling Point (Sampling Point ID) Monitoring Period **Collection Period Compliance Status** Select from Inventory of Active Sampling Points 10/17/19 - 10/22/19 Complete 11/16/19 - 11/21/19 11/16/19 - 11/21/19 11/16/19 - 11/21/19 Complete **Physical Parameters (PPS)** 1 routine (RT) per month **Collection Period Compliance Status** Sampling Point (Sampling Point ID) **Monitoring Period** Select from Inventory of Active Sampling Points 10/1/19 - 10/31/19 Complete 11/1/19 - 11/30/19 Complete 12/1/19 - 12/31/19 Complete 1/1/20 - 1/31/20 Complete 2/1/20 - 2/29/20 3/1/20 - 3/31/20 4/1/20 - 4/30/20 5/1/20 - 5/31/20 6/1/20 - 6/30/20 7/1/20 - 7/31/20 8/1/20 - 8/31/20 9/1/20 - 9/30/20 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) 1 routine (RT) per year Sampling Point (Sampling Point ID) **Compliance Status Monitoring Period Collection Period** ENTRY POINT (3) 1/1/19 - 12/31/19 Complete 1/1/20 - 12/31/20 1/1/21 - 12/31/21

	Connecticut Dep Water Out		of Public H nitoring and			0			
PWS ID	PWS Name		intoring and		Classifica				rimary Source
CT0341034	ACLS PROPERTIES INC.				NC		40	P	GW
	where applicable)		Service	Resident		mercial		Combined	-
132 FEDERAL R			Connections	neoraem		3	maastinai		, Britanan
Towns Served:						•			
	-	Mon	itoring Requ	ireme	nts				
Water System	Facility: WELL (WSF ID:					_			
E. Coli (3014	.)						1 tr	iggered (TG) per period
Sampling	Point (Sampling Point ID)			Monitorii	ng Period	d Col	lection Perio	od Compl	iance Status
WELL (2)			1	0/16/19 -	· 10/22/1	.9		Сс	omplete
			1	1/15/19 -	11/21/1	.9		Co	omplete
			1	1/15/19 -	11/21/1	.9		Co	omplete
			1	1/15/19 -	11/21/1	.9		Co	omplete
E. Coli (3014	-								per quarter
	Point (Sampling Point ID)			Monitoriı	-	d Col	lection Perio		iance Status
WELL (2)				7/1/19 -					omplete
			1	.0/1/19 -		9			omplete
				1/1/20 -				Co	omplete
				4/1/20 -					
				7/1/20 -					
		Public N	otification R	equire					
			Compliance	Notice			<u>ification</u>		<u>tification</u>
Violation/Situa Total Coliform			Period	Tier 2		uired 2/2004	Performed		
Total Coliform			1/1/04 - 6/30/04 1/1/04 - 3/31/04	2	-	2/2004		11/22/2004 11/22/2004	
	eters M&R Violation		l/1/04 - 5/31/04	3		2/2004		11/22/2004	
	eters M&R Violation		L/1/04 - 3/31/04	3		2/2004		11/22/2004	
Total Coliform			7/1/04 - 9/30/04	2	-	2005		2/12/2005	
Total Coliform)/1/04 - 12/31/04	2		/2005		6/29/2005	
	trite M&R Violation		/1/04 - 12/31/04	2		/2005		6/29/2005	
	eters M&R Violation)/1/04 - 12/31/04	3		/2006		5/30/2006	
			cility and San				tory	-,,	
Water						Tote	-	nd	
	ter System Facility		int Sampling Poir	nt		Colifo			Stage
Facility ID		ID	Description		Stati			ier Asbestos	WQP 2 DBPR
00600 DIST	FRIBUTION SYSTEM	4	DISTRIBUTION			Y			
			AM WITHIN 5 SER	VICE CON	I A				
		RRATT	RR AT AND T		A	Y		Y	
		RRSUBWA		D. 611.11	A	Y		Y	
		SUBHAND			A	Y		Y	
		SUBSLOP			A	Y		Y	
		SUBTRIPLE			A	Y		Y	
		UPSTREAM		VICE CON					
	RY POINT	3	ENTRY POINT		A				
20654 WEL		2	WELL		A				
59903 TRE	ATMENT PLANT								

	VV d	ter Qua	muy mon	ntoring a	nu coi	прпа	ances	scheuu	le		
PWS ID	PWS Name					Class	ification	Population	Owne	r Type	Primary Source
СТ0341034	ACLS PROPERTI	ES INC.					NC	40		Р	GW
Local Address (w	here applicable)			Service	Resider	ntial C	ommerci	al Industri	ial C	ombine	ed Agricultural
132 FEDERAL RO	٩D			Connection	าร		3				
Towns Served: D	ANBURY							1			!
			Co	rmatio	n						
Name				Organization Job Title						9	
Mr. Louis Sclafar	i			Acls Properties Inc President							
Mailing Address	ine One		Mailing Add	ress Line Two				City		State	Zip Code
132 Federal Road	l		Suite 103				Danbu	ry		СТ	06811
Business Phone	e Extension	Fax	M	obile Phone	Emergenc	y Phon	e Email A	Address			
203-778-2225			20	203-470-9156							
Contact Role(s):	Administrative	Contact, Leg	gal Contact, O	wner			·				
Please note the	ollowing:										

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.

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

	Connectic	ut Depa	rtme	nt of	Public	Health	Drir	nking	g Wa	ater	Se	ction	
		ter Qua						-	-				
PWS ID	PWS Name	C C	<i>J</i>		0							er Type F	rimary Sourc
СТ0341044	SUBWAY (MILL	PLAIN ROAD)				N		2			P	GW
Local Address	(where applicable)				Service	Residen	tial Co	mmerci	al In	dustria	al (Combined	Agricultura
71 MILL PLAIN	ROAD				Connection	ns		1					
Towns Served:	DANBURY												
			N	lonite	oring Rec	quireme	nts						
Water Systen	n Facility: DISTR	IBUTION S	YSTEM (WSF I	D: 00600)								
Total Colifor	m (3100)									1	rout		per quarter
Sampling	Point (Sampling P	oint ID)				Monitori	-		ollecti	ion Per	iod	Compl	iance Status
Select fro	m Inventory of Act	ive Sampling	Points			7/1/19 -							omplete
						10/1/19 -						Co	omplete
						1/1/20 -							
						4/1/20 -							
						7/1/20 -	9/30/2	0					
-	ameters (PPS)												per quarter
	Point (Sampling P					Monitori	-		ollecti	ion Per	iod		iance Status
Select fro	m Inventory of Act	ive Sampling	Points			7/1/19 -							omplete
						10/1/19 -						Co	omplete
						1/1/20 -							
						4/1/20 -							
						7/1/20 -	9/30/2	0					
	n Facility: ENTR	Y POINT (V	VSF ID: U	0700)							-		
	Nitrite (NOX)	1.00										-	RT) per year
	Point (Sampling P	oint ID)				Monitori	-		ollecti	ion Per	100		iance Status
ENTRY PC	JINT (3)					1/1/19 -							omplete
						1/1/20 -							
				- •1•		1/1/21 -							
		Water Sy	ystem	Facili	ty and Sa	ampling	Poin	t Inve	ntor	-			
Water			C	Detet	Constant in a	a ta t			otal 	Lead o			
System Wa Facility ID	ter System Facility	· ·	sampling ID	·	Sampling P Description		_		iform Sule	Copp		Achestos	Stage WQP 2 DBP
	TRIBUTION SYSTEM	1	4		DISTRIBUTI		<u>Sta</u>	lus	Y	Nule	i iei	ASDESIUS	WQF 2 DDF
00000 DIS				REAM	WITHIN 5 S				I				
			UPSTR		WITHIN 5 S								
00700 ENT	TRY POINT		3		ENTRY POIN		•						
00700 LINI			2		WELL	• •							
20655 W/F			2					`					
20655 WE				con	tact Info	mation							
									1			and a second second	
Name				0	ganization				_			Job Title	
Name Mr. David Ben			b. d = 111	Oı M	ill Plain Pack	age				perty C)wne	er	7: 0
Name Mr. David Ben Mailing Addres	ss Line One		Mailing	Oı M	-	age			Ci)wne	er State	Zip Code
Name Mr. David Ben Mailing Addres 71 Mill Plain Re	ss Line One oad		Mailing	OI M Address	ill Plain Pack Line Two			Danbu	Ci ¹ ry	ty)wne	er	Zip Code 06811
Name Mr. David Ben Mailing Addres	ss Line One oad one Extension	Fax 203-792-		OI M Address	ill Plain Pack Line Two	age Emergency	Phone	Email A	Ci ^r ry Addres	ty		er State	

	C J	0		L			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
СТ0341044	SUBWAY (MILL PLAIN ROAD)			NC	25	Р	GW
Local Address	(where applicable)	Service	Resider	ial Combine	ed Agricultura		
71 MILL PLAIN	I ROAD	Connections		1			
Towns Served	: DANBURY	ŀ					
Please note tl	ne following:						
1. The residua	al disinfectant concentration must be measu	red at the same location	and time a	as each total colif	orm sample.		
2. If a Collecti	on Period is specified, all water quality same	oles must be collected du	ring the sp	pecified period.			
1 0	on results, additional monitoring may be re lence sent by the DWS on or after the gener			1 1			,

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	Сс	onnectic Wa					: Health Ind Con			0			ction		
PWS ID	PW	/S Name	•	5		0						1	ner Type P	rimary	Source
СТ0341064	L TA	ORMINA RES	TAURANT						NC		28		Р	G١	
		e applicable)				Service	Residen	tial C	Comme	ercial	Industr	ial	Combined	Agri	cultura
84 BALL PC						Connectio	ons		1						
Towns Serv	ed: DAN	BURY										_			
				M	onit	oring Re	quireme	nts							
Water Sys	stem Fac	ility: DISTF	RIBUTION S	SYSTEM ()	NSF I	D: 00600)									
Total Col	iform (3	100)									2	l rou	itine (RT)	per qu	uarter
Samp	ling Poin	t (Sampling P	Point ID)				Monitori	ng Pe	riod	Colle	ction Pe	riod	Compl	iance S	itatus
Select	from Inv	entory of Act	ive Samplin	g Points			7/1/19 -	9/30/	/19				Co	mplet	e
							10/1/19 -	12/31	1/19	_			Cc	mplet	e
							1/1/20 -	3/31/	/20				Co	mplet	e
							4/1/20 -	6/30/	/20						
							7/1/20 -	9/30/	/20						
Physical I	Paramet	ers (PPS)									1	L rou	tine (RT)	per qı	uarter
Samp	ling Poin	t (Sampling P	Point ID)				Monitori	ng Pe	riod	Colle	ction Pe	riod	Compl	iance S	itatus
Select	from Inv	entory of Act	ive Sampling	g Points			7/1/19 -	9/30/	/19				Co	mplet	e
							10/1/19 -	12/31	1/19				Co	mplet	e
							1/1/20 -	3/31/	/20				Co	mplet	e
							4/1/20 -	6/30/	/20						
							7/1/20 -	9/30/	/20						
Water Sys	stem Fac	ility: ENTR	Y POINT (\	WSF ID: 00)700)										
Nitrate A	nd Nitri	te (NOX)										1	routine (F	RT) pe	r year
Samp	ling Poin	t (Sampling P	Point ID)				Monitori	ng Pe	riod	Colle	ection Pe	riod	Compl	iance S	itatus
ENTRY	Y POINT (3)					1/1/19 -	12/31	/19				Co	mplet	e
							1/1/20 -	12/31	./20				Co	mplet	e
							1/1/21 -	12/31	./21						
			Water S	System F	acili	ity and S	Sampling	Poir	nt In	vent	ory				
Water				-		-				Total	Lead	and			
System	Water Sy	stem Facility	,	Sampling	Point	Sampling	Point		(Colifor	т Сор	per			Stage
Facility ID				ID		Descriptio	n	St	tatus	Rule	Rule	Tier	Asbestos	WQP	2 DBP
00600	DISTRIBU	TION SYSTEM	/	4		DISTRIBUT	ION SYSTEM		А	Y					
				DOWNST	REAM	WITHIN 5	SERVICE CON	١	А						
				TR00	1	RR LADY R	OOM		А	Y			Y		
				TR00	2	RR MENS I	RR		А	Y			Y		
				TR00	3	HAND SIN	К		А	Y			Y		
				TR00	4	KIT SNK TR	RPL SNK		А	Y			Y		
				UPSTRE	AM	WITHIN 5	SERVICE CON	١	А						
00700	ENTRY PO	DINT		3		ENTRY PO	INT		А						
20656	WELL			2		WELL			А						
					Con	tact Info	ormation								
Name						rganization							Job Title		
Ms. Gina C	larizio					ormina Res	staurant			ſ	Owner		300 1100		
Mailing Ad		• One		Mailing A		s Line Two				L	City		State	Zip C	ode.
99 Hoyts H									Betl	hel	,		CT	068	
Business		Extension	Fax	<u>,</u>	Mobi	le Phone	Emergency	Phon			ress			000	
			, ux	-			203-792-								
	formation l cies contain	has been provide ned herein will n					systems mainta	in comp						ng requi	remen

Schedule Generation Date: 3/10/2020

						- P -					
PWS ID	PWS Name					Cla	ssification	Population	Owner Ty	/pe l	Primary Source
СТ0341064	TAORMINA RES	TAURANT					NC	28	Р		GW
Local Address (w	here applicable			Service	Resider	ntial	Commerc	al Industri	al Com	bined	d Agricultural
84 BALL POND R	OAD			Connections			1				
Towns Served: D	DANBURY				·				÷		
Contact Role(s):	Legal Contact,	Owner									
Name				Organization					Job	Title	
Mr. Jose Sari				Taormina Resta	urant						
Mailing Address	Line One		Mailing Addr	ess Line Two				City	Sta	ate	Zip Code
Taormina Restau	urant		84 Ball Pond	Road			New F	arifield	C	Т	06810
Business Phon	e Extension	Fax	Mo	bile Phone E	mergency	y Pho	one Email	Address	·		
203-746-1040)		203	3-313-3147			junior:	L699@aol.co	om		
Contact Role(s):	Administrative	Contact									
Please note the	following:										
1. The residual d	lisinfectant concer	tration must b	be measured at	the same location	and time a	as ead	ch total colif	orm sample.			
2. If a Collection	Period is specified	, all water qua	ality samples mu	ust be collected du	iring the sp	pecifie	ed period.				
3. Depending on	results, additiona	l monitoring m	hay be required	(i.e. repeat or con	firmation	samp	les). This sc	hedule is subj	ect to char	ge, a	nd 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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	· · · · · · · · · · · · · · · · · · ·		Public Healt oring and Co					cetion	
PWS ID	PWS Name		or mg and Co	-				vner Type F	Primary Source
CT034114					IC	2		P	GW
Local Add	ress (where applicable)		Service Resid	ential Co	mmerc	ial In	dustrial	Combined	Agricultura
128 FEDEF	RAL ROAD		Connections		1				
Towns Ser	rved: DANBURY					1			
		Monite	oring Requirem	ents					
Water Sy	stem Facility: DISTRIBUTION	SYSTEM (WSFI	D: 00600)						
Total Co	liform (3100)						1 ro	utine (RT)	per quarter
Samı	pling Point (Sampling Point ID)		Monite	oring Peri	iod (Collecti	on Period	l Compl	iance Status
Selec	ct from Inventory of Active Sampli	ng Points	7/1/1	9 - 9/30/1	.9			Co	omplete
			10/1/1	9 - 12/31,	/19			C(omplete
			1/1/2	0 - 3/31/2	20				
			4/1/2	0 - 6/30/2	20				
			7/1/2	0 - 9/30/2	20				
Physical	Parameters (PPS)						1 ro	utine (RT)	per quarter
Samj	pling Point (Sampling Point ID)		Monite	oring Peri	iod (Collecti	on Period	l Compl	iance Status
Selec	ct from Inventory of Active Sampli	ng Points	7/1/1	9 - 9/30/1	.9			Co	omplete
			10/1/1	9 - 12/31,	/19			Co	omplete
				0 - 3/31/2					
				0 - 6/30/2					
				0 - 9/30/2	20				
Water Sy	stem Facility: ENTRY POINT	(WSF ID: 00700)							
	And Nitrite (NOX)							-	RT) per year
	pling Point (Sampling Point ID)			oring Peri		Collecti	on Period		iance Status
ENTR	RY POINT (3)			9 - 12/31/				C	omplete
<u> </u>) - 12/31/					
			1/1/21	L - 12/31/	21				
	vstem Facility: WELL (WSF ID	: 20660)							
	3014)						1 ro	utine (RT)	per quarter
E. Coli (-								• •
Sam	pling Point (Sampling Point ID)			oring Peri		Collecti	on Period		iance Status
-	pling Point (Sampling Point ID)		7/1/1	9 - 9/30/1	19	Collecti	on Period	C	biance Status
Sam	pling Point (Sampling Point ID)		7/1/1 10/1/1	9 - 9/30/1 9 - 12/31/	.9 /19	Collecti	on Perioc	C	iance Status
Sam	pling Point (Sampling Point ID)		7/1/1 10/1/1 1/1/2	9 - 9/30/1 9 - 12/31/ 0 - 3/31/2	19 /19 20	Collecti	on Perioc	C	biance Status
Sam	pling Point (Sampling Point ID)		7/1/1 10/1/1 1/1/2 4/1/2	9 - 9/30/1 9 - 12/31/ 0 - 3/31/2 0 - 6/30/2	19 /19 20 20	Collecti	on Perioc	C	biance Status
Samı	pling Point (Sampling Point ID) L (2)		7/1/1 10/1/1 1/1/2 4/1/2 7/1/2	9 - 9/30/1 9 - 12/31/ 0 - 3/31/2 0 - 6/30/2 0 - 9/30/2	19 /19 20 20 20			C	biance Status
Samı	pling Point (Sampling Point ID) L (2)	System Facil	7/1/1 10/1/1 1/1/2 4/1/2	9 - 9/30/1 9 - 12/31/ 0 - 3/31/2 0 - 6/30/2 0 - 9/30/2	19 /19 20 20 20			C	biance Status
Samp WELL Weter	pling Point (Sampling Point ID) L (2) Water		7/1/1 10/1/1 1/1/2 4/1/2 7/1/2 ity and Samplir	9 - 9/30/1 9 - 12/31/ 0 - 3/31/2 0 - 6/30/2 0 - 9/30/2	19 /19 20 20 20 t Inve 7	entor ^{Total}	y Lead and	Cu Cu	iance Status omplete omplete
Samp WELL Water System	pling Point (Sampling Point ID) L (2) Water System Facility		7/1/1 10/1/1 1/1/2 4/1/2 7/1/2 ity and Samplin Sampling Point	9 - 9/30/1 9 - 12/31, 0 - 3/31/2 0 - 6/30/2 0 - 9/30/2 19 Poin	19 /19 20 20 20 t Inve <i>T</i>	entor otal	Y Lead and Copper	Cu Cu 	iance Status omplete omplete Stage
Samı WELL Water System Facility ID	pling Point (Sampling Point ID) L (2) Water Water System Facility	Sampling Point ID	7/1/1 10/1/1 1/1/2 4/1/2 7/1/2 ity and Samplir Sampling Point Description	9 - 9/30/1 9 - 12/31/ 0 - 3/31/2 0 - 6/30/2 0 - 9/30/2 ng Poin	19 /19 20 20 20 t Inve <i>T</i> <i>Col</i>	entor otal liform Rule	Y Lead and Copper	Cu Cu 	iance Status omplete omplete Stage
Samp WELL Water System	pling Point (Sampling Point ID) L (2) Water System Facility	Sampling Point ID 4	7/1/1 10/1/1 1/1/2 4/1/2 7/1/2 ity and Samplin Sampling Point Description DISTRIBUTION SYSTE	9 - 9/30/1 9 - 12/31/ 0 - 3/31/2 0 - 6/30/2 0 - 9/30/2 ng Poin Stc	19 /19 20 20 20 t Inve <i>T</i> <i>Col</i> <i>ntus</i>	entor otal	Y Lead and Copper	Cu Cu 	iance Status omplete omplete Stage
Samı WELL Water System Facility ID	pling Point (Sampling Point ID) L (2) Water Water System Facility	Sampling Point ID 4 DOWNSTREAM	7/1/1 10/1/1 1/1/2 4/1/2 7/1/2 ity and Samplin Sampling Point Description DISTRIBUTION SYSTE WITHIN 5 SERVICE C	9 - 9/30/1 9 - 12/31/ 0 - 3/31/2 0 - 6/30/2 0 - 9/30/2 1g Poin Ste M	19 /19 20 20 20 t Inve 7 <i>Col</i> <i>ntus</i>	entor otal liform Rule	Y Lead and Copper	Cu Cu 	iance Status omplete omplete Stage
Samp WELL Water System Facility ID 00600	pling Point (Sampling Point ID) L (2) Water Water Water System Facility DISTRIBUTION SYSTEM	Sampling Point ID 4 DOWNSTREAM UPSTREAM	7/1/1 10/1/1 1/1/2 4/1/2 7/1/2 ity and Samplin Sampling Point Description DISTRIBUTION SYSTE WITHIN 5 SERVICE C WITHIN 5 SERVICE C	9 - 9/30/1 9 - 12/31/ 0 - 3/31/2 0 - 6/30/2 0 - 9/30/2 ng Poin Ste EM	19 /19 20 20 20 t Inve t Inve A A A A	entor otal liform Rule	Y Lead and Copper	Cu Cu 	iance Status omplete omplete Stage
Samı WELL Water System Facility ID 00600	pling Point (Sampling Point ID) L (2) Water System Facility DISTRIBUTION SYSTEM ENTRY POINT	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3	7/1/1 10/1/1 1/1/2 4/1/2 7/1/2 ity and Samplin Sampling Point Description DISTRIBUTION SYSTE WITHIN 5 SERVICE C WITHIN 5 SERVICE C ENTRY POINT	9 - 9/30/1 9 - 12/31/ 0 - 3/31/2 0 - 6/30/2 0 - 9/30/2 0 - 9/30/2 1g Poin Stc Stc	19 /19 20 20 20 t Inve 7 Col atus 4 A A A A	entor otal liform Rule	Y Lead and Copper	Cu Cu 	biance Status
Samp WELL Water System Facility ID 00600	pling Point (Sampling Point ID) L (2) Water Water Water System Facility DISTRIBUTION SYSTEM	Sampling Point ID 4 DOWNSTREAM UPSTREAM	7/1/1 10/1/1 1/1/2 4/1/2 7/1/2 ity and Samplin Sampling Point Description DISTRIBUTION SYSTE WITHIN 5 SERVICE C WITHIN 5 SERVICE C	9 - 9/30/1 9 - 12/31/ 0 - 3/31/2 0 - 6/30/2 0 - 9/30/2 0 - 9/30/2 1g Poin Stc Stc	19 /19 20 20 20 t Inve t Inve A A A A	entor otal liform Rule	Y Lead and Copper	Cu Cu 	iance Status omplete omplete Stage

	vva	ter quu	110y 1101	mor mg u		npm		Junuar			
PWS ID	PWS Name					Class	ification	Population	Owner	r Type	Primary Source
СТ0341144	WIDOW BROWI	NS CAFE					NC	25	P)	GW
Local Address (w	here applicable)			Service	Resider	ntial C	ommerci	al Industri	ial Co	ombine	ed Agricultural
128 FEDERAL RO	AD			Connectio	ns		1				
Towns Served: D	ANBURY				ż	·			·		
			C	ontact Info	rmatio	n					
Name				Organization					J	ob Title	9
Ms. Aura Showa	h			Widow Brown	's Cafe						
Mailing Address	Line One		Mailing Add	ress Line Two				City		State	Zip Code
41 Carlson Ridge	Road						New M	lilford		СТ	06776-2935
Business Phon	e Extension	Fax	M	obile Phone	Emergenc	y Phon	e Email A	Address		·	
203-743-7021		203-792-	5138		860-671	-9410					
Contact Role(s):	Administrative	Contact, Leg	gal Contact, O)wner			·				
Please note the	following:										
	total for show to some some	and a second b		بالمحمد المتحد مالك	and a second attended		total calif.				

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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PWS ID	PWS Name	into ing un	u don		sification Po		vner Tyne Pi	rimary Source
CT0341164	18 MILL PLAIN ROAD			Ciu	NC	25	P	GW
	(where applicable)	Service	Residen	ntial	Commercial	Industrial	Combined	Agricultura
16, 18, 22 MILL		Connections	Residen	rtiai	1	maastria	combined	Agriculture
Towns Served:					-			
		nitoring Pogu	viromo	nto				
		onitoring Requ	ineme	:1115				
	n Facility: DISTRIBUTION SYSTEM (M	VSF ID: 00600)						-
Total Colifor							outine (RT)	-
	Point (Sampling Point ID)		Monitori	_		lection Period	-	ance Status
Select from	m Inventory of Active Sampling Points		10/1/19 -					mplete
			11/1/19 -		-			mplete
			12/1/19 -		-			mplete
			1/1/20 -					mplete
			2/1/20 -					mplete
			3/1/20 -				Со	mplete
			4/1/20 -					
			5/1/20 -					
			6/1/20 -					
			7/1/20 -					
			8/1/20 -					
			9/1/20 -	- 9/3	0/20			
-	ameters (PPS)						outine (RT)	•
	Point (Sampling Point ID)		Monitori	-		ection Period		ance Status
Select from	m Inventory of Active Sampling Points		10/1/19 -					mplete
			11/1/19 -					mplete
			12/1/19 -					mplete
			1/1/20 -		-			mplete
			2/1/20 -					mplete
			3/1/20 -				Со	mplete
			4/1/20 -					
			5/1/20 -	- 5/3	1/20			
			6/1/20 -					
			7/1/20 -					
			8/1/20 -					
			9/1/20 -	- 9/3	0/20			
Water System	n Facility: ENTRY POINT (WSF ID: 00	700)						
Nitrate And I	Nitrite (NOX)					-	L routine (R	T) per year
			Monitori	ing P	eriod Coll	lection Period	d Compli	ance Status
Sampling	Point (Sampling Point ID)							
Sampling ENTRY PO			1/1/19 -	12/3	1/19		Со	mplete
								mplete mplete
			1/1/19 -	12/3	31/20			-
	DINT (3)	er Compliance	1/1/19 - 1/1/20 - 1/1/21 -	12/3 12/3	1/20 1/21			-
ENTRY PO	DINT (3)		1/1/19 - 1/1/20 - 1/1/21 - Schec	12/3 12/3 dule	1/20 1/21	Achieved	Со	

		- // -	0/ =0 =0	
Public	c Notification R	equirem	nents	
	Compliance	Notice	Public Notification	PN Certification
tion/Situation	Period	Tier	Required Performed	Due to DPH Received

PWS ID	PWS Name				Classification P		Population	Owner Type	Primary Source
СТ0341164	18 MILL PLAIN ROAD					NC	25	Р	GW
Local Address	(where applicable)		Service	Resident	tial	Commerci	al Industria	al Combine	d Agricultural
16, 18, 22 MIL	L PLAIN ROAD		Connections			1			
Towns Served:	: DANBURY								
Total Coliform	M&R Violation	9/1/	19 - 9/30/19	3		12/8/2020		12/18/202	.0
Physical Param	neters M&R Violation	9/1/	19 - 9/30/19	3		12/8/2020		12/18/202	.0

Water System Facility and Sampling Point Inventory

Water				•		1 0		Total	Lead and		
System	Water S	ystem Facility		Sampling Point	t Sampling	Point		Coliform			Stage
Facility ID)	-		ID	Descriptio	n	Statu	s Rule		Asbestos	WQP 2 DBPF
00600	DISTRIBL	JTION SYSTEM	1	4	DISTRIBUT	ION SYSTEM	Α	Y			
				DOWNSTREAM	1 WITHIN 5	SERVICE CON	А				
				MPD001	KIT HAND	SNK 1	А	Y		Y	
				MPD002	KIT HAND	SNK 2	Α	Y		Y	
				MPD003	KIT SNK D	OUBLE	Α	Y		Y	
				MPD004	RR LADY R	OOM	Α	Y		Y	
				MPD005	RR MENS	RR	Α	Y		Y	
				MPD006	KIT SNK SI	NGLE SNK 1	А	Y		Y	
				MPD007	KIT SNK SI	NGLE SNK 2	А	Y		Y	
L				UPSTREAM	WITHIN 5	SERVICE CON	Α				
00700	ENTRY P	OINT		3	ENTRY PO	INT	Α				
20661	WELL			2	WELL		Α				
54198	WINDMI SYSTEM	LL DINER TRE	ATMENT								
54200	WX350 E TANKS(3	BLADDER STOF	RAGE								
				Cor	ntact Info	ormation					
Name				C	Organization					Job Title	
Emxm LLC	2										
Mailing Ac	ddress Lin	e One		Mailing Addres	ss Line Two			C	ity	State	Zip Code
16 Mill Pla	ain Road						D	anbury		СТ	06811
Busines	s Phone	Extension	Fax	Mob	oile Phone	Emergency Ph	none E	mail Addre	SS		
Contact R	ole(s): O	wner									
Name	, i			C	Organization					Job Title	
Mr. Georg	ge Marnel	akis									
Mailing Ac	ddress Lin	e One		Mailing Addres	ss Line Two			C	ity	State	Zip Code
108 Maple	e Tree Hill	Rd					S	outhbury		СТ	06488
Business	s Phone	Extension	Fax	Mob	oile Phone	Emergency Ph	none E	mail Addre	SS		
203-41	7-1269		203-426-	8019		203-788-51	53 g	marnelos@	me.com		
Contact R	ole(s): A	dministrative	Contact, Leg	al Contact		•					

	e y	0		1			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
СТ0341164	18 MILL PLAIN ROAD			NC	25	Р	GW
Local Address	where applicable)	Service	Residen	ntial Commerc	ial Industri	al Combine	ed Agricultura
16, 18, 22 MIL	PLAIN ROAD	Connections		1			
Towns Served:	DANBURY			·			
Please note th	e following:						
1. The residua	disinfectant concentration must be measured at	the same location	and time a	as each total colif	orm sample.		
2. If a Collection	n Period is specified, all water quality samples m	ust be collected du	ring the sp	ecified period.			
	on results, additional monitoring may be required ence sent by the DWS on or after the generation of					-	

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

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	Connecticut De	partmer	nt of	Public H	lealth I	Drinkir	ig Wa	ater S	Section	
	Water Qu	•					0			
PWS ID	PWS Name		ome	or mg and		L.			wner Type Pr	imary Source
CT034119						NC	2		S	GW
	ress (where applicable)			Service	Residentia			dustrial	Combined	Agricultural
	ROAD (RT 7), DANBURY, CT 068	10		Connections		2				
	ved: DANBURY	-								
		M	onite	oring Requ	iremen	ts				
Water Sy	stem Facility: DISTRIBUTIO	N SYSTEM (WSF I	D: 00600)						
Total Co	liform (3100)							1 r	outine (RT) p	er quarter
Samp	oling Point (Sampling Point ID)				Monitoring	g Period	Collect	ion Peric	d Complia	ince Status
Selec	t from Inventory of Active Samp	ling Points			7/1/19 - 9	/30/19			Out o	f Service
					4/1/20 - 6					
					7/1/20 - 9	/30/20				
Physical	Parameters (PPS)							1 r	outine (RT) p	er quarter
Samp	oling Point (Sampling Point ID)				Monitoring	g Period	Collect	ion Peric	od Complia	ince Status
Selec	t from Inventory of Active Samp	ling Points			7/1/19 - 9	/30/19			Out o	f Service
					4/1/20 - 6	/30/20				
					7/1/20 - 9	/30/20				
Water Sy	stem Facility: ENTRY POINT	(WSF ID: 0	0700)							
Nitrate A	And Nitrite (NOX)								1 routine (R	T) per year
Samp	oling Point (Sampling Point ID)				Monitoring	g Period	Collecti	ion Peric	od Complia	ince Status
ENTR	RY POINT (3)				1/1/19 - 12	2/31/19			Out o	f Service
					1/1/20 - 12	2/31/20				
					1/1/21 - 12	2/31/21				
		Oth	er C	ompliance	Schedu	les				
Compliand	ce Schedule Activity				Du	ie Date		Achieve	d Date	
SEASONAL	L START UP COMPLETION				5/1	LO/2020				
		Public	Not	ification R	equiren	nents				
			С	ompliance	Notice		Notifica		<u>PN Certi</u>	
Violation/				Period	Tier	Require		formed	Due to DPH	Received
	form M&R Violation			/17 - 6/30/17	3	9/22/202			10/2/2018	
Total Colif	form M&R Violation			/17 - 7/31/17	3	12/18/20			12/28/2018	
	Water	System I	acil	ity and Sar	npling P	oint Inv				
Water	Martin Contain English	Constitution	Defet				Total	Lead ar		
System Facility ID	Water System Facility	Sampling ID	Point	Sampling Poir Description	nt		oliform Rule	Coppe	r er Asbestos	Stage
00600	DISTRIBUTION SYSTEM	4		DISTRIBUTION	I CVCTENA	<u>Status</u>	Y	Nule II	CI MONESLUS	WQF 2 DDPK
00000						A	T			
		UPSTRE		WITHIN 5 SER WITHIN 5 SER		A A				
		WM0		KIT SNK		A	Y		Y	
		WM00		RR MENS RR			Y Y		Y Y	
		WM00		RR LADY ROO	М	A A	Y Y		Y Y	
00700	ENTRY POINT	3		ENTRY POINT	. • 1	A	1		I	
20662	WELL			WELL						
20002	VVELL	2		VVELL		A				

	··· a	tor Quan	<i>ncy</i> 1/10		or mg a		P-	101	100 0	onouu	U			
PWS ID	PWS Name						Clas	sific	ation	Population	Own	er Type	Primary	Source
СТ0341194	WOOSTER MOU	NTAIN GUN	CLUB					NC	2	25		S	G۱	N
Local Address (w	here applicable)				Service	Reside	ntial	Con	nmercia	al Industri	al (Combine	d Agri	cultural
DANBURY ROAD	(RT 7), DANBUR	r, CT 06810			Connection	IS			2					
Towns Served: D	ANBURY													
			(Cont	tact Info	rmatio	n							
Name				Or	ganization							Job Title	è	
Mr. Dean A. Price	e			Da	inbury Shoo	ting Sport	s Assn	1		Director				
Mailing Address I	Line One		Mailing Ad	Idress	Line Two					City		State	Zip C	ode
P O Box 7145									Wilton			СТ	06897	-7154
Business Phone	e Extension	Fax		Mobil	e Phone	Emergend	y Pho	ne	Email A	ddress				
203-846-4612		203-762-9	909			203-846	5-4612	2	hopalo	ngdingdong	@aol	.com		
Contact Role(s):	Administrative	Contact			<u>i</u>									
Name				Or	ganization							Job Title	<u>j</u>	
Mr. David Cooley	Y			De	ep-Enginee	ring Unit				Supv Civil	Engir	neer		
Mailing Address I	Line One		Mailing Ad	Idress	s Line Two					City		State	Zip C	ode
163 Great Hill Ro	ad								Portlan	d		СТ	064	80
Business Phone	e Extension	Fax	1	Mobil	e Phone	Emergend	y Pho	ne	Email A	ddress				
860-342-2215		860-344-2	2560	860-2	05-7552	860-424	-3333	3	david.c	ooley@ct.g	ov			
Contact Role(s):	Legal Contact, (Dwner	·		·									
Please note the f	following:													
1. The residual di	sinfectant concent	tration must b	e measured	at the	same locatio	n and time	as ead	ch to	tal colifo	orm 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

	Water Quality M	nonntor mg an						
PWS ID	PWS Name		Cla			Owr		imary Sourc
CT0341244	PAPPADELLA'S RESTAURANT	1		NC	25		Р	GW
	where applicable)	Service	Residential	Commerci	al Industr	ial	Combined	Agricultur
.29 PANDANRA		Connections		1				
owns Served:	DANBURY							
	Ν	Monitoring Requ	irements	5				
Nater System	Facility: DISTRIBUTION SYSTEM	(WSF ID: 00600)						
Total Coliforn						1 ro	utine (RT)	per montl
Sampling	Point (Sampling Point ID)		Monitoring F	Period C	ollection Pe	riod	Complie	ance Status
Select from	n Inventory of Active Sampling Points		10/1/19 - 10/	/31/19			Со	mplete
			11/1/19 - 11/	/30/19			Coi	mplete
			12/1/19 - 12/	31/19			Со	mplete
			1/1/20 - 1/3	1/20			Со	mplete
			2/1/20 - 2/2	9/20				
			3/1/20 - 3/3	1/20				
			4/1/20 - 4/3	-				
			5/1/20 - 5/3					
			6/1/20 - 6/3	-				
			7/1/20 - 7/3					
			8/1/20 - 8/3					
			9/1/20 - 9/3	0/20				
•	meters (PPS)						utine (RT)	•
	Point (Sampling Point ID)		Monitoring F		ollection Pe	eriod		ance Status
Select from	n Inventory of Active Sampling Points		10/1/19 - 10/					mplete
			11/1/19 - 11/					mplete
			12/1/19 - 12/					mplete
			1/1/20 - 1/3				Со	mplete
			2/1/20 - 2/2					
			3/1/20 - 3/3					
			4/1/20 - 4/3					
			5/1/20 - 5/3					
			6/1/20 - 6/3					
			7/1/20 - 7/3					
			8/1/20 - 8/3					
Nator System	Eacility: ENTRY DOINT (M/SE ID)	00700)	9/1/20 - 9/3	0/20				
	Facility: ENTRY POINT (WSF ID:	00700j				4	noutino (D	T)
	Nitrite (NOX) Point (Sampling Point ID)		Monitoring F	Deriod (ollection Pe		routine (R	ance Status
ENTRY POI			1/1/19 - 12/3			nou	-	mplete
			1/1/20 - 12/3	-			0	inpiete
			1/1/21 - 12/3					
		ther Compliance						
Competition C 1					A -1.*		Dete	
Compliance Sch				Date	Achie	eved	Date	
LESPOND TO SA	ANITARY SURVEY			/2016				
	water System	Facility and Sar	npling Po		-			
Water	er System Facility Samplin	ng Point Sampling Poi			otal Lead i <u>form Cop</u>			

Schedule Generation Date: 3/10/2020

	wa	ter Qual	ity Monit	oring a	na con	трпа	nce 5	cneau	le		
PWS ID	PWS Name					Classif	ication	Population	Owner	Type P	rimary Sourc
СТ0341244	PAPPADELLA'S F	RESTAURANT				N	С	25	Р		GW
Local Address (where applicable)			Service	Residen	tial Co	mmercia	l Industr	ial Co	mbined	Agricultura
129 PANDANRA	M ROAD			Connection	ns		1				
Towns Served:	DANBURY			÷	·	·		·	·		
, Facility ID			ID	Description	1	Sto	itus Ri	, ule Rule	e Tier As	bestos	WQP 2 DBF
00600 DIST	RIBUTION SYSTEM	1	4	DISTRIBUTI	ON SYSTEM			Y			
			DOWNSTREAM	WITHIN 5 S	ERVICE COM	N /	4				
			UPSTREAM	WITHIN 5 S	ERVICE COM	N A	4				
00700 ENT	RY POINT		3	ENTRY POIN	NT		4				
20664 WEL	L		2	WELL			4				
			Con	tact Info	rmation	ľ					
Name			01	rganization					ol	b Title	
Mr. Tony Rand	hawa			appadella's R	estaurant			Property	Owner		
Mailing Address			Mailing Address					City		state	Zip Code
124 West King S	Street						Danbur	y		СТ	06811
Business Phor	ne Extension	Fax	Mobi	le Phone	Emergency	Phone	Email A	ddress	I		
203-797-997	9		203-2	240-6470	203-240-	6470					
Contact Role(s)	Owner						-1				
Name	·		OI	rganization					Jo	b Title	
Mr. Andres Me	dina		Pa	appadella's R	lestaurant			Chef			
Mailing Address	s Line One		Mailing Address	s Line Two				City	S	state	Zip Code
129 Pandanram	Road						Danbur	у		СТ	06811
Business Phor	ne Extension	Fax	Mobi	le Phone	Emergency	Phone	Email A	ddress			
203-743-680	4	203-297-6	6046								
Contact Role(s)	Administrative	Contact, Leg	al Contact, Owr	ner							
Name			Oi	rganization					Jo	b Title	
Mr. Luis Alvare	z		Pa	appadella's R	lestaurant		1	Chef			
Mailing Address	s Line One		Mailing Address	s Line Two				City	S	state	Zip Code
129 Pandanram	ı Road						Danbur	у		СТ	06811
Business Phor	ne Extension	Fax	Mobi	le Phone	Emergency	Phone	Email A	ddress			
203-743-680	4	203-297-6	6046								
Contact Role(s)	Owner										
Please note the	e following:										
L. The residual	disinfectant concen	tration must be	e measured at the	e same locatio	on and time a	s each t	otal colifo	rm sample.			

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

End of schedule

	Connecticut Dep					o Cal	adula	cction		
		ality Monit	oring an	a com	<u> </u>					
PWS ID	PWS Name							ner Type P		
СТ0341294	CHUCKS STEAK HOUSE				NC		25	Р	GV	
	(where applicable)		Service Connections	Resident			ndustrial	Combined	d Agric	ultura
20 SEGAR STRE			Connections		1					
Towns Served:	DANBURY									
			oring Requ	uireme	nts					
	n Facility: DISTRIBUTION	SYSTEM (WSFI	D: 00600)							
Total Colifor	• •							utine (RT)	• •	
	Point (Sampling Point ID)			Monitori	-	Collect	ion Perioa	-	liance S	
Select fro	m Inventory of Active Sampli	ng Points		7/1/19 -					omplete	
				10/1/19 -					omplete	
				1/1/20 -				Co	omplete	:
				4/1/20 -						
				7/1/20 -	9/30/20					
-	ameters (PPS)					~ ~		utine (RT)	• •	
	Point (Sampling Point ID)			Monitori	-	Collect	ion Perioa		liance S	
Select fro	m Inventory of Active Sampli	ng Points		7/1/19 -					omplete	
				10/1/19 -					omplete	
				1/1/20 -	3/31/20			Co	omplete	2
				4/1/20 -						
				4/1/20 - 7/1/20 -						
	n Facility: ENTRY POINT	(WSF ID: 00700)								
Nitrate And	Nitrite (NOX)	(WSF ID: 00700)		7/1/20 -	9/30/20			routine (I		-
Nitrate And Sampling	Nitrite (NOX) Point (Sampling Point ID)	(WSF ID: 00700)		7/1/20 - Monitori	9/30/20 ng Period	Collect	1 ion Period	l Compl	liance S	tatus
Nitrate And	Nitrite (NOX) Point (Sampling Point ID)	(WSF ID: 00700)		7/1/20 - Monitori 1/1/19 -	9/30/20 ng Period 12/31/19	Collect		I Compl Co	liance S omplete	tatus
Nitrate And Sampling	Nitrite (NOX) Point (Sampling Point ID)	(WSF ID: 00700)		7/1/20 - <i>Monitorii</i> 1/1/19 - 1/1/20 -	9/30/20 ng Period 12/31/19 12/31/20	Collect		I Compl Co	liance S	tatus
Nitrate And Sampling	Nitrite (NOX) Point (Sampling Point ID)	(WSF ID: 00700)		7/1/20 - Monitori 1/1/19 -	9/30/20 ng Period 12/31/19 12/31/20	Collect		I Compl Co	liance S omplete	tatus
Nitrate And Sampling	Nitrite (NOX) Point (Sampling Point ID) DINT (3)	(WSF ID: 00700) System Facili		7/1/20 - Monitorii 1/1/19 - 1/1/20 - 1/1/21 -	9/30/20 ng Period 12/31/19 12/31/20 12/31/21		ion Perioa	I Compl Co	liance S omplete	tatus
Nitrate And Sampling ENTRY PC	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water	System Facili	ity and Sai	7/1/20 - Monitorii 1/1/19 - 1/1/20 - 1/1/21 - mpling	9/30/20 ng Period 12/31/19 12/31/20 12/31/21	vento Total	ion Perioa r y Lead and	l Compl	liance S omplete	tatus
Nitrate And Sampling ENTRY PC Water System Wa	Nitrite (NOX) Point (Sampling Point ID) DINT (3)	System Facili	ity and Sar Sampling Poi	7/1/20 - Monitorii 1/1/19 - 1/1/20 - 1/1/21 - mpling	9/30/20 ng Period 12/31/19 12/31/20 12/31/21	ivento Total Coliform	ion Perioa r y Lead and Copper	l Compl	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water ter System Facility	System Facili Sampling Point ID	i ty and Sa ı Sampling Poi Description	7/1/20 - Monitorii 1/1/19 - 1/1/20 - 1/1/21 - mpling int	9/30/20 ng Period 12/31/19 12/31/20 12/31/21 Point Ir Status	1Vento Total Coliform Rule	ion Perioa r y Lead and Copper	l Compl	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water	System Facili Sampling Point ID 4	i ty and Sa Sampling Poi Description DISTRIBUTIO	7/1/20 - Monitorii 1/1/19 - 1/1/20 - 1/1/21 - mpling int N SYSTEM	9/30/20 ng Period 12/31/19 12/31/20 12/31/21 Point Ir Status A	Total Coliform Rule Y	ion Perioa r y Lead and Copper	I Compl Ca Ca I I r Asbestos	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water ter System Facility	System Facili Sampling Point ID 4 CSH001	i ty and Sai Sampling Poi Description DISTRIBUTIOI KIT SNK DOUI	7/1/20 - Monitoria 1/1/19 - 1/1/20 - 1/1/21 - mpling int N SYSTEM BLE 1	9/30/20 ng Period 12/31/19 12/31/20 12/31/21 Point Ir Status	Total Coliform Rule Y Y	ion Perioa r y Lead and Copper	I Compl Ca Ca I I I A Sbestos	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water ter System Facility	System Facili Sampling Point ID 4 CSH001 CSH002	ity and Sai Sampling Poi Description DISTRIBUTIOI KIT SNK DOUI KIT SNK DOUI	7/1/20 - Monitorii 1/1/19 - 1/1/20 - 1/1/21 - mpling int N SYSTEM BLE 1 BLE 2	9/30/20 ng Period 12/31/19 12/31/20 12/31/21 Point Ir Status A	Total Coliform Rule Y Y Y	ion Perioa r y Lead and Copper	I Compl Ca Ca I I r Asbestos	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water ter System Facility	System Facili Sampling Point ID 4 CSH001 CSH002 CSH003	ity and Sai Sampling Poi Description DISTRIBUTION KIT SNK DOUI KIT SNK DOUI KIT SNK DOUI	7/1/20 - Monitoria 1/1/19 - 1/1/20 - 1/1/21 - mpling int N SYSTEM BLE 1 BLE 2 K	9/30/20 ng Period 12/31/19 12/31/20 12/31/21 Point Ir Status A A	Total Coliform Rule Y Y	ion Perioa r y Lead and Copper	I Compl Ca Ca I I I A Sbestos	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water ter System Facility	System Facili Sampling Point ID 4 CSH001 CSH002 CSH003 CSH004	ity and Sai Sampling Poi Description DISTRIBUTIOI KIT SNK DOUI KIT SNK DOUI KIT HAND SNI SERVERS STA	7/1/20 - Monitoria 1/1/19 - 1/1/20 - 1/1/21 - mpling int N SYSTEM BLE 1 BLE 2 K	9/30/20 ng Period 12/31/19 12/31/20 12/31/21 Point Ir Status A A A A	Total Coliform Rule Y Y Y	ion Perioa r y Lead and Copper	I Compl Ca Ca I I r Asbestos Y Y Y	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water ter System Facility	System Facili Sampling Point ID 4 CSH001 CSH002 CSH003 CSH004 CSH005	ity and Sai Sampling Poi Description DISTRIBUTION KIT SNK DOUI KIT SNK DOUI KIT SNK DOUI KIT HAND SNI SERVERS STA BAR SINK	7/1/20 - Monitorii 1/1/19 - 1/1/20 - 1/1/21 - mpling int N SYSTEM BLE 1 BLE 2 K T H SNK	9/30/20 ng Period 12/31/19 12/31/20 12/31/21 Point Ir Status A A A A A A A	Total Coliform Rule Y Y Y Y Y	ion Perioa r y Lead and Copper	I Compl Ca Ca Ca Ca Ca Ca Ca Ca Ca Ca Ca Ca Ca	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water ter System Facility	System Facili Sampling Point ID 4 CSH001 CSH002 CSH003 CSH004 CSH005 CSH006	ity and Sai Sampling Poi Description DISTRIBUTIOI KIT SNK DOUI KIT SNK DOUI KIT HAND SNI SERVERS STA	7/1/20 - Monitorii 1/1/19 - 1/1/20 - 1/1/21 - mpling int N SYSTEM BLE 1 BLE 2 K T H SNK	9/30/20 ng Period 12/31/19 12/31/20 12/31/21 Point Ir Status A A A A A A A	Total Coliform Rule Y Y Y Y Y Y	ion Perioa r y Lead and Copper	r Asbestos Y Y Y Y	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water ter System Facility	System Facili Sampling Point ID 4 CSH001 CSH002 CSH003 CSH004 CSH005 CSH006 CSH007	ity and Sai Sampling Poi Description DISTRIBUTIOI KIT SNK DOUI KIT SNK DOUI KIT SNK DOUI KIT HAND SNI SERVERS STA BAR SINK RR LADY ROO RR MENS RR	7/1/20 - Monitorii 1/1/19 - 1/1/20 - 1/1/21 - mpling int N SYSTEM BLE 1 BLE 2 K T H SNK	9/30/20 ng Period 12/31/19 12/31/20 12/31/21 Point Ir Status A A A A A A A A A A A A A	Total Coliform Rule Y Y Y Y Y Y Y Y	ion Perioa r y Lead and Copper	r Asbestos Y Y Y Y Y Y	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water ter System Facility	System Facili Sampling Point ID 4 CSH001 CSH002 CSH003 CSH004 CSH005 CSH006	ity and Sai Sampling Poi Description DISTRIBUTIOI KIT SNK DOUI KIT SNK DOUI KIT SNK DOUI KIT HAND SNI SERVERS STA BAR SINK RR LADY ROO RR MENS RR	7/1/20 - Monitorii 1/1/19 - 1/1/20 - 1/1/21 - mpling int N SYSTEM BLE 1 BLE 2 K T H SNK	9/30/20 ng Period 12/31/19 12/31/20 12/31/21 Point Ir Status A A A A A A A A A A A A A	Total Coliform Rule Y Y Y Y Y Y Y Y Y Y	ion Perioa r y Lead and Copper	r Asbestos Y Y Y Y Y Y Y	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water ter System Facility	System Facili Sampling Point ID 4 CSH001 CSH002 CSH003 CSH004 CSH005 CSH006 CSH007	ity and Sai Sampling Poi Description DISTRIBUTIOI KIT SNK DOUI KIT SNK DOUI KIT SNK DOUI KIT HAND SNI SERVERS STA BAR SINK RR LADY ROO RR MENS RR	7/1/20 - Monitorii 1/1/19 - 1/1/20 - 1/1/21 - mpling int N SYSTEM BLE 1 BLE 2 K T H SNK M RVICE CON	9/30/20 ng Period 12/31/19 12/31/20 12/31/21 Point Ir Status A A A A A A A A A A A A A	Total Coliform Rule Y Y Y Y Y Y Y Y Y Y	ion Perioa r y Lead and Copper	r Asbestos Y Y Y Y Y Y Y	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID 00600 DIS	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water ter System Facility	System Facili Sampling Point ID 4 CSH001 CSH002 CSH003 CSH004 CSH005 CSH006 CSH007 DOWNSTREAM	ity and Sai Sampling Poi Description DISTRIBUTION KIT SNK DOUN KIT SNK DOUN KIT HAND SNI SERVERS STA BAR SINK RR LADY ROO RR MENS RR WITHIN 5 SEF	7/1/20 - Monitoria 1/1/19 - 1/1/20 - 1/1/21 - mpling int N SYSTEM BLE 1 BLE 2 K T H SNK M RVICE CON	9/30/20 ng Period 12/31/19 12/31/20 12/31/21 Point Ir Status A A A A A A A A A A A A A	Total Coliform Rule Y Y Y Y Y Y Y Y Y Y	ion Perioa r y Lead and Copper	r Asbestos Y Y Y Y Y Y Y	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID 00600 DIS ³	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water ter System Facility TRIBUTION SYSTEM	System Facili Sampling Point ID 4 CSH001 CSH002 CSH003 CSH004 CSH005 CSH006 CSH007 DOWNSTREAM UPSTREAM	ity and Sai Sampling Poi Description DISTRIBUTIOI KIT SNK DOUI KIT SNK DOUI KIT HAND SNI SERVERS STAT BAR SINK RR LADY ROO RR MENS RR WITHIN 5 SEF WITHIN 5 SEF	7/1/20 - Monitoria 1/1/19 - 1/1/20 - 1/1/21 - mpling int N SYSTEM BLE 1 BLE 2 K T H SNK M RVICE CON	9/30/20 ng Period 12/31/19 12/31/21 Point Ir Status A A A A A A A A A A A A A	Total Coliform Rule Y Y Y Y Y Y Y Y Y Y	ion Perioa r y Lead and Copper	r Asbestos Y Y Y Y Y Y Y	iance S omplete omplete	tatus Stage
Nitrate And Sampling ENTRY PC Water System Wa Facility ID 00600 DIS 00600 DIS	Nitrite (NOX) Point (Sampling Point ID) DINT (3) Water ter System Facility TRIBUTION SYSTEM	System Facili Sampling Point ID 4 CSH001 CSH002 CSH003 CSH004 CSH005 CSH006 CSH007 DOWNSTREAM UPSTREAM 3	ity and Sai Sampling Poi Description DISTRIBUTIOI KIT SNK DOUI KIT SNK DOUI KIT SNK DOUI KIT HAND SNI SERVERS STAT BAR SINK RR LADY ROO RR MENS RR WITHIN 5 SEF WITHIN 5 SEF ENTRY POINT	7/1/20 - Monitoria 1/1/19 - 1/1/20 - 1/1/21 - mpling int N SYSTEM BLE 1 BLE 2 K T H SNK M RVICE CON	9/30/20 ng Period 12/31/19 12/31/20 12/31/21 Point Ir Status A A A A A A A A A A A A A	Total Coliform Rule Y Y Y Y Y Y Y Y Y Y	ion Perioa r y Lead and Copper	r Asbestos Y Y Y Y Y Y Y	iance S omplete omplete	tatus Stage

	vvc	itti Qua	muy mon	ntoring t		npi	iance .	Junuar		
PWS ID	PWS Name				Clas		sification	Population	Owner Type	Primary Source
СТ0341294	CHUCKS STEAK	HOUSE			N			25	Р	GW
Local Address (w	here applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
20 SEGAR STREE	Г			Connectio	ons		1			
Towns Served: D	ANBURY			i						
			C	ontact Info	ormatior	า				
Name				Organization					Job Titl	e
Mr. Hank Zaccar	а			Chucks Steak	house			Owner		
Mailing Address	Line One		Mailing Add	ress Line Two				City	State	Zip Code
20 Segar Street							Danbu	ry	СТ	06810
Business Phone	e Extension	Fax	M	obile Phone	Emergenc	y Pho	ne Email A	Address		
203-792-5555		203-792-	-5246		860-210	-1982	2			
Contact Role(s):	Administrative	e Contact, Le	gal Contact, C	Owner	÷		÷			
Please note the	following:									
1. The residual d	sinfectant conce	ntration must	be measured at	the same locat	ion and time	as eac	h total colif	orm 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

	Connecticut Dep					0			ction	
	`	ality Monit	oring an	d Com					T	
PWS ID	PWS Name					tion Pop		Owr	ner Type P	rimary Source
СТ0341314		DAD	1		NC		40		Р	GW
Local Addr	ress (where applicable)		Service	Resident			Industri	al	Combined	Agricultura
			Connections			4				
Towns Ser	ved: DANBURY	.		_						
		Monite	oring Requ	ireme	nts					
Water Sys	stem Facility: DISTRIBUTION	SYSTEM (WSF I	D: 00600)							
Total Col	liform (3100)						1	rou	tine (RT)	per quarter
Samp	oling Point (Sampling Point ID)			Monitorii	ng Period	Colle	ction Pe	riod	Compli	ance Status
Select	t from Inventory of Active Sampli	ng Points		7/1/19 -						mplete
					12/31/19					mplete
				1/1/20 -					Со	mplete
				4/1/20 -						
	- · ·			7/1/20 -	9/30/20					
-	Parameters (PPS)									per quarter
	oling Point (Sampling Point ID)	a - Delinte			ng Period	Colle	ction Pe	riod		ance Status
Select	t from Inventory of Active Sampli	ng Points		7/1/19 -						mplete
					12/31/19					mplete
				1/1/20 - 4/1/20 -					CO	mplete
				7/1/20 -						
Mator Sv	stem Facility: ENTRY POINT	()M/SE ID: 00700)		//1/20-	9/30/20					
	And Nitrite (NOX)							1	routino (P	T) per year
	bling Point (Sampling Point ID)			Monitorii	ng Period	Colle	ction Pe		-	ance Status
-	Y POINT (3)			1/1/19 - 1		conc		iiou		mplete
2					12/31/20					mpiete
				1/1/21 - 1						
Water Sv	stem Facility: WELL #1 (WSF	ID: 22958)		_, _,						
E. Coli (3							1	rou	tine (RT)	per quarter
-	oling Point (Sampling Point ID)			Monitoriı	ng Period	Colle	- ction Pe			ance Status
WELL				7/1/19 -	-					mplete
							mplete			
				1/1/20 -						mplete
				4/1/20 -						•
				7/1/20 -	9/30/20					
	Water	System Facili	ity and Sar	npling	Point I	nvent	ory			
Water			-			Total	-	and		
	Water System Facility	Sampling Point	Sampling Poi	nt		Colifori				Stage
Facility ID		ID	Description		Status	s Rule	Rule	Tier	Asbestos	WQP 2 DBPI
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	I SYSTEM	А	Y				
		DOWNSTREAM	WITHIN 5 SER	VICE CON	I A					
		UPSTREAM	WITHIN 5 SER	VICE CON	I A					
	ENTRY POINT	3	ENTRY POINT		Α					
00700										
	WELL #1	2	WELL		А					
	WELL #1 120 TREATMENT SYSTEM	2	WELL		A					

	Connectic	ut Depa	rtmen	t of	Public	Health	ı Dı	rinking	g W	'ater	Se	ction		
	Wa	ter Qua	lity Mo	onit	oring a	nd Con	npl	iance	Sch	edul	e			
PWS ID	PWS Name						Clas	ssification	Рор	ulation	Own	er Type	Primar	y Source
СТ0341314	120 CLAPBOARD	RIDGE ROA	D					NC		40		Р	G	iW
Local Address (w	here applicable)				Service	Resider	ntial	Commerc	ial I	ndustri	al (Combine	d Agr	icultural
					Connectior	าร		4						
Towns Served: D	ANBURY													
		Water Sy	ystem F	acili	ity and Sa	ampling	; Po	int Inve	ento	ry				
Water System Wate Facility ID	r System Facility		Sampling F ID	Point	Sampling P Description			Col	otal iform Rule		per	Asbesto	s WQF	Stage 2 DBPR
54192 WX35	0 PRESSURE STO	RAGE												
				Con	tact Info	rmatior	۱							
Name				Or	rganization							Job Title		
Dr. Ralph Giulia	10								Pr	operty	Owne	er		
Mailing Address	Line One		Mailing Ac	ddress	s Line Two				C	City		State	Zip	Code
120 Clapboard R	idge Road							Danbu	ry			СТ	06	810
Business Phon	e Extension	Fax		Mobi	le Phone	Emergency	y Pho	ne Email	Addre	ess				
203-744-5941		230-797-0	0865	203-2	64-9628	203-744	-5947	7 giulian	odds	@gmai	l.com			
Contact Role(s):	Administrative	Contact, Leg	al Contact	, Own	ner									
2. If a Collection	isinfectant concent Period is specified,	all water qua	lity samples	must	be collected o	during the sp	pecifie	ed period.		Ċ.				
	results, additional ce sent by the DWS	-								-				related

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

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

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWSID PWS** Name Classification Population Owner Type Primary Source Р CT0340013 UNITED METHODIST CHURCH OF DANBURY NC 25 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 5 CLAPBOARD RIDGE ROAD 1 Towns Served: DANBURY **Monitoring Requirements** Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) 1 routine (RT) per quarter **Collection Period Compliance Status** Sampling Point (Sampling Point ID) Monitorina Period Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Complete 10/1/19 - 12/31/19 Complete 1/1/20 - 3/31/20 Complete 4/1/20 - 6/30/20 7/1/20 - 9/30/20 **Physical Parameters (PPS)** 1 routine (RT) per quarter Sampling Point (Sampling Point ID) Monitorina Period **Collection Period Compliance Status** Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Complete 10/1/19 - 12/31/19 Complete Complete 1/1/20 - 3/31/20 4/1/20 - 6/30/20 7/1/20 - 9/30/20 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) 1 routine (RT) per year Sampling Point (Sampling Point ID) **Monitoring Period Collection Period Compliance Status** ENTRY POINT (3) 1/1/19 - 12/31/19 Complete 1/1/20 - 12/31/20 Complete 1/1/21 - 12/31/21 **Public Notification Requirements** Notice Compliance **Public Notification PN Certification** Violation/Situation Period Tier Required Performed Due to DPH Received 7/1/04 - 7/31/04 Total Coliform M&R Violation 2 4/29/2005 5/9/2005 Monochlorobenzene M&R Violation 1/1/05 - 3/31/05 10/17/2006 10/27/2006 3 Chlorodibromomethane M&R Violation 1/1/05 - 3/31/05 3 10/17/2006 10/27/2006 Total Coliform MCL Violation 10/1/06 - 12/31/06 2 11/25/2006 12/5/2006 Water System Facility and Sampling Point Inventory Water Total Lead and Water System Facility Sampling Point Sampling Point System Coliform Copper Stage ID Description Facility ID Rule Rule Tier Asbestos WQP 2 DBPR Status DISTRIBUTION SYSTEM 4 DISTRIBUTION SYSTEM Υ 00600 Α DOWNSTREAM WITHIN 5 SERVICE CON Α KS KIT SNK A Υ Y Ρ UM001 L RM BY OFF L SINK Y 1

UM004 M RM BY OFF R SINK Ρ 1 Υ UM005 WF BY OFFICE Ρ Υ 1 UM006 Ρ Υ L RM BY NURS L SINK 1 NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

L RM BY OFF R SINK

M RM BY OFF L SINK

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UM002

UM003

Schedule Generation Date: 3/10/2020

Connecticut Department of Public Health Drinking Water Section Wator Quality March

	Wat	ter Qua	lity Monit	or mg a	nu con	прпа	IICE .		Juui	C		
PWS ID	PWS Name			0		-					er Type Pi	rimary Source
СТ0340013	UNITED METHO	DIST CHURCI	OF DANBURY			N	С	2	5		Р	GW
Local Address	(where applicable)			Service	Resider	ntial Co	mmerci	al In	dustria	al (Combined	Agricultura
5 CLAPBOARD	RIDGE ROAD			Connectior	าร		1					
Towns Served:	DANBURY			1								1
		Water Sy	/stem Facili	ity and S	ampling	Poin	t Inve	ntoi	'y			
Water							Т	otal	Lead	and		
System Wa	iter System Facility		Sampling Point			Col	Coliform		per		Stage	
Facility ID			ID	Description	ו	Sta	tus R	ule	Rule	Tier	Asbestos	WQP 2 DBP
			UM007	L RM BY NU	JRS R SINK	I	0	Y	1			
			UM008	M RM BY N	IURS SINK	I	D	Y	1			
			UM009	KITCHEN		I	0	Y	1			
			UM010	EASTSIDE N	/ RM SINK	I	D	Y	1			
			UM011	EASTSIDE V	VM RM SIN	K I	D	Y	1			
			UM012	WESTSIDE I	M RM SINK	I	0	Y	1			
			UM013	WESTSIDE	WESTSIDE WM RM SINK			Y				
			UPSTREAM	WITHIN 5 S	ERVICE CO	N /	4					
00700 EN1	TRY POINT		3	ENTRY POI	NT	1	4					
11027 WE	LL		2	WELL		1	4					
Facility Classif Operator Nam		TER SYSTEM	Operator Type Certification(s)				NT PLANT OPERATOR - CLASS II					Certification Expiration
FOLEY, JAMES			CHIEF OPERATC				IT PLAN	T OPE	RATOR	R - CLA	ASS II	3/31/2023
				tact Info	rmatior	1		1				
Name			Or	rganization							Job Titlo	
	dist Church of Dan	oury									Job Title	
Vialling Addre				- Line True				C				Zia Carla
	ss Line One		Mailing Address	s Line Two			Dauba	Ci	ty		State	Zip Code
5 Clapboard Ri	idge Rd				Emorgona	, Dhana	Danbu	ry			State	Zip Code 06811-4525
	idge Rd	Fax		s Line Two le Phone	Emergency	/ Phone		ry			State	
5 Clapboard Ri Business Pho	idge Rd	Fax			Emergency	/ Phone		ry			State	
5 Clapboard Ri Business Pho Contact Role(s	idge Rd one Extension	Fax	Mobi		Emergency	/ Phone		ry			State	
5 Clapboard Ri Business Pho Contact Role(s Name	idge Rd one Extension s): Legal Contact, C	Fax	Mobi	le Phone			Email A	ry Addres			State CT Job Title	· ·
Clapboard Ri Business Pho Contact Role(s Name Mr. Peter Eato	idge Rd one Extension s): Legal Contact, C	Fax	Mobi	le Phone rganization nited Metho			Email A	ry Addres	ir, Tru		State CT Job Title	
Contact Role(s Name Mr. Peter Eato Mailing Addres	idge Rd Dne Extension S): Legal Contact, C Dn ss Line One	Fax	Or Ur	le Phone rganization nited Metho			Email A	ry Addres Cha Ci	ir, Tru		State CT Job Title Cmte	06811-4525
Contact Role(s Name Mr. Peter Eato Mailing Addres	idge Rd Dne Extension S): Legal Contact, C Dn ss Line One idge Road	Fax	Mobi Or Ur Mailing Address	le Phone rganization nited Metho)anbury	Email /	ry Addres Cha Ci ry	ir, Tru: ty		State CT Job Title Cmte State	206811-4525 Zip Code
Contact Role(s Name Mr. Peter Eato Mailing Addres	idge Rd Define Extension i): Legal Contact, C Don ss Line One idge Road Done Extension	Fax	Or Ur Mailing Address Mobi	le Phone rganization nited Metho s Line Two	dist Ch of D)anbury / Phone	Email /	ry Addres Cha Ci ry Addres	ir, Tru: ty	stees	State CT Job Title Cmte State CT	206811-4525 Zip Code
Contact Role(s Name Mr. Peter Eato Clapboard Ri Business Pho 203-743-15	idge Rd Define Extension i): Legal Contact, C Don ss Line One idge Road Done Extension	Fax Dwner Fax 203-743-1	Or Ur Mailing Address Mobi	le Phone rganization nited Metho s Line Two	dist Ch of D Emergency)anbury / Phone	Email A Danbu Email A	ry Addres Cha Ci ry Addres	ir, Tru: ty	stees	State CT Job Title Cmte State CT	206811-4525 Zip Code
5 Clapboard Ri Business Pho Contact Role(s Name Mr. Peter Eato Mailing Addres 5 Clapboard Ri Business Pho 203-743-15	idge Rd Define Extension 5): Legal Contact, C Define One idge Road Define Extension 03 5): Administrative C	Fax Dwner Fax 203-743-1	Or Ur Mailing Address Mobi	le Phone rganization nited Metho s Line Two	dist Ch of D Emergency)anbury / Phone	Email A Danbu Email A	ry Addres Cha Ci ry Addres	ir, Tru: ty	stees	State CT Job Title Cmte State CT	206811-4525 Zip Code
5 Clapboard Ri Business Pho Contact Role(s Name Mr. Peter Eato Mailing Addres 5 Clapboard Ri Business Pho 203-743-15 Contact Role(s Please note th	idge Rd Define Extension 5): Legal Contact, C Define One idge Road Define Extension 03 5): Administrative C	Fax Dwner Fax 203-743-1 Contact	Mobi	le Phone rganization nited Metho s Line Two le Phone	dist Ch of E Emergency 203-746)anbury / Phone -5184	Email / Danbu Email / danbu	ry Addres Cha Ci ry Addres	ir, Tru: ty Ss C@sbc;	stees	State CT Job Title Cmte State CT	206811-4525 Zip Code
Contact Role(s Name Mr. Peter Eato Vailing Addres Clapboard Ri Business Pho 203-743-15 Contact Role(s Please note th I. The residua 2. If a Collection	idge Rd Extension S): Legal Contact, C Con ss Line One idge Road cone Extension 03 S): Administrative Cone the following:	Fax Dwner Fax 203-743-1 Contact ration must b all water qua	Mobi	le Phone rganization nited Metho s Line Two le Phone e same locatio be collected o	dist Ch of D Emergency 203-746	Danbury / Phone -5184 as each t pecified p	Email / Danbu Email / danbu	ry Addres Cha Ci ry Addres ryUM(ir, Tru: ty C@sbc; mple.	globa	State CT Job Title Cmte State CT I.net	Zip Code 06811

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End of schedule