

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0360034	BREWERS DEEP RIVER MARINA	NC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
50 RIVER LANE				1			

Towns Served: DEEP RIVER

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100)		1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
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		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
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			

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

Nitrate And Nitrite (NOX)		1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
ENTRY POINT (3)	1/1/19 - 12/31/19		Complete	
	1/1/20 - 12/31/20		Complete	
	1/1/21 - 12/31/21			

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION SURVEY REPORT	3/1/2020	

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
			DOWNSTREAM WITHIN 5 SERVICE CON	A				
			UPSTREAM WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
20667	WELL 1	2	WELL 1	A				
59522	ATMOSPHERIC STORAGE							
59752	WELL 2	2	WELL 2	A				

Contact Information

Name		Organization		Job Title		
Mr. Brian G. Homan		Shm Deep River Marina LLC		General Manager		
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
50 River Lane				Deep River	CT	06417

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

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CT0360034	BREWERS DEEP RIVER MARINA	NC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
50 RIVER LANE				1			
Towns Served: DEEP RIVER							
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-526-5560	1242	860-526-2469		860-575-1660	bhoman@shmarinas.com		
Contact Role(s):	Administrative Contact, Legal Contact						

Please note the following:

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

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

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

End of schedule

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0363064	JEANS LEGACY, LLC	NC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
497 WINTHROP ROAD				1			
Towns Served: DEEP RIVER							

Monitoring Requirements

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Total Coliform (3100)		1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
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		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
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			

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

Nitrate And Nitrite (NOX)		1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
POINT OF ENTRY (3)	1/1/19 - 12/31/19			Complete
	1/1/20 - 12/31/20			Complete
	1/1/21 - 12/31/21			

Public Notification Requirements

<i>Violation/Situation</i>	<i>Compliance Period</i>	<i>Notice Tier</i>	<i>Public Notification</i>		<i>PN Certification</i>	
			<i>Required</i>	<i>Performed</i>	<i>Due to DPH</i>	<i>Received</i>
Total Coliform M&R Violation	1/1/19 - 3/31/19	3	5/6/2020		5/16/2020	
Physical Parameters M&R Violation	1/1/19 - 3/31/19	3	5/6/2020		5/16/2020	
E. Coli	4/1/19 - 6/30/19	3	8/12/2020		8/22/2020	

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	A				
			DOWNSTREAM	A				
			UPSTREAM	A				
00700	POINT OF ENTRY	3	POINT OF ENTRY	A				
53268	WELL	2	WELL	A				

Contact Information

Name		Organization		Job Title		
Mr. Fred Zobel		Jeans Legacy LLC				
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
79 River Street				Deep River	CT	06417

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Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
497 WINTHROP ROAD				1			
Towns Served: DEEP RIVER							
79 River Street		Deep River			CT	06417	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-526-3277			203-623-1445				

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

Please note the following:

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