Connecticut Department of F	ublic Health D	rinking	Water S	ection
Water Quality Monito		_		
PWS ID PWS Name				wner Type Primary Source
CT0360012 VALLEY REGIONAL HIGH SCHOOL	Cid	NTNC	565	L GW
	ervice Residential	Commercia		Combined Agricultural
	onnections 1	Commercia	iii iiiaastiiai	- Agricultural
Towns Served: DEEP RIVER				
	ing Requirements	2		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:		•		
Asbestos (1094)	•		1 rout	ine (RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring I	Period Co	ollection Perio	
Select from Inventory of Active Sampling Points	1/1/11 - 12/			Complete
, constant of the contract of	1/1/20 - 12/			
Total Coliform (3100)	_,_,_	,	1 rc	outine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring I	Period Co	ollection Perio	
Select from Inventory of Active Sampling Points	7/1/19 - 9/3			Complete
, , ,	10/1/19 - 12/	•		Complete
	1/1/20 - 3/3			·
	4/1/20 - 6/3	30/20		
	7/1/20 - 9/3	30/20		
Lead And Copper (PBCU)			5 routii	ne (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring I	Period Co	ollection Perio	
Select from Inventory of Active Sampling Points	1/1/18 - 12/	31/20	6/1-9/30	
	1/1/21 - 12/	31/23	6/1-9/30	
Physical Parameters (PPS)			1 rc	outine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring I	Period Co	llection Perio	d Compliance Status
Select from Inventory of Active Sampling Points	7/1/19 - 9/3	30/19		Complete
	10/1/19 - 12/	/31/19		Complete
	1/1/20 - 3/3	31/20		
	4/1/20 - 6/3	30/20		
	7/1/20 - 9/3	30/20		
Water System Facility: ENTRY POINT (WSF ID: 00700)				
Inorganic Chemicals (IOCS)			1 routii	ne (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring I	Period Co	ollection Perio	d Compliance Status
ENTRY POINT (3)	1/1/17 - 12/	31/19		Complete
	1/1/20 - 12/	31/22		
	1/1/23 - 12/	31/25		
Nitrate And Nitrite (NOX)				1 routine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring I	Period Co	llection Perio	d Compliance Status
ENTRY POINT (3)	1/1/19 - 12/	31/19		Complete
	1/1/20 - 12/	31/20		
	1/1/21 - 12/	31/21		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)			1 routii	ne (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring I		llection Perio	<u> </u>
ENTRY POINT (3)	1/1/17 - 12/	31/19		Complete
	1/1/20 - 12/			
	1/1/23 - 12/	31/25		
Organic Chemicals (VOCS)				ne (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring I	Period Co	ollection Perio	d Compliance Status

Connecticut Department of Public Health Drinking Water Section										
Water Quality Monitoring and Compliance Schedule										
PWS Name	Classification	Population	Owner Type	F						

PWS ID PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT0360012	VALLEY REGIONAL HIGH SCHOOL				NTNC	565	L	GW
Local Address	(where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
256 KELSEV HI	II POAD	Connections	1					

Monitoring Requirements

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

Organic Chemicals (VOCS) 1 routine (RT)					
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
ENTRY POINT (3)	1/1/19 - 12/31/21				
	1/1/22 - 12/31/24				

Other Compliance Schedules

Compliance Schedule Activity	Due Date Achieved Date	
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
CROSS CONNECTION SURVEY REPORT	3/1/2020	

water system racinty and sampling rount inventory									
Water System	Water System Facility	Samplina Point	Sampling Point		Total Coliform	Lead and Copper			Stage
Facility ID	•	ID	Description	Status	Dula		Asbestos		_
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
		VR001	KITCHEN COOK SINK	Α	Υ	2	Υ		
		VR002	LAVATORY SINK 100	1	Υ	2			
		VR003	LAVATORY SINK OFFICE	1	Υ	2			
		VR004	LAVATORY SINK 400	1	Υ	2			
		VR005	LAVATORY SINK FAC	1	Υ	2			
		VR006	LAVATORY SINK 500	I	Υ	2			
		VR007	TECH ED	Α	Υ	2			
		VR008	FACULTY LOUNGE	Α	Υ	2			
		VR009	CHORUS ROOM	Α	Υ	2			
		VR010	HOME EC E	Α	Υ	2			
		VR011	HOME EC W	Α	Υ	2			
		VR012	OFFICE COFFEE SINK	Α	Υ	2	Υ		
00700	ENTRY POINT	3	ENTRY POINT	Α					
10176	WELL 1	2	WELL 1	Α					
51753	WELL 2	2	WELL 2	Α					
51757	ATMOSPHERIC TANK								
51759	PRESSURE TANK								
51761	PUMP STATION								

Certified Operator Information

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

· · · · · · · · · · · · · · · · · · ·	•	•	
Facility Classification: SMALL W	/ATER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
RADICCHI, PAUL J.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2020

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

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

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT0360012	VALLEY REGIONAL HIGH SCHOOL				NTNC	565	L	GW
Local Address (v	vhere applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
256 KELSEY HILL	. ROAD	Connections	1					

Contact Information										
Name Organization							Job Title			
Mr. Bruce Glowac Regional School District #4 Director of Faciliti										
Mailing Address Lin	Mailing Address Line One Mailing Address Line Two					City	State	Zip Code		
1 Winthrop Road P.O. Box 1		ox 187	187 Dec			СТ	06417			
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address				
860-526-2417		860-526-3	631		860-767-0650	BRUCEG	BRUCEGLOWAC@AOL.COM			

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

Please note the following:

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

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

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

End of schedule

Schedule Generation Date: 3/10/2020

	Connecticut Department o	f Public Health	n Dri	nking	Water	Se	ction	
	Water Quality Monit			_				
PWS ID	PWS Name	<u> </u>	_				ner Type P	rimary Source
СТ0360022	JOHN WINTHROP JUNIOR HIGH SCHOOL		N.	TNC	400		L	GW
Local Address (where applicable)	Service Reside	ntial C	ommerci	al Industri	al	Combined	Agricultural
1 WINTHROP R	OAD	Connections 1						
Towns Served:	DEEP RIVER							
	Monit	oring Requireme	ents					
-	Facility: DISTRIBUTION SYSTEM (WSF	ID: 00600)						
Asbestos (10	•							r nine years
	Point (Sampling Point ID)	Monito			ollection Pe	riod		iance Status
Select fror	m Inventory of Active Sampling Points	1/1/11					Co	mplete
		1/1/20	- 12/31,	/28				
Total Coliforn	•							per quarter
	Point (Sampling Point ID)	Monitor			ollection Pe	riod		iance Status
Select fror	m Inventory of Active Sampling Points	7/1/19						omplete
		10/1/19 1/1/20					Co	mplete
		4/1/20						
		7/1/20						
Lead And Cop	nner (PRCII)	771/20	3/30/	20	5 rou	ıtine	(RT) ner	three years
_	Point (Sampling Point ID)	Monito	rina Per	riod Co	ollection Pe			iance Status
	n Inventory of Active Sampling Points	1/1/18			6/1-9/30			
	, , , , , , , , , , , , , , , , , , ,	1/1/21			6/1-9/30			
Physical Para	meters (PPS)	· ·		<u> </u>		rou	tine (RT)	per quarter
_	Point (Sampling Point ID)	Monito	ring Per	riod Co	ollection Pe			iance Status
Select fror	m Inventory of Active Sampling Points	7/1/19	- 9/30/	19			Со	mplete
		10/1/19	10/1/19 - 12/31/19				Co	mplete
		1/1/20	- 3/31/	20				
		4/1/20	- 6/30/	20				
		7/1/20	- 9/30/	20				
,	Facility: ENTRY POINT (WSF ID: 00700)							
_	emicals (IOCS)							three years
	Point (Sampling Point ID)	Monito			ollection Pe	riod		iance Status
ENTRY PO	INT (3)	1/1/17					Со	mplete
		1/1/20						
Nituata And I	Niturity (NOV)	1/1/23	- 12/31/	/25		4.) T)
	Nitrite (NOX) Point (Sampling Point ID)	Monito	rina Dar	riod C	ollection Pe		•	RT) per year iance Status
ENTRY PO	· · · · · · · · · · · · · · · · · · ·	1/1/19			JACCHON PE	iiou		mplete
2.11.11.11.0	(3)	1/1/20						pictc
		1/1/21						
Pesticides. H	erbicides and PCBs - Phase II & V (SOCS)	, , ==	,/		1 rou	ıtine	(RT) per	three years
	Point (Sampling Point ID)	Monito	ring Per	riod Co	ollection Pe			iance Status
ENTRY PO	INT (3)	1/1/17	- 12/31,	/19			Co	mplete
			-		_		-	

1/1/20 - 12/31/22 1/1/23 - 12/31/25

Monitoring Period

Schedule Generation Date: 3/10/2020

Organic Chemicals (VOCS)

Sampling Point (Sampling Point ID)

1 routine (RT) per three years

Compliance Status

Collection Period

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
СТ0360022	JOHN WINTHROP JUNIOR HIGH SCHOOL				NTNC	400	L	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industr	ial Combin	ed Agricultural
1 WINTHROP	ROAD	Connections	1					

Towns Served: DEEP RIVER

Monitoring Requirements

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

Organic Chemicals (VOCS)		1 routine (RT) per three			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
ENTRY POINT (3)	1/1/19 - 12/31/21				
	1/1/22 - 12/31/24				

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
CROSS CONNECTION SURVEY REPORT	3/1/2020	

	VV	ater system racin	ity and Sampling P	OIIIC II		•			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description		Total Coliform Rule		Asbestos		Stage
			<u> </u>	Status		Nuie Hei	ASDESIUS	WQP	Z DDFN
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Υ				
			WITHIN 5 SERVICE CON	Α					
		JW001	KITCHEN SINK 712	Α	Υ	2	Υ		
		JW002	LAVATORY SINK 700	Α	Υ	2			
		JW003	LAVATORY SINK 200	Α	Υ	2			
		JW004	LAVATORY SINK 122	Α	Υ	2			
		JW005	LAVATORY SINK 100	Α	Υ	2			
		JW006	WELL HEAD	Α		2			
		JW007	OFFICE SINK	Α	Υ	2			
		JW008	FACULTY WORK ROOM	Α	Υ	2			
		JW009	HOME EC ROOM	Α	Υ	2			
		JW010	PROJECT LEARN ROOM	Α	Υ	2			
		JW011	FACULTY LOUNGE	Α	Υ	2			
		JW012	TEAM ROOM	Α	Υ	2			
		JW013	ADMIN BLDG KITCHEN	Α	Υ	2			
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
10177	WELL 1	2	WELL 1	Α					
51815	WELL 2	2	WELL 2	Α					
51819	ATMOSPHERIC TANK								
51821	PRESSURE TANK								
51823	PUMP STATION								

Certified Operator Information

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

Facility Classification: SMALL W	ATER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
RADICCHI, PAUL J.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2021

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.

	Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name		Classification		Population	Owner Type	Primary Source			
СТ0360022	T0360022 JOHN WINTHROP JUNIOR HIGH SCHOOL				NTNC	400	L	GW		
Local Address (v	vhere applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural		
1 WINTHROP RO	HROP ROAD Connections 1									

Connecticut Department of Public Health Drinking Water Section

Towns Served: DEEP RIVER

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name

Operator Type

Certification(s)

Expiration

WATER TREATMENT PLANT OPERATOR - CLASS II 12/31/2020

						WAIER IREALIVIEN	I PLAINI	OPERATOR .	- CLASS II	12/31/2020
				Con	tact Info	ormation				
Name				Oı	rganization			Job Title		
Mr. Bruce Glowac			Regional School District #4 Director of Faciliti							
Mailing Address Line One Mailing Addr				Address	s Line Two		City	State	Zip Code	
1 Winthrop Road			P.O. Bo	x 187			Deep Riv	⁄er	СТ	06417
Business Phone	Extension	Fax		Mobi	ile Phone	Emergency Phone	Email Address			
860-526-2417		860-526-3	3631			860-767-0650	BRUCEGLOWAC@AOL.COM			
C++ D-1-/-). A		C44 1				•	*			

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

Please note the following:

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

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

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

End of schedule

Schedule Generation Date: 3/10/2020

Page 6

	Connecticut Departmen	t of Public Health	Drinki	ng Water S	Section
	Water Quality Mo	onitoring and Con	npliance	e Schedule	<u>,</u>
PWS ID	PWS Name	<u> </u>	_		Owner Type Primary Source
СТ0363011	MOUNT SAINT JOHN SCHOOL		NTNC	40	P GW
Local Address (where applicable)	Service Resider	ntial Comme	ercial Industrial	Combined Agricultural
		Connections 1			
Towns Served:	DEEP RIVER				
	Mo	onitoring Requireme	nts		
Water System	Facility: DISTRIBUTION SYSTEM (V	VSF ID: 00600)			
Asbestos (10	-			1 rou	tine (RT) per nine years
	Point (Sampling Point ID)		ing Period	Collection Perio	od Compliance Status
	m Inventory of Active Sampling Points	1/1/13 -	12/31/21		
Total Coliforn	•				outine (RT) per quarter
	Point (Sampling Point ID)		ing Period	Collection Perio	<u> </u>
Select fror	n Inventory of Active Sampling Points		- 9/30/19		Complete
			- 12/31/19		Complete
			- 3/31/20 - 6/30/20		
			- 9/30/20 - 9/30/20		
Lead And Cor	oner (PRCII)	7/1/20	3/30/20	5 rout	ine (RT) per three years
•	Point (Sampling Point ID)	Monitor	ing Period	Collection Perio	
	m Inventory of Active Sampling Points		12/31/19	6/1-9/30	
	, , ,		12/31/22	6/1-9/30	
			12/31/25	6/1-9/30	
Physical Para	meters (PPS)			1 r	outine (RT) per quarter
Sampling	Point (Sampling Point ID)	Monitor	ing Period	Collection Perio	od Compliance Status
Select fror	n 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		
			- 6/30/20		
			- 9/30/20		
	Facility: ENTRY POINT (WSF ID: 00	700)			
•	emicals (IOCS)				ine (RT) per three years
	Point (Sampling Point ID)		ing Period	Collection Perio	
ENTRY PO	INT (3)		12/31/19		Complete
			12/31/22		
Nituata Aurila	Nituita (NOV)	1/1/23 -	12/31/25		1tina (DT)
Nitrate And N	NITRITE (NOX) Point (Sampling Point ID)	Monitor	ing Pariod	Collection Perio	1 routine (RT) per year od Compliance Status
ENTRY PO			ing Period 12/31/19	Conection Ferr	Complete
LIVINITO	(3)		12/31/19		Complete
			12/31/21		
Pesticides H	erbicides and PCBs - Phase II & V(SC		,,	1 rout	ine (RT) per three years
-	Point (Sampling Point ID)		ing Period	Collection Perio	
ENTRY PO			12/31/19		Complete
	·		12/21/22		

1/1/20 - 12/31/22 1/1/23 - 12/31/25

Monitoring Period

Schedule Generation Date: 3/10/2020

Sampling Point (Sampling Point ID)

Organic Chemicals (VOCS)

1 routine (RT) per three years

Compliance Status

Collection Period

	Con	necticut Dep	artment of	Public H	ealth I	Drink	ing W	/ater S	Sect	ion		
			ality Monit				U					
PWS ID	PWS I		diffey Monite	oring and				ulation		Type Pri	mary	Source
CT036301		NT SAINT JOHN SCHO	OOL			NTNC	.оп тор	40	Р	1,700	GW	
	ress (where a			Service	Residentia		nercial	Industrial	Со	mbined		ultural
		, p. 1 - 2 - 2 /		Connections	1						0 -	
Towns Ser	ved: DEEP R	IVER									I	
			Monito	oring Requ	irement	ts						
Water Sy	stem Facilit	y: ENTRY POINT	(WSF ID: 00700)									
Organic	Chemicals	(VOCS)						1 rout	ine (R	T) per t	hree '	years
Samp	oling Point (S	Sampling Point ID)			Monitoring		Collec	ction Peri	od	Complia	ince Si	tatus
ENTR	Y POINT (3)				1/1/18 - 12	-						
					1/1/21 - 12	/31/23						
	N	Nonthly Water	System Facil	ity (WSF) L	evel Mo	onitori	ing Re	quiren	nent	S		
Water Sy	stem Facilit	y: ENTRY POINT (WSFID: 00700)									
Analyt	:e	Monitoring Req	uirement (Summa	ary Type)	Operat	ting Limi	t		Sar	nples Re	q/Mo	nth
рН		Entry Point pH I	Monitoring (PHRD)	Minim	um: 7.0	PH			4		
Start D	oate: 9/1/20	008		Complia	nce History	y :	Operat	ting Limit	1	Monitori	ng	
				Monitor	ng Period		-	iance Sta		Compliar	nce Sta	atus:
				10/1/201	.9 - 10/31/2	2019						
				11/1/201	.9 - 11/30/2	2019						
				12/1/201	.9 - 12/31/2	2019						
				1/1/2020) - 1/31/202	20						
				2/1/2020) - 2/29/202	20						
			Other Co	ompliance	Schedu	les						
Complian	ce Schedule /	Activity			Du	e Date		Achiev	ed Dat	te		
SUBMIT LE	EAD CONSUN	MER NOTICE CERTIFIC	ATE		12/2	29/2013						
SUBMIT LE	EAD CONSUN	MER NOTICE CERTIFIC	ATE		12/2	29/2016						
CROSS CO	NNECTION S	URVEY REPORT			3/2	1/2019						
DISTRIBUT	TION SYSTEM	I MATERIALS EVALUA	TION		8/3	1/2019						
CROSS CO	NNECTION S	URVEY REPORT			3/2	1/2020						
		Water	System Facili	ty and San	npling P	oint Ir	nvento	ory				
Water							Total	Lead a	nd			
System	Water Syste	em Facility	Sampling Point		nt		Coliforn					Stage
Facility ID			ID	Description		Status		Rule T	ier As	bestos 1	NQP 2	2 DBPR
00600	DISTRIBUTION	ON SYSTEM	4	DISTRIBUTION		Α	Υ					
			DOWNSTREAM			Α						
			UPSTREAM	WITHIN 5 SER	VICE CON	Α						
00700	ENTRY POIN		3	ENTRY POINT		Α						
36269	TREATMEN											
51068		UMATIC TANKS										
61757	INTERCONN CTWC CHES	IECTION - CT0261031 TER	-									
746	WELL 1		2	WELL 1		Α						
			Certified	Operator I	nforma	tion						

	Connection	cut Depa	rtme	ent of Public	c Health	i Drii	iking '	Water	Section	
	Wa	ater Qua	lity N	Monitoring a	and Cor	nplia	nce So	chedul	e	
PWS ID	PWS Name					_				Primary Source
CT0363011	MOUNT SAINT	JOHN SCHOO	L			NT	NC	40	Р	GW
Local Address (where applicable)		Service	Reside	ntial Co	mmercial	Industria	al Combine	ed Agricultura
				Connection	ons 1					
Towns Served:	DEEP RIVER			-		, , , , , , , , , , , , , , , , , , ,		ı	<u> </u>	'
			Cer	tified Operat	or Inforn	natior	1			
Water System	Facility: TREA	TMENT PLA	NT (W	SF ID: 36269)						
Facility Classific	cation: CLASS 17	REATMENT P	LANT							Certification
Operator Name	2		Oper	ator Type	Certificati	on(s)				Expiration
SIMA, III, JOHN	F.		CHIEF (OPERATOR	WATER TR	EATMEN	IT PLANT (OPERATOR	R - CLASS II	9/30/2020
					DISTRIBUT	ION SYS	TEM OPER	RATOR - CL	ASS I	6/30/2020
				Contact Inf	ormatio	n				
Name				Organization	<u> </u>				Job Title	 e
Mount Saint Jo	hn School									
Mailing Address	s Line One		Mailing	g Address Line Two				City	State	Zip Code
135 Kirtland Str	eet			-			Dee River CT			06417
Business Pho	ne Extension	Fax		Mobile Phone	Emergeno	y Phone	Email Ad	dress		
860-526-539	1									
Contact Role(s)	Owner			1	1					
Name				Organization	1				Job Titl	9
Ms. Kathy Whit	te			Academy At	Mount Sain	t John		Chief Adm	ninistrator	
Mailing Address	s Line One		Mailing	g Address Line Two				City	State	Zip Code
135 Kirtland Str	eet						Deep Riv	er	СТ	06417
Business Pho	ne Extension	Fax		Mobile Phone	Emergeno	y Phone	Email Ad	dress		
860-343-135	7						whitek@	mtstjohn.	org	
Contact Role(s)	Legal Contact									
Name				Organization	1				Job Title	9
Ms. Pamela L P	otemri			Academy At	Mount Sain	t John		Chief Adm	ninistrator	
Mailing Address	s Line One		Mailing	g Address Line Two				City	State	Zip Code
135 Kirtland St							Deep Riv	er	СТ	06417
Business Pho	ne Extension	Fax		Mobile Phone	Emergenc	y Phone	Email Ad	dress		
860-343-135	7	860-239-0	0753		860-343	3-1300	potemrip	@mtstjoh	in.og	

Connecticut Department of Dublic Health Drinking Water Section

Contact Role(s): Administrative Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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- 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 Water Quality Mor				_			
DWCID	9	ntoring an					1	Duines and Course
PWS ID	PWS Name				on Pol			Primary Source
CT0363023	INCARNATION CENTER, INC	C	Desident	NTNC	1 - 1	42	P	GW
	vhere applicable)	Service Connections	Resident	tial Comme	ercial	Industrial	Combine	d Agricultura
253 BUSHY HILL		COTTTCCTIONS	18					
Towns Served: [sitoring Pogu	iromo	ntc				
Mater System	Facility: DISTRIBUTION SYSTEM (WS	nitoring Requ	ıremei	iits				
Asbestos (10		51 1D. 00000j				1 rou	tine (RT) n	er nine years
•	Point (Sampling Point ID)		Monitorii	na Period	Colle	ction Perio		oliance Status
	n Inventory of Active Sampling Points		1/1/15 - 1		Conc	.ccion i cin	ou comp	mance Status
Total Coliforn	· · · · · · · · · · · · · · · · · · ·		1/1/13	12/31/23		1 ,	outine (RT) per quarter
	Point (Sampling Point ID)		Monitorii	na Period	Colla	ı ı ection Perio	=	oliance Status
	n Inventory of Active Sampling Points		7/1/19 -	_	Cone	ction rem		Complete
30,000,11011	entory of Active Sumpling Forms		10/1/19 -					Complete
			1/1/20 -					Complete
			4/1/20 -				<u> </u>	ompiete .
			7/1/20 -	· · ·				
Lead And Cop	ner (PBCU)		, , -	-,,			5 routine	(RT) per year
•	Point (Sampling Point ID)		Monitorii	ng Period	Colle	ction Perio		oliance Status
	Inventory of Active Sampling Points		1/1/19 - 1	_	6	5/1-9/30	_	Complete
			1/1/20 - 1			5/1-9/30		·
			1/1/21 - 1			5/1-9/30		
Physical Para	meters (PPS)						outine (RT) per quarter
•	Point (Sampling Point ID)		Monitorii	ng Period	Colle	ction Perio	-	oliance Status
Select from	n 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: 007	00)						
Inorganic Che	micals (IOCS)					1 rout	ine (RT) pe	r three years
Sampling F	Point (Sampling Point ID)		Monitorii	ng Period	Colle	ection Perio	od Com _l	oliance Status
ENTRY POI	NT (3)		1/1/18 - 3	12/31/20				
			1/1/21 - 3	12/31/23				
Nitrate And N								(RT) per year
	Point (Sampling Point ID)		Monitorii		Colle	ection Perio		oliance Status
ENTRY POI	NT (3)		1/1/19 - 1				(Complete
			1/1/20 - 1					
			1/1/21 - 3	12/31/21				
· · · · · · · · · · · · · · · · · · ·	erbicides and PCBs - Phase II & V (SOC	•						r three years
	Point (Sampling Point ID)		Monitorii		Colle	ection Perio		oliance Status
ENTRY POI	NT (3)		1/1/17 - 3	12/31/19			(Complete

1/1/20 - 12/31/22 1/1/23 - 12/31/25

Monitoring Period

1/1/19 - 12/31/19

Schedule Generation Date: 3/10/2020

Organic Chemicals (VOCS)

ENTRY POINT (3)

Sampling Point (Sampling Point ID)

1 routine (RT) per year

Compliance Status

Complete

Collection Period

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

PWS ID PWS Name				Cla	ssification	Population	Owner Type	Primary Source
СТ0363023	INCARNATION CENTER, INC				NTNC	42	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
253 BUSHY HILL	ROAD	Connections	18					

Monitoring Requirements

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

Organic Chemicals (VOCS)

Sampling Point (Sampling Point ID)

Monitoring Period Collection Period Compliance Status

1/1/20 - 12/31/20

1/1/21 - 12/31/21

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)		Operating Limi	t	Samples Req/Month
рН	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH		PH	4
Start Date: 6/1/2008		Compliance History:		Operating Limit	Monitoring
				Compliance Status	S: Compliance Status:
		10/1/2019 - 10/31/2019			
		11/1/2019 - 11/30/2019			
		12/1/2019 -	12/31/2019		
		1/1/2020 - 1	./31/2020		
		2/1/2020 - 2	2/29/2020		

Other Compliance Schedules

Compliance Schedule Activity

Due Date

Achieved Date

DISTRIBUTION SYSTEM MATERIALS EVALUATION 8/31/2019
CROSS CONNECTION SURVEY REPORT 3/1/2021

	7,1,									
	Water System Facility and Sampling Point Inventory									
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR		
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	Α	Υ					
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α						
		IC01	MAIN OFFICE KIT	Α	Υ	3	Υ			
		IC02	ACTVTY CTR BOYS LEFT	Α	Υ	3	Υ			
		IC03	LODGE DINING ROOM	Α	Υ	3				
		IC04	NATURES PLG KIT	Α	Υ	3				
		IC05	NATURES PLG SOBR RT	Α	Υ	3				
		IC06	GIBNEY DNG HALL KIT	Α	Υ	3	Υ			
		IC07	LAKESIDE BLDG N BR	Α	Υ					
		IC08	BROOKS BLDG SVC SINK	Α	Υ					
		UPSTREAM	WITHIN 5 SERVICE CON	Α						
00700	ENTRY POINT	3	ENTRY POINT	Α						
22782	WELL 2	2	WELL 2	Α						
22783	WELL 4	2	WELL 4	Α						
54868	TREATMENT PLANT									
54870	ATMOSPHERIC TANKS									

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.

Schedule Generation Date: 3/10/2020

С		ut Departm					_			ction	
	Wa	ter Quality I	Monitor	ring a	nd Com	ıplia	ance S	Sche	edule		
PWS ID PV	WS Name					Classif	fication	Popula	ation Owi	ner Type F	rimary Source
CT0363023 IN	CARNATION C	ENTER, INC					TNC	42		P	GW
Local Address (who		<u> </u>	Se	ervice	Resident	tial Co	ommerci	ial Ind	dustrial	Combined	Agricultural
253 BUSHY HILL RO			Co	onnection	ns 18						
Towns Served: DE	P RIVER										l
		Water Systen	n Facility	and S	ampling	Poin	nt Inve	ntor	у		
Water							To	otal	Lead and		
*	ystem Facility	•	ng Point Sa					iform	Copper		Stage
Facility ID		-	ID De	escription	1	Sto	atus R	Rule	Rule Tier	Asbestos	WQP 2 DBPR
54872 BLADDE	R TANKS										
54874 PUMP S	TATION										
58479 WELL 1			2 W	ELL 1			Α				
		Cei	rtified O	perato	r Inform	atio	n				
Water System Fa	cility: TREAT	TMENT PLANT (W	/SF ID: 548	68)							
Facility Classificati	on: CLASS 2 TF	REATMENT PLANT									Certification
Operator Name		Oper	ator Type		Certification	n(s)					Expiration
O'SHAUGHNESSY,	WILLIAM J.	CHIEF	OPERATOR		WATER TRE	ATME	NT PLAN	T OPER	RATOR - CI	ASS II	6/30/2021
SIMA, III, JOHN F.		ASSIGN	NED OPERAT	OR	WATER TRE	ATMEI	NT PLAN	T OPER	RATOR - CI	ASS II	9/30/2020
					DISTRIBUTION	ON SYS	STEM OP	ERATO	R - CLASS	I	6/30/2020
			Conta	ct Info	rmation						
Name			Orga	nization						Job Title	
Dr. Nancy Pilon			Incar	nation Ce	enter			Exec	cutive Dire	ctor	
Mailing Address Li	ne One	Mailin	g Address Li	ne Two				Cit	:y	State	Zip Code
PO Box 577							Ivoryto	on		СТ	06442
Business Phone	Extension	Fax	Mobile F	Phone	Emergency	Phone	e Email A	Addres	S		
860-767-0848		860-767-8432			860-304-9	9156	npilon	@incar	rnationcer	iter.org	
Contact Role(s):	dministrative	Contact, Legal Cont	act								
Name			Orga	nization						Job Title	
Incarnation Cente	Inc		_								
Mailing Address Li	ne One	Mailin	g Address Li	ne Two				Cit	V	State	Zip Code
P. O. Box 577			shy Hill Rd				Ivoryto		<u>, </u>	СТ	06442
Business Phone	Extension	Fax	Mobile F	Phone	Emergency	Phone			S		
Contact Role(s): C) Wner										
Name			Orga	nization						Job Title	
Reverend John Do	uglas Ousley			nation Ce	enter Inc			Dire	ctor		
Mailing Address Li		Mailin	g Address Li					Cit	:y	State	Zip Code
209 Madison Ave			-				New Y		-	NY	10016
Business Phone	Extension	Fax	Mobile F	Phone	Emergency	Phone			S		

Schedule Generation Date: 3/10/2020

Contact Role(s): Legal Contact

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

	Cara Cara	- 0		I-				
PWS ID PWS Name					ssification	Population	Owner Type	Primary Source
СТ0363023	INCARNATION CENTER, INC			NTNC	42	Р	GW	
Local Address (where applicable)		Service	Residential		Commercia	al Industri	al Combine	ed Agricultural
253 BUSHY HILL ROAD		Connections	18					

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