Connecticut Department o	f Public H	lealth I	Drinkir	ng V	Vater	Secti	ion	
Water Quality Moni	toring an	d Comp	oliance	Sc	hedule	e		
PWS ID PWS Name		С	lassificatio	n Po	pulation (Owner 1	Гуре Pri	mary Source
CT0550011 AQUARION WATER CO OF CT-TLWC			С		142	Р		GW
Local Address (where applicable)	Service	Residentia	Comme	rcial	Industria	I Con	nbined	Agricultural
	Connections						58	
Towns Served: GOSHEN								
Monit	oring Requ	uirement	ts					
Water System Facility: DISTRIBUTION SYSTEM (WSF	ID: 00600)							
Asbestos (1094)					1 rou	utine (F	RT) per	nine years
Sampling Point (Sampling Point ID)		Monitoring	Period	Colle	ection Peri	iod	Complia	nce Status
Select from Inventory of Active Sampling Points		1/1/13 - 12	/31/21					
Total Coliform (3100)					1	routin	e (RT)	per month
Sampling Point (Sampling Point ID)		Monitoring	Period	Colle	ection Peri	iod	Complia	nce Status
Select from Inventory of Active Sampling Points		10/1/19 - 10	0/31/19				Con	nplete
		11/1/19 - 1:	1/30/19				Con	nplete
		12/1/19 - 12	2/31/19				Con	nplete
		1/1/20 - 1/	/31/20				Con	nplete
		2/1/20 - 2/	/29/20				Con	nplete
		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					
Lead And Copper (PBCU)					5 rout	tine (R	T) per t	hree years
Sampling Point (Sampling Point ID)		Monitoring	Period	Colle	ection Peri	iod	Complia	nce Status
Select from Inventory of Active Sampling Points		1/1/19 - 12	/31/21		6/1-9/30			
		1/1/22 - 12	/31/24		6/1-9/30			
Physical Parameters (PPS)					1	routine	e (RT) p	er quarter
Sampling Point (Sampling Point ID)		Monitoring	Period	Colle	ection Peri	iod	Complia	nce Status
Select from Inventory of Active Sampling Points		7/1/19 - 9/	/30/19				Con	nplete
		10/1/19 - 12	2/31/19				Con	nplete
		1/1/20 - 3/	/31/20				Con	nplete
		4/1/20 - 6/	/30/20					
		7/1/20 - 9/	/30/20					_
Water System Facility: ENTRY POINT (WSF ID: 00700)							
Net Gross Alpha (4000)					1 rout	tine (R	T) per t	hree years
Sampling Point (Sampling Point ID)		Monitoring		Colle	ection Peri	iod	Complia	nce Status
ENTRY POINT (3)		1/1/17 - 12	/31/19				Con	nplete
		1/1/20 - 12	• •					
		1/1/23 - 12	/31/25					
Uranium (4006)						=	- •	hree years
Sampling Point (Sampling Point ID)		Monitoring		Colle	ection Peri	iod		nce Status
ENTRY POINT (3)		1/1/17 - 12	• •				Con	nplete
		1/1/20 - 12	•					
		1/1/23 - 12	/31/25					

	Connecticut Departmen	nt of Public I	Health	Dr	rinking	g V	Vater	Sec	tion		
	Water Quality Mo	onitoring an	d Con	npl	iance	Sc	hedule	9			
PWS ID	PWS Name			Clas	sification	Ро	pulation	Owne	wner Type Primary So		
CT0550011	AQUARION WATER CO OF CT-TLWC				С		142	F)	GW	
Local Address	(where applicable)	Service Connections	Residen	ntial	Commerc	ial	Industria	l Co	58	Agricultural	
Towns Served:	GOSHEN	,		'				-			
	Me	onitoring Requ	uireme	nts							
Water Systen	n Facility: ENTRY POINT (WSF ID: 00										
Combined R	adium-226/228 (4010)						1 rout	tine (RT) per t	three years	
	Point (Sampling Point ID)		Monitor	ing P	eriod (Colle	ection Peri	_		ance Status	
ENTRY PC			1/1/17 -							mplete	
			1/1/20 -							<u> </u>	
			1/1/23 -								
Inorganic Ch	emicals (IOCS)						1 rout	tine (RT) per t	three years	
_	Point (Sampling Point ID)		Monitor	ing P	eriod (Colle	ection Peri	-		ance Status	
ENTRY PC	DINT (3)		1/1/18 -	12/3	1/20						
			1/1/21 -	12/3	1/23						
Nitrate And	Nitrite (NOX)							1 ro	utine (R	T) per year	
Sampling	Point (Sampling Point ID)		Monitor	ing P	eriod (Colle	ection Peri	iod	Compli	ance Status	
ENTRY PC	DINT (3)		1/1/19 -	12/3	1/19				Co	mplete	
			1/1/20 -	12/3	1/20						
			1/1/21 -	12/3	1/21						
Pesticides, H	lerbicides and PCBs - Phase II & V (So	OCS)					1 rout	tine (RT) per t	three years	
Sampling	Point (Sampling Point ID)		Monitor	ing P	eriod (Colle	ection Peri	iod	Compli	ance Status	
ENTRY PC	DINT (3)		1/1/17 -	12/3	1/19				Co	mplete	
			1/1/20 -	12/3	1/22						
			1/1/23 -	12/3	1/25						
Organic Che	micals (VOCS)						1	routi	ne (RT) ¡	er quarter	
Sampling	Point (Sampling Point ID)		Monitor	ing P	eriod (Colle	ection Peri	iod	Compli	ance Status	
ENTRY PC	DINT (3)		7/1/19 -	- 9/30	0/19				Со	mplete	
			10/1/19 -	- 12/3	31/19						
			1/1/20 -	- 3/32	1/20						
			4/1/20 -	- 6/30	0/20						
			7/1/20 -	- 9/30	0/20						
Water Systen	n Facility: WELL 1 (WSF ID: 131)										
E. Coli (3014	4)						1	rout	ine (RT)	per month	
Sampling	Point (Sampling Point ID)		Monitor	ing P	eriod (Colle	ection Peri	iod	Compli	ance Status	
WELL 1 (2	2)		10/1/19 -	- 10/3	31/19				Со	mplete	
			11/1/19 -	- 11/3	30/19				Со	mplete	
			12/1/19 -						Со	mplete	
			1/1/20 -							mplete	
			2/1/20 -	- 2/29	9/20				Со	mplete	
			3/1/20 -								
			4/1/20 -								
			5/1/20 -								
			6/1/20 -								
			7/1/20 -	- 7/32	1/20						

8/1/20 - 8/31/20

Connecticut Department of Public Health Drinking Water Section	1
Water Quality Monitoring and Compliance Schedule	

PWS ID	PWS Name			Classifi	ication P	opulation	Owner Type	Primary Source
CT0550011 AQUARION WATER CO OF CT-TLWC			C	С	142	Р	GW	
Local Address (where applicable) Service Residen		ntial Co	mmercial	Industri	al Combine	ed Agricultural		
		Connections					58	

Towns Served: GOSHEN

Monitoring Requirements

Water System Facility: WELL 1 (WSF ID: 131)

E. Coli (3014)

Sampling Point (Sampling Point ID)

1 routine (RT) per month

Monitoring Period Collection Period Compliance Status

9/1/20 - 9/30/20

Other Compliance Schedules

o the	compliance senedales		
Compliance Schedule Activity	Due Date	Achieved Date	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020		
SUBMIT CCR CERTIFICATION FORM	8/9/2020		
CROSS CONNECTION EXEMPTION	3/1/2023		

CROSS CO	NNECTION EXEMPTION		3/:	1/2023				
	Wat	er System Facili	ty and Sampling P	oint Ir	vento	γ		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	00004	TL HEIGHTS DIST	A	Υ			
		4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		PB6892	56 TYLER LAKE HTS	Α		3		
		PB6893	11 TYLER LAKE HTS EX	Α		3		
		PB6894	62 TYLER LAKE HTS RD	Α		3		
		PB6895	75 TYLER LAKE HTS RD	Α	Υ	3		
		PB6896	61 TYLER LAKE HTS RD	Α		3		
		PB6897	37 TYLER LAKE HTS RD	Α		3		
		TYLER002	23 PARK ROAD	Α	Υ	3		
		TYLER003	22 PARK RD. EXT.	Α	Υ	3		
		TYLER004	45 TYLER LAKE HTS	Α	Υ	3		
		TYLER005	27 TYLER LAKE HTS.	Α	Υ	3		
		TYLER006	541 SHARON TURNPIKE	Α	Υ	3		
		TYLER007	532 SHARON TURNPIKE	Α	Υ	3		
		TYLER008	10 TYLER LAKE HGHTS	Α	Υ	3		
		TYLER009	6 TYLER LAKE HGHTS	Α	Υ	3		
		TYLER010	29 TYLER LAKE HTS EX	Α	Υ	3		
		TYLER011	25 TYLER LAKE HTS EX	Α	Υ	3		
		TYLER012	21 TYLER LAKE HTS EX	Α	Υ	3		
		TYLER013	19 TYLER LAKE HTS EX	Α	Υ	3		
		TYLER014	15 TYLER LAKE HTS EX	Α	Υ	3		
		TYLER016	13 TYLER LAKE HTS EX	Α	Υ	3		
		TYLER017	9 TYLER LAKE HTS EX	Α	Υ	3		
		TYLER018	20 TYLER LAKE HTS EX	Α	Υ	3		
		TYLER019	22 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER020	24 TYLER LAKE HGHTS	Α	Υ	3		
		TYLER021	26 TYLER LAKE HTS RD	Α	Υ	3		

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			Classification	Population	Owner Type	Primary Source
CT0550011	AQUARION WATER CO OF CT-TLWC			С	142	Р	GW
Local Address (v	vhere applicable)	Service	Residen	ntial Commerc	ial Industri	al Combine	ed Agricultural
		Connections				58	

Towns Ser	rved: GOSHEN							
	Wa	ter System Facil	ity and Sampling P	oint In	vento	У		
Water System Facility ID	Water System Facility		Sampling Point Description		Total Coliform Rule	Lead and Copper	Asbestos	Stage DBPR
		TYLER022	28 TYLER LAKE HTS RD	A	Υ	3		
		TYLER023	30 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER024	34 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER025	36 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER026	40 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER027	44 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER028	46 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER029	54 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER030	3 PARK ROAD	Α	Υ	3		
		TYLER031	58 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER032	60 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER034	64 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER036	69 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER037	65 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER039	57 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER040	41 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER041	39 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER043	35 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER044	29 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER045	15 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER046	9 TYLER LAKE HTS RD	Α	Υ	3		
		TYLER047	17 CENTER ROAD	Α	Υ	3		
		TYLER048	27 CENTER ROAD	Α	Υ	3		
		TYLER049	9 PARK ROAD	Α	Υ	3		
		TYLER050	19 PARK ROAD	Α	Υ	3		
		TYLER051	12 PARK ROAD EXT	Α	Υ	3		
		TYLER052	13 PARK ROAD EXT	Α	Υ	3		
		TYLER053	544 SHARON TURNPIKE	Α	Υ	3		
		TYLER054	550 SHARON TURNPIKE	Α	Υ	3		
		TYLER055	552 SHARON TURNPIKE	Α	Υ	3		
		TYLER056	556 SHARON TURNPIKE	Α	Υ	3		
		TYLER057	560 SHARON TURNPIKE	Α	Υ	3		
		TYLER058	566 SHARON TURNPIKE	Α	Υ	3		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
131	WELL 1	2	WELL 1	Α				
61632	ATMOSPHERIC STORAGE							

Water Quality Monitoring and Compliance Schedule							
PWS ID	PWS Name			Classification	Population	Owner Type F	Primary Source
CT0550011	AQUARION WATER CO OF CT-TLWC			С	142	Р	GW
Local Address (w	here applicable)	Service	Residen	tial Commerc	al Industri	al Combined	d Agricultural
		Connections				58	
		•		*			

Connecticut Department of Public Health Drinking Water Section

Towns Served: GOSHEN

Certified	C	perator	Inf	formation
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Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL W	ATER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020
GIORDANO, DAVID S.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020
		WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2020

Contact Information Organization Job Title Name Mr. John P. Walsh **Aquarion Water Company** Vice President Mailing Address Line One Mailing Address Line Two State Zip Code City 835 Main Street СТ 06604 Mail Stop 700 Bridgeport **Business Phone** Extension Mobile Phone **Emergency Phone Email Address** Fax 203-337-5852 203-337-5938 781-413-6175 jwalsh@aquarionwater.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

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

PWS ID PWS Name C					ssification	Population	Owner Type	Prin	nary Source
CT0550321	CT0550321 VILLAGE MARKET PLACE					462	Р		GW
Local Address (where applicable)		Service	Residential		Commerci	al Industri	al Combine	ed	Agricultural
59 TORRINGTON ROAD		Connections	21	. 7					

59 TORRINGTON ROAD	offilections 21 /		
Towns Served: GOSHEN			
Monitor	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:			
Asbestos (1094)	•	1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28	_	<u> </u>
Total Coliform (3100)		3 re	peat (RP) per period
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	9/10/19 - 9/15/19		Complete
Total Coliform (3100)	<u> </u>	1 rou	tine (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		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	Complete
	1/1/20 - 12/31/22	6/1-9/30	<u> </u>
	1/1/23 - 12/31/25	6/1-9/30	
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring 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		

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

PWS ID PWS Name C					ssification	Population	Owner Type	Primary Sour	ce
CT0550321	70550321 VILLAGE MARKET PLACE					462	Р	GW	
Local Address (where applicable)		Service	Residential		Commerci	al Industri	al Combin	ed Agricultur	ral
59 TORRINGTON ROAD		Connections	21		7				

59 TORRINGTON ROAD	Connections	21	7		
Towns Served: GOSHEN					
Monito	oring Requi	rements	;		
Water System Facility: ENTRY POINT (WSF ID: 00700)					
Chloride (1017)				1 rou	itine (RT) per quarter
Sampling Point (Sampling Point ID)	M	onitoring F	Period	Collection Period	Compliance Status
ENTRY POINT (3)	7	7/1/19 - 9/3	0/19		Complete
	10	0/1/19 - 12/	31/19		Complete
	1	1/1/20 - 3/3	1/20		Complete
		4/1/20 - 6/3	0/20		
	7	7/1/20 - 9/3	0/20		
Net Gross Alpha (4000)				1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	M	onitoring F	Period	Collection Period	Compliance Status
ENTRY POINT (3)	1,	/1/17 - 12/3	31/19		Complete
	1,	/1/20 - 12/3	31/22		
	1,	/1/23 - 12/3	31/25		
Uranium (4006)				1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	M	onitoring F	Period	Collection Period	Compliance Status
ENTRY POINT (3)	1,	/1/17 - 12/3	31/19		Complete
	1,	/1/20 - 12/3	31/22		
	1,	/1/23 - 12/3	31/25		
Combined Radium-226/228 (4010)				1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	M	lonitoring F	Period	Collection Period	Compliance Status
ENTRY POINT (3)	1,	/1/17 - 12/3	31/19		Complete
	1,	/1/20 - 12/3	31/22		
	1,	/1/23 - 12/3	31/25		
Inorganic Chemicals (IOCS)				1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	N	onitoring F	Period	Collection Period	Compliance Status
ENTRY POINT (3)	1,	/1/17 - 12/3	31/19		Complete
	1,	/1/20 - 12/3	31/22		
	1,	/1/23 - 12/3	31/25		
Nitrate And Nitrite (NOX)				1	routine (RT) per year
Sampling Point (Sampling Point ID)	N	1onitoring F	Period	Collection Period	Compliance Status
ENTRY POINT (3)	1,	/1/19 - 12/3	31/19		Complete
	1,	/1/20 - 12/3	31/20		
	1,	/1/21 - 12/3	31/21		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)				1 routine	e (RT) per three years
Sampling Point (Sampling Point ID)	N	1onitoring F	Period	Collection Period	Compliance Status
ENTRY POINT (3)	1,	/1/17 - 12/3	31/19		Complete
	1,	/1/20 - 12/3	31/22		
	1,	/1/23 - 12/3	31/25		
Organic Chemicals (VOCS)				1	routine (RT) per year
Sampling Point (Sampling Point ID)		onitoring F		Collection Period	Compliance Status
ENTRY POINT (3)	1,	/1/19 - 12/3	31/19		Complete

	ut Departmei ter Quality M			_							
PWS ID PWS Name CT0550321 VILLAGE MARKE Local Address (where applicable) 59 TORRINGTON ROAD	T PLACE	Service Connection	Residentia	С	Population O 462 al Industrial	P Combined	GW Agricultural				
Towns Served: GOSHEN		Connection	13 21	/							
Towns Served. GOSITEN	D.O.	anitarina Das		ha.							
NA		onitoring Red	quiremen	LS							
Water System Facility: ENTRY	POINT (WSF ID: 0	0700)									
Organic Chemicals (VOCS)				5 1 6		1 routine (R					
Sampling Point (Sampling Po	oint ID)		Monitoring		ollection Perio		nce Status				
			1/1/20 - 12			Cor	nplete				
Matau Cuataua Facilitus MELL	4 (MCF ID: 403C)		1/1/21 - 12	/31/21							
Water System Facility: WELL	1 (WSF ID: 1826)					1 (= 0)					
E. Coli (3014)	-1-4 (D)		8.6 (4 (. Daniel G		ggered (TG)	•				
Sampling Point (Sampling Po	oint ID)		Monitoring		ollection Perio		nce Status				
WELL 1 (2)			9/9/19 - 9,				nplete				
Monthly Water System Facility (WSF) Level Monitoring Requirements											
Water System Facility: ENTRY	POINT (WSFID: 00	700)									
Analyte Moni	toring Requirement (Summary Type)	Opera	ting Limit		Samples Re	Samples Req/Month				
pH Entry	Point pH Monitoring	(PHRD)	Minim	um: 6.4 PH		Dail	У				
Start Date: 1/1/2007		Comp	liance History	/: Op	erating Limit	Monitoring					
		oring Period		mpliance Stat	us: Compliar	nce Status:					
			2019 - 10/31/								
			2019 - 11/30/								
			2019 - 12/31/								
			020 - 1/31/20								
			020 - 2/29/20								
	Oth	er Compliand	ce Schedu	les							
Compliance Schedule Activity			Du	d Date							
SUBMIT CCR CERTIFICATION FORM	M		11/	6/2009							
SUBMIT CCR TO THE DEPARTMEN	Т		6/3								
SUBMIT CCR CERTIFICATION FORM	М		8/9/2010								
SUBMIT CCR TO THE DEPARTMEN	Т		6/3	0/2012							
SUBMIT LEAD CONSUMER NOTICE	E CERTIFICATE			29/2013							
SUBMIT CCR TO THE DEPARTMEN	T	SUBMIT CCR TO THE DEPARTMENT 6/30/2016									
DISTRIBUTION SYSTEM MATERIALS EVALUATION 8/31/2019											
				-							
L2 ASSESSMENT (MULTIPLE TC+, 2	2ND IN 12M)		10/	31/2019							
L2 ASSESSMENT (MULTIPLE TC+, 2 SUBMIT LEAD CONSUMER NOTICE	2ND IN 12M) E CERTIFICATE		10/3 12/3	31/2019 29/2019							
L2 ASSESSMENT (MULTIPLE TC+, 2 SUBMIT LEAD CONSUMER NOTICE CROSS CONNECTION SURVEY REP	2ND IN 12M) E CERTIFICATE ORT		10/s 12/s 3/s	31/2019 29/2019 1/2020							
L2 ASSESSMENT (MULTIPLE TC+, 2 SUBMIT LEAD CONSUMER NOTICE CROSS CONNECTION SURVEY REP SUBMIT CCR TO THE DEPARTMEN	2ND IN 12M) E CERTIFICATE ORT T		10/3 12/3 3/	31/2019 29/2019 1/2020 0/2020							
L2 ASSESSMENT (MULTIPLE TC+, 2 SUBMIT LEAD CONSUMER NOTICE CROSS CONNECTION SURVEY REP	2ND IN 12M) E CERTIFICATE ORT T		10/3 12/3 3/ 6/3 8/9	31/2019 29/2019 1/2020 0/2020 9/2020							
L2 ASSESSMENT (MULTIPLE TC+, 2 SUBMIT LEAD CONSUMER NOTICE CROSS CONNECTION SURVEY REP SUBMIT CCR TO THE DEPARTMEN	2ND IN 12M) E CERTIFICATE ORT T	Notification	10/3 12/3 3/ 6/3 8/9	31/2019 29/2019 1/2020 0/2020 9/2020							
L2 ASSESSMENT (MULTIPLE TC+, 2 SUBMIT LEAD CONSUMER NOTICE CROSS CONNECTION SURVEY REP SUBMIT CCR TO THE DEPARTMEN SUBMIT CCR CERTIFICATION FORM	2ND IN 12M) E CERTIFICATE ORT T	Compliance	10/3 12/3 3/ 6/3 8/9 Requiren	31/2019 29/2019 1/2020 0/2020 9/2020 nents	otification	PN Certi	fication				
L2 ASSESSMENT (MULTIPLE TC+, 2 SUBMIT LEAD CONSUMER NOTICE CROSS CONNECTION SURVEY REP SUBMIT CCR TO THE DEPARTMEN SUBMIT CCR CERTIFICATION FORM Violation/Situation	2ND IN 12M) E CERTIFICATE ORT T M Public	Compliance Period	10/3 12/3 3/ 6/3 8/9 Requiren Notice Tier	31/2019 29/2019 1/2020 0/2020 9/2020 nents Public N Required	Performed	Due to DPH	fication Received				
L2 ASSESSMENT (MULTIPLE TC+, 2 SUBMIT LEAD CONSUMER NOTICE CROSS CONNECTION SURVEY REP SUBMIT CCR TO THE DEPARTMEN SUBMIT CCR CERTIFICATION FORM Violation/Situation REVISED TOTAL COLIFORM RULE (2ND IN 12M) E CERTIFICATE ORT T M Public	Compliance Period 11/1/19 -	10/3 12/3 3/ 6/3 8/9 Requiren Notice Tier 2	31/2019 29/2019 1/2020 0/2020 9/2020 nents <i>Public N.</i> <i>Required</i> 12/15/2019	Performed	Due to DPH 12/25/2019					
L2 ASSESSMENT (MULTIPLE TC+, 2 SUBMIT LEAD CONSUMER NOTICE CROSS CONNECTION SURVEY REP SUBMIT CCR TO THE DEPARTMEN SUBMIT CCR CERTIFICATION FORM Violation/Situation	2ND IN 12M) E CERTIFICATE ORT T M Public	Compliance Period	10/3 12/3 3/ 6/3 8/9 Requiren Notice Tier 2 9 2	31/2019 29/2019 1/2020 0/2020 9/2020 nents Public N Required	Performed	Due to DPH					

Water Quality Monitoring and Con						2 0011	_	ner Type P	Primary Sou				
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Markon		V	rater bys	otem racin	ity aliu Sa	inping	PUIII						
Water System	Water 9	System Facility	Sc	ampling Point	Samplina Pa	int		Tot Colife		nd and Opper		Si	age
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				VMP3	VILLAGE MK	TPI STR		А Y		N			
				VMP4	GOSHEN HD	_	-	I Y		N			
				VMP5	M GREENBU			A Y		N	Υ		
				VMP6	HILTZ & BOV			A Y N			·		
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Operator N	Vame			Operator Type Certification(s)					Expira	ion			
RELA, GE	ORGE		С	CHIEF OPERATOR WATER TREATMEN					ENT PLANT OPERATOR - CLASS I				
				Con	tact Infor	mation							
Name Organization											Job Title		
/lr. Mark (Greenbe	ark Greenber	g Real Esta	ite		Owner							
1ailing Ad			N	Mailing Address Line Two				City		State	Zip Coc		
/O Mgre				.O. Box 28				Waterto			СТ	06795	
Business		Extension	Fax		le Phone E	mergency	Phone					22,00	
860-491		102	860-945-87		571-1171	- 3				enberg	realestate.	com	
		dministrative Co							J. 3.	0			_

Connecticut Department of Public Health Drinking Water Section												
	Wat	ter Qual	lity Monit	toring a	nd Con	nplia	ance S	Schedul	le			
PWS ID	PWS Name			Classification Po		Population	Owner Type I		Pri	mary Source		
CT0550321	VILLAGE MARKE	T PLACE					С	462		Р		GW
Local Address (w	here applicable)			Service	Residen	itial Co	ommerci	al Industri	al C	Combined		Agricultural
59 TORRINGTON	ROAD			Connection	ns 21		7					
Towns Served: G	OSHEN				·							
Name			0	rganization				J	Job Title			
Village Market P	lace LLC											
Mailing Address I	ine One		Mailing Addres	ss Line Two			City			State		Zip Code
184 Fern Avenue							Litchfie	eld		CT		06759
Business Phone	Extension	Fax	Mob	ile Phone	Emergency	gency Phone Email Addre		Address				
Contact Role(s):	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