

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0570062 | GREENWICH AMERICAN CENTER | NTNC | 800 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1 AMERICAN LANE | | | 2 | | | | |

Towns Served: GREENWICH

Monitoring Requirements

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

| Chlorine Residual (1012) | 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 | | |
| Asbestos (1094) | 1 routine (RT) per nine years | | |
| <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 | 1/1/11 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/28 | | |
| Total Haloacetic Acids (2456) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| KITCHEN SALAD PREP (102) | 1/1/19 - 12/31/19 | 7/1-7/31 | Complete |
| | 1/1/20 - 12/31/20 | 7/1-7/31 | |
| | 1/1/21 - 12/31/21 | 7/1-7/31 | |
| Total Trihalomethanes (2950) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ANNEX MENS ROOM (101) | 1/1/19 - 12/31/19 | 7/1-7/31 | Complete |
| | 1/1/20 - 12/31/20 | 7/1-7/31 | |
| | 1/1/21 - 12/31/21 | 7/1-7/31 | |
| 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 | | |
| Lead And Copper (PBCU) | 10 routine (RT) per three years | | |
| <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 | 1/1/17 - 12/31/19 | 6/1-9/30 | Complete |
| | 1/1/20 - 12/31/22 | 6/1-9/30 | |
| | 1/1/23 - 12/31/25 | 6/1-9/30 | |
| 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 | | |

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

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| CT0570062 | GREENWICH AMERICAN CENTER | NTNC | 800 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1 AMERICAN LANE | | | 2 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

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

| Inorganic Chemicals (IOCS) | 1 routine (RT) per three years | | |
|--|---------------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| 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 | | |
| <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 | | |
| | 1/1/21 - 12/31/21 | | |
| Pesticides, Herbicides and PCBs-Phase II (SOC2) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Pesticides, Herbicides and PCBs-Phase V (SOC5) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Organic Chemicals (VOCS) | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 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: **WELL 39 (WSF ID: 10258)**

| E. Coli (3014) | 1 routine (RT) per quarter | | |
|---|-----------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 39 (2) | 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: **WELL 14 (WSF ID: 49409)**

| E. Coli (3014) | 1 routine (RT) per quarter | | |
|---|-----------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 14 (2) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |

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

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|----------------------------------|----------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0570062 | GREENWICH AMERICAN CENTER | NTNC | 800 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1 AMERICAN LANE | | | 2 | | | | |

Towns Served: GREENWICH

Monitoring Requirements

| | | | |
|---|--------------------------|-----------------------------------|--------------------------|
| Water System Facility: WELL 14 | | (WSF ID: 49409) | |
| E. Coli (3014) | | 1 routine (RT) per quarter | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

| | | | |
|--|---|---------------------------|---------------------------|
| Water System Facility: ENTRY POINT (WSFID: 00700) | | | |
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: .2 MG/L | Daily |
| Start Date: 1/1/2002 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | 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 - 2/29/2020 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| CROSS CONNECTION SURVEY REPORT | 3/1/2019 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| 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 | 101 | ANNEX MENS ROOM | A | | | | Y |
| | | 101 ANNEX M | GENERATED BY BATCH | A | Y | | | |
| | | 102 | KITCHEN SALAD PREP | A | Y | | Y | Y |
| | | 102 KITCHEN | GENERATED BY BATCH | A | Y | | | |
| | | 103 | 3E MENS ROOM | A | | N | | |
| | | 103 3E MENS | GENERATED BY BATCH | A | Y | | | |
| | | 104 | 2E LADIES ROOM | A | | N | | |
| | | 104 2E LADI | GENERATED BY BATCH | A | Y | | | |
| | | 105 | 1E MENS ROOM | A | | N | | |
| | | 105 1E MENS | GENERATED BY BATCH | A | Y | | | |
| | | 106 | T/L EAST MENS ROOM | A | | N | | |
| | | 106 T/L EAS | GENERATED BY BATCH | A | Y | | | |
| | | 107 | 3W LADIES ROOM | A | | N | | |
| | | 107 3W LADI | GENERATED BY BATCH | A | Y | | | |

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

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|----------------------------------|----------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0570062 | GREENWICH AMERICAN CENTER | NTNC | 800 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1 AMERICAN LANE | | | 2 | | | | |
| Towns Served: GREENWICH | | | | | | | |

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 | Stage WQP 2 DBPR |
|--------------------------|------------------------------------|-------------------|--------------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | 108 | 2W MENS ROOM | A | | N | | |
| | | 108 | 2W MENS GENERATED BY BATCH | A | Y | | | |
| | | 109 | 1W LADIES ROOM | A | | N | | |
| | | 110 | T/L WEST MENS ROOM | A | | N | | |
| | | 110 | T/L MEN GENERATED BY BATCH | A | Y | | | |
| | | | 1W LADIES R GENERATED BY BATCH | A | Y | | | |
| | | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10258 | WELL 39 | 2 | WELL 39 | A | | | | |
| 1702 | GREENWICH AMERICAN TREATMENT PLANT | | | | | | | |
| 49409 | WELL 14 | 2 | WELL 14 | A | | | | |
| 55557 | ATMOSPHERIC STORAGE TANK | | | | | | | |
| 55559 | BOOSTER PUMPS | | | | | | | |

Contact Information

| | | | | | | | | |
|--|-----------|---------------------------|--------------|-----------------|---------------------------|--|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Mr. Robert H. Linder | | Greenwich American Center | | | Director | | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | | State | Zip Code |
| Greenwich American Ctr C/O Tishman Speye | | 1 American Lane | | | Greenwich | | CT | 06831 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-861-4400 | | 203-552-6879 | | | rlinder@tishmanspeyer.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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0570142 | ROUND HILL COMMUNITY CHURCH | NTNC | 25 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 395 ROUND HILL ROAD | | | 3 | | | | |
| Towns Served: GREENWICH | | | | | | | |

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 quarter | |
|---|--------------------------|-----------------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 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 | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **ENTRY POINT (WSFID: 00700)**

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---------------------------------------|----------------------------|--------------------------------------|
| pH | Entry Point pH Monitoring (PHRD) | Minimum: 6.4 PH | 4 |
| Start Date: 5/1/2008 | | Compliance History: | Operating Limit |
| | | Monitoring Period | Monitoring 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 - 2/29/2020 | |

Other Compliance Schedules

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

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|----------------------------------|------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0570142 | ROUND HILL COMMUNITY CHURCH | NTNC | 25 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 395 ROUND HILL ROAD | | | 3 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Public Notification Requirements

| Violation/Situation | Compliance Period | Notice Tier | Public Notification | | PN Certification | |
|-----------------------------------|--------------------|-------------|---------------------|-----------|------------------|----------|
| | | | Required | Performed | Due to DPH | Received |
| pH M&R Violation | 11/1/14 - 11/30/14 | 3 | 1/9/2016 | | 1/19/2016 | |
| Total Coliform M&R Violation | 7/1/15 - 9/30/15 | 2 | 1/27/2016 | | 2/6/2016 | |
| Physical Parameters M&R Violation | 7/1/15 - 9/30/15 | 3 | 12/27/2016 | | 1/6/2017 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Total Coliform Status | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|----------------------------|-------------------|----------------------------|-----------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | |
| | | RH001 | KIT SINK COM CTR DBL | A | Y | 2 | Y |
| | | RH002 | KIT SINK COM CTR SNG | A | Y | 2 | Y |
| | | RH003 | KIT SINK COM CTR TRP | A | Y | 2 | Y |
| | | RH004 | RR COMM CTR MR L | A | Y | 2 | Y |
| | | RH005 | RR COMM CTR MR R | A | Y | 2 | Y |
| | | RH006 | RR COMM CTR LR L | A | Y | 2 | Y |
| | | RH007 | RR COMM CTR LR R | A | Y | 2 | Y |
| | | RH008 | RR CHURCH MR L | A | Y | 2 | Y |
| | | RH009 | RR CHURCH MR R | A | Y | 2 | Y |
| | | RH010 | RR CHURCH LR R | A | Y | 2 | Y |
| | | RH011 | RR CHURCH LR L | A | Y | 2 | Y |
| | | RH012 | CHURCH SCHOOL SINK | A | Y | 2 | Y |
| | | RH013 | RR CHURCH NURSERY SC | A | Y | 2 | Y |
| | | RH014 | KIT SNK CHURCH | A | Y | 2 | Y |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | |
| 20054 | WELL | 2 | WELL | A | | | |
| 54359 | TREATMENT SYSTEM FOR PH | | | | | | |
| 61326 | ATMOSPHERIC STORAGE TANK 1 | | | | | | |
| 61328 | ATMOSPHERIC STORAGE TANK 2 | | | | | | |
| 61330 | ATMOSPHERIC STORAGE TANK 3 | | | | | | |

Certified Operator Information

| Water System Facility: TREATMENT SYSTEM FOR PH (WSF ID: 54359) | | | |
|---|----------------|---|--------------------------|
| Facility Classification: | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| HURLBUT, PAUL | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2022 |

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| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 395 ROUND HILL ROAD | | | 3 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Contact Information

| | | | | | | | | |
|----------------------------|-----------|--------------|-----------------------------|-----------------|-------------------------------------|---------------|-------|----------|
| Name | | | Organization | | | Job Title | | |
| Ms. Lynda C. Kinney | | | Round Hill Community Church | | | Administrator | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 395 Round Hill Road | | | | | | Greenwich | CT | 06831 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-869-1091 | | 203-869-6927 | | 203-788-1773 | church@roundhillcommunitychurch.org | | | |

Contact Role(s): **Administrative Contact**

| | | | | | | | | |
|--------------------------|-----------|-----|-----------------------------|-----------------|----------------------|-----------|-------|----------|
| Name | | | Organization | | | Job Title | | |
| Mr. Joseph Huley | | | Round Hill Community Church | | | Chairman | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 395 Round Hill Rd | | | | | | Greenwich | CT | 06831 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-869-1091 | | | | | JHULEY@OPTONLINE.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.
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 | | |
| CT0570202 | WHITBY SCHOOL | NTNC | 350 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 969 LAKE AVENUE | | | 3 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

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

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Chlorine Residual (1012) | | 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 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <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 | 1/1/11 - 12/31/19 | | | | |
| | 1/1/20 - 12/31/28 | | | | |
| 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 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Disinfectant Byproducts - TTHM & HAA5 (DBP) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| CAEDMON KITCHEN (WS001) | 1/1/19 - 12/31/19 | 7/1-7/31 | Complete | | |
| | 1/1/20 - 12/31/20 | 7/1-7/31 | | | |
| | 1/1/21 - 12/31/21 | 7/1-7/31 | | | |
| Lead And Copper (PBCU) | | 10 routine (RT) per six months | | | |
| <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 - 12/31/19 | | Complete | | |
| | 1/1/20 - 6/30/20 | | Complete | | |
| | 7/1/20 - 12/31/20 | | | | |
| 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 | | | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | |
| Nitrate (1040) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |

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 | | |
| CT0570202 | WHITBY SCHOOL | NTNC | 350 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 969 LAKE AVENUE | | | 3 | | | | |

Towns Served: GREENWICH

Monitoring Requirements

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

| Nitrate (1040) | 1 routine (RT) per quarter | | |
|--|---------------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |
| Nitrite (1041) | 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 | | |
| | 1/1/21 - 12/31/21 | | |
| Inorganic Chemicals (IOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 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 | | |
| Organic Chemicals (VOCS) | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 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 | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **ENTRY POINT (WSFID: 00700)**

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|------------------------------|---------------------------------------|---------------------------|---------------------------|
| Chlorine | Entry Point RDC (EPRD) | Minimum: 0.32 MG/L | Continuous |
| Start Date: 11/1/2014 | | | |
| | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 10/1/2019 - 10/31/2019 | Y | |
| | 11/1/2019 - 11/30/2019 | Y | |
| | 12/1/2019 - 12/31/2019 | Y | |
| | 1/1/2020 - 1/31/2020 | | |

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 | Classification | Population | Owner Type | Primary Source | | |
| CT0570202 | WHITBY SCHOOL | NTNC | 350 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 969 LAKE AVENUE | | | 3 | | | | |
| Towns Served: GREENWICH | | | | | | | |
| Water System Facility: ENTRY POINT (WSFID: 00700) | | | | | | | |
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | | | Samples Req/Month | | |
| Chlorine | Entry Point RDC (EPRD) | Minimum: 0.32 MG/L | | | Continuous | | |
| Start Date: 11/1/2014 | | Compliance History: | | Operating Limit | Monitoring | | |
| | | Monitoring Period | | Compliance Status: | Compliance Status: | | |
| | | 2/1/2020 - 2/29/2020 | | | | | |
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | | | Samples Req/Month | | |
| Orthophosphate | Entry Point Phosphate Monitoring (PHOS) | Minimum: 0.35 MG/L | | | 2 | | |
| Start Date: 11/1/2017 | | Compliance History: | | Operating Limit | Monitoring | | |
| | | Monitoring Period | | Compliance Status: | 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 - 2/29/2020 | | | | | |
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | | | Samples Req/Month | | |
| Orthophosphate | Entry Point Phosphate Monitoring (PHOS) | Maximum: 0.6 MG/L | | | 2 | | |
| Start Date: 11/1/2017 | | Compliance History: | | Operating Limit | Monitoring | | |
| | | Monitoring Period | | Compliance Status: | 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 - 2/29/2020 | | | | | |
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | | | Samples Req/Month | | |
| pH | Entry Point pH Monitoring (PHRD) | Minimum: 7.2 PH | | | 4 | | |
| Start Date: 11/1/2017 | | Compliance History: | | Operating Limit | Monitoring | | |
| | | Monitoring Period | | Compliance Status: | 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 - 2/29/2020 | | | | | |
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | | | Samples Req/Month | | |
| pH | Entry Point pH Monitoring (PHRD) | Maximum: 7.7 PH | | | 4 | | |
| Start Date: 11/1/2017 | | Compliance History: | | Operating Limit | Monitoring | | |
| | | Monitoring Period | | Compliance Status: | 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 - 2/29/2020 | | | | | |

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 | Classification | Population | Owner Type | Primary Source | | |
| CT0570202 | WHITBY SCHOOL | NTNC | 350 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 969 LAKE AVENUE | | | 3 | | | | |

Towns Served: GREENWICH

Water System Facility: ENTRY POINT (WSFID: 00700)

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|------------------------------|---|---------------------------|---------------------------|
| Phosphate (as PO4) | Entry Point Phosphate Monitoring (PHOS) | Minimum: 0.1 MG/L | 2 |
| Start Date: 11/1/2017 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | 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 - 2/29/2020 | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|-----------|---------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 9/28/2020 | |

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 | Stage WQP 2 DBPR |
|--------------------------|------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | WS001 | CAEDMON KITCHEN | A | Y | N | | Y |
| | | WS003 | CUSTODIAL ROOM 306 | A | | N | | |
| | | WS004 | FOUNDERS STONE ROOM | A | | N | | |
| | | WS005 | FOUNDERS KITCHEN | A | | N | | |
| | | WS006 | RENAISSANCE 2ND FL M | A | | N | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10260 | WELL 2 | 2 | WELL 2 | A | | | | |
| 50212 | ATMOSPHERIC TANK | | | | | | | |
| 50214 | HYDROPNEUMATIC TANK | | | | | | | |
| 60730 | WELL 3 | 2 | WELL 3 | A | | | | |
| 60732 | WELL 3 TREATMENT PLANT | | | | | | | |
| 941 | WELL 2 TREATMENT PLANT | | | | | | | |
| XX700 | ENTRY POINT | 3X | ENTRY POINT | A | | | | |

Certified Operator Information

Water System Facility: WELL 2 TREATMENT PLANT (WSF ID: 941)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------|----------------|---|--------------------------|
| FOLEY, JAMES | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 3/31/2023 |

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 | | |
| CT0570202 | WHITBY SCHOOL | NTNC | 350 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 969 LAKE AVENUE | | | 3 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Contact Information

| | | | | | | | | | |
|------------------------------|-----------|--------------|--------------------------|-----------------|---------------------------|-------------------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Mr. Thomas F. Coleman | | | Whitby School | | | Dir of Facilities | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| 969 Lake Avenue | | | | | | Greenwich | | CT | 06830 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | | |
| 203-869-8464 | 129 | 203-869-9445 | | 203-561-9491 | tcoleman@whitbyschool.org | | | | |

Contact Role(s): **Administrative Contact**

| | | | | | | | | | |
|--------------------------|-----------|-----|--------------------------|-----------------|--------------------------|-----------------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Ms. Simone Becker | | | Whitby School | | | Head of Schools | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| 969 Lake Avenue | | | | | | Greenwich | | CT | 06830 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | | |
| 203-869-8464 | | | | | sbecker@whitbyschool.org | | | | |

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.
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 | | |
| CT0570212 | PARKWAY SCHOOL | NTNC | 514 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 141 LOWER CROSS ROAD | | | 2 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

| | | | | | | | |
|---|--|--------------------------|---------------------------------------|--------------------------|--|--------------------------|--|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | | | | | |
| Asbestos (1094) | | | 1 routine (RT) per nine years | | | | |
| <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 | | 1/1/11 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 12/31/28 | | | | | |
| 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 - 8/31/19 | | | | 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 | | | | | |
| Lead And Copper (PBCU) | | | 20 routine (RT) per six months | | | | |
| <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 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 6/30/20 | | | | | |
| | | 7/1/20 - 12/31/20 | | | | | |
| 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 (1040) | | | 1 routine (RT) per quarter | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 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 | | | | | |
| Nitrite (1041) | | | 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 | | | | | |
| Inorganic Chemicals (IOCS) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 1/1/17 - 3/31/18 | | 1/1-3/31 | | Complete | |
| | | 1/1/20 - 12/31/22 | | | | | |

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 | | |
| CT0570212 | PARKWAY SCHOOL | NTNC | 514 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 141 LOWER CROSS ROAD | | | 2 | | | | |

Towns Served: GREENWICH

Monitoring Requirements

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

| Inorganic Chemicals (IOCS) | 1 routine (RT) per three years | | |
|---|--------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 1/1/23 - 12/31/25 | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Organic Chemicals (VOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Optimal Water Quality Corrosion Control Parameters

Water System Facility: DISTRIBUTION SYSTEM (WSFID: 00600)

| Start Date: | Analyte | Operating Limit |
|-------------|---------|-----------------|
| 11/1/2018 | pH | Minimum: 7.0 PH |

Water System Facility: ENTRY POINT (WSFID: 00700)

| Start Date: | Analyte | Operating Limit |
|-------------|---------|------------------------------------|
| 11/1/2018 | pH | Maximum: 7.7 PH Minimum: 7.2 PH |

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------|---------------------------------------|----------------------------|---------------------------|
| pH | Entry Point pH Monitoring (PHRD) | Minimum: 7.2 PH | Daily |
| Start Date: 12/1/2016 | | Compliance History: | Operating Limit |
| | | Monitoring Period | 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 - 2/29/2020 | |

Other Compliance Schedules

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

Water System Facility and Sampling Point Inventory

| Water System | Water System Facility | Sampling Point | Sampling Point | Total Coliform | Lead and Copper | Stage |
|--------------|-----------------------|----------------|----------------|----------------|-----------------|-------|
|--------------|-----------------------|----------------|----------------|----------------|-----------------|-------|

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 |
|------------------|-----------------------|----------------|------------|------------|----------------|
| CT0570212 | PARKWAY SCHOOL | NTNC | 514 | L | GW |

| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
|----------------------------------|---------------------|-------------|------------|------------|----------|--------------|
| 141 LOWER CROSS ROAD | | 2 | | | | |

Towns Served: GREENWICH

| Facility ID | ID | Description | Status | Rule | Rule Tier | Asbestos | WQP 2 | DBPR |
|-------------|---------------------|----------------------|--------|------|-----------|----------|-------|------|
| 00600 | DISTRIBUTION SYSTEM | | | | | | | |
| | 4 | DISTRIBUTION SYSTEM | A | Y | | Y | | |
| | 7EAST | 7 E CLASSROOM SINK | I | | N | | | |
| | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | | |
| | PS001 | 1W CLASSROOM SINK | A | Y | 2 | Y | | |
| | PS002 | 2N CLASSROOM SINK | A | Y | 2 | Y | | |
| | PS003 | 3 S CLASSROOM SINK | A | Y | 2 | Y | | |
| | PS004 | 3 W CLASSROOM SINK | A | Y | 2 | Y | | |
| | PS005 | 4 E CLASSROOM SINK | A | Y | 2 | Y | | |
| | PS006 | 4N CLASSROOM SINK | A | Y | 2 | Y | | |
| | PS007 | 4 S CLASSROOM SINK | A | Y | 2 | Y | | |
| | PS008 | 4 WEST CLASSROOM SIN | A | Y | 2 | Y | | |
| | PS009 | 5S CLASSROOM SINK | A | Y | 2 | Y | | |
| | PS010 | 7 EAST | A | Y | 2 | Y | | |
| | PS011 | 8 EAST CLASSROOM SIN | A | Y | 2 | Y | | |
| | PS012 | 8S CLASSROOM SINK | A | Y | 2 | Y | | |
| | PS013 | ART ROOM SINK | A | Y | 2 | Y | | |
| | PS014 | BOYS ROOM SINK | A | Y | 2 | Y | | |
| | PS015 | CAF WATER FOUNTAIN | A | Y | 2 | Y | | |
| | PS016 | GIRLS ROOM SINK | A | Y | 2 | Y | | |
| | PS017 | TEACHERS LOUNGE SINK | A | Y | 2 | Y | | |
| | PS018 | ART ROOM SNK 1 | A | Y | 2 | Y | | |
| | PS019 | ART ROOM SNK 2 | A | Y | 2 | Y | | |
| | PS020 | ART ROOM SNK 3 | A | Y | 2 | Y | | |
| | PS021 | ART ROOM SNK 4 | A | Y | 2 | Y | | |
| | PS022 | KIT SNK R | A | Y | 2 | Y | | |
| | PS023 | KIT SNK MIDDLE | A | Y | 2 | Y | | |
| | PS024 | KIT SNK L | A | Y | 2 | Y | | |
| | PS025 | 2S CLASSROOM | A | Y | 2 | Y | | |
| | PS026 | 4 E CLASSROOM | A | Y | 2 | | | |
| | PS027 | 5N CLASSROOM | A | Y | 2 | Y | | |
| | PS028 | KITCHEN DISHWASHING | I | | N | | | |
| | PS029 | NURSE'S OFFICE SINK | A | | 2 | | | |
| | PS030 | KITCHEN HAND WASH | A | Y | 2 | Y | Y | |
| | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | | |
| 00700 | ENTRY POINT | | A | | | | | |
| 53226 | WELL #2 | | A | | | | | |
| 53228 | WELL #3 | | A | | | | | |
| 963 | TREATMENT PLANT | | | | | | | |

Certified Operator Information

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 |
| CT0570212 | PARKWAY SCHOOL | NTNC | 514 | L | GW |

| | | | | | | |
|----------------------------------|---------------------|-------------|------------|------------|----------|--------------|
| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 141 LOWER CROSS ROAD | 2 | | | | | |

Towns Served: GREENWICH

Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 963)**

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|----------------|-------------------|--|--------------------------|
| LEMKE, BRIAN | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS I | 3/31/2021 |
| YOUNG, RICHARD | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CONDITION | 6/30/2020 |

Contact Information

| | | |
|--------------------------|--------------------------|--------------------|
| Name | Organization | Job Title |
| Mr. Daniel Watson | Greenwich Public Schools | Dir. of Facilities |

| | | | | |
|--------------------------|--------------------------|-----------|-------|----------|
| Mailing Address Line One | Mailing Address Line Two | City | State | Zip Code |
| 290 Greenwich Avenue | | Greenwich | CT | 06830 |

| | | | | | |
|----------------|-----------|-----|--------------|-----------------|-----------------------------------|
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address |
| 203-625-7437 | | | | | daniel_watson@greenwich.k12.ct.us |

Contact Role(s): **Administrative Contact**

| | | |
|--------------------------|--------------------------|----------------------|
| Name | Organization | Job Title |
| Mr. Ralph F. Mayo | Greenwich Public Schools | Intrm Superintendent |

| | | | | |
|--------------------------|--------------------------|-----------|-------|----------|
| Mailing Address Line One | Mailing Address Line Two | City | State | Zip Code |
| 290 Greenwich Ave | | Greenwich | CT | 06830 |

| | | | | | |
|----------------|-----------|--------------|--------------|-----------------|--------------------------------|
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address |
| 203-625-7425 | | 203-618-9379 | | 475-299-7235 | ralph_mayo@greenwich.k12.ct.us |

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.
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 | | |
| CT0570262 | SUTTON LAND, LLC | NTNC | 150 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1041-1073 NORTH STREET | | | 3 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

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

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <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 | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| 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 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per year | | | |
| <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 | 1/1/19 - 12/31/19 | 6/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/20 | 6/1-9/30 | | | |
| | 1/1/21 - 12/31/21 | 6/1-9/30 | | | |
| 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) | | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <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 - 12/31/21 | | Complete | | |
| | 1/1/22 - 12/31/24 | | | | |
| 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 | | | | |
| Pesticides, Herbicides and PCBs-Phase II (SOC2) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Pesticides, Herbicides and PCBs-Phase V (SOC5) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |

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 | | |
| CT0570262 | SUTTON LAND, LLC | NTNC | 150 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1041-1073 NORTH STREET | | | 3 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

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

Pesticides, Herbicides and PCBs-Phase V (SOC5) **1 routine (RT) per three years**

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Organic Chemicals (VOCS) **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 | | |
| | 1/1/21 - 12/31/21 | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|-----------|---------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION EXEMPTION | 3/1/2021 | |

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 | Stage WQP 2 DBPR |
|--------------------------|------------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | NSSC001 | IGA HAND SINK | A | Y | 1 | Y | Y |
| | | NSSC002 | PIZZA R RM | A | Y | 1 | Y | Y |
| | | NSSC003 | FLW SHOP UTIL SINK | A | Y | 1 | Y | Y |
| | | NSSC004 | PHARM R RM | A | Y | 1 | Y | Y |
| | | NSSC005 | I GRACE R RM | A | Y | 1 | Y | Y |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10263 | WELL | 2 | WELL | A | | | | |
| 1260 | NORTH STREET TREATMENT PLANT | | | | | | | |
| 60868 | ATMOSPHERIC TANKS | | | | | | | |

Certified Operator Information

Water System Facility: **NORTH STREET TREATMENT PLANT (WSF ID: 1260)**

Facility Classification: CLASS 2 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------|----------------|---|--------------------------|
| HURLBUT, PAUL | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2022 |

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 | | |
| CT0570262 | SUTTON LAND, LLC | NTNC | 150 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1041-1073 NORTH STREET | | | 3 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Contact Information

| | | | | | | | | | |
|--------------------------------|-----------|-----|--------------------------|-----------------|---------------|------------------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Mr. Stanford Guy Sutton | | | Sutton Land, LLC | | | Agent of Service | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| 87 Greenwich Avenue | | | | | | Greenwich | | CT | 06830 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | | |
| 203-661-5202 | | | | | | | | | |

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 | | |
| CT0570272 | ST. AGNES CHURCH | NTNC | 105 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 247 STANWICH ROAD | | | 1 | | | | |

Towns Served: GREENWICH

Monitoring Requirements

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

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Chlorine Residual (1012) | | 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 | | | | |
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <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 | 1/1/12 - 12/31/20 | | | | |
| | 1/1/21 - 12/31/29 | | | | |
| 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 | | | | |
| Disinfectant Byproducts - TTHM & HAA5 (DBP) | | 1 routine (RT) per year | | | |
| <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 | 1/1/20 - 12/31/20 | 7/1-9/30 | | | |
| | 1/1/21 - 12/31/21 | 7/1-9/30 | | | |
| 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) | | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/18 - 12/31/20 | | | | |
| | 1/1/21 - 12/31/23 | | | | |
| 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 | | | | |

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 | | |
| CT0570272 | ST. AGNES CHURCH | NTNC | 105 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 247 STANWICH ROAD | | | 1 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

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

Pesticides, Herbicides and PCBs - Phase II & V (SOCS) **1 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/20 - 3/31/20 | | |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Organic Chemicals (VOCS) **1 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: **WELL (WSF ID: 10264)**

E. Coli (3014) **1 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| WELL (2) | 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 | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **ENTRY POINT (WSFID: 00700)**

| <i>Analyte</i> | <i>Monitoring Requirement (Summary Type)</i> | <i>Operating Limit</i> | <i>Samples Req/Month</i> |
|-----------------------------|---|---------------------------|---------------------------|
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: 0.2 MG/L | Daily |
| Start Date: 1/1/2002 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | 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 - 2/29/2020 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|-------------------------------------|-----------------|----------------------|
| CROSS CONNECTION SURVEY REPORT | 3/1/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

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> |
| Chlorine M&R Violation | 10/1/18 - 12/31/18 | 3 | 2/22/2020 | | 3/3/2020 | |

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 | Classification | Population | Owner Type | Primary Source | | |
| CT0570272 | ST. AGNES CHURCH | NTNC | 105 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 247 STANWICH ROAD | | | 1 | | | | |
| Towns Served: GREENWICH | | | | | | | |

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 | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 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 | | | | |
| 10264 | WELL | 2 | WELL | A | | | | |
| 45099 | TREATMENT PLANT | | | | | | | |

Certified Operator Information

| Water System Facility: TREATMENT PLANT (WSF ID: 45099) | | | |
|---|----------------|---|--------------------------|
| Facility Classification: CLASS 1 TREATMENT PLANT | | | |
| | | | Certification Expiration |
| Operator Name | Operator Type | Certification(s) | |
| FOLEY, JAMES | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 3/31/2023 |

Contact Information

| | | | | | | | |
|---|-----------|-----------------------------|--------------------------|-----------------|-------------------------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Ms. Lori J Wilson | | St Cat. of Siena & St Agnes | | | Pastoral Admin Assoc | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| 247 Starwich Rd | | | | | Greenwich | CT | 06830 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-637-3661 | 328 | | | 914-837-0199 | lori.wilson@stcatherine-stagnes.org | | |
| 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 | | |
| CT0575023 | FAIRVIEW COUNTRY CLUB | NTNC | 435 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1241 KING STREET | | | | 1 | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

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

| Chlorine Residual (1012) | 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 | | |
| Asbestos (1094) | 1 routine (RT) per nine years | | |
| <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 | 1/1/11 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/28 | | |
| Total Haloacetic Acids (2456) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| SNACK BAR (FCC033) | 1/1/19 - 12/31/19 | 7/1-7/31 | Complete |
| | 1/1/20 - 12/31/20 | 7/1-7/31 | |
| | 1/1/21 - 12/31/21 | 7/1-7/31 | |
| Total Trihalomethanes (2950) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| #7 T BATHROOM (FCC032) | 1/1/19 - 12/31/19 | 7/1-7/31 | Complete |
| | 1/1/20 - 12/31/20 | 7/1-7/31 | |
| | 1/1/21 - 12/31/21 | 7/1-7/31 | |
| 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 | | |
| Lead And Copper (PBCU) | 5 routine (RT) per three years | | |
| <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 | 1/1/18 - 12/31/20 | 6/1-9/30 | Complete |
| | 1/1/20 - 12/31/22 | 6/1-9/30 | |
| | 1/1/23 - 12/31/25 | 6/1-9/30 | |
| 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 | | |

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0575023 | FAIRVIEW COUNTRY CLUB | NTNC | 435 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1241 KING STREET | | | | 1 | | | |

Towns Served: GREENWICH

Monitoring Requirements

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

| | 1 routine (RT) per quarter | | |
|--|---------------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| Arsenic (1005) | 1 routine (RT) per quarter | | |
| ENTRY POINT (3) | 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 | | |
| Chloride (1017) | 1 routine (RT) per quarter | | |
| ENTRY POINT (3) | 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 | | |
| Nitrate (1040) | 1 routine (RT) per quarter | | |
| ENTRY POINT (3) | 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 | | |
| Nitrite (1041) | 1 routine (RT) per year | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | Complete |
| | 1/1/21 - 12/31/21 | | |
| Ethylene Dibromide (EDB) (2946) | 1 routine (RT) per quarter | | |
| 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 | | |
| Inorganic Chemicals (IOCS) | 1 routine (RT) per three years | | |
| ENTRY POINT (3) | 1/1/18 - 12/31/20 | | Complete |
| | 1/1/21 - 12/31/23 | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | 1 routine (RT) per three years | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |

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

| | | | | | | | |
|----------------------------------|------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0575023 | FAIRVIEW COUNTRY CLUB | NTNC | 435 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1241 KING STREET | | | | 1 | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

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

Pesticides, Herbicides and PCBs - Phase II & V (SOCS) 1 routine (RT) per three years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Organic Chemicals (VOCS) 1 routine (RT) per quarter

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 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: WELL #1 (WSF ID: 10267)

E. Coli (3014) 1 routine (RT) per quarter

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| WELL #1 (2) | 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: WELL #2 (WSF ID: 10268)

E. Coli (3014) 1 routine (RT) per quarter

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| WELL #2 (2) | 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 | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---|---------------------------|---------------------------|
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: .2 MG/L | Daily |
| Start Date: 1/1/2002 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | 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 - 2/29/2020 | | |

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

| | | | | | | | |
|----------------------------------|------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0575023 | FAIRVIEW COUNTRY CLUB | NTNC | 435 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1241 KING STREET | | | | 1 | | | |
| Towns Served: GREENWICH | | | | | | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|------------|---------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2012 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2017 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2018 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2019 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

Public Notification Requirements

| Violation/Situation | Compliance Period | Notice Tier | Public Notification | | PN Certification | |
|----------------------------------|-------------------|-------------|---------------------|-----------|------------------|----------|
| | | | Required | Performed | Due to DPH | Received |
| Distribution Color MCL Violation | 4/1/04 - 6/30/04 | 2 | 12/22/2004 | | 1/1/2005 | |
| Nitrate MCL Violation | 1/1/11 - 3/31/11 | 1 | 3/10/2011 | | 3/20/2011 | |

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 2 DBPR | Stage |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|---|----------|------------|-------|
| | | | | | | | | | | |
| 00600 | DISTRIBUTION SYSTEM | 4 | GENERIC DISTRIBUTION | A | Y | | | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | | | |
| | | FCC001 | KIT SNK DOUBLE OLD | A | Y | 2 | Y | | | |
| | | FCC002 | KIT SNK TRPL SNK OLD | A | Y | 2 | Y | | | |
| | | FCC003 | KIT SNK SINGLE OLD | A | Y | 2 | Y | | | |
| | | FCC004 | KIT HAND SNK OLD | A | Y | 2 | Y | | | |
| | | FCC005 | BAR SINK OLD | A | Y | 2 | Y | | | |
| | | FCC006 | KIT HAND SNK NEW | A | Y | 2 | Y | | | |
| | | FCC007 | KIT SNK SML SING NEW | A | Y | 2 | Y | | | |
| | | FCC008 | KIT SNK LRG SING NEW | A | Y | 2 | Y | | | |
| | | FCC009 | KIT SNK TRP SK L NEW | A | Y | 2 | Y | | | |
| | | FCC010 | KIT SNK TRP SK R NEW | A | Y | 2 | Y | | | |
| | | FCC011 | SLOP SINK F1 | A | Y | 2 | Y | | | |
| | | FCC012 | BAR HAND SINK NEW L | A | Y | 2 | Y | | | |
| | | FCC013 | BAR HAND SINK NEW R | A | Y | 2 | Y | | | |
| | | FCC014 | BAR SINK TRIPLE NEW | A | Y | 2 | Y | | | |
| | | FCC015 | RR LADY ROOM 1F L | A | Y | 2 | Y | | | |
| | | FCC016 | RR LADY RM 1F M | A | Y | 2 | Y | | | |
| | | FCC017 | RR LADY ROOM 1F R | A | Y | 2 | Y | | | |
| | | FCC018 | RR MENS RM 1F L | A | Y | 2 | Y | | | |
| | | FCC019 | RR MENS RM 1F R | A | Y | 2 | Y | | | |
| | | FCC020 | LAUNDRY RM DBL SINK | A | Y | 2 | Y | | | |
| | | FCC021 | BSMTFOODPREP SINGSNK | A | Y | 2 | Y | | | |
| | | FCC022 | RR BASEMENT | A | Y | 2 | Y | | | |
| | | FCC023 | RR LADY ROOM LWR LVL | A | Y | 2 | Y | | | |

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

| | | | | | | | |
|----------------------------------|------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0575023 | FAIRVIEW COUNTRY CLUB | NTNC | 435 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1241 KING STREET | | | | 1 | | | |
| Towns Served: GREENWICH | | | | | | | |

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 | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | FCC024 | BOILER ROOM SINK | A | Y | 2 | Y | |
| | | FCC025 | RR 7 T | A | Y | 2 | Y | |
| | | FCC026 | SNACK BAR SINK | A | Y | 2 | Y | |
| | | FCC027 | SINK BASEMENT | A | Y | 2 | Y | |
| | | FCC028 | KITCHEN SINK | A | Y | 2 | Y | |
| | | FCC029 | BAR TWO | A | Y | 2 | Y | |
| | | FCC030 | LADIES LOCKERROOM | A | Y | 2 | Y | |
| | | FCC031 | SINK BOILER ROOM | A | Y | 2 | Y | |
| | | FCC032 | #7 T BATHROOM | A | Y | 2 | Y | Y |
| | | FCC033 | SNACK BAR | A | Y | 2 | Y | Y |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10267 | WELL #1 | 2 | WELL #1 | A | | | | |
| 10268 | WELL #2 | 2 | WELL #2 | A | | | | |
| 60867 | ATM TANK | | | | | | | |
| 965 | FCC WATER TREATMENT | | | | | | | |

Certified Operator Information

| | | | |
|---|----------------------|---|---------------------------------|
| Water System Facility: FCC WATER TREATMENT (WSF ID: 965) | | | |
| Facility Classification: CLASS 1 TREATMENT PLANT | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| FOLEY, JAMES | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 3/31/2023 |

Contact Information

| | | | | | | | |
|---|-----------|-----------------------|--------------------------|-----------------|------------------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. John M. Perella | | Fairview Country Club | | | Faculty Director | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| 1241 King Street | | | | | Greenwich | CT | 06831 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-531-6200 | 205 | 203-531-4477 | | | john@fairviewcountryclub.org | | |
| 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

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 | | |
| CT0579043 | FIRST CHURCH OF ROUND HILL | NTNC | 60 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 464 ROUND HILL ROAD & JOHN STREET | | | 1 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

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

| | | | | | |
|---|--------------------------|--------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <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 | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per month | | | |
| <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 | 10/1/19 - 10/31/19 | | Complete | | |
| | 11/1/19 - 11/30/19 | | Complete | | |
| | 12/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 1/31/20 | | Complete | | |
| | 2/1/20 - 2/29/20 | | Complete | | |
| | 3/1/20 - 3/31/20 | | | | |
| | 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 | | | |
| <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 | 10/9/19 - 10/14/19 | | Complete | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per six months | | | |
| <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 - 12/31/19 | | Complete | | |
| | 1/1/20 - 6/30/20 | | Complete | | |
| | 7/1/20 - 12/31/20 | | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per month | | | |
| <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 | 10/1/19 - 10/31/19 | | Complete | | |
| | 11/1/19 - 11/30/19 | | Complete | | |
| | 12/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 1/31/20 | | Complete | | |
| | 2/1/20 - 2/29/20 | | Complete | | |
| | 3/1/20 - 3/31/20 | | | | |
| | 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 | | | | |

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|-----------------------------------|-----------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0579043 | FIRST CHURCH OF ROUND HILL | NTNC | 60 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 464 ROUND HILL ROAD & JOHN STREET | | | 1 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

| | | | | | | | |
|---|--|--------------------------|---------------------------------------|--------------------------|--|--------------------------|--|
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | | | |
| Nitrate (1040) | | | 1 routine (RT) per quarter | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 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 | | | | | |
| Nitrite (1041) | | | 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 | | | | | |
| Inorganic Chemicals (IOCS) | | | 1 routine (RT) per three years | | | | |
| <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 - 12/31/21 | | | | | |
| | | 1/1/22 - 12/31/24 | | | | | |
| Pesticides, Herbicides and PCBs-Phase II (SOC2) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 1/1/17 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 12/31/22 | | | | | |
| | | 1/1/23 - 12/31/25 | | | | | |
| Pesticides, Herbicides and PCBs-Phase V (SOC5) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 1/1/17 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 12/31/22 | | | | | |
| | | 1/1/23 - 12/31/25 | | | | | |
| Organic Chemicals (VOCS) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT (3) | | 1/1/17 - 12/31/19 | | | | Complete | |
| | | 1/1/20 - 12/31/22 | | | | | |
| | | 1/1/23 - 12/31/25 | | | | | |
| Water System Facility: UPPER WELL (WSF ID: 10269) | | | | | | | |
| E. Coli (3014) | | | 1 triggered (TG) per period | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| WELL (2) | | 10/8/19 - 10/14/19 | | | | Complete | |
| Water System Facility: LOWER WELL (WSF ID: 56276) | | | | | | | |
| E. Coli (3014) | | | 1 triggered (TG) per period | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| LOWER WELL (2) | | 10/8/19 - 10/14/19 | | | | | |

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 | | |
| CT0579043 | FIRST CHURCH OF ROUND HILL | NTNC | 60 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 464 ROUND HILL ROAD & JOHN STREET | | | 1 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| SWTS 2: DWS REVIEW & APPROVAL OF SOWT | 9/30/2018 | |
| CCTS 1: PWS TO RECOMMEND OCCT | 1/5/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2019 | |
| CCTS 1: PWS TO RECOMMEND OCCT | 6/30/2019 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CCTS 2: DWS REVIEW & APPROVAL OF OCCT | 9/30/2019 | |
| CORRECTIVE ACTION/CORRECTIVE ACTION PLAN | 11/30/2019 | |
| CORRECTIVE ACTION/CORRECTIVE ACTION PLAN | 11/30/2019 | |
| SWTS 2: DWS REVIEW & APPROVAL OF SOWT | 12/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 3/30/2020 | |
| CCTS 2: DWS REVIEW & APPROVAL OF OCCT | 6/30/2020 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 9/28/2020 | |

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 | | | | |
| 10269 | UPPER WELL | 2 | WELL | A | | | | |
| 56276 | LOWER WELL | 2 | LOWER WELL | A | | | | |

Certified Operator Information

| | | | |
|---|----------------------|---|---------------------------------|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
| Facility Classification: SMALL WATER SYSTEM | | | |
| <i>Operator Name</i> | <i>Operator Type</i> | <i>Certification(s)</i> | <i>Certification Expiration</i> |
| HURLBUT, ANDREW | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |

Contact Information

| | | | | | | | |
|--|-----------|----------------------------|--------------|-----------------|-------------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Reverend Leo Curry | | First Church of Round Hill | | | Pastor | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 464 Round Hill Road | | | | | Greenwich | CT | 06831 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-629-3876 | | | | | fcroundhill@outlook.com | | |
| Contact Role(s): Administrative Contact, Legal Contact, Owner | | | | | | | |

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 | |
| CT0579043 | FIRST CHURCH OF ROUND HILL | NTNC | 60 | P | GW | |
| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 464 ROUND HILL ROAD & JOHN STREET | | 1 | | | | |
| Towns Served: GREENWICH | | | | | | |

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 | | |
| CT0579123 | BRUNSWICK SCHOOL SYSTEM 2 | NTNC | 295 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1275 KING STREET | | | 3 | | | | |

Towns Served: GREENWICH

Monitoring Requirements

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

| Chlorine Residual (1012) | 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 | | |
| Asbestos (1094) | 1 routine (RT) per nine years | | |
| <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 | 1/1/11 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/28 | | |
| Total Haloacetic Acids (2456) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| KITCHEN SINK GRND FL (DIST1KIT) | 1/1/19 - 12/31/19 | 8/1-8/31 | Complete |
| | 1/1/20 - 12/31/20 | 8/1-8/31 | |
| | 1/1/21 - 12/31/21 | 8/1-8/31 | |
| Total Trihalomethanes (2950) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| 2ND FLOR N. PANTRY (SAMP3NPANT2) | 1/1/19 - 12/31/19 | 8/1-8/31 | Complete |
| | 1/1/20 - 12/31/20 | 8/1-8/31 | |
| | 1/1/21 - 12/31/21 | 8/1-8/31 | |
| 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 | | |
| Lead And Copper (PBCU) | 5 routine (RT) per three years | | |
| <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 | 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 (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)**

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 | | |
| CT0579123 | BRUNSWICK SCHOOL SYSTEM 2 | NTNC | 295 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1275 KING STREET | | | 3 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

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

| | | | | | |
|--|--------------------------|---------------------------------------|--------------------------|--|--|
| 2,4-D (2105) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 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 | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/18 - 12/31/20 | | Complete | | |
| | 1/1/21 - 12/31/23 | | | | |
| 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 | | | | |
| Pesticides, Herbicides and PCBs-Phase II (SOC2) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Pesticides, Herbicides and PCBs-Phase V (SOC5) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Organic Chemicals (VOCS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 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: WELL #1 (WSF ID: 10270) | | | | | |
| E. Coli (3014) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| WELL (2) | 7/1/19 - 9/30/19 | | Complete | | |
| Water System Facility: WELL #3 (WSF ID: 10842) | | | | | |
| E. Coli (3014) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |

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 | | |
| CT0579123 | BRUNSWICK SCHOOL SYSTEM 2 | NTNC | 295 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1275 KING STREET | | | 3 | | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

Water System Facility: **WELL #3 (WSF ID: 10842)**

| | | | | |
|---|--------------------------|--------------------------|--------------------------|-----------------------------------|
| E. Coli (3014) | | | | 1 routine (RT) per quarter |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| WELL #3 (2) | 7/1/19 - 9/30/19 | | Complete | |

Water System Facility: **WELL #4 (WSF ID: 59302)**

| | | | | |
|---|--------------------------|--------------------------|--------------------------|-----------------------------------|
| E. Coli (3014) | | | | 1 routine (RT) per quarter |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| WELL #4 (2) | 7/1/19 - 9/30/19 | | Complete | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **ENTRY POINT (WSFID: 00700)**

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|------------------------------|---------------------------------------|----------------------------|---|
| Chlorine | Entry Point RDC (EPRD) | Minimum: 0.2 MG/L | Continuous |
| Start Date: 12/1/2019 | | Compliance History: | Monitoring Compliance Status: |
| | | Monitoring Period | Operating Limit Compliance Status: |
| | | 12/1/2019 - 12/31/2019 | Y |
| | | 1/1/2020 - 1/31/2020 | |
| | | 2/1/2020 - 2/29/2020 | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|-----------|---------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| ADDRESS CONTAMINATION | 12/7/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |

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 | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DIST1KIT | KITCHEN SINK GRND FL | A | Y | | | Y |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | GARBAT2 | GARAGE BATHROOM | P | | | | |
| | | GARFILT1 | GARAGE FILTRATON RM | P | | | | |
| | | GROUNDFIT2 | FITNESS CNTR PANTRY | P | Y | | | |
| | | OUTBLDG | PUMP HOUSE TAP | P | | | | |
| | | SAMP1NPANT1 | 1ST FLR. N. PANTRY | P | | | | |
| | | SAMP2SPANT1 | 1ST FLR. S. PANTRY | P | | | | |
| | | SAMP3NPANT2 | 2ND FLOR N. PANTRY | A | | | | Y |
| | | SAMP4SPANT2 | 2ND FLR S. PANTRY | P | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | WELL1SAMP | WELL#1 PUMP HOUSE | P | | | | |
| | | WELL2SAMP | WELL #2 PUMP HOUSE | P | | | | |

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|----------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0579123 | BRUNSWICK SCHOOL SYSTEM 2 | NTNC | 295 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1275 KING STREET | | | 3 | | | | |
| Towns Served: GREENWICH | | | | | | | |

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 | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | WELL3SAMP | WELL #3 PUMP HOUSE | P | | | | |
| | | WELL4SAMP | WELL #4 PUMP HOUSE | P | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10270 | WELL #1 | 2 | WELL | A | | | | |
| 10842 | WELL #3 | 2 | WELL #3 | A | | | | |
| 59302 | WELL #4 | 2 | WELL #4 | A | | | | |
| 61182 | ATMOSPHERIC STORAGE | | | | | | | |
| 967 | TREATMENT PLANT | | | | | | | |

Certified Operator Information

| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
|---|-------------------|--|--------------------------|
| Facility Classification: DISTRIBUTION SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| WITTENZELLNER, ROBERT | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS III | 6/30/2022 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS III | 9/30/2021 |
| HARKINS, STUART A. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS III | 6/30/2022 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2022 |
| Water System Facility: TREATMENT PLANT (WSF ID: 967) | | | |
| Facility Classification: CLASS 1 TREATMENT PLANT | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| WITTENZELLNER, ROBERT | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS III | 6/30/2022 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS III | 9/30/2021 |
| HARKINS, STUART A. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS III | 6/30/2022 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2022 |

Contact Information

| | | | | | | | | |
|--|-----------|------------------------|--------------------------|-----------------|---------------------------------|-----------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Mrs. Kathleen Harrington | | Brunswick School, Inc. | | | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 100 Maher Road | | | | | | Greenwich | CT | 06830 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-625-5815 | | 203-625-5816 | | 203-223-2526 | kharrington@brunswickschool.org | | | |
| Contact Role(s): Administrative Contact, Legal Contact, Owner | | | | | | | | |

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

| | | | | | | |
|----------------------------------|----------------------------------|----------------|------------|------------|----------------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | |
| CT0579123 | BRUNSWICK SCHOOL SYSTEM 2 | NTNC | 295 | P | GW | |
| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1275 KING STREET | | 3 | | | | |

Towns Served: GREENWICH

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 | | |
| CT0570164 | STANWICH CLUB | NTNC | 130 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 888 NORTH STREET | | | | 10 | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

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

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <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 | 1/1/11 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per month | | | |
| <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 | 10/1/19 - 10/31/19 | | Complete | | |
| | 11/1/19 - 11/30/19 | | Complete | | |
| | 12/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 1/31/20 | | Complete | | |
| | 2/1/20 - 2/29/20 | | Complete | | |
| | 3/1/20 - 3/31/20 | | | | |
| | 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 six months | | | |
| <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 - 12/31/19 | | Complete | | |
| | 1/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 12/31/20 | | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per month | | | |
| <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 | 10/1/19 - 10/31/19 | | Complete | | |
| | 11/1/19 - 11/30/19 | | Complete | | |
| | 12/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 1/31/20 | | Complete | | |
| | 2/1/20 - 2/29/20 | | Complete | | |
| | 3/1/20 - 3/31/20 | | | | |
| | 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) | | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |

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 | | |
| CT0570164 | STANWICH CLUB | NTNC | 130 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 888 NORTH STREET | | | | 10 | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

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

| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | |
|--|--------------------------|---------------------------------------|--------------------------|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| 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 | | |
| <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 | | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| ENTRY POINT (3) | 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 | | | |
| Organic Chemicals (VOCS) | | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete | |
| | 10/1/19 - 12/31/19 | | | |
| | 1/1/20 - 3/31/20 | | Complete | |
| | 4/1/20 - 6/30/20 | | | |
| | 7/1/20 - 9/30/20 | | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| CROSS CONNECTION SURVEY REPORT | 3/1/2019 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 3/30/2020 | |

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 | | | | |
| | | SC01 | KITCHEN-1 ENTRY PT | A | | 2 | | |
| | | SC02 | KITCHEN-2 | A | Y | 2 | | |
| | | SC03 | MENS ROOM CLUB | A | | 2 | | |
| | | SC04 | MANAGER KITCHEN | A | | 2 | | |

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 | | |
| CT0570164 | STANWICH CLUB | NTNC | 130 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 888 NORTH STREET | | | | 10 | | | |
| Towns Served: GREENWICH | | | | | | | |

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 | Stage WQP 2 DBPR |
|--------------------------|---------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | SC05 | MANAGER BATHROOM | A | | 2 | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10259 | WELL 1 | 2 | WELL1 | A | | | | |
| 55971 | ATMOSPHERIC STORAGE TANKS | | | | | | | |
| 60102 | WELL 2 | 2 | WELL 2 | A | | | | |

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------|----------------|---|--------------------------|
| FOLEY, JAMES | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 3/31/2023 |

Contact Information

| | | | | | | | | |
|---------------------------|-----------|-----------------------|--------------------------|-----------------|-------------------------|-----------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Mr. Guy D'ambrosio | | Stanwich Country Club | | | General Manager | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 888 North Street | | | | | | Greenwich | CT | 06831 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-869-0555 | 225 | | | | gdambrosio@stanwich.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 | | |
| CT0570184 | TAMARACK COUNTRY CLUB | NTNC | 130 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 55 LOCUST ROAD | | | | 1 | | | |

Towns Served: GREENWICH

Monitoring Requirements

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

| Chlorine Residual (1012) | | 1 routine (RT) per month | |
|---|--------------------------|--------------------------------------|--------------------------|
| <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 | 10/1/19 - 10/31/19 | | Complete |
| | 11/1/19 - 11/30/19 | | Complete |
| | 12/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 1/31/20 | | Complete |
| | 2/1/20 - 2/29/20 | | Complete |
| | 3/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 4/30/20 | | |
| | 5/1/20 - 5/31/20 | | |
| | 6/1/20 - 6/30/20 | | |
| | 7/1/20 - 7/31/20 | | |
| | 8/1/20 - 8/31/20 | | |
| | 9/1/20 - 9/30/20 | | |
| | 7/1/19 - 9/30/19 | | |
| | 10/1/19 - 12/31/19 | | |
| | 1/1/20 - 3/31/20 | | |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |
| Asbestos (1094) | | 1 routine (RT) per nine years | |
| <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 | 1/1/11 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/28 | | |
| Total Haloacetic Acids (2456) | | 1 routine (RT) per year | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| MAINT GARAGE SINK (TCC020) | 1/1/19 - 12/31/19 | 7/1-7/31 | Complete |
| | 1/1/20 - 12/31/20 | 7/1-7/31 | |
| | 1/1/21 - 12/31/21 | 7/1-7/31 | |
| Total Trihalomethanes (2950) | | 1 routine (RT) per year | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| SINK KITCHEN POOL (TCC015) | 1/1/19 - 12/31/19 | 7/1-7/31 | Complete |
| | 1/1/20 - 12/31/20 | 7/1-7/31 | |
| | 1/1/21 - 12/31/21 | 7/1-7/31 | |
| Total Coliform (3100) | | 1 routine (RT) per month | |
| <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 | 10/1/19 - 10/31/19 | | Complete |
| | 11/1/19 - 11/30/19 | | Complete |
| | 12/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 1/31/20 | | Complete |
| | 2/1/20 - 2/29/20 | | Complete |

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 | | |
| CT0570184 | TAMARACK COUNTRY CLUB | NTNC | 130 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 55 LOCUST ROAD | | | | 1 | | | |

Towns Served: GREENWICH

Monitoring Requirements

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

| Total Coliform (3100) | | 1 routine (RT) per month | |
|---|--------------------------|---------------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 3/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 4/30/20 | | |
| | 5/1/20 - 5/31/20 | | |
| | 6/1/20 - 6/30/20 | | |
| | 7/1/20 - 7/31/20 | | |
| | 8/1/20 - 8/31/20 | | |
| | 9/1/20 - 9/30/20 | | |

| Lead And Copper (PBCU) | | 5 routine (RT) per year | |
|---|--------------------------|--------------------------------|--------------------------|
| <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 | 1/1/19 - 12/31/19 | 6/1-9/30 | Complete |
| | 1/1/20 - 12/31/20 | 6/1-9/30 | |
| | 1/1/21 - 12/31/21 | 6/1-9/30 | |

| Physical Parameters (PPS) | | 1 routine (RT) per month | |
|---|--------------------------|---------------------------------|--------------------------|
| <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 | 10/1/19 - 10/31/19 | | Complete |
| | 11/1/19 - 11/30/19 | | Complete |
| | 12/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 1/31/20 | | Complete |
| | 2/1/20 - 2/29/20 | | Complete |
| | 3/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 4/30/20 | | |
| | 5/1/20 - 5/31/20 | | |
| | 6/1/20 - 6/30/20 | | |
| | 7/1/20 - 7/31/20 | | |
| | 8/1/20 - 8/31/20 | | |
| | 9/1/20 - 9/30/20 | | |

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

| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | |
|---|--------------------------|---------------------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| 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 | |
|---|--------------------------|--------------------------------|--------------------------|
| <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 | | |

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0570184 | TAMARACK COUNTRY CLUB | NTNC | 130 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 55 LOCUST ROAD | | | | 1 | | | |
| Towns Served: GREENWICH | | | | | | | |

Monitoring Requirements

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

Pesticides, Herbicides and PCBs - Phase II & V (SOCS) **1 routine (RT) per three years**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Organic Chemicals (VOCS) **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 | | |
| | 1/1/21 - 12/31/21 | | |

Water System Facility: **WELL 1 (WSF ID: 10822)**

E. Coli (3014) **1 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| WELL 1 (2) | 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: **WELL 2 (WSF ID: 51937)**

E. Coli (3014) **1 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| WELL 2 (TCC022) | 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 | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **ENTRY POINT (WSFID: 00700)**

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---|---------------------------|---------------------------|
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: 0.2 MG/L | Daily |
| Start Date: 6/1/2006 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | 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 - 2/29/2020 | | |

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 | Classification | Population | Owner Type | Primary Source | | |
| CT0570184 | TAMARACK COUNTRY CLUB | NTNC | 130 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 55 LOCUST ROAD | | | | 1 | | | |
| Towns Served: GREENWICH | | | | | | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|--|-----------------|----------------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2012 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| 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 | | | |
| | | BCSINK | BATH CLUB SNK | A | Y | 2 | Y | |
| | | BCSINKL | BATH CLUB SNK L | A | Y | 2 | Y | |
| | | BCSINKM | BATH CLUB SNK M | A | Y | 2 | Y | |
| | | BSHS | BAR HAND SINK | A | Y | 2 | Y | |
| | | BSSS | BAR SINK SINGLE SNK | A | Y | 2 | Y | |
| | | DAYCAMPSNK | DAY CAMP SNK | A | Y | 2 | Y | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | KSACRTFPTRL | KS ALACRT FP TRP L | A | Y | 2 | Y | |
| | | KSACRTFPTRR | KS ALACRT FP TRP R | A | Y | 2 | Y | |
| | | KSACRTHSCOF | KS ALACRT HS COF STA | A | Y | 2 | Y | |
| | | KSACRTSING | KS ALACRT SINGLE SNK | A | Y | 2 | Y | |
| | | KSMAINKHSB | KS MAIN KIT HANDSK B | A | Y | 2 | Y | |
| | | KSMAINKHSF | KS MAIN KIT HANDSK F | A | Y | 2 | Y | |
| | | KSMAINKTDBL | KS MAIN KIT DBL SK | A | Y | 2 | Y | |
| | | KSMAINKTRPL | KS MAIN KIT TRP L | A | Y | 2 | Y | |
| | | KSMAINKTRPR | KS MAIN KIT TRP R | A | Y | 2 | Y | |
| | | KSPOOL | KS POOL | A | Y | 2 | Y | |
| | | POOLHSEFONT | POOL HSE FOUNTAIN | A | Y | 2 | Y | |
| | | RRRLWLS | RR LADY L WALL L SNK | A | Y | 2 | Y | |
| | | RRRLWRS | RR LADY L WALL R SNK | A | Y | 2 | Y | |
| | | RRLRWLS | RR LADY R WALL L SNK | A | Y | 2 | Y | |
| | | RRLRWRS | RR LADY R WALL R SNK | A | Y | 2 | Y | |
| | | RRMRLWLS | RR MENS L WALL L SNK | A | Y | 2 | Y | |
| | | RRMRLWRS | RR MENS L WALL R SNK | A | Y | 2 | Y | |
| | | RRMRRWLS | RR MENS R WALL L SNK | A | Y | 2 | Y | |
| | | RRMRRWRS | RR MENS R WALL R SNK | A | Y | 2 | Y | |
| | | TCC001 | 1ST SINK BASE CLUB | A | Y | | | |
| | | TCC002 | SINK BASE CLUB | A | Y | | | |
| | | TCC003 | SINK BATH BASE CLUB | A | Y | | | |
| | | TCC004 | SINK LG KITCHEN CLUB | A | Y | | | |
| | | TCC005 | SINK SM KITCHEN CLUB | A | Y | | | |
| | | TCC006 | SINK BATH CLUB | A | Y | | | |

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0570184 | TAMARACK COUNTRY CLUB | NTNC | 130 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 55 LOCUST ROAD | | | | 1 | | | |
| Towns Served: GREENWICH | | | | | | | |

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 | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | TCC007 | SINK BATH CLUB | A | Y | | | |
| | | TCC008 | SINK KITCHEN POOL | A | Y | | | |
| | | TCC009 | FOUNTAIN POOLHOUSE | A | Y | | | |
| | | TCC010 | SINK DAYCAMP | A | Y | | | |
| | | TCC011 | SINK M BROOM POOL | A | Y | | | |
| | | TCC012 | SINK W BR POOL | A | Y | | | |
| | | TCC013 | SINK W BR POOL | A | Y | | | |
| | | TCC014 | SINK KITCHEN POOL | A | Y | | | |
| | | TCC015 | SINK KITCHEN POOL | A | Y | | | Y |
| | | TCC016 | SINK BATH CLUB | A | Y | | | |
| | | TCC017 | SINK BATH CLUB | A | Y | | | |
| | | TCC018 | SINK BATH CLUB | A | Y | | | |
| | | TCC019 | SINK LAUNDRY CLUB | A | Y | | | |
| | | TCC020 | MAINT GARAGE SINK | A | | | | Y |
| | | TCC023 | RR MENS L WALL R SNK | A | Y | | | |
| | | TCC024 | RR MENS L WALL L SNK | A | Y | | | |
| | | TCC025 | RR MENS R WALL R SNK | A | Y | | | |
| | | TCC026 | RR MENS R WALL L SNK | A | Y | | | |
| | | TCC027 | RR LADY R WALL L SNK | A | Y | | | |
| | | TCC028 | RR LADY R WALL R SNK | A | Y | | | |
| | | TCC029 | RR LADY L WALL R SNK | A | Y | | | |
| | | TCC030 | RR LADY L WALL L SNK | A | Y | | | |
| | | TCC031 | BAR HAND SINK | A | Y | | | |
| | | TCC032 | BAR SINK SINGLE SNK | A | Y | | | |
| | | TCC033 | KS MAIN KIT TRP L | A | Y | | | |
| | | TCC034 | KS MAIN KIT TRP R | A | Y | | | |
| | | TCC035 | KS MAIN KIT HANDSK F | A | Y | | | |
| | | TCC036 | KS MAIN KIT HANDSK B | A | Y | | | |
| | | TCC037 | KS MAIN KIT DBL SK | A | Y | | | |
| | | TCC038 | KS ALACRT HS COF STA | A | Y | | | |
| | | TCC039 | KS ALACRT FP TRP L | A | Y | | | |
| | | TCC040 | KS ALACRT FP TRP R | A | Y | | | |
| | | TCC041 | KS ALACRT SINGLE SNK | A | Y | | | |
| | | TCC042 | BATH CLUB SNK M | A | Y | | | |
| | | TCC043 | BATH CLUB SNK L | A | Y | | | |
| | | TCC044 | DAY CAMP SNK | A | Y | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10822 | WELL 1 | 2 | WELL 1 | A | | | | |

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 | | |
| CT0570184 | TAMARACK COUNTRY CLUB | NTNC | 130 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 55 LOCUST ROAD | | | | 1 | | | |
| Towns Served: GREENWICH | | | | | | | |

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 | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 51937 | WELL 2 | TCC022 | WELL 2 | A | | | | |
| 51939 | TREATMENT PLANT | | | | | | | |
| 51941 | ATMOSPHERIC TANK | | | | | | | |

Certified Operator Information

| | | | |
|---|----------------|---|--------------------------|
| Water System Facility: TREATMENT PLANT (WSF ID: 51939) | | | |
| Facility Classification: CLASS 1 TREATMENT PLANT | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| FOLEY, JAMES | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 3/31/2023 |

Contact Information

| | | | | | | |
|-------------------------------|-----------|--------------------------|--------------|-----------------|-------------------------------|----------|
| Name | | Organization | | | Job Title | |
| Mr. Brian P. Gillespie | | Tamarack Country Club | | | General Manager | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 55 Locust Road | | | | Greenwich | CT | 06831 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 203-531-7300 | 121 | 203-531-9558 | | 914-830-5310 | brian@tamarackcountryclub.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