Connecticut Departmen	nt of Public H	ealth I	Orinking	g Water S	Section	
Water Quality M	onitoring and	d Comp	oliance	Schedule		
PWS ID PWS Name		С	lassification	Population O	wner Type Pri	mary Source
CT0620044 BROOKSVALE PARK-VETERANS' MEM	ORIAL BLDG		NC	25	Р	GW
Local Address (where applicable)	Service	Residentia	Commerc	ial Industrial	Combined	Agricultural
524 BROOKSVALE AVENUE	Connections		1			
Towns Served: HAMDEN						
M	onitoring Requ	irement	ts			
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)					
Total Coliform (3100)				1 rc	outine (RT) p	er quarter
Sampling Point (Sampling Point ID)	ı	Monitoring	Period (Collection Perio	d Complia	nce Status
Select from Inventory of Active Sampling Points		7/1/19 - 9,	/30/19		Cor	nplete
	1	.0/1/19 - 12	2/31/19		Cor	nplete
		1/1/20 - 3,	/31/20		Cor	nplete
		4/1/20 - 6,	/30/20			
		7/1/20 - 9,	/30/20			
Physical Parameters (PPS)				1 rc	outine (RT) p	er quarter
Sampling Point (Sampling Point ID)	ı	Monitoring	Period (Collection Perio	d Complia	nce Status
Select from Inventory of Active Sampling Points		7/1/19 - 9,	/30/19		Cor	nplete
	1	.0/1/19 - 1	2/31/19		Cor	nplete
		1/1/20 - 3,		Cor	nplete	
		4/1/20 - 6,				
		7/1/20 - 9,	/30/20			
Water System Facility: ENTRY POINT (WSF ID: 0	0700)					
Nitrate And Nitrite (NOX)					1 routine (R	「) per year
Sampling Point (Sampling Point ID)		Monitoring	Period (Collection Perio	d Complia	nce Status
ENTRY POINT (3)		1/1/19 - 12	/31/19		Cor	nplete
		1/1/20 - 12	/31/20			
		1/1/21 - 12	/31/21			
Water System Facility: WELL (WSF ID: 21076)						
E. Coli (3014)				1 rd	outine (RT) p	er quarter
Sampling Point (Sampling Point ID)		Monitoring	Period (Collection Perio	d Complia	nce Status
WELL (2)		7/1/19 - 9,	/30/19		Cor	nplete
	1	.0/1/19 - 12	2/31/19		Cor	nplete
		1/1/20 - 3,	/31/20		Cor	nplete
		4/1/20 - 6,	/30/20			
		7/1/20 - 9,	/30/20			
Oth	ner Compliance	Schedu	les			
Compliance Schedule Activity		Du	e Date	Achieve	d Date	
CONSULT WITH THE DEPARTMENT		1/2	6/2020	2/19/2	2020	
ADDRESS CONTAMINATION		3/1	9/2020			
Public	Notification R	equiren	nents			
	Compliance	Notice		<u>lotification</u>	PN Certi	fication
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received
Total Coliform M&R Violation	4/1/04 - 6/30/04	2	11/5/2004		11/15/2004	
Total Coliform M&R Violation	1/1/04 - 3/31/04	2	11/5/2004		11/15/2004	
Total Coliform M&R Violation	7/1/04 - 9/30/04	2	2/9/2005		2/19/2005	
Total Coliform M&R Violation	10/1/04 - 12/31/04	2	6/23/2005		7/3/2005	

	Connectic	ut Depart	ment o	of Public H	lealth	Drink	ing V	Vater S	Section	
		ter Qualit					_			
PWS ID	PWS Name	201	<i>y</i>			Classifica			wner Type P	rimary Source
CT0620044	4 BROOKSVALE PA	ARK-VETERANS'	MEMORIA	L BLDG		NC		25	P	GW
Local Addr	ress (where applicable)			Service	Resident	ial Com	nercial	Industrial	Combined	Agricultura
524 BROO	KSVALE AVENUE			Connections			1			
Towns Serv	ved: HAMDEN			1	1	1			1	
		Р	ublic No	tification R	Require	ments				
				Compliance	Notice		lic Notif	<u>cation</u>	PN Cert	<u>tification</u>
Violation/	Situation			Period	Tier	Requ	ired P	erformed	Due to DPH	Received
Nitrate An	d Nitrite M&R Violation	n	1/1	./04 - 12/31/04	2	6/23/	2005		7/3/2005	
Total Colife	orm M&R Violation		1/	1/05 - 3/31/05	2	8/26/	2005		9/5/2005	
Physical Pa	arameters M&R Violati	on	10/	1/05 - 12/31/05	3	3/20/	2007		3/30/2007	
Total Colife	orm M&R Violation		1/	1/07 - 3/31/07	2	6/22/	2007		7/2/2007	
Physical Pa	arameters M&R Violati	on	4/	1/06 - 6/30/06	3	8/18/	2007		8/28/2007	
Nitrate An	d Nitrite M&R Violation	n	1/1	./09 - 12/31/09	2	4/1/2	010		4/11/2010	
E. Coli M&	R Violation		4/	1/17 - 6/30/17	3	9/26/	2018		10/6/2018	
E. Coli M&	R Violation		4/	1/19 - 6/30/19	3	9/23/	2020		10/3/2020	
		Water Syst	tem Faci	lity and Sai	mpling	Point I	nvent	ory		
Water							Total	Lead ar	nd	
	Water System Facility	San	_	t Sampling Poi	int		Colifori			Stage
Facility ID			ID	Description		Statu		Rule Ti	er Asbestos	WQP 2 DBPI
00600	DISTRIBUTION SYSTEM		4	DISTRIBUTIO		Α	Υ			
		DO		/ WITHIN 5 SEF						
			SP5	-BROOKVALE	\/FT N/I #1	Α	Υ			
			SP6	-BROOKVALE	FHT	Α	Y			
		ι	JPSTREAM	WITHIN 5 SEF	FHT RVICE CON	A A				
	ENTRY POINT	L	JPSTREAM 3	WITHIN 5 SER	FHT RVICE CON	A A A				
21076	WELL	L	JPSTREAM	WITHIN 5 SEF	FHT RVICE CON	A A				
21076		L	JPSTREAM 3 2	WITHIN 5 SEF ENTRY POINT WELL	FHT RVICE CON	A A A				
21076	WELL	L	JPSTREAM 3 2	WITHIN 5 SER	FHT RVICE CON	A A A				
21076	WELL	Ĺ	JPSTREAM 3 2	WITHIN 5 SER ENTRY POINT WELL ntact Infori	FHT RVICE CON	A A A	Y		Job Title	
21076 57912 Name Mr. Vincer	WELL TREATMENT PLANT nt Lavorgna		JPSTREAM 3 2 Co	WITHIN 5 SERENTRY POINT WELL ntact Information Organization Hamden Parks 8	FHT RVICE CON	A A A	Y	ark Ranger		
21076 57912 Name Mr. Vincer Mailing Ad	TREATMENT PLANT Int Lavorgna Iddress Line One		JPSTREAM 3 2 Co	WITHIN 5 SER ENTRY POINT WELL ntact Infori	FHT RVICE CON	A A A	Y	ark Ranger City	State	Zip Code
21076 57912 Name Mr. Vincer Mailing Ad 524 Brooks	nt Lavorgna ddress Line One svale Avenue	Ma	JPSTREAM 3 2 Co	WITHIN 5 SER ENTRY POINT WELL ntact Infori Organization Hamden Parks &	THT RVICE CON mation Recreation	A A A A	Y P amden	City		Zip Code 06518
21076 57912 Name Mr. Vincer Mailing Ad 524 Brooks	mt Lavorgna ddress Line One svale Avenue s Phone Extension	Ma Fax	JPSTREAM 3 2 Co Gailing Addre	WITHIN 5 SER ENTRY POINT WELL ntact Infori Organization Hamden Parks &	FHT RVICE CON	A A A A Pon H	P amden mail Add	City	State CT	
21076 57912 Name Mr. Vincer Mailing Ad 524 Brooks Business 203-287	nt Lavorgna ddress Line One svale Avenue s Phone Extension 7-2669	Fax 203-287-267	JPSTREAM 3 2 Co Gailing Addre	WITHIN 5 SER ENTRY POINT WELL ntact Infori Organization Hamden Parks &	THT RVICE CON mation Recreation	A A A A Pon H	P amden mail Add	City	State CT	
21076 57912 Name Mr. Vincer Mailing Ad 524 Brooks Business 203-287	mt Lavorgna ddress Line One svale Avenue s Phone Extension	Fax 203-287-267	CO Cailing Address Mol	WITHIN 5 SER ENTRY POINT WELL ntact Infori Organization Hamden Parks &	THT RVICE CON mation Recreation	A A A A Pon H	P amden mail Add	City	State CT	

Town of Hamden

Mailing Address Line Two

Mobile Phone

2750 Dixwell Avenue

Fax

Mayor

City

cleng@hamden.com

Hamden

Emergency Phone Email Address

State

CT

Zip Code

06518

Mr. Curt B. Leng

Business Phone

203-287-7100

Mailing Address Line One

Hamden Government Center

Contact Role(s): Legal Contact, Owner

Extension

Connecticut D	epartment of Public H	ealth Drinking	g Water Section
Water (Quality Monitoring and	l Compliance S	Schedule

			<i>-</i>			1			
PWS ID	PWS Name					Classification	Population	Owner Type	Primary Source
СТ0620044	BROOKSVALE PARK-V	ETERANS	' MEMORIAL E	BLDG		NC	25	Р	GW
Local Address (v	vhere applicable)			Service	Resider	ntial Commerc	ial Industri	al Combine	ed Agricultural
524 BROOKSVA	Connections		1						

Towns Served: HAMDEN

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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 Dep	partment of	f Public	Health	Dr	inkir	ng W	ater	Se	ction	
	•	ality Monit					_				
DVA(C ID		anty Monit	or mg ar	iu Con							
PWS ID	PWS Name	LLAUDEL			Class				Own		Primary Source
CT0620064	YMCA - CAMP MOUNTAIN	ILAUREL	C	Desident	Li _ 1 _ 6	NC		.80	-1	P	GW
	(where applicable)		Service Connection	Resident	tiai C	Comme	rciai ir	ndustri	aı	Combined	l Agricultural
2700 DOWNES			Connection	3		1					
Towns Served	HAMDEN										
Mator Custor	m Facility DISTRIBUTION		oring Req	luireme	nts						
	m Facility: DISTRIBUTION	STSTEIN (WSFT	ט: טטטטטן						4	· · · /DT	.
Total Colifor	•			0.0 14 1	0 -	at a at	C-111			-) per month
	g Point (Sampling Point ID)			Monitorii			Collect	tion Pe	rioa	Compi	iance Status
Select fro	om Inventory of Active Sampli	ng Points		5/1/20 -							
				6/1/20 -							
				7/1/20 -							
	. (556)			8/1/20 -	8/31,	/20					
-	rameters (PPS)			0.0 1: 1			6.11			=) per month
	g Point (Sampling Point ID)			Monitorii			Collect	tion Pe	riod	Compl	iance Status
DISTRIBU	JTION SYSTEM (4)			5/1/20 -							
				6/1/20 -							
				7/1/20 -							
	- 111	/:		8/1/20 -	8/31,	/20					
•	m Facility: ENTRY POINT	(WSF ID: 00700)									
	Nitrite (NOX)									=	RT) per year
	g Point (Sampling Point ID)			Monitorii	_		Collect	tion Pe	riod		iance Status
ENTRY PO	OINT (3)			1/1/19 - 1		-				Co	omplete
				1/1/20 - :		-					
				1/1/21 - :	12/31	./21					
		Other C	omplianc	e Sched	lules	5					
	chedule Activity				Due D			Achie	ved L	Date	
SEASONAL STA	ART UP COMPLETION			5	5/1/2	020					
	Water	System Facili	ity and Sa	ampling	Poi	nt Inv					
Water	nton Custom Fasilitu	Campling Doint	Campalina D	oint			Total	Lead			Charana
System Work Facility ID	ater System Facility	Sampling Point ID	Description		_		oliform Rule			Achastas	Stage WQP 2 DBPR
-	TDIDITION CVCTEM	4	DISTRIBUTION			tatus ^	Y	Nuie	1161	ASDESIUS	WQF 2 DDFK
טטסטט טוא	STRIBUTION SYSTEM	4 DOWNSTREAM				A A	Ţ				
		UPSTREAM	WITHIN 5 SE			A					
00700 FN	TDV DOINT				V .						
	TRY POINT	2	ENTRY POIN	11		A					
21078 WE			WELL			Α					
		Con	tact Info	rmation							
Name		0	rganization							Job Title	
Central CT Co	ast YMCA										
Mailing Addre	ess Line One	Mailing Addres	s Line Two				С	ity		State	Zip Code
1240 Chapel S							Haven			СТ	06511
Business Ph		ax Mobi	le Phone	Emergency	Phon	ne Ema	il Addre	ess			
203-777-96	522					info(@cccym	ica.org			
Contact Role(s	s): Owner										

Schedule Generation Date: 3/10/2020

	Connectic	ut Depa	n unent (of Public	пеани	וועו	nkmg	vvater	Section	l
	Wa	ter Qua	lity Mon	itoring a	nd Cor	nplia	nce S	Schedul	le	
PWS ID	PWS Name					Classif	fication	Population	Owner Type	Primary Sou
CT0620064	YMCA - CAMP N	10UNTAIN L	AUREL			N	NC .	180	Р	GW
Local Address (w	here applicable)			Service	Resider	Residential Con		al Industri	al Combin	ed Agricult
2700 DOWNES ROAD				Connection	ns		1			
Towns Served: H	AMDEN			,					,	
Name				Organization Jo					Job Titl	е
Mr. Alexei Bachı	uretz			Hamden YMCA				Operation	ns Director	
Mailing Address	Line One		Mailing Addr	ess Line Two			City		State	Zip Code
1605 Sherman A	venue						Hamde	n	СТ	06514
Business Phon	e Extension	Mo	bile Phone	Emergenc	y Phone	Email A	Email Address			
203-248-6361							abachu	retz@cccyr	nca.org	
Contact Polo(c):	Administrativo	Contact		,			•			

Connecticut Department of Public Health Drinking Water Section

Contact Role(s): Administrative Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Depa	artmen	t of	Public F	Health	Drin	ıking	g W	ater	Se	ction	
	Water Qua	lity Mo	onito	oring an	d Com	plia	nce S	Sch	edul	e		
PWS ID	PWS Name			0							er Type Pri	imary Source
CT0620074	BROOKSVALE PARK - FIELD	HOUSE				N	С		25		L	GW
Local Address	(where applicable)			Service	Resident	ial Co	mmerci	ial I	ndustria	ıl (Combined	Agricultural
524 BROOKS\	/ALE AVENUE			Connections			1					
Towns Served	: HAMDEN							,		,		
		Mo	onito	ring Requ	uiremer	าts						
Water Syste	m Facility: DISTRIBUTION S											
Total Colifo	rm (3100)								1	rout	ine (RT) p	er quarter
Samplin	g Point (Sampling Point ID)				Monitorin	ng Perio	od C	Collec	tion Per	iod	Complia	ınce Status
Select fro	om Inventory of Active Sampling	g Points			7/1/19 -	9/30/1	9				Cor	nplete
					10/1/19 -	12/31/	19					
					4/1/20 -	6/30/2	0					
					7/1/20 -	9/30/2	0					
Physical Pa	rameters (PPS)								1	rout	ine (RT) p	er quarter
-	g Point (Sampling Point ID)				Monitorin			Collec	tion Per	iod	Complia	ınce Status
Select fro	om Inventory of Active Sampling	g Points			7/1/19 -						Cor	nplete
					10/1/19 -			10/	1-11/30			
					4/1/20 -							
					7/1/20 -	9/30/2	0					
Water Syste	m Facility: ENTRY POINT (\	WSF ID: 00	700)									
	Nitrite (NOX)									1 r	=	Γ) per year
	g Point (Sampling Point ID)				Monitorin			Collect	tion Per	iod		ınce Status
ENTRY P	OINT (3)				1/1/19 - 1				1-11/30		Cor	nplete
					1/1/20 - 1			-	1-11/30			
					1/1/21 - 1		21	4/1	1-11/30			
		Othe	er Co	mpliance	Sched	ules						
Compliance S	Schedule Activity				D	ue Dat	te		Achiev	ved E	ate	
SEASONAL ST	ART UP COMPLETION				4	/1/202	.0					
		Public	Noti	fication F	Require	ment	ts					
			Со	mpliance	Notice	<u>P</u>	ublic N	lotific	ation		PN Certi	<u>fication</u>
Violation/Site	uation			Period	Tier	Re	quired	Pe	rformed	D	ue to DPH	Received
E. Coli			7/1/1	19 - 9/30/19	3	11/1	13/2020)		11	./23/2020	
	Water S	ystem F	acilit	ty and Sai	mpling	Point	t Inve	ento	ry			
Water								otal	Lead o			
	ater System Facility			Sampling Poi	int			iform				Stage
Facility ID		ID		Description		Sta	tus	Rule	Rule	Tier	Asbestos I	WQP 2 DBPR
00600 DIS	STRIBUTION SYSTEM	4		DISTRIBUTIO		Α		Υ				
				WITHIN 5 SEF				v				
		SP4		-BROOKVALE		Α		Y				
00700 5	ITDV DOINT	UPSTREA		WITHIN 5 SEF								
	ITRY POINT	3		ENTRY POINT	<u> </u>	Δ						
22892 W	ELL #1	2		WELL #1		Д	1					
			Cont	act Infor	mation							
Name			Org	ganization							Job Title	
Mr. Vincent L				mden Parks 8	& Recreation	on	1		rk Range	er		
Mailing Addre	ess Line One	Mailing Ad	ddress	Line Two				C	City		State	Zip Code

	Connectic	ut Depa	rtment o	f Public	Health	ı Dı	rinking	Water	Section	
	Wa	ter Qua	lity Moni	toring a	and Cor	npl	iance S	Schedul	e	
PWS ID I	PWS Name					Clas	ssification	Population	Owner Type	Primary Source
CT0620074	BROOKSVALE PA	ARK - FIELD H	IOUSE				NC	25	L	GW
Local Address (wh	nere applicable)			Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
524 BROOKSVALE	AVENUE			Connectio	ons		1			
Towns Served: HA	AMDEN				,					·
524 Brooksvale A	venue						Hamde	n	СТ	06518
Business Phone	Extension	Fax	Mol	obile Phone Emergency Phone Email Address						
203-287-2669		203-287-2	2670				brooks	vale@hamd	en.com	
Contact Role(s):	Administrative	Contact								
Name				Organization					Job Title	2
Mr. Curt B. Leng			٦	own of Ham	nden			Mayor		
Mailing Address L	ine One		Mailing Addre	ss Line Two				City	State	Zip Code
Hamden Governr	nent Center		2750 Dixwell A	Avenue			Hamde	n	СТ	06518
Business Phone	Extension	Fax	Mol	oile Phone	Emergenc	y Pho	ne Email A	Address		
203-287-7100							cleng@	hamden.co	m	
Contact Role(s):	Legal Contact									

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

End of schedule

	Connectic	•					•				ction	
	Wat	ter Quality	y Monit	oring ar	nd Con	ıplia	nce	Sche	edule	e		
PWS ID	PWS Name					Classif	ication	Popul	ation	Own	er Type F	Primary Source
CT0621014	CHURCH OF THE	ASCENSION				N	IC	2	5		Р	GW
Local Address (where applicable)			Service	Residen	tial Co	mmerc	ial In	dustria	l (Combined	l Agricultural
1040-1050 DUN	NBAR HILL RD			Connection	S		1					
Towns Served:	HAMDEN			"				·				1
				oring Req	Juireme	nts						
•	Facility: DISTR	IBUTION SYSTE	M (WSF II	D: 00600)								
Total Coliforn												per quarter
	Point (Sampling P	-			Monitori			Collecti	on Peri	iod	Compl	iance Status
Select fror	n Inventory of Acti	ve Sampling Poir	nts		7/1/19 -						Co	omplete
					10/1/19 -	12/31/	19				Co	omplete
					1/1/20 -	3/31/2	.0					
					4/1/20 -	6/30/2	.0					
				-	7/1/20 -	9/30/2	.0					
Physical Para	meters (PPS)								1	rout	tine (RT)	per quarter
Sampling	Point (Sampling P	oint ID)			Monitori	ng Peri	od (Collecti	on Peri	iod	Compl	iance Status
Select fror	m Inventory of Acti	ve Sampling Poir	nts		7/1/19 -	9/30/1	.9				Co	omplete
					10/1/19 -	12/31/	19				Co	omplete
					1/1/20 -	3/31/2	.0					
					4/1/20 -	6/30/2	.0					
					7/1/20 -							
Water System	Facility: ENTRY	POINT (WSF	D: 00700)									
-	Nitrite (NOX)	(1101								1 r	outine (RT) per year
	Point (Sampling P	oint ID)			Monitori	na Peri	od (`ollecti	on Peri		=	iance Status
ENTRY PO					1/1/19 -			oncon	011 1 011	iou -		omplete
ENTITY	1141 (3)				1/1/20 -							Simplete
					1/1/21 -							
		14/	· · · · · · · · · · · · · · · · · ·									
		Water Syste	em Facili	ity and Sa	ampling	Poin	t Inve	entor	У			
Water								otal	Lead a			
	er System Facility	Sam		Sampling Po				iform	Сорр			Stage
Facility ID			ID	Description			itus	Rule	Rule 1	ier	Asbestos	WQP 2 DBPR
00500 WEL			2	WELL 1			4					
00600 DIST	RIBUTION SYSTEM		4	DISTRIBUTIO			4					
		DOV	VNSTREAM	WITHIN 5 SE	ERVICE CON	N A	4					
		UF	PSTREAM	WITHIN 5 SE	ERVICE CON	N A	4					
00700 ENT	RY POINT		3	ENTRY POIN	IT	A	4					
			Con	tact Info	rmation							
Name				rganization							Job Title	
Reverend Thor	nas I. O'rourke			nurch of The	Ascension			Past	tor		100 1100	
Mailing Addres		Mai	ling Address		500.151011			Cit			State	Zip Code
1050 Dunbar H		IVIGI	g / taures	J Line 1 WO			Hamd		~ 1		CT	06514
Business Pho		Fax	Mohi	le Phone	Emergency	Phone			:c		CI	00314
203-288-751		I ax	IVIUDII	ic i none	Emergency	THORE	Liliali	Huules				
		Contact Lagal C	antact Occur	\								
COITTACT KOIE(S)	: Administrative	contact, Legal Co	Jiitact, OWn	ICI								

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

		9 8		- P	S 0 1 1 0 0 1 0 1		
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0621014	CHURCH OF THE ASCENSION	NC	25	Р	GW		
Local Address (v	where applicable)	Service	Residen	ntial Commerc	ial Industri	al Combin	ed Agricultural
1040-1050 DUN		1					
т с і	LIANADENI			•	•		

Towns Served: HAMDEN

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End of schedule