	Connecticut Department	of Public H	lealth	D	rinkir	ng V	Water	Se	ection			
	Water Quality Mon	litoring an	d Con	npl	liance	Sc	chedul	le				
PWS ID	PWS Name Classifi											
СТ0745103	LITCHFIELD MONTESSORI SCHOOL				NTNC		120		Р	GW		
Local Address ((where applicable)	Service	Residen	tial	Comme	rcial	Industri	al	Combined	Agricultura		
5 KNIFE SHOP	ROAD	Connections	1									
Towns Served:	LITCHFIELD											
	Mon	itoring Requ	iireme	nts	;							
Water Systen	n Facility: DISTRIBUTION SYSTEM (WS	F ID: 00600)										
Asbestos (1	094)						1 ro	outi	ne (RT) pe	r nine years		
Sampling	Point (Sampling Point ID)		Monitori	ing F	Period	Collection Period			Compli	Compliance Status		
Select fro	m Inventory of Active Sampling Points		1/1/11 -	12/3	31/19				Co	mplete		
			1/1/20 -	12/3	31/28							
Total Colifor	m (3100)						1	ro	utine (RT)	per quarter		
Sampling	Point (Sampling Point ID)		Monitori	ing P	Period	Collection Period			Compli	Compliance Status		
Select fro	m Inventory of Active Sampling Points		7/1/19 -	9/3	0/19				Co	mplete		
			10/1/19 - 12/31/19						Co	mplete		
			1/1/20 - 3/31/20						Co	mplete		
			4/1/20 -	6/3	0/20							
			7/1/20 -	9/3	0/20							
	pper (PBCU)						5 rou	three years				
Sampling Point (Sampling Point ID)			Monitoring Period			Collection Period			Compli	ance Status		
Select from Inventory of Active Sampling Points			1/1/17 - 12/31/19			6/1-9/30			Co	mplete		
			1/1/20 -				6/1-9/30					
			1/1/23 -	12/3	31/25		6/1-9/30					
-	ameters (PPS)						1	ro		per quarter		
	Sampling Point (Sampling Point ID)		Monitoring Period			Collection Period			Compli	ance Status		
Select fro	Select from Inventory of Active Sampling Points		7/1/19 - 9/30/19						Co	mplete		
			10/1/19 - 12/31/19						Co	mplete		
			1/1/20 - 3/31/20						Co	mplete		
			4/1/20 -		-							
		7/1/20 -	0/20									
Water Systen	n Facility: ENTRY POINT (WSF ID: 0070	00)										
-	emicals (IOCS)						1 rou	utin	e (RT) per	three years		
Sampling	Sampling Point (Sampling Point ID)			Monitoring Period				riod	Compli	ance Status		
ENTRY PC	DINT (3)		1/1/19 -									
			1/1/22 -	12/3	31/24							
	Nitrite (NOX)								-	T) per year		
	Sampling Point (Sampling Point ID)		Monitoring Period			Collection Period				ance Status		
ENTRY PC	DINT (3)		1/1/19 -						Co	mplete		
L			1/1/20 -									
			1/1/21 -	12/3	31/21							
	Ierbicides and PCBs-Phase II (SOC2)									three years		
	Sampling Point (Sampling Point ID)				Period	Coll	ection Pe	riod		ance Status		
ENTRY POINT (3)			1/1/17 - 12/31/19						Co	mplete		
			1/1/20 - 12/31/22									
			1/1/23 -	12/3	31/25							
	Ierbicides and PCBs-Phase V (SOC5)									three years		
Sampling	Point (Sampling Point ID)		Monitori	ing P	Period	Coll	ection Pe	riod	Compli	ance Status		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations. Schedule Generation Date: 3/10/2020

	Connecticut De	partment of	f Public	Health	Dı	rinkin	g W	/ater S	ection		
	Water Qı	ality Monit	oring ar	nd Com	ıpl	iance	Sch	nedule			
PWS ID	PWS Name				Clas	ssification	Pop	ulation Ov	vner Type	Primary Source	
СТ0745103	LITCHFIELD MONTESSORI	SCHOOL				NTNC		120	Р	GW	
Local Address	s (where applicable)		Service		tial	Commer	cial	Industrial	Combine	d Agricultura	
5 KNIFE SHOP	ROAD		Connection	s 1							
Towns Served	: LITCHFIELD										
		Monite	oring Req	uireme	nts						
Water Syste	m Facility: ENTRY POINT	(WSF ID: 00700)									
Pesticides,	Herbicides and PCBs-Phas	e V (SOC5)						1 routir	ne (RT) pei	r three years	
Samplin	g Point (Sampling Point ID)		Monitoring Period					Collection Period Compl			
ENTRY P	OINT (3)			1/1/17 - 1		-			C	omplete	
				1/1/20 -		-					
				1/1/23 -	12/3	1/25					
-	emicals (VOCS)									three years	
	g Point (Sampling Point ID)			Monitori	_		Collec	ction Period		liance Status	
ENTRY P	UINT (3)			1/1/17 - 1		-			C	omplete	
				1/1/20 - 1		-					
				1/1/23 - 1							
		Other C	omplianc	e Sched	lule	es					
-	chedule Activity					Date		Achieved	d Date		
	ECTION EXEMPTION					2019					
DISTRIBUTION	N SYSTEM MATERIALS EVALU	-				/2019					
	Water	System Facili	ity and Sa	mpling	Po	int Inv	ento	ory			
Water			c (; c				Total	Lead and			
System Wo Facility ID	ater System Facility	Sampling Point ID	Sampling Po Description	oint			oliforn Rule			Stage WQP 2 DBP	
	STRIBUTION SYSTEM	4	DISTRIBUTIO			<u>Status</u> A	Y	Kule He	ASDESIUS	WQF 2 DDF	
00000 Di.		DOWNSTREAM				A	I				
		UPSTREAM	WITHIN 5 SE		-	A					
00700 EN	ITRY POINT	3	ENTRY POIN		•	A					
	ELL	2	WELL			A					
	ESSURE STORAGE	L	VV LLL			~					
	EATMENT PLANT										
		Certified	Onerator	Inform	ati	on					
Mator Sucto			-	morm	ati						
,	m Facility: DISTRIBUTION	•	D: 00000)							0	
Operator Nai	ification: SMALL WATER SYST	Operator Type	0	Certificatio	n(c)					Certification Expiration	
LEMAY, REAL		CHIEF OPERATO		DISTRIBUTI					S I	6/30/2020	
LLIVIAT, REAL	L <i>V</i> .	CHIEF OPERATO		NATER TRE						12/31/2022	
KILBOURN, EF	RIC M	ASSIGNED OPER								12/31/2022	
KILDOONN, LI		ASSIGNED OF LI		NATER TRE						12/31/2022	
		Con	tact Info								
Name				mation							
Name Mc Donna T	Fortion		rganization	occori Cobe			D.	icinoss Ma	Job Title		
Ms. Donna T Mailing Addre		Mailing Address	tchfield Mont		501			usiness Mar	State	7in Codo	
waning Audre			S LINE I WO					City		Zip Code	
5 Knife Shop	Road					North	hlaid		CT	06778	

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations. Schedule Generation Date: 3/10/2020

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

				0		P							
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source					
СТ0745103	LITCHFIELD MONTESSORI SCHOOL						NTNC	120	Р	GW			
Local Address (w		Service	Resid	Residential Co		ial Industr	ial Combine	ed Agricultural					
5 KNIFE SHOP RO		Connectior	าร	1									
Towns Served: L	ITCHFIELD												
860-283-5920)			860-2	860-294-1954 busines			ssmanager@litchfieldmontessori.org					
Contact Role(s):	Administrative	Contact											
Name		Organization				Job Title							
Ms. Cara Johnson Litchfield Monte						chool		Head of School					
Mailing Address	Mailing Addre	ess Line Two				City	State	Zip Code					
5 Knife Shop Roa			Northfie			field C		06778					
Business Phon	e Extension	Fax	Мо	bile Phone	Emerge	ncy Ph	one Email	e Email Address					
860-283-5920)						cjohns	cjohnson@litchfieldmontessori.org					
Contact Role(s):	Legal Contact												
Please note the	following:												
1. The residual d	isinfectant concen	tration must b	e measured at t	the same locatio	on and tim	ie as ea	ch total coli	form sample.					
2. If a Collection	Period is specified	, all water qua	lity samples mu	st be collected o	during the	specifi	ed period.						
	results, additional ce sent by the DW												

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

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

End of schedule