

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0780021</b>	<b>UNIVERSITY OF CONNECTICUT - MAIN CAMPUS</b>	C	27,199	S	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			350				

Towns Served: MANSFIELD

## Monitoring Requirements

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

<b>Chlorine Residual (1012)</b>	<b>10 routine (RT) per month</b>		
<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	6/1/20 - 6/30/20		
	7/1/20 - 7/31/20		
<b>Chlorine Residual (1012)</b>	<b>30 routine (RT) per month</b>		
<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		
	2/1/20 - 2/29/20		
	3/1/20 - 3/31/20		
	4/1/20 - 4/30/20		
	5/1/20 - 5/31/20		
	8/1/20 - 8/31/20		
	9/1/20 - 9/30/20		
<b>Asbestos (1094)</b>	<b>2 routine (RT) per nine years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WILLOW HOUSE DAYCR (UCDEP-4)	1/1/14 - 12/31/22		
FACILITIES OPS BLDG (UCMC-5)	1/1/14 - 12/31/22		
<b>Total Coliform (3100)</b>	<b>10 routine (RT) per month</b>		
<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	6/1/20 - 6/30/20		
	7/1/20 - 7/31/20		
<b>Total Coliform (3100)</b>	<b>30 routine (RT) per month</b>		
<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		
	8/1/20 - 8/31/20		
	9/1/20 - 9/30/20		
<b>Disinfectant Byproducts - TTHM &amp; HAA5 (DBP)</b>	<b>4 routine (RT) per quarter</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
DISCOVERY DEPOT DC. (UCDEP-3)	7/1/19 - 9/30/19	9/1-9/30	Complete
	10/1/19 - 12/31/19	12/1-12/31	Complete

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			350				

Towns Served: MANSFIELD

### Monitoring Requirements

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

<b>Disinfectant Byproducts - TTHM &amp; HAA5 (DBP)</b>		<b>4 routine (RT) per quarter</b>	
<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	3/1-3/31	
	4/1/20 - 6/30/20	6/1-6/30	
	7/1/20 - 9/30/20	9/1-9/30	
303 MAPLE ROAD (UCMC-4)	7/1/19 - 9/30/19	9/1-9/30	Complete
	10/1/19 - 12/31/19	12/1-12/31	Complete
	1/1/20 - 3/31/20	3/1-3/31	
	4/1/20 - 6/30/20	6/1-6/30	
	7/1/20 - 9/30/20	9/1-9/30	
HILLTOP APTS COMMUNITY CENTER (UCMC-6)	7/1/19 - 9/30/19	9/1-9/30	Complete
	10/1/19 - 12/31/19	12/1-12/31	Complete
	1/1/20 - 3/31/20	3/1-3/31	
	4/1/20 - 6/30/20	6/1-6/30	
	7/1/20 - 9/30/20	9/1-9/30	
EH&S (UCMC-7)	7/1/19 - 9/30/19	9/1-9/30	Complete
	10/1/19 - 12/31/19	12/1-12/31	Complete
	1/1/20 - 3/31/20	3/1-3/31	
	4/1/20 - 6/30/20	6/1-6/30	
	7/1/20 - 9/30/20	9/1-9/30	
<b>Lead And Copper (PBCU)</b>		<b>30 routine (RT) per three years</b>	
<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	
	1/1/21 - 12/31/23	6/1-9/30	
<b>Physical Parameters (PPS)</b>		<b>30 routine (RT) per month</b>	
<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		
	8/1/20 - 8/31/20		
	9/1/20 - 9/30/20		
<b>Physical Parameters (PPS)</b>		<b>10 routine (RT) per month</b>	
<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	6/1/20 - 6/30/20		
	7/1/20 - 7/31/20		

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## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0780021</b>	<b>UNIVERSITY OF CONNECTICUT - MAIN CAMPUS</b>	C	27,199	S	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			350				

Towns Served: MANSFIELD

### Monitoring Requirements

Water System Facility: **ENTRY POINT - FENTON RIVER WELLFIELD (WSF ID: 00701)**

<b>Net Gross Alpha (4000)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - FENTON (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
<b>Uranium (4006)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - FENTON (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
<b>Combined Radium-226/228 (4010)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - FENTON (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - FENTON (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - FENTON (3)	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
	1/1/21 - 12/31/21		
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>	<b>2 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - FENTON (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - FENTON (3)	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
	1/1/21 - 12/31/21		
Water System Facility: <b>WILLIMANTIC WELLFIELD TREATMENT PLANT (WSF ID: 00702)</b>			
<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT - WILLIMANTIC TP (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		

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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		
<b>CT0780021</b>	<b>UNIVERSITY OF CONNECTICUT - MAIN CAMPUS</b>	C	27,199	S	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			350				

Towns Served: MANSFIELD

### Monitoring Requirements

Water System Facility: **WILLIMANTIC WELLFIELD TREATMENT PLANT (WSF ID: 00702)**

<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT - WILLIMANTIC TP (3)	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
	1/1/21 - 12/31/21		
<b>Radionuclides - Gross Alpha, Combined Radium &amp; Uranium (RADA)</b>		<b>1 routine (RT) per three years</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT - WILLIMANTIC TP (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>		<b>2 routine (RT) per three years</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT - WILLIMANTIC TP (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
<b>Organic Chemicals (VOCS)</b>		<b>1 routine (RT) per year</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT - WILLIMANTIC TP (3)	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
	1/1/21 - 12/31/21		

Water System Facility: **FENTON RIVER - WELL B (WSF ID: 1322)**

<b>E. Coli (3014)</b>		<b>1 routine (RT) per month</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
FENTON RIVER WELL B (2)	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: **FENTON RIVER - WELL C (WSF ID: 1323)**

<b>E. Coli (3014)</b>		<b>1 routine (RT) per month</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
FENTON RIVER WELL C (2)	10/1/19 - 10/31/19		Complete
	11/1/19 - 11/30/19		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		
<b>CT0780021</b>	<b>UNIVERSITY OF CONNECTICUT - MAIN CAMPUS</b>	C	27,199	S	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			350				

Towns Served: MANSFIELD

### Monitoring Requirements

**Water System Facility: FENTON RIVER - WELL C (WSF ID: 1323)**

<b>E. Coli (3014)</b>	<b>1 routine (RT) per month</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	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: FENTON RIVER - WELL D (WSF ID: 1324)**

<b>E. Coli (3014)</b>	<b>1 routine (RT) per month</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
FENTON RIVER WELL D (2)	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: WILLIMANTIC WELLFIELD - WELL 1 (WSF ID: 1461)**

<b>E. Coli (3014)</b>	<b>1 routine (RT) per month</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
UConn - WELL 1 (2)	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		

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

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Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			350				

Towns Served: MANSFIELD

### Monitoring Requirements

Water System Facility: **WILLIMANTIC WELLFIELD - WELL 1 (WSF ID: 1461)**

<b>E. Coli (3014)</b>	<b>1 routine (RT) per month</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	8/1/20 - 8/31/20		
	9/1/20 - 9/30/20		

Water System Facility: **WILLIMANTIC WELLFIELD - WELL 2 (WSF ID: 1462)**

<b>E. Coli (3014)</b>	<b>1 routine (RT) per month</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
UConn - WELL 2 (2)	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: **WILLIMANTIC WELLFIELD - WELL 3 (WSF ID: 1463)**

<b>E. Coli (3014)</b>	<b>1 routine (RT) per month</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
UConn - WELL 3 (2)	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: **WILLIMANTIC WELLFIELD - WELL 4 (WSF ID: 1464)**

<b>E. Coli (3014)</b>	<b>1 routine (RT) per month</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
UConn - WELL 4 (2)	10/1/19 - 10/31/19		Complete
	11/1/19 - 11/30/19		Complete
	12/1/19 - 12/31/19		Complete

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## Water Quality Monitoring and Compliance Schedule

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Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			350				

Towns Served: MANSFIELD

### Monitoring Requirements

Water System Facility: **WILLIMANTIC WELLFIELD - WELL 4 (WSF ID: 1464)**

E. Coli (3014)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	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		

### Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **ENTRY POINT - FENTON RIVER WELLFIELD (WSFID: 00701)**

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily
<b>Start Date:</b> 12/1/2003	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring Compliance Status:</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	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: 7.0 PH	Daily
<b>Start Date:</b> 12/1/2003	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring Compliance Status:</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	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		

Water System Facility: **WILLIMANTIC WELLFIELD TREATMENT PLANT (WSFID: 00702)**

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.5 MG/L	Daily
<b>Start Date:</b> 3/1/2013	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring Compliance Status:</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	10/1/2019 - 10/31/2019		
	11/1/2019 - 11/30/2019		
	12/1/2019 - 12/31/2019		

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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		
<b>CT0780021</b>	<b>UNIVERSITY OF CONNECTICUT - MAIN CAMPUS</b>	C	27,199	S	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			350				

Towns Served: MANSFIELD

## Water System Facility: WILLIMANTIC WELLFIELD TREATMENT PLANT (WSFID: 00702)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.5 MG/L	Daily
<b>Start Date:</b> 3/1/2013	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	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: 7.0 PH	Daily
<b>Start Date:</b> 3/1/2013	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	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
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2011	
RESPOND TO SANITARY SURVEY	12/4/2019	11/26/2019
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	
CROSS CONNECTION SURVEY REPORT	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				
		UCDEP-1	DEPT RES LIFE MAINT	A	Y	N		
		UCDEP-10	1340 STAFFORD RD	A		3		
		UCDEP-2	LONGLEY SCHOOL	A	Y	N		
		UCDEP-3	DISCOVERY DEPOT DC.	I	Y			
		UCDEP-4	WILLOW HOUSE DAYCR	I	Y		Y	
		UCDEP-5	KENNEDY BLDG	A	Y	N	Y	
		UCDEP-6	64 SPRING MANOR LN	A		3		
		UCDEP-7	86 SPRING MANOR LN	A	Y	3		
		UCDEP-8	104 SPRING MANOR LN	A	Y	3		
		UCDEP-9	NORLING	A		N		
		UCMC-1	VISITORS CENTER	A	Y	N		
		UCMC-10	NORTH DINING HALL	A	Y	N		
		UCMC-11	STUDENT UNION	A	Y	N		

*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		
<b>CT0780021</b>	<b>UNIVERSITY OF CONNECTICUT - MAIN CAMPUS</b>	C	27,199	S	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			350				

Towns Served: MANSFIELD

### 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
		UCMC-12	COOP	A	Y	N		
		UCMC-13	10 SOUTH EAGLEVILLE	I	Y			
		UCMC-14	9 DOG LA UNIT 108	I	Y			
		UCMC-15	9 DOG LA UNIT 109	I	Y			
		UCMC-16	11 DOG LANE	I	Y			
		UCMC-17	DAILY CAMPUS	I	Y			
		UCMC-18	41/42 HORSEBARN HILL	A		3		
		UCMC-19	43/44 HORSEBARN HILL	A		3		
		UCMC-2	NATHAN HALE	A	Y	N		
		UCMC-20	9 OAK HILL RD	A		3		
		UCMC-21	1310 STORRS RD	A		3		
		UCMC-22	1332 STORRS RD	A		3		
		UCMC-23	HIGH HEAD	A	Y	N		
		UCMC-24	TOWERS COMM CTR	A		N		
		UCMC-25	CHARTER OAK COMM CTR	A	Y	N		
		UCMC-26	2 N EAGLEVILLE RD	A		3		
		UCMC-27	4 MOULTON RD	A		3		
		UCMC-28	26 OAK HILL	A	Y	3		
		UCMC-29	1 HILLSIDE	A	Y	3		
		UCMC-3	DAIRY BAR	A	Y	N		
		UCMC-30	GRANGE HALL	A	Y	N		
		UCMC-31	HICKS HALL	A	Y	N		
		UCMC-33	WATSON HALL	A		N		
		UCMC-34	SHAKESPEARE BLDG	A	Y	N		
		UCMC-35	BELDON HALL	A	Y	N		
		UCMC-36	EDDY HALL	A	Y	N		
		UCMC-37	HOLLISTER BLDG	A	Y	N		
		UCMC-38	CHANDLER BLDG	A	Y	N		
		UCMC-39	KINGSTON HALL	A	Y	N		
		UCMC-4	303 MAPLE ROAD	I	Y			
		UCMC-40	SHERMAN HALL	A	Y	N		
		UCMC-41	ALSOP HALL	A		N		
		UCMC-42	BROCK HALL	A		N		
		UCMC-43	BEECHER HALL	A		N		
		UCMC-44	SOUTH CHILLER	A		N		
		UCMC-45	LANDSCAPE BUILDING	A		N		
		UCMC-46	KELLOG BARN	A	Y	N		
		UCMC-47	POULTY OFFICE	A		N		

*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		
<b>CT0780021</b>	<b>UNIVERSITY OF CONNECTICUT - MAIN CAMPUS</b>	C	27,199	S	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			350				

Towns Served: MANSFIELD

### 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
		UCMC-48	CTWC-UCONN	A	Y			
		UCMC-5	FACILITIES OPS BLDG	A	Y	N	Y	
		UCMC-6	HILLTOP APTS COMMUNI	A	Y	N		Y
		UCMC-7	EH&S	A	Y	N		Y
		UCMC-8	CUP	A	Y	N		
		UCMC-9	SOUTH DINING HALL	A	Y	N		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00701	ENTRY POINT - FENTON RIVER WELLFIELD	3	EP - FENTON	A				
00702	WILLIMANTIC WELLFIELD TREATMENT PLANT	3	ENTRY POINT - WILLIM	A				
1322	FENTON RIVER - WELL B	2	FENTON RIVER WELL B	A				
1323	FENTON RIVER - WELL C	2	FENTON RIVER WELL C	A				
1324	FENTON RIVER - WELL D	2	FENTON RIVER WELL D	A				
1461	WILLIMANTIC WELLFIELD - WELL 1	2	UCONN - WELL 1	A				
1462	WILLIMANTIC WELLFIELD - WELL 2	2	UCONN - WELL 2	A				
1463	WILLIMANTIC WELLFIELD - WELL 3	2	UCONN - WELL 3	A				
1464	WILLIMANTIC WELLFIELD - WELL 4	2	UCONN - WELL 4	A				
147A	FENTON RIVER WELLFIELD TREATMENT PLANT							
32795	FENTON RIVER WELLFIELD CLEARWELL							
32807	TOWERS STANDPIPE #1 WEST							
37100	BONE MILL ROAD TANK							
37102	CORRECTIONAL FACILITY TANK							
45549	5.4 MG TOWERS BASIN							
52038	FENTON RIVER WELLFIELD PUMP STATION							
52040	TOWERS LOOP PUMP STATION							
53803	HIGH HEAD PUMP STATION							
60339	TOWERS STANDPIPE #2 (EAST)							
61553	INTERCONNECTION - CT00473011 - CTWC							

*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		
<b>CT0780021</b>	<b>UNIVERSITY OF CONNECTICUT - MAIN CAMPUS</b>	C	27,199	S	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			350				

Towns Served: MANSFIELD

### Certified Operator Information

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

**Facility Classification:** CLASS 2 DISTRIBUTION SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
BUHLER, BRANT D.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2022
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2022
DOWLING, THOMAS F.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS I	9/30/2020

**Water System Facility: FENTON RIVER WELLFIELD TREATMENT PLANT (WSF ID: 147A)**

**Facility Classification:** CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
BUHLER, BRANT D.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2022
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2022
DOWLING, THOMAS F.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS I	9/30/2020

**Water System Facility: WILLIMANTIC WELLFIELD TREATMENT PLANT (WSF ID: 00702)**

**Facility Classification:** CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
BUHLER, BRANT D.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2022
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2022
DOWLING, THOMAS F.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS I	9/30/2020

### Contact Information

Name		Organization			Job Title	
<b>Mr. Stanley Nolan</b>		University of Connecticut			Director of Util.	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
25 Ledoyt Road		Unit 3252		Storrs	CT	06269-3252
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-486-3208				860-234-2415	stanley.nolan@uconn.edu	

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

Name		Organization			Job Title	
<b>Mr. Scott Jordan</b>		University of Connecticut			Exec Vp Admin & Cfo	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
352 Mansfield Road		Unit 1122		Mansfield	CT	06269-1122
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-486-3455					Scott.jordan@uconn.edu	

**Contact Role(s): 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	
<b>CT0780021</b>	<b>UNIVERSITY OF CONNECTICUT - MAIN CAMPUS</b>	C	27,199	S	SWP	
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		350				

Towns Served: MANSFIELD

**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		
<b>CT0780041</b>	<b>WHITE OAK CONDOMINIUMS</b>	<b>C</b>	<b>192</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			64				

Towns Served: MANSFIELD

## Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<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	1/1/14 - 12/31/22				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<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				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<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			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<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				
<b>Water System Facility: ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<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				

*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		
<b>CT0780041</b>	<b>WHITE OAK CONDOMINIUMS</b>	C	192	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		64					

Towns Served: MANSFIELD

## Monitoring Requirements

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

<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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		
<b>Radionuclides - Gross Alpha, Combined Radium &amp; Uranium (RADA)</b>	<b>1 routine (RT) per six years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/19		Complete
	1/1/20 - 12/31/25		
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	
CROSS CONNECTION SURVEY REPORT	3/1/2024	

## 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				
		WHITOA001	UNIT 4C	A	Y			
		WHITOA005	14A	A	Y	2		
		WHITOA001	4C	A	Y	2	Y	
		WHITOA002	3D	A	Y	2		
		WHITOA003	9B	A	Y	2		
WHITOA004	16A	A	Y	2				
00700	ENTRY POINT	3	ENTRY POINT	A				

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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		
<b>CT0780041</b>	<b>WHITE OAK CONDOMINIUMS</b>	<b>C</b>	<b>192</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		64					

Towns Served: MANSFIELD

## 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
1835	WELL 2	2	WELL 2	A				
248	WELL 1	2	WELL 1	A				
56030	HYDROPNEUMATIC STORAGE							

## Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2021
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2020
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2022
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020

## Contact Information

Name		Organization			Job Title	
<b>Mr. Alan H. Berman</b>		Attorney Alan H. Berman			Attorney	
Mailing Address Line One			Mailing Address Line Two		City	State
111 Roberts Street, Suite G1					East Hartford	CT
Zip Code	06108					
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-282-1888		860-610-0177		860-810-8169	a.bermanatty@outlook.com	

Contact Role(s): **Legal Contact**

Name		Organization			Job Title	
<b>Ms. Sandra Martinik</b>		White & Katzman Real Estate			Property Manager	
Mailing Address Line One			Mailing Address Line Two		City	State
111 Roberts St.			Suite G1		East Hartford	CT
Zip Code	06108-3666					
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-291-8777	102	860-610-0177		860-291-8777	sandram@wkmanage.com	

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.
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		
<b>CT0780051</b>	<b>KNOLLWOOD APARTMENTS</b>	C	312	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
101 S. EAGLEVILLE RD, MANSFIELD			136				
Towns Served: MANSFIELD							

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<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	1/1/14 - 12/31/22				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<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		Complete		
	5/1/20 - 5/31/20		Complete		
	6/1/20 - 6/30/20		Complete		
	7/1/20 - 7/31/20		Complete		
	8/1/20 - 8/31/20		Complete		
	9/1/20 - 9/30/20		Complete		
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per six months</b>			
<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		Complete		
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<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		Complete		
	5/1/20 - 5/31/20		Complete		
	6/1/20 - 6/30/20		Complete		
	7/1/20 - 7/31/20		Complete		
	8/1/20 - 8/31/20		Complete		
	9/1/20 - 9/30/20		Complete		
Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<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				

*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		
<b>CT0780051</b>	<b>KNOLLWOOD APARTMENTS</b>	C	312	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
101 S. EAGLEVILLE RD, MANSFIELD			136				
Towns Served: MANSFIELD							

## Monitoring Requirements

Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>							
<b>Inorganic Chemicals (IOCS)</b>				<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>		<i>Collection Period</i>		<i>Compliance Status</i>	
		1/1/22 - 12/31/24					
<b>Nitrate And Nitrite (NOX)</b>				<b>1 routine (RT) per year</b>			
<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					
<b>Radionuclides - Gross Alpha, Combined Radium &amp; Uranium (RADA)</b>				<b>1 routine (RT) per six years</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>		<i>Collection Period</i>		<i>Compliance Status</i>	
ENTRY POINT (3)		1/1/14 - 12/31/19				Complete	
		1/1/20 - 12/31/25					
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>				<b>1 routine (RT) per three years</b>			
<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					
<b>Organic Chemicals (VOCS)</b>				<b>1 routine (RT) per three years</b>			
<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					

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
SWTS 1: PWS TO RECOMMEND SOWT	12/12/2017	
LEAD PUBLIC EDUCATION REPORT TO STATE	3/31/2018	
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	3/31/2018	
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	9/30/2018	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2019	
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2019	
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	9/30/2019	
RESPOND TO SANITARY SURVEY	1/17/2020	1/18/2020
CROSS CONNECTION SURVEY REPORT	3/1/2020	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/30/2020	
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN	4/16/2020	1/18/2020
SUBMIT CCR TO THE DEPARTMENT	7/1/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

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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		
<b>CT0780051</b>	<b>KNOLLWOOD APARTMENTS</b>	<b>C</b>	<b>312</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
101 S. EAGLEVILLE RD, MANSFIELD			136				
Towns Served: MANSFIELD							

## Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
E. Coli M&R Violation	3/6/17 -	3	6/5/2018		6/15/2018	
Nitrate And Nitrite M&R Violation	1/1/17 - 12/31/17	3	3/15/2019		3/25/2019	

## 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				
		KW20C	KW 20C	A	Y			
		KWA01A	APARTMENT	A	Y	1		
		KWA01B	APARTMENT	A	Y	1		
		KWA01C	APARTMENT	A	Y	1		
		KWA01D	APARTMENT	A	Y	1		
		KWA02A	APARTMENT	A	Y	1		
		KWA02B	APARTMENT	A	Y	1		
		KWA02C	APARTMENT	A	Y	1		
		KWA02D	APARTMENT	A	Y	1		
		KWA03A	APARTMENT	A	Y	1		
		KWA03B	APARTMENT	A	Y	1		
		KWA03C	APARTMENT	A	Y	1		
		KWA03D	APARTMENT	A	Y	1		
		KWA04A	APARTMENT	A	Y	1		
		KWA04B	APARTMENT	A	Y	1		
		KWA04C	APARTMENT	A	Y	1		
		KWA04D	APARTMENT	A	Y	1		
		KWA05A	APARTMENT	A	Y	1		
		KWA05B	APARTMENT	A	Y	1		
		KWA05C	APARTMENT	A	Y	1		
		KWA05D	APARTMENT	A	Y	1		
		KWA06A	APARTMENT	A	Y	1		
		KWA06B	APARTMENT	A	Y	1		
		KWA06C	APARTMENT	A	Y	1		
		KWA06D	APARTMENT	A	Y	1		
		KWA07A	APARTMENT	A	Y	1		
		KWA07B	APARTMENT	A	Y	1		
		KWA07C	APARTMENT	A	Y	1		
		KWA07D	APARTMENT	A	Y	1		
		KWA08A	APARTMENT	A	Y	1		
		KWA08B	APARTMENT	A	Y	1		

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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		
<b>CT0780051</b>	<b>KNOLLWOOD APARTMENTS</b>	<b>C</b>	<b>312</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
101 S. EAGLEVILLE RD, MANSFIELD			136				
Towns Served: MANSFIELD							

### 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
		KWA08C	APARTMENT	A	Y	1		
		KWA08D	APARTMENT	A	Y	1		
		KWA09A	APARTMENT	A	Y	1		
		KWA09B	APARTMENT	A	Y	1		
		KWA09C	APARTMENT	A	Y	1		
		KWA09D	APARTMENT	A	Y	1		
		KWA10A	APARTMENT	A	Y	1		
		KWA10B	APARTMENT	A	Y	1		
		KWA10C	APARTMENT	A	Y	1		
		KWA10D	APARTMENT	A	Y	1		
		KWA11A	APARTMENT	A	Y	1		
		KWA11B	APARTMENT	A	Y	1		
		KWA11C	APARTMENT	A	Y	1		
		KWA11D	APARTMENT	A	Y	1		
		KWA11P	KW-11D	A	Y			
		KWA12A	APARTMENT	A	Y	1		
		KWA12B	APARTMENT	A	Y	1		
		KWA12C	APARTMENT	A	Y	1		
		KWA12D	APARTMENT	A	Y	1		
		KWA13A	APARTMENT	A	Y	1		
		KWA13B	APARTMENT	A	Y	1		
		KWA13C	APARTMENT	A	Y	1		
		KWA13D	APARTMENT	A	Y	1		
		KWA14A	APARTMENT	A	Y	1		
		KWA14B	APARTMENT	A	Y	1		
		KWA14C	APARTMENT	A	Y	1		
		KWA14D	APARTMENT	A	Y	1		
		KWA15A	APARTMENT	A	Y	1		
		KWA15B	APARTMENT	A	Y	1		
		KWA15C	APARTMENT	A	Y	1		
		KWA15D	APARTMENT	A	Y	1		
		KWA16A	APARTMENT	A	Y	1		
		KWA16B	APARTMENT	A	Y	1		
		KWA16C	APARTMENT	A	Y	1		
		KWA16D	APARTMENT	A	Y	1		
		KWA17A	APARTMENT	A	Y	1		
		KWA17B	APARTMENT	A	Y	1		
		KWA17C	APARTMENT	A	Y	1		
		KWA17D	APARTMENT	A	Y	1		

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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		
<b>CT0780051</b>	<b>KNOLLWOOD APARTMENTS</b>	<b>C</b>	<b>312</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
101 S. EAGLEVILLE RD, MANSFIELD			136				
Towns Served: MANSFIELD							

### 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
		KWA18A	APARTMENT	A	Y	1		
		KWA18B	APARTMENT	A	Y	1		
		KWA18C	APARTMENT	A	Y	1		
		KWA18D	APARTMENT	A	Y	1		
		KWA19A	APARTMENT	A	Y	1		
		KWA19B	APARTMENT	A	Y	1		
		KWA19C	APARTMENT	A	Y	1		
		KWA19D	APARTMENT	A	Y	1		
		KWA20A	APARTMENT	A	Y	1		
		KWA20B	APARTMENT	A	Y	1		
		KWA20C	APARTMENT	A	Y	1		
		KWA20D	APARTMENT	A	Y	1		
		KWA21A	APARTMENT	A	Y	1		
		KWA21B	APARTMENT	A	Y	1		
		KWA21C	APARTMENT	A	Y	1		
		KWA21D	APARTMENT	A	Y	1		
		KWA22A	APARTMENT	A	Y	1		
		KWA22B	APARTMENT	A	Y	1		
		KWA22C	APARTMENT	A	Y	1		
		KWA22D	APARTMENT	A	Y	1		
		KWA23A	APARTMENT	A	Y	1		
		KWA23B	APARTMENT	A	Y	1		
		KWA23C	APARTMENT	A	Y	1		
		KWA23D	APARTMENT	A	Y	1		
		KWA24A	APARTMENT	A	Y	1		
		KWA24B	APARTMENT	A	Y	1		
		KWA24C	APARTMENT	A	Y	1		
		KWA24D	APARTMENT	A	Y	1		
		KWA25A	APARTMENT	A	Y	1		
		KWA25B	APARTMENT	A	Y	1		
		KWA25C	APARTMENT	A	Y	1		
		KWA25D	APARTMENT	A	Y	1		
		KWA26A	APARTMENT	A	Y	1		
		KWA26B	APARTMENT	A	Y	1		
		KWA26C	APARTMENT	A	Y	1		
		KWA26D	APARTMENT	A	Y	1		
		KWA27A	APARTMENT	A	Y	1		
		KWA27B	APARTMENT	A	Y	1		
		KWA27C	APARTMENT	A	Y	1		

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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		
<b>CT0780051</b>	<b>KNOLLWOOD APARTMENTS</b>	<b>C</b>	<b>312</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
101 S. EAGLEVILLE RD, MANSFIELD			136				
Towns Served: MANSFIELD							

### 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
		KWA27D	APARTMENT	A	Y	1		
		KWA28A	APARTMENT	A	Y	1		
		KWA28B	APARTMENT	A	Y	1		
		KWA28C	APARTMENT	A	Y	1		
		KWA28D	APARTMENT	A	Y	1		
		KWA29A	APARTMENT	A	Y	1		
		KWA29B	APARTMENT	A	Y	1		
		KWA29C	APARTMENT	A	Y	1		
		KWA29D	APARTMENT	A	Y	1		
		KWA2C	KW 2C	A	Y			
		KWA30A	APARTMENT	A	Y	1		
		KWA30B	APARTMENT	A	Y	1		
		KWA30C	APARTMENT	A	Y	1		
		KWA30D	APARTMENT	A	Y	1		
		KWA31A	APARTMENT	A	Y	1		
		KWA31B	APARTMENT	A	Y	1		
		KWA31C	APARTMENT	A	Y	1		
		KWA31D	APARTMENT	A	Y	1		
		KWA32A	APARTMENT	A	Y	1		
		KWA32B	APARTMENT	A	Y	1		
		KWA32C	APARTMENT	A	Y	1		
		KWA32D	APARTMENT	A	Y	1		
		KWA33A	APARTMENT	A	Y	1		
		KWA33B	APARTMENT	A	Y	1		
		KWA33C	APARTMENT	A	Y	1		
		KWA33D	APARTMENT	A	Y	1		
		KWA34A	APARTMENT	A	Y	1		
		KWA34B	APARTMENT	A	Y	1		
		KWA34C	APARTMENT	A	Y	1		
		KWA34D	APARTMENT	A	Y	1		
		KWACT01	TAP COMP TANK #1 TOP	A	Y	1		
		KWACT02	TAP COMP TANK #1 BOT	A	Y	1		
		KWACT03	TAP COMP TANK #2 BOT	A	Y	1		
		KWADT01	DISTRIBUTION TAP #1	A	Y	1		
		KWAHT01	HOLDING TANK TAP 1	A	Y	1		
		KWAW01	TAP WELL #1	A	Y	1		
		KWAW02	TAP WELL #2	A	Y	1		
		KWAW03	TAP WELL #3	A	Y	1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				

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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		
<b>CT0780051</b>	<b>KNOLLWOOD APARTMENTS</b>	<b>C</b>	<b>312</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
101 S. EAGLEVILLE RD, MANSFIELD			136				
Towns Served: MANSFIELD							

## 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
00700	ENTRY POINT	3	ENTRY POINT	A				
1970	WELL 5	2	WELL 5	A				
289	WELL 3	2	WELL 3	A				
290	WELL 2	2	WELL 2	A				
45466	ATMOSPHERIC STORAGE							
45469	HYDROPNEUMATIC PRESSURE TANKS							

## Certified Operator Information

Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
Facility Classification: SMALL WATER SYSTEM			Certification
Operator Name	Operator Type	Certification(s)	Expiration
KLOBUKOWSKI, STEVEN J.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2022 6/30/2020

## Contact Information

Name		Organization			Job Title		
<b>Mr. Yitzchock Rabinowitz</b>		Willington Property Group LLC			Owner		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
61 Interstate Ln					Waterbury	CT	06705
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-573-9870	101	203-575-2078			yr@axelagroup.com		

Contact Role(s): <b>Legal Contact, Owner</b>							
Name		Organization			Job Title		
<b>Mr. Martin Brousseau</b>		Landmark Properties			Maintenance Manager		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
43 Burt Latham Rd					Willington	CT	06279
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-941-6005					martin.brousseau@storrsstudentliving.com		

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.
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		
<b>CT0780061</b>	<b>ORCHARD ACRES ASSOCIATION</b>	C	176	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
45 & 77 CHENEY DRIVE			88				

Towns Served: MANSFIELD

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<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	1/1/14 - 12/31/22				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<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		Complete		
	5/1/20 - 5/31/20		Complete		
	6/1/20 - 6/30/20		Complete		
	7/1/20 - 7/31/20		Complete		
	8/1/20 - 8/31/20		Complete		
	9/1/20 - 9/30/20		Complete		
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<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			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<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		Complete		
	5/1/20 - 5/31/20		Complete		
	6/1/20 - 6/30/20		Complete		
	7/1/20 - 7/31/20		Complete		
	8/1/20 - 8/31/20		Complete		
	9/1/20 - 9/30/20		Complete		
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<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				

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

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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		
<b>CT0780061</b>	<b>ORCHARD ACRES ASSOCIATION</b>	C	176	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
45 & 77 CHENEY DRIVE			88				

Towns Served: MANSFIELD

### Monitoring Requirements

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

<b>Nitrate And Nitrite (NOX)</b>			<b>1 routine (RT) per year</b>
<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		

<b>Radionuclides - Gross Alpha, Combined Radium &amp; Uranium (RADA)</b>			<b>1 routine (RT) per six years</b>
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/19		Complete
	1/1/20 - 12/31/25		

<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>			<b>1 routine (RT) per three years</b>
<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		

<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>			<b>1 routine (RT) per three years</b>
<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		

<b>Organic Chemicals (VOCS)</b>			<b>1 routine (RT) per three years</b>
<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		

**Water System Facility: ENTRY POINT - UPPER SYSTEM (WSF ID: 00701)**

<b>Di(2-Ethylhexyl) - Phthalate (2039)</b>			<b>1 routine (RT) per three years</b>
<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		

<b>Inorganic Chemicals (IOCS)</b>			<b>1 routine (RT) per three years</b>
<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		

<b>Nitrate And Nitrite (NOX)</b>			<b>1 routine (RT) per year</b>
<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		

<b>Radionuclides - Gross Alpha, Combined Radium &amp; Uranium (RADA)</b>			<b>1 routine (RT) per six years</b>
<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		
<b>CT0780061</b>	<b>ORCHARD ACRES ASSOCIATION</b>	C	176	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
45 & 77 CHENEY DRIVE			88				
Towns Served: MANSFIELD							

## Monitoring Requirements

<b>Water System Facility: ENTRY POINT - UPPER SYSTEM (WSF ID: 00701)</b>							
<b>Radionuclides - Gross Alpha, Combined Radium &amp; Uranium (RADA)</b>				<b>1 routine (RT) per six years</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>		<i>Collection Period</i>		<i>Compliance Status</i>	
ENTRY POINT (3)		1/1/14 - 12/31/19				Complete	
		1/1/20 - 12/31/25					
<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>				<b>1 routine (RT) per three years</b>			
<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					
<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>				<b>1 routine (RT) per three years</b>			
<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					
<b>Organic Chemicals (VOCS)</b>				<b>1 routine (RT) per three years</b>			
<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					

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
RESPOND TO SANITARY SURVEY	12/21/2018	
CROSS CONNECTION EXEMPTION	3/1/2019	
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

## 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				
		OA17	DISTRIBUTION SYSTEM	I	Y			
		OA21	DISTRIBUTION SYSTEM	I	Y			
		OA45	DISTRIBUTION SYSTEM	I	Y			
		OA49	DISTRIBUTION SYSTEM	I	Y			
		OA86	DISTRIBUTION SYSTEM	I	Y			
		ORAR001	UNIT 44	A	Y	2		Y
		ORAR002	UNIT 2	A	Y	2		Y
		ORAR003	UNIT 3	A	Y	2		Y
		ORAR004	UNIT 8	A	Y	2		

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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		
<b>CT0780061</b>	<b>ORCHARD ACRES ASSOCIATION</b>	<b>C</b>	<b>176</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
45 & 77 CHENEY DRIVE		88					
Towns Served: MANSFIELD							

### 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
		ORAR005	RENTAL OFFICE RSTRM	A	Y	2	Y	Y
		ORAR006	UNIT 4	A	Y	2		Y
		ORAR007	UNIT 48	A	Y	2		Y
		ORAR008	UNIT 52	A	Y	2		Y
		ORAR009	UNIT 56	A	Y	2		Y
		ORAR010	UNIT 76	A	Y	2		Y
		ORAR011	UNIT 78	A	Y	2		Y
		ORAR012	UNIT 86	A	Y	2		Y
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT - LOWER SYSTEM	3	ENTRY POINT	A				
00701	ENTRY POINT - UPPER SYSTEM	3	ENTRY POINT	A				
242	WELL 4	2	WELL 4	A				
243	WELL 3	2	WELL 3	A				
244	WELL 1	2	WELL 1	A				
245	WELL 2	2	WELL 2	A				
51007	ATM TANK1							
51009	ATM TANK2							
51011	PRESSURE TANK 1							
51013	ATM TANK3							
51015	PRESSURE TANK 2							

### Certified Operator Information

Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
Facility Classification: SMALL WATER SYSTEM			
<b>Operator Name</b>	<b>Operator Type</b>	<b>Certification(s)</b>	<b>Certification Expiration</b>
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2021
LAFRAMBOISE, JEFFREY	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2020

### Contact Information

Name		Organization			Job Title	
<b>Mr. William Gajewski</b>		Gajewski Realty				
Mailing Address Line One			Mailing Address Line Two		City	State
P.O. Box 1123					Sturbridge	MA
Business Phone		Extension	Fax	Mobile Phone	Emergency Phone	Email Address
508-764-1474				774-200-0078		mgmt@orchardacresapartments.com
Contact Role(s): <b>Administrative Contact, Legal Contact, Owner</b>						

*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		
<b>CT0780061</b>	<b>ORCHARD ACRES ASSOCIATION</b>	<b>C</b>	<b>176</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
45 & 77 CHENEY DRIVE			88				
Towns Served: MANSFIELD							

**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		
CT0780081	CTWC - PINEWOODS LANE DIV	C	68	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			18				

Towns Served: MANSFIELD

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<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	1/1/14 - 12/31/22				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>			
<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				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<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			
	1/1/21 - 12/31/23	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<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: <b>ENTRY POINT (WSF ID: 00700)</b>					
<b>Net Gross Alpha (4000)</b>		<b>1 routine (RT) per three years</b>			
<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				
<b>Uranium (4006)</b>		<b>1 routine (RT) per three years</b>			
<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				
<b>Combined Radium-226/228 (4010)</b>		<b>1 routine (RT) per three years</b>			
<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				
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<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		

*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		
<b>CT0780081</b>	<b>CTWC - PINEWOODS LANE DIV</b>	C	68	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		18					

Towns Served: MANSFIELD

## Monitoring Requirements

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

<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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		
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	
CROSS CONNECTION SURVEY REPORT	3/1/2024	

## 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	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		PINE001	10 PINEWOODS	A	Y	3	Y
		PINE002	12 PINEWOODS	A	Y	3	Y
		PINE003	15 PINEWOODS	A	Y	3	Y
		PINE004	16 PINEWOODS	A	Y	3	Y
		PINE005	18 PINEWOODS	A	Y	3	Y
		PINE006	19 PINEWOODS	A	Y	3	Y
		PINE007	24 PINEWOODS	A	Y	3	Y
		PINE008	25 PINEWOODS	A	Y	3	Y
		PINE009	29 PINEWOODS	A	Y	3	Y
		PINE010	30 PINEWOODS	A	Y	3	Y
		PINE011	33 PINEWOODS	A	Y	3	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		
<b>CT0780081</b>	<b>CTWC - PINEWOODS LANE DIV</b>	C	68	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		18					

Towns Served: MANSFIELD

### 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
		PINE012	34 PINEWOODS	A	Y	3	Y	
		PINE013	35 PINEWOODS	A	Y	3	Y	
		PINE014	38 PINEWOODS	A	Y	3	Y	
		PINE015	41 PINEWOODS	A	Y	3	Y	
		PINE016	100 WARRENVILLE	A	Y	3	Y	
		PINE017	104 WARRENVILLE	A	Y	3	Y	
		PINE018	108 WARRENVILLE	A	Y	3	Y	
		PINE019	SAMPLE STATION	A	Y		Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
293	WELL 1	2	WELL 1	A				
51023	ATMOSPHERIC STORAGE							
51025	PRESSURE STORAGE							

### Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
CONNORS, JAMES	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2021
KEARNEY, THOMAS	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2020
		WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2023
BUHLER, BRANT D.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2022
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2022

### Contact Information

Name		Organization			Job Title	
<b>Mr. Craig J. Patla</b>		Connecticut Water Company			Vp, Service Delivery	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
93 West Main Street				Clinton	CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-664-6140				800-391-1924	cpatla@ctwater.com	
Contact Role(s): <b>Legal Contact</b>						
Name		Organization			Job Title	
<b>Mr. David Connors</b>		Connecticut Water Company			Director, Service De	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
93 West Main St				Clinton	CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-664-6141				860-227-4902	dconnors@ctwater.com	
Contact Role(s): <b>Administrative Contact</b>						

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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		
<b>CT0780081</b>	<b>CTWC - PINWOODS LANE DIV</b>	<b>C</b>	<b>68</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		<b>18</b>					

Towns Served: MANSFIELD

**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		
<b>CT0780091</b>	<b>HUNTING LODGE APARTMENTS</b>	C	115	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
16 HUNTING HEIGHTS DRIVE			40				
Towns Served: MANSFIELD							

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<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	1/1/14 - 12/31/22				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<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				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<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			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
DISTRIBUTION SYSTEM (4)	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: <b>ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<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				

*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		
CT0780091	HUNTING LODGE APARTMENTS	C	115	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
16 HUNTING HEIGHTS DRIVE			40				

Towns Served: MANSFIELD

## Monitoring Requirements

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

<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>		
<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			
<b>Radionuclides - Gross Alpha, Combined Radium &amp; Uranium (RADA)</b>		<b>1 routine (RT) per six years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
ENTRY POINT (3)	1/1/14 - 12/31/19		Complete	
	1/1/20 - 12/31/25			
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>		<b>1 routine (RT) per three years</b>		
<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			
<b>Organic Chemicals (VOCS)</b>		<b>1 routine (RT) per three years</b>		
<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			

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
SUBMIT CCR TO THE DEPARTMENT	6/30/2019	
SUBMIT CCR CERTIFICATION FORM	8/9/2019	
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
RESPOND TO SANITARY SURVEY	2/6/2020	
CROSS CONNECTION SURVEY REPORT	3/1/2020	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

## 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>
Total Coliform M&R Violation	8/1/18 - 8/31/18	3	1/3/2020		1/13/2020	
E. Coli M&R Violation	7/31/18 -	3	1/3/2020		1/13/2020	
E. Coli M&R Violation	7/31/18 -	3	1/3/2020		1/13/2020	
E. Coli M&R Violation	7/31/18 -	3	1/3/2020		1/13/2020	

## 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>

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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		
<b>CT0780091</b>	<b>HUNTING LODGE APARTMENTS</b>	<b>C</b>	<b>115</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
16 HUNTING HEIGHTS DRIVE			40				
Towns Served: MANSFIELD							

### 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				
		HL16-1	BLDG 16 UNIT 1	A	Y	3	Y	
		HL16-2	BLDG 16 UNIT 2	A	Y	3	Y	
		HL16-3	BLDG 16 UNIT 3	A	Y	3	Y	
		HL16-4	BLDG 16 UNIT 4	A	Y	3	Y	
		HL16-5	BLDG 16 UNIT 5	A	Y	3	Y	
		HL16-6	BLDG 16 UNIT 6	A	Y	3	Y	
		HL16-7	BLDG 16 UNIT 7	A	Y	3	Y	
		HL16-8	BLDG 16 UNIT 8	A	Y	3	Y	
		HL19-1	BLDG 19 UNIT 1	A	Y	3	Y	
		HL19-2	BLDG 19 UNIT 2	A	Y	3	Y	
		HL19-3	BLDG 19 UNIT 3	A	Y	3	Y	
		HL19-4	BLDG 19 UNIT 4	A	Y	3	Y	
		HL19-5	BLDG 19 UNIT 5	A	Y	3	Y	
		HL19-6	BLDG 19 UNIT 6	A		3	Y	
		HL19-7	BLDG 19 UNIT 7	A	Y	3	Y	
		HL19-8	BLDG 19 UNIT 8	A	Y	3	Y	
		HL24-1	BLDG 24 UNIT 1	A	Y	3	Y	
		HL24-2	BLDG 24 UNIT 2	A	Y	3	Y	
		HL24-3	BLDG 24 UNIT 3	A	Y	3	Y	
		HL24-4	BLDG 24 UNIT 4	A	Y	3	Y	
		HL24-5	BLDG 24 UNIT 5	A	Y	3	Y	
		HL24-6	BLDG 24 UNIT 6	A	Y	3	Y	
		HL24-7	BLDG 24 UNIT 7	A	Y	3	Y	
		HL24-8	BLDG 24 UNIT 8	A	Y	3	Y	
		HL30-1	BLDG 30 UNIT 1	A		3	Y	
		HL30-2	BLDG 30 UNIT 2	A	Y	3	Y	
		HL30-3	BLDG 30 UNIT 3	A		3	Y	
		HL30-4	BLDG 30 UNIT 4	A	Y	3	Y	
		HL30-5	BLDG 30 UNIT 5	A	Y	3	Y	
		HL30-6	BLDG 30 UNIT 6	A	Y	3	Y	
		HL30-7	BLDG 30 UNIT 7	A	Y	3	Y	
		HL30-8	BLDG 30 UNIT 8	A	Y	3	Y	
		HL37-1	BLDG 37 UNIT 1	A	Y	3	Y	
		HL37-2	BLDG 37 UNIT 2	A	Y	3	Y	
		HL37-3	BLDG 37 UNIT 3	A	Y	3	Y	
		HL37-4	BLDG 37 UNIT 4	A	Y	3	Y	
		HL37-5	BLDG 37 UNIT 5	A	Y	3	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		
<b>CT0780091</b>	<b>HUNTING LODGE APARTMENTS</b>	<b>C</b>	<b>115</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
16 HUNTING HEIGHTS DRIVE		40					
Towns Served: MANSFIELD							

## 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
		HL37-6	BLDG 37 UNIT 6	A	Y	3	Y	
		HL37-7	BLDG 37 UNIT 7	A	Y	3	Y	
		HL37-8	BLDG 37 UNIT 8	A	Y	3	Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
1830	WELL 2	2	WELL 2	A				
240	WELL 1	2	WELL 1	A				
45481	ATMOSPHERIC STORAGE							

## Certified Operator Information

Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
Facility Classification: SMALL WATER SYSTEM			
Operator Name	Operator Type	Certification(s)	Certification Expiration
KLOBUKOWSKI, STEVEN J.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2022 6/30/2020

## Contact Information

Name		Organization			Job Title	
<b>Corridor Ventures Inc.</b>						
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
20 Avon Meadow Lane				Avon	CT	06001
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	

Contact Role(s): <b>Owner</b>						
Name		Organization			Job Title	
<b>Mr. Yitzchock Rabinowitz</b>		Willington Property Group LLC			Owner	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
61 Interstate Ln				Waterbury	CT	06705
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-573-9870	101	203-575-2078			yr@axelagroup.com	

Contact Role(s): <b>Legal Contact, Owner</b>						
Name		Organization			Job Title	
<b>Mr. Martin Brousseau</b>		Landmark Properties			Maintenance Manager	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
43 Burt Latham Rd				Willington	CT	06279
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-941-6005					martin.brousseau@storrstudentliving.com	

Contact Role(s): <b>Administrative Contact</b>						
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*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	
<b>CT0780091</b>	<b>HUNTING LODGE APARTMENTS</b>	<b>C</b>	<b>115</b>	<b>P</b>	<b>GW</b>	
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
16 HUNTING HEIGHTS DRIVE		40				
Towns Served: MANSFIELD						

**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		
<b>CT0780101</b>	<b>CLUB HOUSE APARTMENTS</b>	C	115	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
3 CLUBHOUSE CIRCLE			44				

Towns Served: MANSFIELD

### Monitoring Requirements

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

<b>Chlorine Residual (1012)</b>		<b>1 routine (RT) per quarter</b>			
<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				
<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<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	1/1/14 - 12/31/22				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>			
<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				
<b>Disinfectant Byproducts - TTHM &amp; HAA5 (DBP)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
BUILDINGS 3 OR 39 UNITS A-D (CHA03CHA39)	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			
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<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			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<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				
<b>Water System Facility: ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<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				

*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		
<b>CT0780101</b>	<b>CLUB HOUSE APARTMENTS</b>	C	115	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
3 CLUBHOUSE CIRCLE			44				
Towns Served: MANSFIELD							

### Monitoring Requirements

Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>			
<b>Nitrate And Nitrite (NOX)</b>			<b>1 routine (RT) per year</b>
<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		
<b>Radionuclides - Gross Alpha, Combined Radium &amp; Uranium (RADA)</b>			<b>1 routine (RT) per nine years</b>
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/22		Complete
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>			<b>1 routine (RT) per three years</b>
<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		
<b>Organic Chemicals (VOCS)</b>			<b>1 routine (RT) per quarter</b>
<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: <b>ENTRY POINT (WSFID: 00700)</b>			
<b>Analyte</b>	<b>Monitoring Requirement (Summary Type)</b>	<b>Operating Limit</b>	<b>Samples Req/Month</b>
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily
<b>Start Date:</b> 1/1/2004		<b>Compliance History:</b>	<b>Operating Limit</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>
		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	
<b>Analyte</b>	<b>Monitoring Requirement (Summary Type)</b>	<b>Operating Limit</b>	<b>Samples Req/Month</b>
pH	Entry Point pH Monitoring (PHRD)	Minimum: 6.4 PH	Daily
<b>Start Date:</b> 7/1/2003		<b>Compliance History:</b>	<b>Operating Limit</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>
		10/1/2019 - 10/31/2019	
		11/1/2019 - 11/30/2019	
		12/1/2019 - 12/31/2019	
		1/1/2020 - 1/31/2020	

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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
<b>CT0780101</b>	<b>CLUB HOUSE APARTMENTS</b>	C	115	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
3 CLUBHOUSE CIRCLE		44				

Towns Served: MANSFIELD

**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	Daily
<b>Start Date:</b> 7/1/2003	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
2/1/2020 - 2/29/2020			

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2019	
CROSS CONNECTION SURVEY REPORT	3/1/2020	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

## Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
Nitrate And Nitrite M&R Violation	1/1/17 - 12/31/17	3	3/9/2019		3/19/2019	
Organic Chemicals M&R Violation	10/1/17 - 12/31/17	3	3/9/2019		3/19/2019	

## 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			
		CHA03A	APARTMENT	A	Y	1		
		CHA03B	APARTMENT	A	Y	1		
		CHA03C	APARTMENT	A	Y	1		
		CHA03CHA39	BUILDINGS 3 OR 39 UN	A				Y
		CHA03D	APARTMENT 3D	A	Y	1		Y
		CHA07A	APARTMENT	A	Y	1		
		CHA07B	APARTMENT	A	Y	1		
		CHA07C	APARTMENT	A	Y	1		
		CHA07D	APARTMENT	A	Y	1		
		CHA11A	APARTMENT	A	Y	1		
		CHA11B	APARTMENT	A	Y	1		
		CHA11C	APARTMENT	A	Y	1		
		CHA11D	APARTMENT	A	Y	1		
		CHA12A	APARTMENT	A	Y	1		
		CHA12B	APARTMENT	A	Y	1		
		CHA12C	APARTMENT	A	Y	1		
		CHA12D	APARTMENT	A	Y	1		
		CHA13A	APARTMENT	A	Y	1		
		CHA13B	APARTMENT	A	Y	1		

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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		
<b>CT0780101</b>	<b>CLUB HOUSE APARTMENTS</b>	<b>C</b>	<b>115</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
3 CLUBHOUSE CIRCLE			44				
Towns Served: MANSFIELD							

### 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
		CHA13C	APARTMENT	A	Y	1		
		CHA13D	APARTMENT	A	Y	1		
		CHA24A	APARTMENT	A	Y	1		
		CHA24B	APARTMENT	A	Y	1		
		CHA24C	APARTMENT	A	Y	1		
		CHA24D	APARTMENT	A	Y	1		
		CHA29A	APARTMENT	A	Y	1		
		CHA29B	APARTMENT	A	Y	1		
		CHA29C	APARTMENT	A	Y	1		
		CHA29D	APARTMENT	A	Y	1		
		CHA32A	APARTMENT	A	Y	1		
		CHA32B	APARTMENT	A	Y	1		
		CHA32C	APARTMENT	A	Y	1		
		CHA32D	APARTMENT	A	Y	1		
		CHA33A	APARTMENT	A	Y	1		
		CHA33B	APARTMENT	A	Y	1		
		CHA33C	APARTMENT	A	Y	1		
		CHA33D	APARTMENT	A	Y	1		
		CHA35A	APARTMENT	A	Y	1		
		CHA35B	APARTMENT	A	Y	1		
		CHA35C	APARTMENT	A	Y	1		
		CHA35D	APARTMENT	A	Y	1		
		CHA39	CLH	A	Y			
		CHA39A	APARTMENT	A	Y	1		
		CHA39B	APARTMENT	A	Y	1		
		CHA39C	APARTMENT	A	Y	1		
		CHA39D	APARTMENT	A	Y	1		
		CHACT01	SAMP TAP COMP TANK	A	Y	1		
		CHADT01	DISTRIBUTION TAP #1	A	Y	1		
		CHAEXT01	EXTERIOR TAP#1	A	Y	1		
		CHAEXT02	EXTERIOR TAP#2	A	Y	1		
		CHAFT01	FILTER SAMP TAP #1	A				
		CHAHT01	HOLDING TANK TAP 1	A	Y	1		
		CHASHOP	MAINT. SHOP SINK	A	Y	1		
		CHAW01	SAMPLING TAP WELL #1	A	Y	1		
		CHAW02	SAMPLING TAP WELL #2	A				
		CHAWBLND	SAMP TAP BLENDED	A	Y	1		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	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		
<b>CT0780101</b>	<b>CLUB HOUSE APARTMENTS</b>	<b>C</b>	<b>115</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
3 CLUBHOUSE CIRCLE		44					
Towns Served: MANSFIELD							

## 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
00700	ENTRY POINT	3	ENTRY POINT	A				
214	WELL 1	2	WELL 1	A				
358	CLUB HOUSE TREATMENT PLANT							
37242	ATMOSPHERIC STORAGE							
37244	PRESSURE STORAGE							

## Certified Operator Information

Water System Facility: <b>CLUB HOUSE TREATMENT PLANT (WSF ID: 358)</b>			
Facility Classification: CLASS 2 TREATMENT PLANT			
<b>Operator Name</b>	<b>Operator Type</b>	<b>Certification(s)</b>	<b>Certification Expiration</b>
KLOBUKOWSKI, STEVEN J.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2022 6/30/2020

## Contact Information

Name		Organization			Job Title		
<b>Mr. Yitzchock Rabinowitz</b>		Willington Property Group LLC			Owner		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
61 Interstate Ln					Waterbury	CT	06705
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-573-9870	101	203-575-2078			yr@axelagroup.com		
Contact Role(s): <b>Legal Contact, Owner</b>							
Name		Organization			Job Title		
<b>Mr. Martin Brousseau</b>		Landmark Properties			Maintenance Manager		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
43 Burt Latham Rd					Willington	CT	06279
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-941-6005					martin.brousseau@storrstudentliving.com		
Contact Role(s): <b>Administrative Contact</b>							

**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		
<b>CT0780121</b>	<b>CTWC - BIRCHWOOD HEIGHTS</b>	C	76	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			20				

Towns Served: MANSFIELD

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<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	1/1/14 - 12/31/22				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<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				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<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			
	1/1/21 - 12/31/23	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<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: <b>ENTRY POINT - UPPER PUMP HOUSE (WSF ID: 00701)</b>					
<b>Net Gross Alpha (4000)</b>		<b>1 routine (RT) per three years</b>			
<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				

*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		
CT0780121	CTWC - BIRCHWOOD HEIGHTS	C	76	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			20				

Towns Served: MANSFIELD

### Monitoring Requirements

Water System Facility: ENTRY POINT - UPPER PUMP HOUSE (WSF ID: 00701)

<b>Net Gross Alpha (4000)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Uranium (4006)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Combined Radium-226/228 (4010)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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		
<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		

### Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

*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		
<b>CT0780121</b>	<b>CTWC - BIRCHWOOD HEIGHTS</b>	C	76	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		20					

Towns Served: MANSFIELD

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2024	

### 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			
		4-1	#35 Kitchen Sink	A	Y			
		BHE001	99 BIRCHWOOD HEIGHT	A	Y	3		
		BHE002	92 BIRCHWOOD HEIGHT	A	Y	3		
		BHE003	64 BIRCHWOOD HEIGHT	A	Y	3		
		BHE004	69 BIRCHWOOD HEIGHT	P	Y	3		
		BHE005	40 BIRCHWOOD HEIGHT	A	Y	3		
		BHE006	77 BIRCHWOOD HEIGHT	A	Y	N		
		BHE007	24 BIRCHWOOD HEIGHTS	A	Y	3		
		BHE008	29 BIRCHWOOD HEIGHTS	A	Y	3		
		BHE009	35 BIRCHWOOD HEIGHTS	A	Y	3		
		BHE010	41 BIRCHWOOD HEIGHTS	A	Y	3		
		BHE011	55 BIRCHWOOD HEIGHTS	A	Y	3		
		BHE012	58 BIRCHWOOD HEIGHTS	A	Y	3		
		BHE013	61 BIRCHWOOD HEIGHTS	A	Y	3		
		BHE014	70 BIRCHWOOD HEIGHTS	A	Y	3		
		BHE015	89 BIRCHWOOD HEIGHTS	A	Y	3		
		BHE016	102 BIRCHWOOD HEIGHT	A	Y	3		
		BHE017	1097 STORRS RD	A	Y	3		
		BHE018	1105 STORRS RD	A	Y	3		
		BHE019	SAMPLE STATION	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00701	ENTRY POINT - UPPER PUMP HOUSE	3	ENTRY POINT	A				
1941	WELL 4	2	WELL 4	A				
287	WELL 2	2	WELL 2	A				
288	WELL 3	2	WELL 3	A				
44905	ATMOSPHERIC TANK - LOWER							
52619	WELL 4 ATM TANK							
52621	WELL 4 PRESSURE TANK							
52623	PUMP STATION-UPPER							
52625	WELL 4 PUMP STATION							
55503	PRESSURE TANK-UPPER							

*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		
<b>CT0780121</b>	<b>CTWC - BIRCHWOOD HEIGHTS</b>	<b>C</b>	<b>76</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		20					

Towns Served: MANSFIELD

## Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
CONNORS, JAMES	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2021
KEARNEY, THOMAS	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2020
		WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2023
BUHLER, BRANT D.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2022
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2022

## Contact Information

Name		Organization			Job Title	
<b>Mr. Craig J. Patla</b>		Connecticut Water Company			Vp, Service Delivery	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
93 West Main Street				Clinton	CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-664-6140				800-391-1924	cpatla@ctwater.com	

Contact Role(s): **Legal Contact**

Name		Organization			Job Title	
<b>Mr. David Connors</b>		Connecticut Water Company			Director, Service De	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
93 West Main St				Clinton	CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-664-6141				860-227-4902	dconnors@ctwater.com	

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.
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		
<b>CT0780131</b>	<b>AH 2 LLC</b>	C	96	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
264 MOUNT HOPE ROAD			32				

Towns Served: MANSFIELD

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<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	1/1/14 - 12/31/22				
<b>Total Coliform (3100)</b>		<b>3 repeat (RP) per period</b>			
<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	9/19/19 - 9/24/19		Complete		
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<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		Complete		
	5/1/20 - 5/31/20		Complete		
	6/1/20 - 6/30/20		Complete		
	7/1/20 - 7/31/20		Complete		
	8/1/20 - 8/31/20		Complete		
	9/1/20 - 9/30/20		Complete		
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<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			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<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		Complete		
	5/1/20 - 5/31/20		Complete		
	6/1/20 - 6/30/20		Complete		
	7/1/20 - 7/31/20		Complete		
	8/1/20 - 8/31/20		Complete		
	9/1/20 - 9/30/20		Complete		

Water System Facility: **ENTRY POINT - WELL 1 (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		
<b>CT0780131</b>	<b>AH 2 LLC</b>	C	96	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
264 MOUNT HOPE ROAD			32				
Towns Served: MANSFIELD							

### Monitoring Requirements

**Water System Facility: ENTRY POINT - WELL 1 (WSF ID: 00700)**

<b>Net Gross Alpha (4000)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Uranium (4006)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Combined Radium-226/228 (4010)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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		
<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		

**Water System Facility: ENTRY POINT - WELL 2 (WSF ID: 00701)**

*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		
<b>CT0780131</b>	<b>AH 2 LLC</b>	C	96	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
264 MOUNT HOPE ROAD			32				

Towns Served: MANSFIELD

### Monitoring Requirements

Water System Facility: **ENTRY POINT - WELL 2 (WSF ID: 00701)**

<b>Net Gross Alpha (4000)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Uranium (4006)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Combined Radium-226/228 (4010)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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		
	1/1/20 - 12/31/20		
	1/1/21 - 12/31/21		
<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		

Water System Facility: **WELL 1 (WSF ID: 1550)**

*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		
<b>CT0780131</b>	<b>AH 2 LLC</b>	C	96	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
264 MOUNT HOPE ROAD			32				
Towns Served: MANSFIELD							

## Monitoring Requirements

Water System Facility: <b>WELL 1 (WSF ID: 1550)</b>							
<b>E. Coli (3014)</b>		<b>1 triggered (TG) per period</b>					
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
WELL 1 (2)	9/18/19 - 9/24/19		Complete				

Water System Facility: <b>WELL 2 (WSF ID: 284)</b>							
<b>E. Coli (3014)</b>		<b>1 triggered (TG) per period</b>					
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
WELL 2 (2)	9/18/19 - 9/24/19		Complete				

## 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	
RESPOND TO SANITARY SURVEY	4/5/2020	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

## 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	A				
			UPSTREAM	A				
		WE01	UNITS #1-4	A	Y	2	Y	
		WE02	UNITS #5-8	A	Y	2		
		WE03	UNITS #9-12	A	Y	2		
		WE04	UNITS #13-16	A	Y	2		
		WE05	UNITS #17-20	A	Y	2		
		WE06	UNITS #21-24	A	Y	2		
WE07	UNITS #25-28	A	Y	2				
WE08	UNITS #29-32	A	Y	2				
00700	ENTRY POINT - WELL 1	3	ENTRY POINT	A				
00701	ENTRY POINT - WELL 2	3	ENTRY POINT	A				
1550	WELL 1	2	WELL 1	A				
284	WELL 2	2	WELL 2	A				
37382	PIT 1 1000 GALLON TANK							
37386	PIT 2 1000 GALLON TANK							

## Certified Operator Information

Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
Facility Classification: SMALL WATER SYSTEM			
<i>Operator Name</i>	<i>Operator Type</i>	<i>Certification(s)</i>	<i>Certification Expiration</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		
<b>CT0780131</b>	<b>AH 2 LLC</b>	<b>C</b>	<b>96</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
264 MOUNT HOPE ROAD		32					
Towns Served: MANSFIELD							

## Certified Operator Information

Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
Facility Classification: SMALL WATER SYSTEM			
<b>Operator Name</b>	<b>Operator Type</b>	<b>Certification(s)</b>	<b>Certification Expiration</b>
KLOBUKOWSKI, STEVEN J.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2022
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2020

## Contact Information

Name		Organization		Job Title			
<b>Mr. Kyle Mayer</b>		Axela Management		Property Manager			
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
61 Interstate Lane					Waterbury	CT	06705
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-919-8966					kmayer@axelamanagement.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		
<b>CT0780161</b>	<b>MAPLEWOOD/MILLBROOK APARTMENTS</b>	C	153	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
1 CARLETON RD			52				
Towns Served: MANSFIELD							

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<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	1/1/14 - 12/31/22				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<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		Complete		
	5/1/20 - 5/31/20		Complete		
	6/1/20 - 6/30/20		Complete		
	7/1/20 - 7/31/20		Complete		
	8/1/20 - 8/31/20		Complete		
	9/1/20 - 9/30/20		Complete		
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<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		
<b>Lead And Copper (PBCU)</b>		<b>10 routine (RT) per six months</b>			
<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 - 6/30/20		Complete		
	7/1/20 - 12/31/20		Complete		
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<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		Complete		
	5/1/20 - 5/31/20		Complete		
	6/1/20 - 6/30/20		Complete		
	7/1/20 - 7/31/20		Complete		
	8/1/20 - 8/31/20		Complete		
	9/1/20 - 9/30/20		Complete		
<b>Water Quality Parameters (WQPD)</b>		<b>2 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		

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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		
CT0780161	MAPLEWOOD/MILLBROOK APARTMENTS	C	153	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
1 CARLETON RD			52				

Towns Served: MANSFIELD

### Monitoring Requirements

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

**Water Quality Parameters (WQPD) 2 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	

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

**Net Gross Alpha (4000) 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		

**Uranium (4006) 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		

**Combined Radium-226/228 (4010) 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		

**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		

**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 & 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		

**Water Quality Parameters - Basic (WQP1) 2 routine (RT) per three years**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>

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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		
CT0780161	MAPLEWOOD/MILLBROOK APARTMENTS	C	153	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
1 CARLETON RD			52				
Towns Served: MANSFIELD							

## Monitoring Requirements

<b>Water System Facility: ENTRY POINT (WSF ID: 00700)</b>			
<b>Water Quality Parameters - Basic (WQP1)</b>		<b>2 routine (RT) per three years</b>	
<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	6/1-9/30	Complete

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	11/27/2019	11/26/2019
LEAD PUBLIC EDUCATION REPORT TO STATE	11/30/2019	11/26/2019
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	12/31/2019	12/23/2019
LEAD PUBLIC EDUCATION REPORT TO STATE	12/31/2019	12/23/2019
CCTS 1: PWS TO RECOMMEND OCCT	1/21/2020	
SWTS 1: PWS TO RECOMMEND SOWT	1/21/2020	
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	1/31/2020	1/14/2020
LEAD PUBLIC EDUCATION REPORT TO STATE	1/31/2020	1/15/2020
LEAD PUBLIC EDUCATION REPORT TO STATE	2/29/2020	2/25/2020
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	2/29/2020	2/25/2020
CROSS CONNECTION SURVEY REPORT	3/1/2020	
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	3/31/2020	
LEAD PUBLIC EDUCATION REPORT TO STATE	3/31/2020	
SUBMIT CCR TO THE DEPARTMENT	7/1/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	9/30/2020	
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	9/30/2021	

## 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>
E. Coli	4/1/18 - 4/30/18	3	9/10/2019		9/20/2019	

## 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				
		MBA01A	APARTMENT	A	Y	1		
		MBA01B	APARTMENT	A	Y	1		
		MBA01C	APARTMENT	A	Y	1		
		MBA01D	APARTMENT	A	Y	1		
		MBA028	MB 2B	A	Y			
		MBA02A	APARTMENT	A	Y	1		

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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		
<b>CT0780161</b>	<b>MAPLEWOOD/MILLBROOK APARTMENTS</b>	<b>C</b>	<b>153</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
1 CARLETON RD			52				
Towns Served: MANSFIELD							

### 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
		MBA02B	APARTMENT	A	Y	1		
		MBA02C	APARTMENT	A	Y	1		
		MBA02D	APARTMENT	A	Y	1		
		MBA03A	APARTMENT	A	Y	1		
		MBA03B	APARTMENT	A	Y	1		
		MBA03C	APARTMENT	A	Y	1		
		MBA03D	APARTMENT	A	Y	1		
		MWA01A	APARTMENT	A	Y	1		
		MWA01B	APARTMENT	A	Y	1		
		MWA01C	APARTMENT	A	Y	1		
		MWA01D	APARTMENT	A	Y	1		
		MWA02A	APARTMENT	A	Y	1		
		MWA02B	APARTMENT	A	Y	1		
		MWA02C	APARTMENT	A	Y	1		
		MWA02D	APARTMENT	A	Y	1		
		MWA03A	APARTMENT	A	Y	1		
		MWA03B	APARTMENT	A	Y	1		
		MWA03C	APARTMENT	A	Y	1		
		MWA03D	APARTMENT	A	Y	1		
		MWA04A	APARTMENT	A	Y	1		
		MWA04B	APARTMENT	A	Y	1		
		MWA04C	APARTMENT	A	Y	1		
		MWA04D	APARTMENT	A	Y	1		
		MWA05A	APARTMENT	A	Y	1		
		MWA05B	APARTMENT	A	Y	1		
		MWA05C	APARTMENT	A	Y	1		
		MWA05D	APARTMENT	A	Y	1		
		MWA06A	APARTMENT	A	Y	1		
		MWA06B	APARTMENT	A	Y	1		
		MWA06C	APARTMENT	A	Y	1		
		MWA06D	APARTMENT	A	Y	1		
		MWA07A	APARTMENT	A	Y	1		
		MWA07B	APARTMENT	A	Y	1		
		MWA07C	APARTMENT	A	Y	1		
		MWA07D	APARTMENT	A	Y	1		
		MWA08A	APARTMENT	A	Y	1		
		MWA08B	APARTMENT	A	Y	1		
		MWA08C	APARTMENT	A	Y	1		
		MWA08D	APARTMENT	A	Y	1		

*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		
<b>CT0780161</b>	<b>MAPLEWOOD/MILLBROOK APARTMENTS</b>	<b>C</b>	<b>153</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
1 CARLETON RD			52				
Towns Served: MANSFIELD							

### 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
		MWA09A	APARTMENT	A	Y	1		
		MWA09B	APARTMENT	A	Y	1		
		MWA09C	APARTMENT	A	Y	1		
		MWA09D	APARTMENT	A	Y	1		
		MWA10A	APARTMENT	A	Y	1		
		MWA10B	APARTMENT	A	Y	1		
		MWA10C	APARTMENT	A	Y	1		
		MWA10D	APARTMENT	A	Y	1		
		MWACT01	SAMP TAP COMP TANK	A	Y	1		
		MWAHT01	HOLDING TANK TAP 1	A	Y	1		
		MWAW01	SAMPLING TAP WELL #1	A	Y	1		
		MWAW02	SAMPLING TAP WELL #2	A	Y	1		
		MWAWBLND	SAMP TAP BLENDED	A	Y	1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
271	WELL 2	2	WELL 2	A				
291	WELL 1	2	WELL 1	A				
37246	ATMOSPHERIC STORAGE							
37249	HYDROPNEUMATIC TANK							

### Certified Operator Information

Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
Facility Classification: SMALL WATER SYSTEM			
Operator Name	Operator Type	Certification(s)	Certification Expiration
KLOBUKOWSKI, STEVEN J.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2022 6/30/2020

### Contact Information

Name		Organization			Job Title	
<b>Mr. Yitzchock Rabinowitz</b>		Willington Property Group LLC			Owner	
Mailing Address Line One		Mailing Address Line Two			City	State
61 Interstate Ln					Waterbury	CT
Zip Code		06705				
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-573-9870	101	203-575-2078			yr@axelagroup.com	
Contact Role(s): <b>Legal Contact, Owner</b>						

*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			
<b>CT0780161</b>	<b>MAPLEWOOD/MILLBROOK APARTMENTS</b>	<b>C</b>	<b>153</b>	<b>P</b>	<b>GW</b>			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
1 CARLETON RD			52					
Towns Served: MANSFIELD								
Name			Organization			Job Title		
<b>Mr. Martin Brousseau</b>			Landmark Properties			Maintenance Manager		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
43 Burt Latham Rd						Wilmington	CT	06279
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-941-6005					martin.brousseau@storrstudentliving.com			
Contact Role(s): <b>Administrative Contact</b>								

**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		
<b>CT0780171</b>	<b>RENWOOD APARTMENTS</b>	C	190	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
17 DARTMOUTH ROAD			76				
Towns Served: MANSFIELD							

### Monitoring Requirements

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

<b>Chlorine Residual (1012)</b>		<b>1 routine (RT) per month</b>		
<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		Complete	
	5/1/20 - 5/31/20		Complete	
	6/1/20 - 6/30/20		Complete	
	7/1/20 - 7/31/20		Complete	
	8/1/20 - 8/31/20		Complete	
	9/1/20 - 9/30/20		Complete	
<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>		
<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	1/1/14 - 12/31/22			
<b>Total Haloacetic Acids (2456)</b>		<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
16 D CORNELL (RENWD001)	1/1/19 - 12/31/19	7/1-9/30		
33A CORNELL (RENWD003)	1/1/20 - 12/31/20	9/1-9/30		
	1/1/21 - 12/31/21	9/1-9/30		
<b>Total Trihalomethanes (2950)</b>		<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
16 D CORNELL (RENWD001)	1/1/19 - 12/31/19	7/1-9/30		
	1/1/20 - 12/31/20	9/1-9/30		
	1/1/21 - 12/31/21	9/1-9/30		
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>		
<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		Complete	
	5/1/20 - 5/31/20		Complete	
	6/1/20 - 6/30/20		Complete	
	7/1/20 - 7/31/20		Complete	
	8/1/20 - 8/31/20		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		
<b>CT0780171</b>	<b>RENWOOD APARTMENTS</b>	C	190	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
17 DARTMOUTH ROAD			76				

Towns Served: MANSFIELD

### Monitoring Requirements

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

<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
	9/1/20 - 9/30/20				
<b>Lead And Copper (PBCU)</b>		<b>10 routine (RT) per six months</b>			
<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				
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<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)**

<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<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				
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>			
<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				
<b>Radionuclides - Gross Alpha, Combined Radium &amp; Uranium (RADA)</b>		<b>1 routine (RT) per six years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/14 - 12/31/19		Complete		
	1/1/20 - 12/31/25				
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>		<b>1 routine (RT) per three years</b>			
<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				

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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		
<b>CT0780171</b>	<b>RENWOOD APARTMENTS</b>	C	190	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
17 DARTMOUTH ROAD			76				
Towns Served: MANSFIELD							

### 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>
	1/1/23 - 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)	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		

#### Water System Facility: WELL 2 (WSF ID: 210)

E. Coli (3014)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL 2 (2)	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: WELL 3 (WSF ID: 235)

E. Coli (3014)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL 3 (2)	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: WELL 1 (WSF ID: 236)

E. Coli (3014)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>

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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		
<b>CT0780171</b>	<b>RENWOOD APARTMENTS</b>	C	190	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
17 DARTMOUTH ROAD			76				
Towns Served: MANSFIELD							

### Monitoring Requirements

Water System Facility: <b>WELL 1 (WSF ID: 236)</b>			
<b>E. Coli (3014)</b>		<b>1 routine (RT) per month</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL 1 (2)	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		

### Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: <b>ENTRY POINT (WSFID: 00700)</b>			
<b>Analyte</b>	<b>Monitoring Requirement (Summary Type)</b>	<b>Operating Limit</b>	<b>Samples Req/Month</b>
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily
<b>Start Date:</b> 3/1/2014	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	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>
CCTS 2: DWS REVIEW & APPROVAL OF OCCT		
SUBMIT CCR TO THE DEPARTMENT	7/1/2004	
CROSS CONNECTION SURVEY REPORT	3/1/2018	
CROSS CONNECTION SURVEY REPORT	3/1/2019	
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
LEAD PUBLIC EDUCATION REPORT TO STATE	9/30/2019	9/3/2019
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	9/30/2019	9/3/2019
CROSS CONNECTION SURVEY REPORT	3/1/2020	
LEAD PUBLIC EDUCATION REPORT TO STATE	3/31/2020	
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	3/31/2020	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

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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		
<b>CT0780171</b>	<b>RENWOOD APARTMENTS</b>	C	190	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
17 DARTMOUTH ROAD			76				
Towns Served: MANSFIELD							

## Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
GROUNDWATER RULE TT Violation	2/21/19 - 2/28/19	2	5/10/2019		5/20/2019	

## 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					
		RENWD001	16 D CORNELL	A	Y	2	Y	Y	Y
		RENWD002	16B CORNELL	A	Y	2	Y	Y	
		RENWD003	33A CORNELL	A	Y	2			Y
		RENWD004	33C CORNELL	A	Y	2			
		RENWD005	16A CORNELL	A	Y	2			
		RENWD006	2A YALE	A	Y	2			
		RENWD007	2B YALE	A	Y	2			
		RENWD008	8A YALE	A	Y	2			
		RENWD009	8B YALE	A	Y	2			
		RENWD010	15B YALE	A	Y	2			Y
		UPSTREAM	WITHIN 5 SERVICE CON	A					
00700	ENTRY POINT	3	ENTRY POINT	A					
210	WELL 2	2	WELL 2	A					
235	WELL 3	2	WELL 3	A					
236	WELL 1	2	WELL 1	A					
51047	ATMOSPHERIC STORAGE								
51049	PRESSURE STORAGE								
60818	TREATMENT PLANT								

## Certified Operator Information

<b>Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
<b>Facility Classification:</b>			
Operator Name	Operator Type	Certification(s)	Certification Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2021
NAPIERATA, KYLE	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2021
<b>Water System Facility: TREATMENT PLANT (WSF ID: 60818)</b>			
<b>Facility Classification:</b> CLASS 1 TREATMENT PLANT			
Operator Name	Operator Type	Certification(s)	Certification Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2021

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0780171</b>	<b>RENWOOD APARTMENTS</b>	<b>C</b>	<b>190</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
17 DARTMOUTH ROAD			76				
Towns Served: MANSFIELD							

## Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 60818)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
NAPIERATA, KYLE	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2021

## Contact Information

Name		Organization		Job Title		
<b>Mr. David Merenstein</b>		Renwood Apartments LLC		Owner		
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
92 Prospect St		P.O. Box 2363		Waterbury	CT	06702
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-528-0190		203-528-0193		203-721-2018	david@detailmanagement.net	

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		
<b>CT0780181</b>	<b>CARRIAGE HOUSE APARTMENTS</b>	<b>C</b>	<b>196</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			64				

Towns Served: MANSFIELD

### Monitoring Requirements

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

<b>Chlorine Residual (1012)</b>		<b>1 routine (RT) per month</b>	
<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		
<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>	
<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	1/1/14 - 12/31/22		
<b>Total Haloacetic Acids (2456)</b>		<b>1 routine (RT) per year</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
BLDG 6 - APARTMENT 6C (4-2)	1/1/19 - 12/31/19	9/1-9/30	Complete
	1/1/20 - 12/31/20	9/1-9/30	
	1/1/21 - 12/31/21	9/1-9/30	
<b>Total Trihalomethanes (2950)</b>		<b>1 routine (RT) per year</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
SHOP (4-6)	1/1/19 - 12/31/19	9/1-9/30	Complete
	1/1/20 - 12/31/20	9/1-9/30	
	1/1/21 - 12/31/21	9/1-9/30	
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>	
<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		

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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		
<b>CT0780181</b>	<b>CARRIAGE HOUSE APARTMENTS</b>	C	196	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			64				

Towns Served: MANSFIELD

### Monitoring Requirements

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

<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
	9/1/20 - 9/30/20				
<b>Lead And Copper (PBCU)</b>		<b>10 routine (RT) per six months</b>			
<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				
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<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)**

<b>Di(2-Ethylhexyl) - Phthalate (2039)</b>		<b>1 routine (RT) per year</b>			
<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				
<b>Net Gross Alpha (4000)</b>		<b>1 routine (RT) per three years</b>			
<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				
<b>Uranium (4006)</b>		<b>1 routine (RT) per three years</b>			
<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				
<b>Combined Radium-226/228 (4010)</b>		<b>1 routine (RT) per three years</b>			
<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		
<b>CT0780181</b>	<b>CARRIAGE HOUSE APARTMENTS</b>	C	196	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		64					

Towns Served: MANSFIELD

## Monitoring Requirements

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

<b>Combined Radium-226/228 (4010)</b>		<b>1 routine (RT) per three years</b>		
<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			
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>		
<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			
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>		
<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			
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>		<b>1 routine (RT) per three years</b>		
<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			
<b>Organic Chemicals (VOCS)</b>		<b>1 routine (RT) per three years</b>		
<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			

## 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: 1.05 MG/L	Daily	
<b>Start Date:</b> 11/1/2018		<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
		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	Y	
		2/1/2020 - 2/29/2020		
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	Daily	
<b>Start Date:</b> 12/1/2005		<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
		10/1/2019 - 10/31/2019		

*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		
<b>CT0780181</b>	<b>CARRIAGE HOUSE APARTMENTS</b>	C	196	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		64					

Towns Served: MANSFIELD

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

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	Daily
<b>Start Date:</b> 12/1/2005	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	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
SUBMIT CCR CERTIFICATION FORM	8/9/2018	
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
CROSS CONNECTION SURVEY REPORT	3/1/2020	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

## Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
Total Coliform MCL Violation	10/1/15 - 10/31/15	2	12/30/2015		1/9/2016	

## 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	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	11A	APARTMENT 11A	A	Y	N	Y
		11B	APARTMENT 11B	A	Y	N	Y
		11C	APARTMENT 11C	A	Y	N	Y
		11D	APARTMENT 11D	A	Y	N	
		12A	APARTMENT 12A	A	Y	N	Y
		12B	APARTMENT 12B	A	Y	N	Y
		12C	APARTMENT 12C	A	Y	N	Y
		12D	APARTMENT 12D	A	Y	N	Y
		13A	APARTMENT 13A	A	Y	N	Y
		13C	APARTMENT 13C	A	Y	N	Y
		13D	APARTMENT 13D	A	Y	N	Y
		14A	APARTMENT 14A	A	Y	N	Y
		14B	APARTMENT 14B	A	Y	N	Y
		14C	APARTMENT 14C	A	Y	N	Y
		14D	APARTMENT 14D	A	Y	N	Y
		15A	APARTMENT 15A	A	Y	N	Y
		15B	APARTMENT 15B	A	Y	N	Y
		15C	APARTMENT 15C	A	Y	N	Y

*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		
<b>CT0780181</b>	<b>CARRIAGE HOUSE APARTMENTS</b>	C	196	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			64				

Towns Served: MANSFIELD

### 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
		15D	APARTMENT 15D	A	Y	N	Y	
		16A	APARTMENT 16A	A	Y	N	Y	
		16B	APARTMENT 16B	A	Y	N	Y	
		16C	APARTMENT 16C	A	Y	N	Y	
		16D	APARTMENT 16D	A	Y	N	Y	
		17A	APARTMENT 17A	A	Y	N	Y	
		17B	APARTMENT 17B	A	Y	N	Y	
		17C	APARTMENT 17C	A	Y	N	Y	
		17D	17D-KITCHEN	A	Y			
		18A	APARTMENT 18A	A	Y	N	Y	
		18B	APARTMENT 18B	A	Y	N	Y	
		18C	APARTMENT 18C	A	Y	N	Y	
		18D	APARTMENT 18D	A	Y	N		
		19A	19-A-BATHROOM	A	Y			
		19B	APARTMENT 19B	A	Y	N	Y	
		19C	APARTMENT 19C	A	Y	N	Y	
		19D	APARTMENT 19D	A	Y	N	Y	
		20A	APARTMENT 20A	A	Y	N	Y	
		20B	APARTMENT 20B	A	Y	N	Y	
		20C	APARTMENT 20C	A	Y	N	Y	
		20D	APARTMENT 20D	A	Y	N	Y	
		2A	APARTMENT 2A	A	Y	N	Y	
		2B	APARTMENT 2B	A	Y	N	Y	
		2C	APARTMENT 2C	A	Y	N	Y	
		2D	APARTMENT 2D	A	Y	N		
		3A	APARTMENT 3A	A	Y	N	Y	
		3B	APARTMENT 3B	A	Y	N		
		3C	APARTMENT 3C	A	Y	N	Y	
		3D	APARTMENT 3D	A	Y	N	Y	
		4	DISTRIBUTION SYSTEM	A	Y			
		4-1	APARTMENT #11D	A	Y	N	Y	
		4-2	BLDG 6 - APARTMENT 6	A	Y	N	Y	Y
		4-3	APARTMENT #4D	A	Y	N	Y	
		4-4	APARTMENT #13B	A	Y	N	Y	
		4-5	APARTMENT #14D	A	Y	N	Y	
		4-6	SHOP	A	Y	N	Y	Y
		4A	APARTMENT 4A	A	Y	N	Y	
		4B	APARTMENT 4B	A	Y	N	Y	
		4C	APARTMENT 4C	A	Y	N	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		
<b>CT0780181</b>	<b>CARRIAGE HOUSE APARTMENTS</b>	C	196	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			64				

Towns Served: MANSFIELD

## 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
		4D	APARTMENT 4D	A	Y	N	Y	
		5A	APARTMENT 5A	A	Y	N	Y	
		5B	APARTMENT 5B	A	Y	N	Y	
		5C	APARTMENT 5C	A	Y	N	Y	
		5D	APARTMENT 5D	A	Y	N	Y	
		6A	APARTMENT 6A	A	Y	N	Y	
		6B	APARTMENT 6B	A	Y	N	Y	
		6D	APARTMENT 6D	A	Y	N		Y
		7A	APARTMENT 7A	A	Y	N		
		7B	APARTMENT 7B	A	Y	N	Y	
		7C	APARTMENT 7C	A	Y	N		
		7D	APARTMENT 7D	A	Y	N	Y	
		8A	APARTMENT 8A	A	Y	N	Y	
		8B	APARTMENT 8B	A	Y	N	Y	
		8C	APARTMENT 8C	A	Y	N	Y	
		8D	APARTMENT 8D	A	Y	N	Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
1480	WELL 2	2	WELL 2	A				
241	WELL 1	2	WELL 1	A				
476	TREATMENT PLANT							
50781	ATMOSPHERIC STORAGE FACILITIES							

## Certified Operator Information

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

**Facility Classification:** DISTRIBUTION SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2021
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2020
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2022
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020

**Water System Facility: TREATMENT PLANT (WSF ID: 476)**

**Facility Classification:** CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2021
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2020
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2022

*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		
<b>CT0780181</b>	<b>CARRIAGE HOUSE APARTMENTS</b>	<b>C</b>	<b>196</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		64					

Towns Served: MANSFIELD

## Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 476)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020

## Contact Information

Name		Organization			Job Title		
<b>Mr. Hagan Brown</b>		Carriage House Apartments LLC			Partner		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
20 Avon Meadow Lane					Avon	CT	06001
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-470-1202		860-218-9890		860-559-0258	hagan@corridorventures.com		

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

Name		Organization			Job Title		
<b>Mr. Randy Kabakoff</b>		Rogin Nassau			Attorney		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
City Place I		Floor 22			Hartford	CT	06103
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-256-6325					rkabakoff@roginlaw.com		

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		
CT0780211	AQUARION WATER CO OF CT-VALLEY VIEW	C	131	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
						56	

Towns Served: MANSFIELD

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<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	1/1/14 - 12/31/22				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<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				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<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			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<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)**

<b>Net Gross Alpha (4000)</b>		<b>1 routine (RT) per three years</b>			
<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				
<b>Uranium (4006)</b>		<b>1 routine (RT) per three years</b>			
<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				

*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		
<b>CT0780211</b>	<b>AQUARION WATER CO OF CT-VALLEY VIEW</b>	C	131	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
						56	

Towns Served: MANSFIELD

## Monitoring Requirements

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

<b>Combined Radium-226/228 (4010)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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		
	1/1/20 - 12/31/20		
	1/1/21 - 12/31/21		
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
CROSS CONNECTION SURVEY REPORT	3/1/2020	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

## 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	04886	FERN DRIVE SS VV	A	Y			
		4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		PB7435	11 SHARON DRIVE	A		3		
		PB7436	13 SHARON DRIVE	A		3		
		PB7437	15 SHARON DRIVE	A		3		
		PB7438	45 MARY BELLE DRIVE	A		3		

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0780211</b>	<b>AQUARION WATER CO OF CT-VALLEY VIEW</b>	<b>C</b>	<b>131</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
						56	

Towns Served: MANSFIELD

### 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
		PB7439	47 MARY BELLE DRIVE	A		3		
		PB7440	52 MARY BELLE DRIVE	A	Y	3		
		PB7524	48 MARY BELLE DRIVE	A	Y	3		
		PB7525	17 BARLOW DRIVE	A	Y	3		
		PB7549	34 FERN DRIVE	A		3		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
		VV-3	DISTRIBUTION SYSTEM	A	Y			
00700	ENTRY POINT	3	ENTRY POINT	A				
1752	WELL 3	2	WELL 3	A				
212	WELL 2	2	WELL 2	A				
49099	ATMOSPHERIC TANK							
49101	PRESSURE TANK							
54822	CONTACT TANKS							
570	VALLEY MOBILE PUMP HOUSE							
60166	TREATED WATER TRANSFER PS							

### Certified Operator Information

Water System Facility: **VALLEY MOBILE PUMP HOUSE (WSF ID: 570)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
CHARNETSKI, MICHAEL R.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2021
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2020
SIMPANEN, JUDY L.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2022
		WATER TREATMENT PLANT OPERATOR - CLASS IV	12/31/2021
GARDNER, DAVID C.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2022
SORENSEN, KEVIN T.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2022
YOUNG, BRIAN	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	12/31/2022
ROGERS, JUSTUS	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2021
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	3/31/2020

### Contact Information

Name		Organization			Job Title	
<b>Mr. John P. Walsh</b>		Aquarion Water Company			Vice President	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
835 Main Street		Mail Stop 700		Bridgeport	CT	06604
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-337-5852		203-337-5938		781-413-6175	jwalsh@aquarionwater.com	
Contact Role(s):		<b>Administrative Contact, Legal Contact</b>				

*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			
<b>CT0780211</b>	<b>AQUARION WATER CO OF CT-VALLEY VIEW</b>	<b>C</b>	<b>131</b>	<b>P</b>	<b>GW</b>			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
						56		
Towns Served: MANSFIELD								
Name			Organization			Job Title		
<b>Mr. Charles Hoddinott</b>			Valley View LLC			Member		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
42 Putting Green Lane						Orange	CT	06477
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
Contact Role(s): <b>Owner</b>								

**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		
<b>CT0780251</b>	<b>MANSFIELD VILLAGE, LLC</b>	C	40	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
91 CHAFFEEVILLE ROAD			15				

Towns Served: MANSFIELD

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<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	1/1/14 - 12/31/22				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<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		Complete		
	5/1/20 - 5/31/20		Complete		
	6/1/20 - 6/30/20		Complete		
	7/1/20 - 7/31/20		Complete		
	8/1/20 - 8/31/20		Complete		
	9/1/20 - 9/30/20		Complete		
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<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			
	1/1/21 - 12/31/23	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<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		Complete		
	5/1/20 - 5/31/20		Complete		
	6/1/20 - 6/30/20		Complete		
	7/1/20 - 7/31/20		Complete		
	8/1/20 - 8/31/20		Complete		
	9/1/20 - 9/30/20		Complete		
<b>Water System Facility: ENTRY POINT (WSF ID: 00700)</b>					
<b>Net Gross Alpha (4000)</b>		<b>1 routine (RT) per three years</b>			
<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				

*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		
<b>CT0780251</b>	<b>MANSFIELD VILLAGE, LLC</b>	C	40	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
91 CHAFFEEVILLE ROAD			15				
Towns Served: MANSFIELD							

## Monitoring Requirements

Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>							
<b>Net Gross Alpha (4000)</b>		<b>1 routine (RT) per three years</b>					
<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						
<b>Uranium (4006)</b>		<b>1 routine (RT) per three years</b>					
<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						
<b>Combined Radium-226/228 (4010)</b>		<b>1 routine (RT) per three years</b>					
<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						
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>					
<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						
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>					
<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						
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>		<b>1 routine (RT) per three years</b>					
<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						
<b>Organic Chemicals (VOCS)</b>		<b>1 routine (RT) per three years</b>					
<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						

## Monthly Water System Facility (WSF) Level Monitoring Requirements

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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		
<b>CT0780251</b>	<b>MANSFIELD VILLAGE, LLC</b>	C	40	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
91 CHAFFEEVILLE ROAD			15				

Towns Served: MANSFIELD

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

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	Daily
<b>Start Date:</b> 10/1/2006		<b>Compliance History:</b>	<b>Operating Limit</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>
		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
RESPOND TO SANITARY SURVEY	6/18/2012	
CROSS CONNECTION EXEMPTION	3/1/2014	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2014	
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

## 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	GENERIC DISTRIBUTION	A	Y			
		4-1	Lot 4	A	Y			
		4-2	Lot 1	A	Y			
		4-3	Lot 15	A	Y			
		4-4	Lot 17	A	Y			
		4-5	Lot 18	A	Y			
		DOWNSTREAM WITHIN 5 SERVICE CON		A				
		MD01	LOT #1	A	Y	3		
		MD02	LOT #2	A	Y	3		
		MD03	LOT #3	A	Y	3		
		MD04	LOT #4	A	Y	3		
		MD05	LOT #5	A	Y	3		
		MD06	LOT #6	A	Y	3		
		MD07	LOT #7	A	Y	3		
		MD08	LOT #8	A	Y	3		
		MD09	LOT #9	A	Y	3		
		MD10	LOT #10	A	Y	3		
		MD11	LOT #11	A	Y	1		
		MD12	LOT #12	A	Y	1		
		MD13	LOT #13	A	Y	1		

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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		
<b>CT0780251</b>	<b>MANSFIELD VILLAGE, LLC</b>	C	40	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
91 CHAFFEEVILLE ROAD			15				
Towns Served: MANSFIELD							

## 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
		MD14	LOT #14	A	Y	1		
		MD15	LOT #15	A	Y	1		
		MD16	LOT #16	A	Y	3		
		MD17	LOT #17	A	Y	1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
292	WELL 1	2	WELL 1	A				
45509	PRESSURIZED STORAGE							
571	MANSFIELD MOBILE PUMP HOUSE							

## Certified Operator Information

Water System Facility: <b>MANSFIELD MOBILE PUMP HOUSE (WSF ID: 571)</b>			
Facility Classification: CLASS 1 TREATMENT PLANT			
Operator Name	Operator Type	Certification(s)	Certification Expiration
CHARNETSKI, MICHAEL R.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2021 6/30/2020

## Contact Information

Name		Organization			Job Title			
<b>Mr. Kenneth Hoddinott</b>		Manfield Village, LLC			Member			
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
P.O. Box 781						Orange	CT	06477
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-799-0371		203-799-2572		203-605-0521	khodd@optonline.net			

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		
<b>CT0787011</b>	<b>CTWC - CRYSTAL SPRINGS DIV.</b>	C	169	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			38	1			

Towns Served: MANSFIELD

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<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	1/1/14 - 12/31/22				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<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		Complete		
	5/1/20 - 5/31/20		Complete		
	6/1/20 - 6/30/20		Complete		
	7/1/20 - 7/31/20		Complete		
	8/1/20 - 8/31/20		Complete		
	9/1/20 - 9/30/20		Complete		
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<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			
	1/1/21 - 12/31/23	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<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		Complete		
	5/1/20 - 5/31/20		Complete		
	6/1/20 - 6/30/20		Complete		
	7/1/20 - 7/31/20		Complete		
	8/1/20 - 8/31/20		Complete		
	9/1/20 - 9/30/20		Complete		
<b>Water System Facility: ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<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				

*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		
<b>CT0787011</b>	<b>CTWC - CRYSTAL SPRINGS DIV.</b>	C	169	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			38	1			

Towns Served: MANSFIELD

## Monitoring Requirements

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

<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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		
<b>Radionuclides - Gross Alpha, Combined Radium &amp; Uranium (RADA)</b>	<b>1 routine (RT) per six years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/19		Complete
	1/1/20 - 12/31/25		
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per year</b>		
<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 - 12/31/20		Complete
	1/1/21 - 12/31/21		

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION SURVEY REPORT	3/1/2020	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

## 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	GENERIC DISTRIBUTION	A	Y			
		CSP001	50C CRYSTAL LANE	A	Y	N		
		CSP002	60C CRYSTAL LANE	A	Y	N		
		CSP003	64B CRYSTAL LANE	A	Y	N		
		CSP004	41B CRYSTAL LANE	A	Y	N		
		CSP005	37C CRYSTAL LANE	A	Y	N		
		CSP006	SAMPLING STATION	A	Y			
		CSP007	26A CRYSTAL LN	A	Y	N		
		CSP008	26B CRYSTAL LN	A	Y	N		
		CSP009	26C CRYSTAL LN	A	Y	N		
		CSP010	26D CRYSTAL LN	A	Y	N		
		CSP011	37A CRYSTAL LN	A	Y	N		
		CSP012	37B CRYSTAL LN	A	Y	N		

**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		
<b>CT0787011</b>	<b>CTWC - CRYSTAL SPRINGS DIV.</b>	C	169	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		38	1				

Towns Served: MANSFIELD

### 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
		CSP013	38A CRYSTAL LN	A	Y	N		
		CSP014	38B CRYSTAL LN	A	Y	N		
		CSP015	38C CRYSTAL LN	A	Y	N		
		CSP016	38D CRYSTAL LN	A	Y	N		
		CSP017	41A CRYSTAL LN	A	Y	N		
		CSP018	41C CRYSTAL LN	A	Y	N		
		CSP020	45A CRYSTAL LN	A	Y	N		
		CSP021	45B CRYSTAL LN	A	Y	N		
		CSP022	45C CRYSTAL LN	A	Y	N		
		CSP023	45D CRYSTAL LN	A	Y	N		
		CSP024	50A CRYSTAL LN	A	Y	N		
		CSP025	50B CRYSTAL LN	A	Y	N		
		CSP026	50D CRYSTAL LN	A	Y	N		
		CSP027	52A CRYSTAL LN	A	Y	N		
		CSP028	52B CRYSTAL LN	A	Y	N		
		CSP029	52C CRYSTAL LN	A	Y	N		
		CSP030	52D CRYSTAL LN	A	Y	N		
		CSP031	58A CRYSTAL LN	A	Y	N		
		CSP032	58B CRYSTAL LN	A	Y	N		
		CSP033	58C CRYSTAL LN	A	Y	N		
		CSP034	60A CRYSTAL LN	A	Y	N		
		CSP035	60B CRYSTAL	A	Y	N		
		CSP036	64A CRYSTAL LN	A	Y	N		
		CSP037	64C CRYSTAL LN	A	Y	N		
		CSP038	64D CRYSTAL LN	A	Y	N		
		CSP039	37D CRYSTAL LN	A	Y	N		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
237	WELL 2	2	WELL 2	A				
44909	ATMOSPHERIC TANK							
44911	PRESSURE TANKS							
52635	PUMP STATION							
53185	WELL 3	2	WELL 3	A				

### Certified Operator Information

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

**Facility Classification:** SMALL WATER SYSTEM

<b>Operator Name</b>	<b>Operator Type</b>	<b>Certification(s)</b>	<b>Certification Expiration</b>
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*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		
<b>CT0787011</b>	<b>CTWC - CRYSTAL SPRINGS DIV.</b>	<b>C</b>	<b>169</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			38	1			

Towns Served: MANSFIELD

## Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
CONNORS, JAMES	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2021
LEPINE, TODD	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	3/31/2020

## Contact Information

Name		Organization			Job Title		
<b>Mr. Craig J. Patla</b>		Connecticut Water Company			Vp, Service Delivery		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
93 West Main Street					Clinton	CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-664-6140				800-391-1924	cpatla@ctwater.com		

Contact Role(s): **Legal Contact**

Name		Organization			Job Title		
<b>Mr. David Connors</b>		Connecticut Water Company			Director, Service De		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
93 West Main St					Clinton	CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-664-6141				860-227-4902	dconnors@ctwater.com		

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.
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		
<b>CT0787091</b>	<b>CTWC - UCONN DEPOT DIV.</b>	C	153	P	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
DEPOT RD			7	5			
Towns Served: MANSFIELD							

## Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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 - 12/31/27		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per month</b>		
<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		
<b>Lead And Copper (PBCU)</b>	<b>1 routine (RT) per three years</b>		
<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		
	1/1/21 - 12/31/23		
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per month</b>		
<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		

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION SURVEY REPORT	3/1/2020	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

*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		
<b>CT0787091</b>	<b>CTWC - UCONN DEPOT DIV.</b>	<b>C</b>	<b>153</b>	<b>P</b>	<b>SWP</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
DEPOT RD		7	5				
Towns Served: MANSFIELD							

## 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	DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UD001	50 DEPOT RD	A	Y	N		
		UD002	85 DEPOT RD	A	Y	N	Y	
		UD003	37 OLD COLONY RD	A	Y	3		
		UD004	38 OLD COLONY RD	A	Y	3		
		UD005	1208 STAFFORD RD	A	Y	N		
		UD006	1250 STAFFORD RD	A	Y	3		
		UD007	1254 STAFFORD RD	A	Y	3		
		UD008	1279 STAFFORD RD	A	Y	N		
		UD009	1281 STAFFORD RD	A	Y	3		
		UD010	1289 STAFFORD RD	A	Y	3		
		UD011	1308 STAFFORD RD	A	Y	3		
		UD012	1340 STAFFORD RD	A	Y	N		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
		XX4XX	DISTRIBUTION SYSTEM	I	Y			
60990	INTERCONNECTION - CT0780021 - UCONN-MAIN							

## Contact Information

Name		Organization			Job Title			
<b>Mr. Craig J. Patla</b>		Connecticut Water Company			Vp, Service Delivery			
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
93 West Main Street						Clinton	CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-664-6140				800-391-1924	cpatla@ctwater.com			

Contact Role(s): <b>Legal Contact, Owner</b>								
Name		Organization			Job Title			
<b>Mr. David Connors</b>		Connecticut Water Company			Director, Service De			
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
93 West Main St						Clinton	CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-664-6141				860-227-4902	dconnors@ctwater.com			

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.
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		
<b>CT0787101</b>	<b>CTWC - UCONN HUNTING LODGE DIV.</b>	C	234	P	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
HUNTING LODGE RD			46	22			
Towns Served: MANSFIELD							

## Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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 - 12/31/27		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per month</b>		
<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		
<b>Lead And Copper (PBCU)</b>	<b>1 routine (RT) per three years</b>		
<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		
	1/1/21 - 12/31/23		
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per month</b>		
<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		

## Other Compliance Schedules

<b>Compliance Schedule Activity</b>	<b>Due Date</b>	<b>Achieved Date</b>
CROSS CONNECTION SURVEY REPORT	3/1/2020	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

*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		
<b>CT0787101</b>	<b>CTWC - UCONN HUNTING LODGE DIV.</b>	C	234	P	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
HUNTING LODGE RD			46	22			
Towns Served: MANSFIELD							

### 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	DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UHL001	11 HUNTING LODGE RD	A	Y	3		
		UHL002	15 HUNTING LODGE RD	A	Y	3	Y	
		UHL003	16 HUNTING LODGE RD	A	Y	3		
		UHL004	22 HUNTING LODGE RD	A	Y	3		
		UHL005	23 HUNTING LODGE RD	A	Y	3		
		UHL006	27 HUNTING LODGE RD	A	Y	3		
		UHL007	28 HUNTING LODGE RD	A	Y	3		
		UHL008	34 HUNTING LODGE RD	A	Y	3		
		UHL009	43 HUNTING LODGE RD	A	Y	3		
		UHL010	57 HUNTING LODGE RD	A	Y	N		
		UHL011	80 HUNTING LODGE RD	A	Y	3		
		UHL012	81 HUNTING LODGE RD	A	Y	3		
		UHL013	87 HUNTING LODGE RD	A	Y	3		
		UHL014	97 HUNTING LODGE RD	A	Y	3		
		UHL015	101 HUNTING LODGE RD	A	Y	3		
		UHL016	105 HUNTING LODGE RD	A	Y	3		
		UHL017	109 HUNTING LODGE RD	A	Y	3		
		UHL018	115 HUNTING LODGE RD	A	Y	3		
		UHL019	122 HUNTING LODGE RD	A	Y	3		
		UHL020	125 HUNTING LODGE RD	A	Y	3		
		UHL021	131 HUNTING LODGE RD	A	Y	3		
		UHL022	132 HUNTING LODGE RD	A	Y	3		
		UHL023	134 HUNTING LODGE RD	A	Y	3		
		UHL024	135 HUNTING LODGE RD	A	Y	3		
		UHL025	146 HUNTING LODGE RD	A	Y	N		
		UHL026	153 HUNTING LODGE RD	A	Y	3		
		UHL027	156 HUNTING LODGE RD	A	Y	3		
		UHL028	180 HUNTING LODGE RD	A	Y	3		
		UHL029	240 HUNTING LODGE RD	A	Y	N		
		UHL030	10 MEADOWOOD RD	A	Y	N		
		UHL031	11 MEADOWOOD RD	A	Y	3		
		UHL032	21 MEADOWOOD RD	A	Y	3		
		UHL033	28 MEADOWOOD RD	A	Y	3		
		UHL034	CTWC - UCONN HUNT L	A	Y			
		UHL035	188 N EAGLEVILLE RD	A	Y	3		
		UHL036	194 N EAGLEVILLE RD	A	Y	3		
		UHL037	197 N EAGLEVILLE RD	A	Y	N		
		UHL038	202 N EAGLEVILLE RD	A	Y	N		

*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		
<b>CT0787101</b>	<b>CTWC - UCONN HUNTING LODGE DIV.</b>	<b>C</b>	<b>234</b>	<b>P</b>	<b>SWP</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
HUNTING LODGE RD			46	22			
Towns Served: MANSFIELD							

## 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
		UHL039	203 N EAGLEVILLE RD	A	Y	N		
		UHL040	204 N EAGLEVILLE RD	A	Y	3		
		UHL041	207 N EAGLEVILLE RD	A	Y	N		
		UHL042	208 N EAGLEVILLE RD	A	Y	3		
		UHL043	213 N EAGLEVILLE RD	A	Y	3		
		UHL044	219 N EAGLEVILLE RD	A	Y	N		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
		XX4XX	DISTRIBUTION SYSTEM	I	Y			

60993 INTERCONNECTION -  
CT0780021 - UCONN-MAIN

## Contact Information

Name			Organization			Job Title			
<b>Mr. Craig J. Patla</b>			Connecticut Water Company			Vp, Service Delivery			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
93 West Main Street						Clinton		CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-664-6140				800-391-1924	cpatla@ctwater.com				

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

Name			Organization			Job Title			
<b>Mr. David Connors</b>			Connecticut Water Company			Director, Service De			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
93 West Main St						Clinton		CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-664-6141				860-227-4902	dconnors@ctwater.com				

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.
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		
CT0787111	CTWC - UCONN SOUTH EAGLEVILLE DIV.	C	750	P	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
SOUTH EAGLEVILLE RD			125	72			
Towns Served: MANSFIELD							

## Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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 - 12/31/27		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per month</b>		
<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		
<b>Lead And Copper (PBCU)</b>	<b>1 routine (RT) per three years</b>		
<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		
	1/1/21 - 12/31/23		
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per month</b>		
<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		

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION SURVEY REPORT	3/1/2020	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

*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		
<b>CT0787111</b>	<b>CTWC - UCONN SOUTH EAGLEVILLE DIV.</b>	C	750	P	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
SOUTH EAGLEVILLE RD			125	72			
Towns Served: MANSFIELD							

### 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	DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
		USE001	11 DOG LN	A	Y			
		USE002	48 DOG LN	A	Y	3	Y	
		USE003	56 DOG LN	A	Y			
		USE004	1 DOG LN UNIT 101	A	Y			
		USE005	1 DOG LN UNIT 102	A	Y			
		USE006	1 DOG LN UNIT 103	A	Y			
		USE007	1 DOG LN UNIT 104	A	Y			
		USE008	1 DOG LN UNIT 105	A	Y			
		USE009	1 DOG LN UNIT 106	A	Y			
		USE010	1 DOG LN UNIT 107	A	Y			
		USE011	1 DOG LN UNIT 108	A	Y			
		USE012	9 DOG LN UNIT 101	A	Y			
		USE013	9 DOG LN UNIT 108	A	Y			
		USE014	9 DOG LN UNIT 109	A	Y			
		USE015	9 DOG LN UNIT 110	A	Y			
		USE016	9 DOG LN UNIT 111	A	Y			
		USE017	1 EASTWOOD RD	A	Y		N	
		USE018	2 EASTWOOD RD	A	Y		3	
		USE019	3 EASTWOOD RD	A	Y		3	
		USE020	4 EASTWOOD RD	A	Y		3	
		USE021	5 EASTWOOD RD	A	Y		N	
		USE022	6 EASTWOOD RD	A	Y		3	
		USE023	7 EASTWOOD RD	A	Y		3	
		USE024	8 EASTWOOD RD	A	Y		3	
		USE025	9 EASTWOOD RD	A	Y		3	
		USE026	10 EASTWOOD RD	A	Y		N	
		USE027	11 EASTWOOD RD	A	Y		3	
		USE028	12 EASTWOOD RD	A	Y		3	
		USE029	13 EASTWOOD RD	A	Y		3	
		USE030	14 EASTWOOD RD	A	Y		3	
		USE031	15 EASTWOOD RD	A	Y		3	
		USE032	16 EASTWOOD RD	A	Y		3	
		USE033	17 EASTWOOD RD	A	Y		3	
		USE034	18 EASTWOOD RD	A	Y		3	
		USE035	19 EASTWOOD RD	A	Y		3	
		USE036	20 EASTWOOD RD	A	Y		3	
		USE037	22 EASTWOOD RD	A	Y		3	

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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		
<b>CT0787111</b>	<b>CTWC - UCONN SOUTH EAGLEVILLE DIV.</b>	C	750	P	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
SOUTH EAGLEVILLE RD			125	72			
Towns Served: MANSFIELD							

### 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
		USE038	3 HILLSIDE CIR	A	Y	3		
		USE039	5 HILLSIDE CIR	A	Y	N		
		USE040	6 HILLSIDE CIR	A	Y	3		
		USE041	7 HILLSIDE CIR	A	Y	3		
		USE042	8 HILLSIDE CIR	A	Y	3		
		USE043	9 HILLSIDE CIR	A	Y	3		
		USE044	10 HILLSIDE CIR	A	Y	3		
		USE045	15 HILLSIDE CIR	A	Y	3		
		USE046	17 HILLSIDE CIR	A	Y	3		
		USE047	18 HILLSIDE CIR	A	Y	3		
		USE048	19 HILLSIDE CIR	A	Y	3		
		USE049	20 HILLSIDE CIR	A	Y	3		
		USE050	21 HILLSIDE CIR	A	Y	3		
		USE051	22 HILLSIDE CIR	A	Y	3		
		USE052	23 HILLSIDE CIR	A	Y	3		
		USE053	25 HILLSIDE CIR	A	Y	3		
		USE054	1 ROYCE CIRCLE UNIT	A	Y			
		USE055	1 ROYCE CIRCLE UNIT	A	Y			
		USE056	1 ROYCE CIRCLE UNIT	A	Y			
		USE057	1 ROYCE CIRCLE UNIT	A	Y			
		USE058	1 ROYCE CIRCLE UNIT	A	Y			
		USE059	1 ROYCE CIRCLE UNIT	A	Y			
		USE060	1 ROYCE CIRCLE UNIT	A	Y			
		USE061	1 ROYCE CIRCLE UNIT	A	Y			
		USE062	1 ROYCE CIRCLE UNIT	A	Y			
		USE063	1 ROYCE CIRCLE UNIT	A	Y			
		USE064	8 ROYCE CIRCLE UNIT	A	Y			
		USE065	8 ROYCE CIRCLE UNIT	A	Y			
		USE066	10 S EGLVLE COMM CTR	A	Y			
		USE067	1 SHERWOOD ST 1D	A	Y	N		
		USE068	3 SHERWOOD ST 1C	A	Y	N		
		USE069	5 SHERWOOD ST 1B	A	Y	N		
		USE070	7 SHERWOOD ST 1A	A	Y	N		
		USE071	8 SHERWD ST BLDG 5 1	A	Y	N		
		USE072	8 SHERWD ST BLDG 5 1	A	Y	N		
		USE073	8 SHERWD ST BLDG 5 1	A	Y	N		
		USE074	8 SHERWD ST BLDG 5 1	A	Y	N		
		USE075	8 SHERWD ST BLDG 5 2	A	Y	N		
		USE076	8 SHERWD ST BLDG 5 2	A	Y	N		

*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		
<b>CT0787111</b>	<b>CTWC - UCONN SOUTH EAGLEVILLE DIV.</b>	C	750	P	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
SOUTH EAGLEVILLE RD			125	72			
Towns Served: MANSFIELD							

### 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
		USE077	8 SHERWD ST BLDG 5 2	A	Y	N		
		USE078	8 SHERWD ST BLDG 5 2	A	Y	N		
		USE079	8 SHERWD ST BLDG 5 3	A	Y	N		
		USE080	8 SHERWD ST BLDG 5 3	A	Y	N		
		USE081	9 SHERWOOD ST 2D	A	Y	N		
		USE082	10 SHERWOOD ST 6D	A	Y	N		
		USE083	11 SHERWOOD ST 2C	A	Y	N		
		USE084	12 SHERWOOD ST 6C	A	Y	N		
		USE085	13 SHERWOOD ST 2B	A	Y	N		
		USE086	14 SHERWOOD ST 6B	A	Y	N		
		USE087	15 SHERWOOD ST 2A	A	Y	N		
		USE088	16 SHERWOOD ST 6A	A	Y	N		
		USE089	17 SHERWOOD ST 3D	A	Y	N		
		USE090	18 SHERWOOD ST 9A	A	Y	N		
		USE091	19 SHERWOOD ST 3C	A	Y	N		
		USE092	20 SHERWOOD ST 9B	A	Y	N		
		USE093	21 SHERWOOD ST BLDG	A	Y	N		
		USE094	22 SHERWOOD ST 9C	A	Y	N		
		USE095	23 SHERWOOD ST 3A	A	Y	N		
		USE096	24 SHERWOOD ST 9D	A	Y	N		
		USE097	25 SHERWOOD ST 4D	A	Y	N		
		USE098	27 SHERWOOD ST BLDG	A	Y	N		
		USE099	29 SHERWOOD ST 4B	A	Y	N		
		USE100	31 SHERWOOD ST BLDG	A	Y	N		
		USE101	35 SHERWOOD ST BLDG	A	Y	N		
		USE102	37 SHERWOOD ST 7C	A	Y	N		
		USE103	39 SHERWOOD ST BLDG	A	Y	N		
		USE104	41 SHERWOOD ST 7A	A	Y	N		
		USE105	43 SHERWOOD ST BLDG	A	Y	N		
		USE106	45 SHERWOOD ST BLDG	A		N		
		USE107	47 SHERWOOD ST BLDG	A	Y	N		
		USE108	49 SHERWOOD ST BLDG	A	Y	N		
		USE109	1220 STORRS RD	A	Y			
		USE110	1266 STORRS RD	A	Y			
		USE111	1206 STORRS RD A	A	Y			
		USE112	1206 STORRS RD B	A	Y			
		USE113	1206 STORRS RD C	A	Y			
		USE114	1 WESTWOOD RD	A	Y	N		
		USE115	2 WESTWOOD RD	A	Y	N		

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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		
<b>CT0787111</b>	<b>CTWC - UCONN SOUTH EAGLEVILLE DIV.</b>	C	750	P	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
SOUTH EAGLEVILLE RD			125	72			
Towns Served: MANSFIELD							

### 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
		USE116	4 WESTWOOD RD	A	Y	N		
		USE117	5 WESTWOOD RD	A	Y	N		
		USE118	6 WESTWOOD RD	A	Y	N		
		USE119	7 WESTWOOD RD	A	Y	N		
		USE120	8 WESTWOOD RD	A	Y	N		
		USE121	9 WESTWOOD RD	A	Y	N		
		USE122	10 WESTWOOD RD	A	Y	N		
		USE123	11 WESTWOOD RD	A	Y	N		
		USE124	12 WESTWOOD RD	A	Y	N		
		USE125	13 WESTWOOD RD	A	Y	N		
		USE126	14 WESTWOOD RD	A	Y	N		
		USE127	15 WESTWOOD RD	A	Y	N		
		USE128	16 WESTWOOD RD	A	Y	N		
		USE129	17 WESTWOOD RD	A	Y	N		
		USE130	18 WESTWOOD RD	A	Y	N		
		USE131	19 WESTWOOD RD	A	Y	N		
		USE132	23 WESTWOOD RD	A	Y	N		
		USE133	28 WILBUR CROSS WAY	A	Y			
		USE134	33 WILBUR CROSS WAY	A	Y			
		USE135	33 WILBUR CROSS WAY	A	Y			
		USE136	33 WILBUR CROSS WAY	A	Y			
		USE137	33 WILBUR CROSS WAY	A	Y			
		USE138	33 WILBUR CROSS WAY	A	Y			
		USE139	34 WILBUR CROSS WAY	A	Y			
		USE140	34 WILBUR CROSS WAY	A	Y			
		USE141	34 WILBUR CROSS WAY	A	Y			
		USE142	40 WILBUR CROSS WAY	A	Y			
		USE143	40 WILBUR CROSS WAY	A	Y			
		USE144	40 WILBUR CROSS WAY	A	Y			
		USE145	40 WILBUR CROSS WAY	A	Y			
		XX4XX	DISTRIBUTION SYSTEM	I	Y			

60996 INTERCONNECTION -  
CT0780021 - UCONN-MAIN

### Contact Information

Name		Organization			Job Title		
<b>Mr. Craig J. Patla</b>		Connecticut Water Company			Vp, Service Delivery		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
93 West Main Street					Clinton	CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		

*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			
<b>CT0787111</b>	<b>CTWC - UCONN SOUTH EAGLEVILLE DIV.</b>	<b>C</b>	<b>750</b>	<b>P</b>	<b>SWP</b>			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
SOUTH EAGLEVILLE RD			125	72				
Towns Served: MANSFIELD								
860-664-6140		800-391-1924		cpatla@ctwater.com				
Contact Role(s): <b>Legal Contact, Owner</b>								
Name			Organization			Job Title		
<b>Mr. David Connors</b>			Connecticut Water Company			Director, Service De		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
93 West Main St						Clinton	CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-664-6141				860-227-4902	dconnors@ctwater.com			
Contact Role(s): <b>Administrative Contact</b>								
<b>Please note the following:</b>								
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		
<b>CT0787121</b>	<b>CTWC - UCONN WILLOWBROOK DIV.</b>	C	134	P	SWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
WILLOWBROOK RD			21				

Towns Served: MANSFIELD

## Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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 - 12/31/27		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per month</b>		
<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		
<b>Lead And Copper (PBCU)</b>	<b>1 routine (RT) per three years</b>		
<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		
	1/1/21 - 12/31/23		
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per month</b>		
<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		

## Other Compliance Schedules

<b>Compliance Schedule Activity</b>	<b>Due Date</b>	<b>Achieved Date</b>
CROSS CONNECTION SURVEY REPORT	3/1/2020	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

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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		
<b>CT0787121</b>	<b>CTWC - UCONN WILLOWBROOK DIV.</b>	<b>C</b>	<b>134</b>	<b>P</b>	<b>SWP</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
WILLOWBROOK RD			21				

Towns Served: MANSFIELD

## 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	DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
		UWB001	88 GURLYVILLE RD	A	Y	N		
		UWB002	19 OAK HILL RD	A	Y	3	Y	
		UWB003	28 OAK HILL RD	A	Y	3		
		UWB004	32 OAK HILL RD	A	Y	3		
		UWB005	33 OAK HILL RD	A	Y	3		
		UWB006	24 WILLOWBROOK RD	A	Y	3		
		UWB007	25 WILLOWBROOK RD	A	Y	3		
		UWB008	28 WILLOWBROOK RD	A	Y	3		
		UWB009	31 WILLOWBROOK RD	A	Y	3		
		UWB010	34 WILLOWBROOK RD	A	Y	3		
		UWB011	39 WILLOWBROOK RD	A	Y	3		
		UWB012	47 WILLOWBROOK RD	A	Y	3		
		UWB013	52 WILLOWBROOK RD	A	Y	3		
		UWB014	57 WILLOWBROOK RD	A	Y	3		
		UWB015	58 WILLOWBROOK RD	A	Y	3		
		UWB016	64 WILLOWBROOK RD	A	Y	3		
		UWB017	67 WILLOWBROOK RD	A	Y	3		
		UWB018	75 WILLOWBROOK RD	A	Y	3		
		UWB019	76 WILLOWBROOK RD	A	Y	3		
		UWB020	82 WILLOWBROOK RD	A	Y	3		
		UWB021	85 WILLOWBROOK RD	A	Y	3		
		XX4XX	DISTRIBUTION SYSTEM	I	Y			

60999 INTERCONNECTION -  
CT0780021 - UCONN-MAIN

## Contact Information

Name		Organization			Job Title		
<b>Mr. Craig J. Patla</b>		Connecticut Water Company			Vp, Service Delivery		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
93 West Main Street					Clinton	CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-664-6140				800-391-1924	cpatla@ctwater.com		
Contact Role(s): <b>Legal Contact, Owner</b>							

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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			
<b>CT0787121</b>	<b>CTWC - UCONN WILLOWBROOK DIV.</b>	<b>C</b>	<b>134</b>	<b>P</b>	<b>SWP</b>			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
WILLOWBROOK RD			21					
Towns Served: MANSFIELD								
Name			Organization			Job Title		
<b>Mr. David Connors</b>			Connecticut Water Company			Director, Service De		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
93 West Main St						Clinton	CT	06413
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-664-6141				860-227-4902	dconnors@ctwater.com			

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.
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.

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**End of schedule**

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