Connecticut Department of Public		•	_	
Water Quality Monitoring ar	nd Com	pliance	Schedul	e
PWS ID PWS Name	(	Classification	Population	Owner Type Primary Source
CT0820031 MIDDLEFIELD HOUSING AUTHORITY		С	62	L GW
Local Address (where applicable) Service	Residenti	al Commerc	ial Industria	al Combined Agricultural
1 SUGARLOAF TERRACE Connections	S 31			
Towns Served: MIDDLEFIELD				
Monitoring Req	uiremen	its		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)				
Asbestos (1094)			1 ro	utine (RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring	g Period (	Collection Per	riod Compliance Status
Select from Inventory of Active Sampling Points	1/1/13 - 12	2/31/21		
Total Coliform (3100)			1	routine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitorin	g Period (	Collection Per	riod Compliance Status
Select from Inventory of Active Sampling Points	7/1/19 - 9	9/30/19		Complete
	10/1/19 - 1	12/31/19		Complete
	1/1/20 - 3			
	4/1/20 - 6			
	7/1/20 - 9	9/30/20		
Lead And Copper (PBCU)				tine (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring		Collection Per	riod Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 1		6/1-9/30	
	1/1/21 - 1	2/31/23	6/1-9/30	
Physical Parameters (PPS)				routine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring		Collection Per	•
Select from Inventory of Active Sampling Points	7/1/19 - 9			Complete
	10/1/19 - 1			Complete
	1/1/20 - 3			
	4/1/20 - 6			
Maria Carla Salita ENTRY ROBET (MCE ID 00700)	7/1/20 - 9	9/30/20		
Water System Facility: ENTRY POINT (WSF ID: 00700)				
Net Gross Alpha (4000)				tine (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring		Collection Per	
ENTRY POINT (3)	1/1/17 - 12			Complete
	1/1/20 - 12			
Liversium (400C)	1/1/23 - 12	2/31/25	1	tine (DT) was there was
Uranium (4006) Sampling Point (Sampling Point ID)	Monitorin	a Pariod (	rou Collection Per	tine (RT) per three years iod Compliance Status
ENTRY POINT (3)	1/1/17 - 12		onection Per	Complete
ENTRY FORM (3)	1/1/20 - 12			Complete
	1/1/23 - 12			
Combined Radium-226/228 (4010)	1, 1, 2, 3	_, 5 ±, 25	1 rou	tine (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring	g Period (	Collection Per	
ENTRY POINT (3)	1/1/17 - 12			Complete
<u> </u>	1/1/20 - 12			11 11.000
	1/1/23 - 12			
Inorganic Chemicals (IOCS)	, , -		1 rou	tine (RT) per three years
Sampling Point (Sampling Point ID)	Monitorin	g Period (	Collection Per	
ENTRY POINT (3)	1/1/17 - 12			Complete

Connecticut Dep						ction
Water Qu	ality Monit	coring and Comp	olianc	e Sche	edule	
PWS ID PWS Name		С	lassificati	on Popu	ation Own	er Type Primary Source
CT0820031 MIDDLEFIELD HOUSING AL	JTHORITY		С	6		L GW
Local Address (where applicable)		Service Residentia	al Comm	ercial In	dustrial	Combined Agricultural
1 SUGARLOAF TERRACE		Connections 31				
Towns Served: MIDDLEFIELD						
Water System Facility: ENTRY POINT (		oring Requirement	ts			
	(W3F ID. 00700)				1 routino	(PT) por three years
Inorganic Chemicals (IOCS)  Sampling Point (Sampling Point ID)		Monitoring	n Derind	Collecti	on Period	(RT) per three years  Compliance Status
Sumpling Form (Sumpling Form 12)		1/1/20 - 12		Conecti	on renou	compliance status
		1/1/23 - 12				
Nitrate And Nitrite (NOX)		_, _,	-, -, -,		1	routine (RT) per year
Sampling Point (Sampling Point ID)		Monitoring	g Period	Collecti	on Period	Compliance Status
ENTRY POINT (3)		1/1/19 - 12				Complete
		1/1/20 - 12	2/31/20			
		1/1/21 - 12	2/31/21			
Pesticides, Herbicides and PCBs - Phase	e II & V (SOCS)				1 routine	(RT) per three years
Sampling Point (Sampling Point ID)		Monitoring	g Period	Collecti	on Period	Compliance Status
ENTRY POINT (3)		1/1/17 - 12				Complete
		1/1/20 - 12				
		1/1/23 - 12	2/31/25			
Organic Chemicals (VOCS)				- 4		(RT) per three years
Sampling Point (Sampling Point ID)		Monitoring		Collecti	on Period	Compliance Status
ENTRY POINT (3)		1/1/18 - 12	<u> </u>			
		1/1/21 - 12				
	Other C	ompliance Schedu	les			
Compliance Schedule Activity			ie Date		Achieved I	Date
DISTRIBUTION SYSTEM MATERIALS EVALUA	TION		31/2019			
SUBMIT CCR TO THE DEPARTMENT		·	30/2020			
SUBMIT CCR CERTIFICATION FORM			9/2020			
CROSS CONNECTION EXEMPTION			1/2024			
	System Facili	ity and Sampling P	oint Ir		•	
Water System Water System Facility	Sampling Point	Sampling Point		Total Coliform	Lead and Copper	Stage
Facility ID	ID	Description Description	Charters	Rule		Asbestos WQP 2 DBPR
00600 DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	Status A	Y		,
		WITHIN 5 SERVICE CON	A	•		
	MHA-01	C/R SINK	Α	Υ	3	
	MHA-02	C/R MENS ROOM SINK	Α		3	
	MHA-06	UNIT #10	Α	Υ		
	MHA-07	UNIT #14	Α	Υ	3	
	MHA-08	UNIT #19	Α	Υ		
	N411A 00	LINUT #20	۸	Υ		
	MHA-09	UNIT #20	Α	T		
	MHA-09 MHA-10	UNIT #24	A	Y		

**UNIT #31** 

**UNIT #36** 

MHA-12

MHA-13

Υ

Υ

Α

	Wa	ter Qua	lity Monit	coring a	nd Con	nplia	nce So	hedul	le	
PWS ID	PWS Name					Classifi	cation Po	pulation	Owner Type	Primary Source
СТ0820031	MIDDLEFIELD H	DUSING AUT	HORITY			C	:	62	L	GW
Local Address (w	here applicable)			Service	Residen	tial Co	mmercial	Industri	al Combine	d Agricultura
1 SUGARLOAF TE	RRACE			Connectio	ns 31					
Towns Served: N	MIDDLEFIELD									
		Water Sy	ystem Facil	ity and S	ampling	Point	Inven	tory		
Water							Tota	ıl Lead	and	
•	r System Facility	'	Sampling Point				_	rm Cop		Stage
Facility ID			ID	Description	1	Sta			Tier Asbestos	WQP 2 DBP
			MHA-14	UNIT #39		F	Y	3	<b>;</b>	
			UPSTREAM	WITHIN 5	SERVICE COI	N A	١			
00700 ENTR	Y POINT		3	ENTRY POI	NT	ļ	١			
430 WELL	#1		2	WELL #1		P	١			
50660 ATM	DSPHERIC TANK									
50662 BLAD	DER TANKS									
			Certified	Operato	r Inform	ation	١			
Water System	Facility: DISTR	IBUTION SY	STEM (WSF I	D: 00600)						
Facility Classifice	ation: SMALL WA	ATER SYSTEM	1							Certification
Operator Name			Operator Typ	е	Certification	on(s)				Expiration
SIMA, III, JOHN F	:		CHIEF OPERATO	OR	WATER TRE	ATMEN	T PLANT (	OPERATOI	R - CLASS II	9/30/2020
					DISTRIBUTI	ON SYS	TEM OPER	ATOR - CI	ASS I	6/30/2020
			Con	tact Info	rmation					
Name			0	rganization					Job Title	
Mr. Peter B. Sib	ley		Si	bley Proper	ty Managem	nent				
Mailing Address	Line One		Mailing Addres	s Line Two				City	State	Zip Code
61 Cedar Street							Rockfall		СТ	06481
Business Phon	e Extension	Fax	Mobi	ile Phone	Emergency	Phone	Email Ad	dress		
860-344-9933	}				860-712-	3020	middlefie	eldhousing	gauthority@co	mcast.net
Contact Role(s):	Administrative	Contact, Leg	al Contact							
Name			0	rganization					Job Title	
Middlefield Hou	sing Authority									
Mailing Address	Line One		Mailing Addres	s Line Two				City	State	Zip Code
61 Cedar Street			1 Sugar Loaf Te	errace			Rockfall		СТ	06481
<b>Business Phon</b>	e Extension	Fax	Mobi	ile Phone	Emergency	Phone	Email Ad	dress		
860-349-0168	<b>3</b>									
Contact Role(s):	Owner									
Please note the	following:									
L. The residual d	isinfectant concen	tration must b	e measured at the	e same locati	on and time a	is each to	otal colifori	m sample.		

Connecticut Department of Public Health Drinking Water Section

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

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 a Collection Period is specified, all water quality samples must be collected during the specified period.

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

End of schedule

	Connecticut Department of	f Public H	<b>lealth</b>	ı Di	rinking	g Water	Sec	ction	
	Water Quality Monit	coring an	d Con	npl	iance	Schedul	e		
PWS ID	PWS Name			Clas	ssification	Population	Owne	er Type Pr	imary Source
СТ0820501	OLD INDIAN TRAIL				С	32		L	GW
Local Address (v	where applicable)	Service	Residen	ntial	Commerc	ial Industria	al C	ombined	Agricultural
		Connections	8						
Towns Served:	DURHAM, MIDDLEFIELD								
	Monit	oring Requ	uireme	nts	•				
Water System	Facility: DISTRIBUTION SYSTEM (WSF I	D: 00600)							
Asbestos (10	94)					1 ro	utine	(RT) per	nine years
Sampling I	Point (Sampling Point ID)		Monitor	ing P	Period C	Collection Per	riod	Compli	ance Status
Select fron	n Inventory of Active Sampling Points		1/1/14 -	12/3	31/22				
Total Coliforn	n (3100)					1	routi	ine (RT) <sub>ا</sub>	per quarter
Sampling I	Point (Sampling Point ID)		Monitor	ing P	Period C	Collection Per	riod	Compli	ance Status
Select fron	n Inventory of Active Sampling Points		7/1/19 -		-			Со	mplete
			10/1/19						mplete
			1/1/20		-			Со	mplete
			4/1/20		-				
			7/1/20	- 9/3	0/20				
Lead And Cop	• • •							· · ·	three years
	Point (Sampling Point ID)		Monitor			Collection Per	riod	Compli	ance Status
Select fron	n Inventory of Active Sampling Points		1/1/19 -		-	6/1-9/30			
	. ()		1/1/22 -	12/3	31/24	6/1-9/30			_
Physical Para									per quarter
	Point (Sampling Point ID)		Monitor			Collection Per	riod		ance Status
Select fron	n Inventory of Active Sampling Points		7/1/19						mplete
			10/1/19						mplete
			1/1/20					Co	mplete
			4/1/20		-				
Matar Custam	Facility FAITRY POINT (MCF ID: 00700)		7/1/20 -	- 9/3	0/20				
	Facility: ENTRY POINT (WSF ID: 00700)					1 401		(DT) man	hhuaa waana
Net Gross Alp	Point (Sampling Point ID)		Monitor	ina D	Period (	rou Collection Per		<b>-</b>	three years ance Status
ENTRY POI			1/1/17 -			onection Per	100		mplete
LIVITATION	(V)		1/1/20 -					CO	inpiete
			1/1/23 -						
Uranium (40	06)		-, -, 25	/-	-, -,	1 rou	ıtine l	(RT) ner t	three years
•	Point (Sampling Point ID)		Monitor	ina P	Period (	Collection Per			ance Status
ENTRY POI			1/1/17 -						mplete
	, ,		1/1/20 -						l: - 12
			1/1/23 -						
Combined Ra	dium-226/228 (4010)			, -	•	1 rou	itine (	(RT) per f	three years
	Point (Sampling Point ID)		Monitor	ing P	Period C	Collection Per		· · ·	ance Status
ENTRY POI			1/1/17 -						mplete
			1/1/20 -						•
			1/1/23 -		-				
									_

**Monitoring Period** 

1/1/17 - 12/31/19

Schedule Generation Date: 3/10/2020

**ENTRY POINT (3)** 

**Gross Beta Particle Activity (4100)** 

Sampling Point (Sampling Point ID)

1 routine (RT) per three years

**Compliance Status** 

Complete

**Collection Period** 

Connecticut Departmen	t of Public H	lealth	Dr	inkin	g W	/ater	S	ection	
Water Quality Mo	nitoring an	d Con	ıpl	iance	Sch	nedul	e		
PWS ID PWS Name								ner Type Pr	imary Source
CT0820501 OLD INDIAN TRAIL				С		32		L	GW
Local Address (where applicable)	Service	Residen	tial	Commerc	cial	Industri	al	Combined	Agricultural
	Connections	8							
Towns Served: DURHAM, MIDDLEFIELD									
Mo	nitoring Requ	iireme	nts						
Water System Facility: ENTRY POINT (WSF ID: 00	700)								
Gross Beta Particle Activity (4100)						1 rou	ıtin	e (RT) per t	hree years
Sampling Point (Sampling Point ID)		Monitori	ng P	eriod (	Collec	ction Pe			ance Status
		1/1/20 -	12/3	1/22					
		1/1/23 -	12/3	1/25					
Man-Made Beta Particle & Photon Emitters (410)	1)					1 rou	ıtin	e (RT) per t	hree years
Sampling Point (Sampling Point ID)		Monitori	ng P	eriod (	Collec	ction Pe	rioa	l Complic	ance Status
ENTRY POINT (3)		1/1/17 -	12/3	1/19				Cor	mplete
		1/1/20 -	12/3	1/22					
		1/1/23 -	12/3	1/25					
Tritium (4102)						1 rou	ıtin	e (RT) per t	hree years
Sampling Point (Sampling Point ID)		Monitori	ng P	eriod (	Collec	ction Pe	rioa	l Complic	ance Status
ENTRY POINT (3)		1/1/17 -	12/3	1/19				Cor	mplete
		1/1/20 -	12/3	1/22					
		1/1/23 -	12/3	1/25					
Strontium-90 (4174)						1 rou	ıtin	e (RT) per t	hree years
Sampling Point (Sampling Point ID)		Monitori	ng P	eriod (	Collec	ction Pe	rioa	l Complic	ance Status
ENTRY POINT (3)		1/1/17 -	12/3	1/19				Cor	mplete
		1/1/20 -		•					
		1/1/23 -	12/3	1/25					
Inorganic Chemicals (IOCS)						1 rou	ıtin	e (RT) per t	hree years
Sampling Point (Sampling Point ID)		Monitori	ng P	eriod (	Collec	ction Pe	rioa	Complia	ance Status
ENTRY POINT (3)		1/1/17 -						Cor	mplete
		1/1/20 -	12/3	1/22					
		1/1/23 -	12/3	1/25					
Nitrate And Nitrite (NOX)								routine (R	
Sampling Point (Sampling Point ID)		Monitori			Collec	ction Pe	rioa		ance Status
ENTRY POINT (3)		1/1/19 -						Cor	mplete
	_	1/1/20 -							
		1/1/21 -	12/3	1/21					
Pesticides, Herbicides and PCBs - Phase II & V (SC	<del>-</del>		_					e (RT) per t	-
Sampling Point (Sampling Point ID)		Monitori			Collec	ction Pe	rioa		ance Status
ENTRY POINT (3)		1/1/17 -		•				Cor	mplete
		1/1/20 -		•					
Organia Chamicala (VOCS)		1/1/23 -	12/3	1/25				a /DT\ max+	

**Monitoring Period** 

1/1/17 - 12/31/19

1/1/20 - 12/31/22 1/1/23 - 12/31/25 1 routine (RT) per three years

**Compliance Status** 

Complete

**Collection Period** 

**Organic Chemicals (VOCS)** 

**ENTRY POINT (3)** 

Sampling Point (Sampling Point ID)

#### Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule PWS ID PWS Name Classification | Population | Owner Type | Primary Source CT0820501 **OLD INDIAN TRAIL** 32 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections Q Towns Served: DURHAM, MIDDLEFIELD **Other Compliance Schedules Due Date Compliance Schedule Activity Achieved Date** SUBMIT LEAD CONSUMER NOTICE CERTIFICATE 12/29/2012 SUBMIT CCR TO THE DEPARTMENT 6/30/2019 SUBMIT CCR CERTIFICATION FORM 8/9/2019 DISTRIBUTION SYSTEM MATERIALS EVALUATION 8/31/2019 SUBMIT CCR TO THE DEPARTMENT 6/30/2020 SUBMIT CCR CERTIFICATION FORM 8/9/2020 CROSS CONNECTION EXEMPTION 3/1/2021 **Water System Facility and Sampling Point Inventory** Lead and Water Sampling Point Sampling Point Water System Facility System Coliform Copper Staae Description ID Rule Tier Asbestos WQP 2 DBPR **Facility ID** Rule Status 00600 DISTRIBUTION SYSTEM **GENERIC DISTRIBUTION** Α DOWNSTREAM WITHIN 5 SERVICE CON Α OIT01 479 CHERRY HILL RD 3 Υ OIT02 499 CHERRY HILL RD Α ٧ Ν Υ OIT03 Α Υ Ν 498 CHERRY HILL RD OIT04 515 CHERRY HILL RD 3 OIT05 508 CHERRY HILL RD Ν Υ **OIT06** Α 3 518 CHERRY HILL RD OIT07 480 MIDDLEFIELD RD 3 Υ **OIT08** 199 MIDDLEFIELD RD 3 Δ **UPSTREAM** WITHIN 5 SERVICE CON Α 00700 **ENTRY POINT** 3 **ENTRY POINT** Α 1502 WELL#1 2 WELL#1 ATMOSPHERIC TANK 60250 **Certified Operator Information** Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Facility Classification: SMALL WATER SYSTEM **Certification Operator Name Operator Type** Certification(s) **Expiration CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS I** KING, THAD D. 12/31/2022 WATER TREATMENT PLANT OPERATOR - CLASS II 12/31/2022 **Contact Information** Name Organization Job Title Middlefield Mailing Address Line One Mailing Address Line Two State Zip Code City

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.

Mobile Phone

**Business Phone** 

Contact Role(s): Owner

Extension

Fax

**Emergency Phone Email Address** 

C	Joinnectic	ut Depa	II UIII	ent or	Public	пеани	עו.	1 111K111E	g vvater	sect	1011	
	Wa	ter Qua	lity I	Monit	oring a	nd Con	npl	liance S	Schedul	le		
PWS ID P	WS Name						Classification   F		Population	Owner	Type P	rimary Source
CT0820501 C	OLD INDIAN TRAIL							С	32	L		GW
Local Address (wh	ere applicable)				Service	Resider	ntial	Commerci	al Industri	al Cor	mbined	Agricultural
					Connection	ns 8						
Towns Served: DU	JRHAM, MIDDLE	FIELD							,			
Name				Or	ganization					Jol	b Title	
Mr. Edward P. Ba	iley			То	wn of Middl	lefield			First Selec	ctman		
Mailing Address L	ine One		Mailin	g Address	Line Two				City	S	tate	Zip Code
Land Use Office			405 M	ain Street	Suite 1			Middle	efield		CT	06455
Business Phone	Extension	Fax		Mobil	e Phone	Emergency	/ Pho	one Email A	Address	·		
860-349-7114		860-349-	7115			860-985	-079	0 ebailey	/@middlefie	ldct.org		
Contact Polo(c):	Administrativo	Contact Loc	ral Cant	tact Own	or							

Connecticut Department of Public Health Drinking Water Section

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 Departr	nent of	Public F	lealth	Drii	nkin	σΜ	7ater (	Section	า
	Water Quality						_			1
PWS ID	PWS Name	MOIIIC	or mg am			ication				Primary Source
CT0821001	REJA - RAINBOW SPRING WATER	COMPANY				C		11	P	GW
	where applicable)		Service	Resident				ndustrial	Combin	
	, ,		Connections	8						
Γowns Served:	MIDDLEFIELD		1		'				'	1
		Monito	ring Requ	iremer	nts					
Water System	Facility: DISTRIBUTION SYSTE	M (WSF II	D: 00600)							
Asbestos (10	94)							1 rou	tine (RT)	per nine years
	Point (Sampling Point ID)			Monitorir			Collec	tion Perio	od Con	npliance Status
	n Inventory of Active Sampling Poin	its		1/1/14 - 1	12/31/	22				
Total Coliforn									<del>-</del>	RT) per month
	Point (Sampling Point ID)			Monitorir			Collec	tion Perio	od Con	npliance Status
Select fror	n Inventory of Active Sampling Poin	its		10/1/19 -						Complete
				11/1/19 -						Complete
				12/1/19 -						Complete
				1/1/20 -						Complete Complete
				2/1/20 - 3/1/20 -						Complete
				4/1/20 -						Complete
				5/1/20 -						
				6/1/20 -						
				7/1/20 -						
				8/1/20 -						
				9/1/20 -	9/30/2	20				
Lead And Co	oper (PBCU)							5 routi	ine (RT) p	er three years
Sampling	Point (Sampling Point ID)			Monitorir	ng Peri	iod	Collec	tion Perio	od Con	npliance Status
Select fror	n Inventory of Active Sampling Poin	its		1/1/19 - 1	12/31/	21	6/	/1-9/30		
				1/1/22 - 1	12/31/	24	6/	/1-9/30		
•	meters (PPS)								<del>-</del>	RT) per month
	Point (Sampling Point ID)			Monitorin			Collec	tion Perio	od Con	npliance Status
Select fror	n Inventory of Active Sampling Poin	its		10/1/19 -						Complete
				11/1/19 -						Complete
				12/1/19 -						Complete
			_	1/1/20 - 2/1/20 -						Complete Complete
				3/1/20 -						Complete
				4/1/20 -						Complete
				5/1/20 -						
				6/1/20 -						
				7/1/20 -						
				8/1/20 -						
				9/1/20 -	9/30/2	20				
Water System	Facility: ENTRY POINT (WSF I	D: 00700)								

Sampling Point (Sampling Point ID)Monitoring PeriodCollection PeriodCompliance StatusENTRY POINT (3)1/1/17 - 12/31/19Complete1/1/20 - 12/31/22

1 routine (RT) per three years

Page 8

Net Gross Alpha (4000)

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

Schedule Generation Date: 3/10/2020

	Connecticut Department					_		ection	
	Water Quality Mon	itoring and	d Con	npli	iance	Sche	dule		
PWS ID	PWS Name			Clas	sification	Popula	ation Ov	vner Type I	Primary Source
CT0821001	REJA - RAINBOW SPRING WATER COMPAI	VY			С	11	L	Р	GW
Local Address	(where applicable)	Service Connections	Resider 8	ntial	Commerc	cial Ind	dustrial	Combined	d Agricultura
Towns Served	: MIDDLEFIELD								
	Moni	itoring Requ	ireme	nts					
•	m Facility: ENTRY POINT (WSF ID: 0070	0)							
	llpha (4000)						1 routir		three years
Sampling	g Point (Sampling Point ID)		Monitor			Collectio	on Period	d Comp	liance Status
			1/1/23 -	12/3	1/25				
Uranium (4	-								three years
	g Point (Sampling Point ID)		Monitor			Collectio	on Period		liance Status
ENTRY P	OINT (3)		1/1/17 -		·			С	omplete
			1/1/20 -						
Carrelain and F	2- di 226/220 /4040\		1/1/23 -	12/3.	1/25		4	- (DT)	. 41
	Radium-226/228 (4010) g Point (Sampling Point ID)		Monitor	ina D	eriod (		1 routir on Period		three years <i>liance Status</i>
ENTRY P			1/1/17 -			Conectio	JII FEIIOC		omplete
LIVIIII	Sitt (3)		1/1/20 -						ompiete
			-, -, 1/1/23 -		-				
Inorganic Cl	hemicals (IOCS)		<u>, , ,                                </u>	<u> </u>	•		1 routir	ne (RT) per	three years
_	g Point (Sampling Point ID)		Monitor	ing Pe	eriod (		on Period		liance Status
ENTRY P	OINT (3)		1/1/18 -	12/3	1/20			C	omplete
			1/1/21 -	12/3	1/23				
Nitrate And	Nitrite (NOX)						1	L routine (	RT) per year
Sampling	g Point (Sampling Point ID)		Monitor	ing Pe	eriod (	Collectio	on Period	d Comp	liance Status
ENTRY P	OINT (3)		1/1/19 -	12/3	1/19				omplete
			1/1/20 -					С	omplete
			1/1/21 -	12/3	1/21				
	Herbicides and PCBs - Phase II & V (SOCS	=							three years
	g Point (Sampling Point ID)		Monitor			Collectio	on Period		liance Status
ENTRY P	OINT (3)		1/1/17 -					C	omplete
			1/1/20 - 1/1/23 -						
Organic Che	emicals (VOCS)		1/1/23 -	12/3	1/25		1 routir	o (PT) nor	three years
_	g Point (Sampling Point ID)		Monitor	ina Pa	eriod (		on Period		liance Status
ENTRY P			1/1/17 -			concern	on remot		omplete
,,,,,,,	\!		1/1/20 -						
			-, -, 1/1/23 -						
	Other	Compliance							
Compliance S	chedule Activity	•		Due L			Achieved	d Date	
	CONSUMER NOTICE CERTIFICATE				2012				
RESPOND TO	SANITARY SURVEY		2	2/14/2	2014				

SUBMIT CCR TO THE DEPARTMENT

SUBMIT CCR CERTIFICATION FORM

8/9/2015

SUBMIT LEAD CONSUMER NOTICE CERTIFICATE

SUBMIT CCR TO THE DEPARTMENT

6/30/2017

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.

C	onnectic	ut Dana	rtmont (	of Public	Haalth	Drin	nkino	T <b>\</b> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	otor	So	ction	
C			lity Mon				_				CUOII	
PWS ID PY		ter Qua	iity Moii	itoring a	illu Coll	_					or Tuno D	rimanı Cauraa
	WS Name EJA - RAINBOW	/ CDDING M/	TED CONADA	AIV					1	Owi	P P	rimary Source GW
		/ SPKING WA	ATER COMPA		Desiden					-1	•	
Local Address (who	ere applicable)			Service Connection	Residen	itiai Co	mmerci	ai in	dustri	aı	Combined	Agricultural
Towns Served: MII	ODI FFIFI D			Commedia	0							
Towns served. Will			Other	Complian	ce Sched	dules						
Compliance Sched	ule Activity			•		Due Da	te		Achie	ved	Date	
SUBMIT CCR CERTI	FICATION FORI	M				8/9/201	17					
DISTRIBUTION SYS	TEM MATERIAL	S EVALUATION	ON		8	3/31/20	19					
CROSS CONNECTIO	N EXEMPTION					3/1/202	20					
SUBMIT CCR TO TH	IE DEPARTMEN	IT			(	5/30/20	20					
SUBMIT CCR CERTI	FICATION FORI	M				8/9/202	20					
		Water Sy	stem Fac	ility and S	Sampling	Poin	t Inve	ntoı	ry			
Water				-			To	tal	Lead	and		
System Water S	System Facility		Sampling Poir				Coli	form				Stage
Facility ID			ID	Descriptio	n	Sta	itus R	ule	Rule	Tier	Asbestos	WQP 2 DBPR
00600 DISTRIB	UTION SYSTEM	]	4	DISTRIBUT	ION SYSTEM	1 /	4	Υ				
			DOWNSTREA	M WITHIN 5	SERVICE CO	N A	4					
			UPSTREAM	WITHIN 5	SERVICE CO	N A	4					
00700 ENTRY I	POINT		3	ENTRY PO	INT	,	4					
1561 WELL#	1		2	WELL #1		,	4					
51092 WELL-X	-TROL											
			Certifie	d Operato	or Inform	natior	1					
Water System Fa	cility: DISTR	IBUTION SY	STEM (WSF	ID: 00600)								
Facility Classificati	on: SMALL WA	ATER SYSTEM										Certification
Operator Name			Operator Ty	уре	Certification	on(s)						Expiration
WITTENZELLNER, F	ROBERT		CHIEF OPERA	TOR	DISTRIBUTI	ON SYS	TEM OP	ERATO	OR - CL	.ASS	Ш	6/30/2022
					WATER TRI	EATMEN	IT PLAN	Г ОРЕ	RATOF	R - CL	ASS III	9/30/2021
			Co	ntact Info	ormation	1						
Name				Organization							Job Title	
Mr. Robert Witter	zellner											
Mailing Address Li	ne One		Mailing Addr	ess Line Two				Ci	ty		State	Zip Code
91 Spak Road							Willing	ton			СТ	06279
Business Phone	Extension	Fax	Mo	bile Phone	Emergency	/ Phone	Email A	Addres	SS			
860-559-2804		860-684-9	9725		860-684	-3262	RWitte	nzelln	ner@R	hwhi	te.com	
Contact Role(s):	Owner											
Name				Organization							Job Title	
Mr. John Wittenze	ellner			Reja Acquisiti	ion Corporat	tion		Pre	sident			
Mailing Address Li	ne One		Mailing Addr	ess Line Two				Ci	ty		State	Zip Code
P.O. Box 322			2 Stafford Str	eet			Staffor	d Spri	ngs		СТ	06076
Business Phone	Extension	Fax	Mo	bile Phone	Emergency	/ Phone	Email A	ddres	SS			
860-684-3262		860-684-9	9475		860-559	-2983	rejaaco	uisiti	on@gr	nail.	com	

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

Connecticut Department of Public Health	Drinking	g Water	Section	
Water Quality Monitoring and Con	npliance S	Schedul	e	
DIAIC N	Cl:f:+:	Daniel Latine	O	D

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0821001	REJA - RAINBOW SPRING WATER COMPANY			С	11	Р	GW
Local Address (v	vhere applicable)	Service	Resider	ntial Commerc	ial Industri	al Combine	ed Agricultural
		Connections	8				

Towns Served: MIDDLEFIELD

# 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						ection	
	Water Quality Mor	nitoring an						
PWS ID	PWS Name		Cla	assificatio	n Pop	ulation Ov	vner Type Pr	rimary Source
CT0826061	SYLVAN RIDGE CONDOMINIUMS			С		84	Р	GW
Local Address	(where applicable)	Service	Residential	Comme	ercial	Industrial	Combined	Agricultural
34 SYLVAN RII	DGE	Connections	24					
Towns Served	: MIDDLEFIELD							
	Mor	nitoring Requ	uirement	S				
•	m Facility: DISTRIBUTION SYSTEM (W	SF ID: 00600)						
Asbestos (1	•							nine years
	g Point (Sampling Point ID)		Monitoring		Collec	tion Period	l Compli	ance Status
	om Inventory of Active Sampling Points		1/1/13 - 12/	/31/21				
Total Colifor								per quarter
	g Point (Sampling Point ID)		Monitoring		Collec	tion Period		ance Status
Select fro	om Inventory of Active Sampling Points		7/1/19 - 9/3	-				mplete
			10/1/19 - 12				Со	mplete
			1/1/20 - 3/3	•				
			4/1/20 - 6/3					
			7/1/20 - 9/3	30/20				
	opper (PBCU)							three years
	g Point (Sampling Point ID)		Monitoring			tion Period	l Compli	ance Status
Select fro	om Inventory of Active Sampling Points		1/1/19 - 12/	-		/1-9/30		
			1/1/22 - 12/	/31/24	6,	/1-9/30		
•	rameters (PPS)							per quarter
	g Point (Sampling Point ID)		Monitoring		Collec	tion Period		ance Status
Select fro	om Inventory of Active Sampling Points		7/1/19 - 9/3					mplete
			10/1/19 - 12				Со	mplete
			1/1/20 - 3/3					
			4/1/20 - 6/3					
			7/1/20 - 9/3	30/20				
•	m Facility: ENTRY POINT (WSF ID: 007	00)						
Net Gross A	•		N. da wita wina	Daviad	Callac			three years
	g Point (Sampling Point ID)		Monitoring		Collec	tion Period		ance Status
ENTRY PO	ואווע (3)		1/1/17 - 12/				Co	mplete
			1/1/20 - 12/					
11	000)		1/1/23 - 12/	/31/25		4	- (DT) (	
Uranium (4	-		Monitorina	Dariad	Collec			three years
ENTRY PO	g Point (Sampling Point ID)		Monitoring		Conec	tion Period		mplete
ENTRYPO	JIIVI (3)		1/1/17 - 12/ 1/1/20 - 12/				CO	inpiete
Combined	20dium 22C/22C (4040)		1/1/23 - 12/	31/23		1	o (DT)	hbuo cc =
	Radium-226/228 (4010)		Monitorius	Dorical	Caller			three years
	g Point (Sampling Point ID)		Monitoring		Conec	tion Period		ance Status
ENTRY PO	(כ) ואווע)		1/1/17 - 12/				CO	mplete
			1/1/20 - 12/	31/22				

1/1/23 - 12/31/25

**Monitoring Period** 

1/1/18 - 12/31/20

Schedule Generation Date: 3/10/2020

**ENTRY POINT (3)** 

**Inorganic Chemicals (IOCS)** 

Sampling Point (Sampling Point ID)

1 routine (RT) per three years

**Compliance Status** 

**Collection Period** 

	Connecticut De	enartment of	F Public H	[ealth]	Drink	ring V	Vater	Se	ction	
		uality Monit							CUOII	
PWS ID	PWS Name	gaarrey 1.10111e	oring and				1		ner Tyne Pi	rimary Sourc
CT0826061	SYLVAN RIDGE CONDOI	MINILIMS			С	1011	84	0111	P	GW
	where applicable)	VIII (III )	Service	Residenti		mercial	Industria	al	Combined	Agricultura
34 SYLVAN RID			Connections	24	u. 001111	The rotal	maasen	J	Combined	71611041141
Towns Served:										
Towns serveu.	MISSELTIELS	Monite	oring Requ	iremen	ıts					
Water System	n Facility: ENTRY POIN		oring nequ							
Inorganic Che	emicals (IOCS)						1 rou	itine	(RT) per	three years
Sampling	Point (Sampling Point ID)	)		Monitorin	g Period	Colle	ection Per		· · · · ·	ance Status
				1/1/21 - 1	2/31/23					
Nitrate And N	Nitrite (NOX)							1	routine (R	T) per year
	Point (Sampling Point ID)			Monitorin	g Period	Colle	ection Per		=	ance Status
ENTRY PO				1/1/19 - 1						mplete
				1/1/20 - 1						
				1/1/21 - 1	2/31/21					
Pesticides, Ho	erbicides and PCBs - Ph	ase II & V (SOCS)					1 rou	itine	(RT) per	three years
-	Point (Sampling Point ID)	• •		Monitorin	g Period	Colle	ection Per			ance Status
ENTRY PO	INT (3)			1/1/17 - 1	2/31/19					
				1/1/20 - 1	2/31/22					
				1/1/23 - 1	2/31/25					
Organic Chen	nicals (VOCS)						1 rou	itine	(RT) per	three years
Sampling	Point (Sampling Point ID)			Monitorin	g Period	Colle	ection Per	riod	Compli	ance Status
ENTRY PO	INT (3)			1/1/17 - 1	2/31/19				Со	mplete
				1/1/20 - 1	2/31/22					
				1/1/23 - 1	2/31/25					
		Other Co	ompliance	Schedu	ıles					
Compliance Scl	hedule Activity			D	ue Date		Achie	ved I	Date	
CROSS CONNEC	CTION EXEMPTION			3,	/1/2012					
SUBMIT LEAD C	CONSUMER NOTICE CERTI	FICATE		12,	/29/2012	2				
DISTRIBUTION :	SYSTEM MATERIALS EVAL	UATION		8/	31/2019					
SUBMIT CCR TO	THE DEPARTMENT			7,	/1/2020					
SUBMIT CCR CE	ERTIFICATION FORM			8,	/9/2020					
	Wate	er System Facili	ity and Sar	npling I	Point I	nvent	ory			
Water						Tota				
	ter System Facility	Sampling Point		nt		Colifor				Stage
Facility ID		ID	Description		Statu		Rule	Tier	Asbestos	WQP 2 DBP
00600 DIST	TRIBUTION SYSTEM	4	DISTRIBUTION		Α	Υ				
		DOWNSTREAM			A					
		SRA02	2 SYLVAN RID		A	Y	1		Y	
		SRA04	4 SYLVAN RID		A	Y	1		Y	
		SRA06	6 SYLVAN RID		A	Y	1		Y	
		SRA08	8 SYLVAN RID		A	Y	1		Y	
		SRA10	10 SYLVAN RI		A	Y	1		Y	
		SRA12	12 SYLVAN RI		A	Y	1		Y	
		SRA14	14 SYLVAN RI		A	Y	1		Y	
		SRA16	16 SYLVAN RI		Α	Y	1		Y	

18 SYLVAN RIDGE

SRA18

Α

Υ

Υ

1

	Сс	onnectic	ut Depa	rtment of	f Public	Health	n Drin	ıking V	Vater Se	ection	
			•	ity Monit				U			
PWS ID	PW	/S Name	tor quar	10, 1101110	.011118 di	14 401	_			ner Type P	rimary Source
CT0826061			CONDOMINIU	IMS			С		84	Р	GW
Local Addr	ess (whe	re applicable)			Service	Resider	ntial Cor	mmercial	Industrial	Combined	
34 SYLVAN		-			Connection	s 24					0
Towns Serv	ved: MID	DLEFIELD									
			Water Sy	stem Facil	ity and Sa	ampling	g Point	Invent	ory		
Water								Total	Lead and		
	_	stem Facility	· S	ampling Point		oint		Colifori			Stage
Facility ID				ID	Description		Sta	tus Rule	Rule Tier	Asbestos	WQP 2 DBPI
				SRA20	20 SYLVAN	RIDGE	Α	. Y	1		
				SRA22	22 SYLVAN	RIDGE	Α	. Y	1	Υ	
				SRA24	24 SYLVAN	RIDGE	Α	. Y	1	Υ	
				SRA26	26 SYLVAN	RIDGE	Α	, Y	1	Υ	
				SRA28	28 SYLVAN	RIDGE	А	Y	1	Υ	
				SRA30	30 SYLVAN	RIDGE	А	. Y	1	Υ	
				SRA32	32 SYLVAN	RIDGE	А	Y	1	Υ	
				SRA34	34 SYLVAN	RIDGE	А	. Y	1	Υ	
				SRA36	36 SYLVAN	RIDGE	А	. Y	1	Υ	
				SRA38	38 SYLVAN	RIDGE	А	. Y	1	Υ	
				SRA40	40 SYLVAN	RIDGE	А	. Y	1	Υ	
				SRA42	42 SYLVAN	RIDGE	А	. Y	1	Υ	
				SRA44	44 SYLVAN I	RIDGE	А	. Y	1	Υ	
				SRA46	46 SYLVAN	RIDGE	А	. Y	1	Υ	
				SRA48	48 SYLVAN	RIDGE	А	. Y	1	Υ	
				UPSTREAM	WITHIN 5 SI	ERVICE CO	N A	1			
00700	ENTRY P	TNIC		3	ENTRY POIN	IT	А	\			
432	WELL #2			2	WELL#1		А	1			
433	WELL #4			2	WELL #2		А	<u> </u>			
50838	ATMOSP	HERIC STORA	GE								
50840	HYDROP	NEUMATIC ST	ORAGE								
				Certified	Operato	r Inforn	nation				
Water Sys	stem Fac	ility: DISTR	RIBUTION SY	STEM (WSF I	D: 00600)						
Facility Cla	assificatio	n: SMALL WA	ATER SYSTEM								Certification
Operator I	Name			Operator Typ	e	Certification	on(s)				Expiration
BAILEY, ED	WARD		(	CHIEF OPERATO	OR S	SMALL WA	TER SYS	TEM OPERA	ATOR CONDI	ΓΙΟΝΑL	9/30/2020
				Con	tact Info	rmation	า				
Name				0	rganization					Job Title	
Mr. Edwar	d Bailey				/Ivan Ridge Co	ondominiu	ıms	В	oard Membe	er	
Mailing Ad		e One		Mailing Addres					City	State	Zip Code
34 Sylvan F				<u> </u>				Rockfall	•	СТ	06481
Business		Extension	Fax	Mohi	le Phone	Emergenc		Email Add	ress	-	<u> </u>
000 242			1 4/1		3 1 1/0	000 000		1.400	1		

860-985-0790

epb10@aol.com

860-343-0405

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

Connecticut Department of Public Health	Drinking	g Water	Section	
Water Quality Monitoring and Com	ipliance S	Schedul	e	

PWS I	ID	PWS Name					Clas	sification	Population	Owner Type	Primary Source
CT082	26061	SYLVAN RIDGE COND	омініи	MS				С	84	Р	GW
Local	Address (w	here applicable)			Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
34 SY	LVAN RIDG	E			Connections	24					

Towns Served: MIDDLEFIELD

## 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 Donor	tmont of	Dublic U	ool+h	D	rinlrin/	~ T	Matan	C	oction	
	Connecticut Depar					`	_			ection	
	Water Quali	ly Monito	oring and	ı Con			_				
PWS ID	PWS Name				Cla		Ро	•	Ow		imary Source
CT0827071	LAKEVIEW ESTATES			5		С		78	_	Р	GW
Local Address	(where applicable)		Service Connections	Residen	tiai	Commerc	ıaı	Industri	aı	Combined	Agricultural
Founc Convod	: MIDDLEFIELD		Connections	38							
rowns Served	MIDDLEFIELD	Monito	ring Pogu	iromo	nto						
Mater System	m Facility: DISTRIBUTION SYS		oring Requ	пеше	1115	•					
Asbestos (1	•	1 1 1 ( 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<b>7. 00000</b>					1 ro	+i	ne (RT) per	nine vears
-	Point (Sampling Point ID)			Monitori	ina E	Period (	`alla	ection Pe			ance Status
	TION SYSTEM (4)			1/1/17 -			Jone	ection Fe	1100	Compile	ance Status
Total Colifor				1/1/1/-	12/3	51/25			1 -	outine (RT)	nor month
	Point (Sampling Point ID)			Monitori	ina E	Pariod (	الد	ection Pe			ance Status
		vints		Monitori			JUII	ection Per	riou		
select If C	om Inventory of Active Sampling Po	אווונ		L0/1/19 - L1/1/19 -		-					mplete mplete
											-
				1/1/19 - 1/1/20 -		-					mplete mplete
				2/1/20 -						COI	ripiete
				3/1/20 -							
				4/1/20 -							
				5/1/20 -							
				6/1/20 -							
				7/1/20 -							
				8/1/20 -							
				9/1/20 -							
Lead And Co	opper (PBCU)			3/1/20	3,3	0,20		5 ro	utir	ne (RT) per	six months
	Point (Sampling Point ID)			Monitori	ing F	Period (	Colle	ection Pe			ance Status
	TION SYSTEM (4)			7/1/19 -	12/3	31/19				-	
	. ,			1/1/20 -							
				7/1/20 -							
Physical Par	ameters (PPS)								1 r	outine (RT)	per month
Sampling	Point (Sampling Point ID)			Monitori	ing F	Period C	Colle	ection Pe	riod	l Compli	ance Status
Select fro	om Inventory of Active Sampling Po	oints		LO/1/19 -	10/	31/19				Со	mplete
			:	1/1/19 -	11/	30/19				Coi	mplete
				2/1/19 -	12/	31/19				Соі	mplete
				1/1/20 -	1/3	1/20				Coi	mplete
				2/1/20 -	2/2	9/20					
				3/1/20 -	3/3	1/20					
				4/1/20 -	4/3	0/20					
				5/1/20 -	5/3	1/20					
				6/1/20 -	6/3	0/20					
				7/1/20 -							
				8/1/20 -	8/3	1/20					
				9/1/20 -	9/3	0/20					
Nater Syster	m Facility: ENTRY POINT (WS	F ID: 00700)									

**Monitoring Period** 

1/1/17 - 12/31/19

Schedule Generation Date: 3/10/2020

**Inorganic Chemicals (IOCS)** 

ENTRY POINT (3)

Sampling Point (Sampling Point ID)

1 routine (RT) per three years

**Compliance Status** 

Complete

**Collection Period** 

	Connecticut Departm				$\sim$			ection	
	Water Quality	Monitoring an	d Con	_			_		
PWS ID	PWS Name			Cla	ssification	Population	Ov	vner Type P	rimary Source
CT0827071	LAKEVIEW ESTATES				С	78		Р	GW
Local Address (	(where applicable)	Service	Residen	itial	Commercia	al Industri	al	Combined	Agricultural
		Connections	38						
Towns Served:	MIDDLEFIELD								
		<b>Monitoring Requ</b>	uireme	nts	;				
Water System	n Facility: ENTRY POINT (WSF ID	): 00700)							
Inorganic Ch	emicals (IOCS)					1 rou	ıtir	e (RT) per	three years
Sampling	Point (Sampling Point ID)		Monitori	ing P	Period Co	ollection Pe	rio	d Compl	iance Status
			1/1/20 -	12/3	31/22				
			1/1/23 -	12/3	31/25				
Nitrate And	Nitrite (NOX)						:	L routine (F	RT) per year
Sampling	Point (Sampling Point ID)		Monitori	ing P	Period Co	ollection Pe	rio	d Compl	iance Status
ENTRY PO	DINT (3)		1/1/19 -	12/3	31/19			Co	mplete
			1/1/20 -	12/3	31/20				
			1/1/21 -	12/3	31/21				
Radionuclide	es - Gross Alpha, Combined Radiu	m & Uranium (RADA	<b>(</b> )			1	. ro	utine (RT)	per quarter
Sampling	Point (Sampling Point ID)		Monitori	ing P	Period Co	ollection Pe	rio	d Compl	iance Status
ENTRY PO	DINT (3)		7/1/19 -	9/3	0/19			Cc	mplete
			10/1/19 -	- 12/	31/19			Cc	mplete
			1/1/20 -	- 3/3	1/20				
			4/1/20 -	- 6/3	0/20				
			7/1/20 -	9/3	0/20				
-	lerbicides and PCBs - Phase II & V	(SOCS)							three years
	Point (Sampling Point ID)		Monitori			ollection Pe			iance Status
ENTRY PO	· ,		1/1/17 -	12/3	31/19	1/1-12/31			Vaiver
_	lerbicides and PCBs - Phase II & V	(SOCS)							three years
	Point (Sampling Point ID)		Monitori	_		ollection Pe	rio	d Compl	iance Status
ENTRY PO	DINT (3)		1/1/20 -						
			1/1/23 -	12/3	31/25				
_	micals (VOCS)		0.0 (0		Santad C	- II ti D -		=	RT) per year
	Point (Sampling Point ID)		Monitori			ollection Pe	rio		iance Status
ENTRY PO	JINT (3)		1/1/19 -					Co	mplete
			1/1/20 -						_
		Athor Compiliance	1/1/21 -						
0 11 -		Other Compliance						10.	
	consumer Notice Certificate				Date /2017	Achie	vec	l Date	
	CONSUMER NOTICE CERTIFICATE				/2017				
	CTION EXEMPTION				2018				
	CONSUMER NOTICE CERTIFICATE				/2018				
	CONSUMER NOTICE CERTIFICATE				/2018				
	CONSUMER NOTICE CERTIFICATE				/2019				
	ERTIFICATION FORM				2019				
	SYSTEM MATERIALS EVALUATION				/2019				
SUDIVITI CCK IC	O THE DEPARTMENT			// T/	2020				

8/9/2020

SUBMIT CCR CERTIFICATION FORM

	Connecticut Depa	artmen	t of Public	Health	Drinki	ing V	Water	Section	
	Water Qua	lity Mo	nitoring a	nd Con	npliand	e Sc	hedul	e	
PWS ID	PWS Name				Classificati	on Po	pulation	Owner Type P	rimary Source
CT0827071	LAKEVIEW ESTATES				С		78	Р	GW
Local Addres	ss (where applicable)		Service Connection	Resider	ntial Comm	ercial	Industria	ol Combined	Agricultura
Towns Serve	ed: MIDDLEFIELD		1			I.			
		Public	Notification	Require	ements				
			Compliance	Notice	Publ	ic Noti	<u>fication</u>	PN Cer	<u>tification</u>
Violation/Si			Period	Tier	Requi		Performed		Received
	es - Gross Alpha, Combined Ra M	&R Violati	1/1/19 - 3/31/19	9 3	6/9/20			6/19/2020	
	pper M&R Violation		7/1/19 -	3	8/12/2			8/22/2020	
	es - Gross Alpha, Combined Ra M		4/1/19 - 6/30/19		8/12/2			8/22/2020	
Radionuclide	es - Gross Alpha, Combined Ra M	&R Violati	7/1/19 - 9/30/19	3	11/11/2	2020		11/21/2020	
	Water S	ystem F	acility and S	ampling	Point Ir	rvent	tory		
Water						Tota			
-,	Vater System Facility		Point Sampling P			Colifor			Stage
Facility ID		ID .	Description		Status	Rule	e Rule	Tier Asbestos	WQP 2 DBPF
00600 D	DISTRIBUTION SYSTEM	4	DISTRIBUTI			Y			
		HAP00	_		A	Y			
		HAP00	_		A	Y			
		HAP00			A	Y			
		HAP01			A	Y			
		HAP01			A	Y Y			
00700 5	NTDV DOINT	HAP01			Α	T			
	NTRY POINT	3	ENTRY POII	N I	Α				
	VELL #1	2	WELL #1		Α				
	LADDER TANK								
60372 W	VELL #2	2	WELL 2		A				
			ied Operato	r Inform	nation				
•	em Facility: DISTRIBUTION S	•	/SF ID: 00600)						
	sification: SMALL WATER SYSTEM								Certification
Operator No		Operato		Certification					Expiration
SIMA, III, JOI	HN F.	CHIEF OPE			EATMENT P				9/30/2020
				DISTRIBUTI	ON SYSTEM	1 OPER	ATOR - CL	ASS I	6/30/2020
		(	Contact Info	rmation	1				
Name			Organization					Job Title	
Mr. Maurice	e Kiniry		Lakeview Esta	tes		I	President		
Mailing Add	ress Line One	Mailing Ac	ldress Line Two				City	State	Zip Code
21 Lakeview	Estates				Mi	ddlefie	ld	СТ	06455
Business P	Phone Extension Fax	[	Mobile Phone	Emergency	Phone Em	nail Add	dress		
860-788-7					MA	AURICE	KINIRY@S	BCGLOBAL.NE	Т
Contact Role	e(s): Legal Contact, Owner								

	onnectic	ut Depa	irtment of	Public	Health	עו	rınkıng	g water	· Se	ction	
	Wa	ter Qua	lity Monit	oring a	nd Con	np)	liance S	Schedul	le		
PWS ID P	WS Name					Cla	ssification	Population	Own	er Type	Primary Source
CT0827071 L	AKEVIEW ESTA	TES					С	78		Р	GW
Local Address (wh	ere applicable)			Service	Residen	itial	Commerci	al Industri	al	Combine	d Agricultural
				Connection	ns 38						
Towns Served: MI	DDLEFIELD										
Name			Oı	rganization						Job Title	
Mr. Bruce Binnix			La	keview Esta	tes						
Mailing Address Li	ne One		Mailing Address	s Line Two				City		State	Zip Code
19 Lakeview Estat	es						Middle	efield		СТ	06455
Business Phone	Extension	Fax	Mobi	le Phone	Emergency	/ Pho	one Email A	Address			
203-317-9501							BBINN	IX@SBCGLO	BAL.N	IET	
Contact Pole(s)	Administrativo	Contact					•				

Connecticut Department of Dublic Health Drinking Water Costion

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

Schedule Generation Date: 3/10/2020

	Connecticut Department of	Dublic F	Jaalth	Dı	rinkin	σΙ	Matar	So	ction	
	*					_			CUOII	
	Water Quality Monit	oring an	a Con	_						
PWS ID	PWS Name			Clas		n Po		Owi		imary Source
CT0827081	BITTERSWEET RIDGE WATER ASSOCIATION	1	I		С		40		Р	GW
Local Address (v	vhere applicable)	Service	Residen	itial	Commer	cial	Industria	al	Combined	Agricultural
		Connections	20							
Towns Served: I										
		oring Requ	ireme	nts						
Water System	Facility: DISTRIBUTION SYSTEM (WSF II	D: 00600)								
Asbestos (10	94)						1 ro	utir	ie (RT) per	nine years
	Point (Sampling Point ID)		Monitori			Colle	ection Per	iod	Compli	ance Status
	n Inventory of Active Sampling Points		1/1/13 -	12/3	31/21					
<b>Total Coliforn</b>							1	rοι	ıtine (RT) <sub>ا</sub>	oer quarter
	Point (Sampling Point ID)		Monitori			Colle	ection Per	iod	Compli	ance Status
Select from	n Inventory of Active Sampling Points		7/1/19 -							mplete
			1/1/20 -						Со	mplete
			4/1/20 -		-					
			7/1/20 -	9/3	0/20					
Total Coliforn	•								•	per period
	Point (Sampling Point ID)		Monitori			Colle	ection Per	iod		ance Status
Select fron	n Inventory of Active Sampling Points		9/26/19		-					mplete
			9/26/19							mplete
			9/26/19							mplete
-			1/21/20	- 1/2	26/20					mplete
Total Coliforn							-			per month
	Point (Sampling Point ID)		Monitori			Colle	ection Per	iod		ance Status
Select from	n Inventory of Active Sampling Points		10/1/19 -							mplete
	(====)		2/1/20 -	2/2	9/20					mplete
Lead And Cop						<i>.</i> "				three years
	Point (Sampling Point ID)							ioa	Compile	ance Status
Select from	n Inventory of Active Sampling Points		1/1/19 -				6/1-9/30			
Dhariaal Dana	markana (DDC)		1/1/22 -	12/3	31/24		6/1-9/30		(DT) .	
Physical Para	Point (Sampling Point ID)		Monitori	ina D	lariad	Calle	ı ection Per			per quarter ance Status
	n Inventory of Active Sampling Points		7/1/19 -			Cone	ction Per	iou		mplete
Select Iron	I inventory of Active Sampling Points		7/1/19 - 10/1/19 -							mplete
			1/1/20 -							mplete
			4/1/20 -							ilibiete
			7/1/20 -		-					
Water System	Facility: ENTRY POINT (WSF ID: 00700)		7/1/20-	9/3	0/20					
Net Gross Alp							1 rous	tine	(RT) per t	three years
-	Point (Sampling Point ID)		Monitori	ina P	Period	Colle	ection Per			ance Status
ENTRY POI			1/1/17 -							mplete
			1/1/20 -							•
			1/1/23 -							
Uranium (40	06)		• •		-		1 rou	tine	e (RT) per 1	three years
-	Point (Sampling Point ID)		Monitori	ing P	Period	Colle	ection Per			ance Status
ENTRY POI			1/1/17 -							mplete

1/1/20 - 12/31/22

Schedule Generation Date: 3/10/2020

	CD 11: T	r 1.1	<b>D</b>	. 1 .	TAT	0		
Connecticut Department							ection	
Water Quality Mon	itoring an	d Con	npl	iance	Schedu	le		
PWS ID PWS Name			Cla	ssification	Population	Ov	wner Type Pr	imary Source
CT0827081 BITTERSWEET RIDGE WATER ASSOCIATION	V			С	40		Р	GW
Local Address (where applicable)	Service	Residen	tial	Commerc	ial Industr	ial	Combined	Agricultural
	Connections	20						
Towns Served: MIDDLEFIELD					·			
Moni	itoring Requ	iireme	nts	}				
Water System Facility: ENTRY POINT (WSF ID: 0070								
Uranium (4006)	,				1 ro	utir	ne (RT) per t	hree vears
Sampling Point (Sampling Point ID)		Monitori	ing P	Period (	Collection Pe			ance Status
		1/1/23 -					•	
Combined Radium-226/228 (4010)					1 ro	utir	ne (RT) per t	three years
Sampling Point (Sampling Point ID)		Monitori	ing P	Period (	Collection Po			ance Status
ENTRY POINT (3)		1/1/17 -	12/3	31/19			Co	mplete
		1/1/20 -	12/3	31/22				
		1/1/23 -	12/3	31/25				
Inorganic Chemicals (IOCS)					1 ro	utir	ne (RT) per t	three years
Sampling Point (Sampling Point ID)		Monitori	ing P	Period (	Collection Pe	erio	d Compli	ance Status
ENTRY POINT (3)		1/1/19 -	12/3	31/21				
		1/1/22 -	12/3	31/24				
Nitrate And Nitrite (NOX)						:	1 routine (R	T) per year
Sampling Point (Sampling Point ID)		Monitori	ing P	Period (	Collection Pe	erio	d Compli	ance Status
ENTRY POINT (3)		1/1/19 -						mplete
		1/1/20 -	12/3	31/20			Co	mplete
		1/1/21 -	12/3	31/21				
Pesticides, Herbicides and PCBs - Phase II & V (SOCS	•						ne (RT) per t	-
Sampling Point (Sampling Point ID)		Monitori			Collection Pe	erio		ance Status
ENTRY POINT (3)		1/1/17 -					Co	mplete
		1/1/20 -						
		1/1/23 -	12/3	31/25				_
Organic Chemicals (VOCS)							ne (RT) per t	•
Sampling Point (Sampling Point ID)		Monitori			Collection Pe	erio		ance Status
ENTRY POINT (3)		1/1/17 -					Col	mplete
		1/1/20 -						
Matar System Facility, MIFLL #1 (MIST ID: 429)		1/1/23 -	12/3	31/25				
Water System Facility: WELL #1 (WSF ID: 428)						4!		
E. Coli (3014)		Monitori		Davidad (			ggered (TG)	per period
Sampling Point (Sampling Point ID) WELL #1 (2)		<i>Monitori</i> 9/25/19			Collection Pe	:110(	u Compile	ance Stutus
VV LLL #1 (Z)		9/25/19						
		9/25/19						
		1/20/20						
Other	Compliance							
	Compliance						10.	
Compliance Schedule Activity				Date	Achi	eve	d Date	
DISTRIBUTION SYSTEM MATERIALS EVALUATION				/2019				
CROSS CONNECTION EXEMPTION			3/1/	2020				

6/30/2020

Schedule Generation Date: 3/10/2020

SUBMIT CCR TO THE DEPARTMENT

	Connecticut Dep	partment of	f Public H	lealth	ı Dr	cinking	g W	ater	Section	
	Water Qu	ality Monit	coring an	d Con	npl	iance S	Sch	edule	9	
PWS ID	PWS Name	-			Clas	sification	Popu	lation C	Owner Type	Primary Source
CT0827081	BITTERSWEET RIDGE WAT	ER ASSOCIATION				С	4	40	Р	GW
Local Addre	ess (where applicable)		Service	Resider	ntial	Commerci	al Ir	ndustrial	Combine	d Agricultural
			Connections	20						
Towns Serv	ved: MIDDLEFIELD									
		Other C	ompliance	Sched	dule	S				
Compliance	e Schedule Activity				Due l	Date		Achiev	ed Date	
SUBMIT CC	R CERTIFICATION FORM				8/9/2	2020				
		Public Not	ification R	equire	eme	ents				
_		C	ompliance	Notice	2	<u>Public N</u>	otific	<u>ation</u>	PN Ce	ertification
Violation/S			Period	Tier		Required		rformed		
Total Colife	orm M&R Violation		/18 - 5/31/18	3		9/11/2019			9/21/2019	9
	Water	System Facil	ity and Sar	npling	Po	int Inve	nto	ry		
Water							otal	Lead a		_
	Water System Facility	Sampling Point ID	Sampling Poil Description	nt			iform			Stage
Facility ID 00600	DISTRIBUTION SYSTEM		DISTRIBUTION	LCVCTEN		Jiuius	Rule	Kule I	ier Asbesto	s WQP 2 DBPR
00000	DISTRIBUTION STSTEIN	4 BR1	1 BITTERSWE			A A	Y Y	2	Υ	
		BR10	10 BITTERSW	_		A	Y	2	Y	
		BR11	11 BITTERSW	_		A	Y	2	Y	
		BR12	12 BITTERSW	_		A	Y	2	Y	
		BR13	13 BITTERSW			A	Y	2	Y	
		BR14	14 BITTERSW			Α	Y	2	Y	
		BR15	15 BITTERSW	_		Α	Υ	2	Y	
		BR16	16 BITTERSW			Α	Υ	N	Υ	
		BR17	17 BITTERSW	EET RIDG	ìΕ	Α	Υ	N	Υ	
		BR18	18 BITTERSW	EET RIDG	iΕ	Α	Υ	N	Υ	
		BR19	19 BITTERSW	EET RIDG	iΕ	Α	Υ	N	Υ	
		BR2	2 BITTERSWE	ET RIDGE		Α	Υ	2	Υ	
		BR20	20 BITTERSW	EET RIDG	iΕ	1	Υ		Υ	
		BR3	3 BITTERSWE	ET RIDGE		Α	Υ	2	Υ	
		BR4	4 BITTERSWE	ET RIDGE		Α	Υ	2	Υ	
		BR5	5 BITTERSWE	ET RIDGE		Α	Υ	2	Υ	
		BR6	6 BITTERSWE	ET RIDGE		Α	Υ	2	Υ	
		BR7	7 BITTERSWE	ET RIDGE		Α	Υ	2	Υ	
		BR8	8 BITTERSWE	ET RIDGE		Α	Υ	2	Υ	
		BR9	9 BITTERSWE	ET RIDGE		Α	Υ	2	Υ	
		DOWNSTREAM	WITHIN 5 SER	VICE CO	N	Α				
		UPSTREAM	WITHIN 5 SER	VICE CO	N	Α				
00700	ENTRY POINT	3	ENTRY POINT			Α				
428	WELL #1	2	WELL #1			Α				
51652	WELL-X-TROL									
	2011 ATMOSPHERIC STORAGE TANKS									

59206 BOOSTER PUMPS

Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT0827081	BITTERSWEET RIDGE WATER ASSOCIATION				С	40	Р	GW	
Local Address	(where applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural	
		20							
Towns Served:	wns Served: MIDDLEFIELD								

Connecticut Department of Public Health Drinking Water Section

**Certified Operator Information** 

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

Facility Classification:SMALL WATER SYSTEMCertificationOperator NameOperator TypeCertification(s)ExpirationKING, THAD D.CHIEF OPERATORDISTRIBUTION SYSTEM OPERATOR - CLASS I12/31/2022WATER TREATMENT PLANT OPERATOR - CLASS II12/31/2022

Contact Information									
Name				Organization			Job Title		
Mr. Charles J. Arrigoni				Bittersweet Ridge Water					
Mailing Address Line One Mailing A			ress Line Two	City		State	Zip Code		
8 Bittersweet Ridge						Middlefield		06455	
Extension	Fax	М	obile Phone	Emergency Phone	Email Ad	dress			
				860-349-8946					
	e One	e One	oni e One Mailing Add	Organization  oni  Bittersweet  e One  Mailing Address Line Two	Organization  oni  Bittersweet Ridge Water  e One  Mailing Address Line Two  Extension  Fax  Mobile Phone  Emergency Phone	Organization  Doni  Bittersweet Ridge Water  e One  Mailing Address Line Two  Middlefit  Extension  Fax  Mobile Phone  Emergency Phone  Email Address	Organization  Doni  Bittersweet Ridge Water  e One  Mailing Address Line Two  City  Middlefield  Extension  Fax  Mobile Phone  Emergency Phone  Email Address	Organization Job Title  Bittersweet Ridge Water  e One Mailing Address Line Two City State  Middlefield CT  Extension Fax Mobile Phone Emergency Phone Email Address	

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.
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End of schedule

Schedule Generation Date: 3/10/2020