Connecticut Department of Publ			ection
Water Quality Monitoring	; and Compliance	e Schedule	
PWS ID PWS Name	Classification	n Population Owr	ner Type Primary Source
CT0820051 POWDER RIDGE SKI LODGE-MAIN BLDG	NTNC	100	P GW
Local Address (where applicable) Service	Residential Comme	ercial Industrial	Combined Agricultural
99 POWDER HILL ROAD Connec	tions 2		
Towns Served: MIDDLEFIELD			
Monitoring F	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	0)		
Asbestos (1094)		1 routin	e (RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)			itine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/19 - 9/30/19		Complete
	10/1/19 - 12/31/19		Complete
	1/1/20 - 3/31/20		Complete
	4/1/20 - 6/30/20		
	7/1/20 - 9/30/20	_	
Lead And Copper (PBCU)	Adamitanton Daniari		routine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/19 - 12/31/19	6/1-9/30	Complete
	1/1/20 - 12/31/20	6/1-9/30	
Dhysical Davassatova (DDC)	1/1/21 - 12/31/21	6/1-9/30	tine (DT) was assessed
Physical Parameters (PPS) Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	tine (RT) per quarter Compliance Status
Select from Inventory of Active Sampling Points	7/1/19 - 9/30/19	Collection Period	Complete
Select from inventory of Active Sampling Forms	10/1/19 - 12/31/19		Complete
	1/1/20 - 3/31/20		Complete
	4/1/20 - 6/30/20		complete
	7/1/20 - 9/30/20		
Water System Facility: ENTRY POINT (WSF ID: 00700)	1,2,20 0,00,20		
Inorganic Chemicals (IOCS)		1 routine	e (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
Nitrate And Nitrite (NOX)		1	routine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		Complete
	1/1/21 - 12/31/21		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19	1/1-12/31	Waiver
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	e (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/20 - 12/31/22		

	Connecticut Dep	partment of	Public Health	Drink	inσ W	ater S	ection		
	•		oring and Com				cction		
PWS ID	PWS Name	arrey 14101111e					wner Type	Primary	/ Source
СТ082005	1 POWDER RIDGE SKI LODG	E-MAIN BLDG		NTNC	1	00	Р	G۱	W
ocal Add	ress (where applicable)		Service Resident	ial Comm	ercial Ir	ndustrial	Combine	d Agri	icultura
99 POWD	ER HILL ROAD		Connections	2	2				
Γowns Sei	rved: MIDDLEFIELD							,	
		Monito	oring Requiremen	nts					
Nater Sy	stem Facility: ENTRY POINT	(WSF ID: 00700)							
Pesticido	es, Herbicides and PCBs - Phas	e II & V (SOCS)				1 routi	ne (RT) pe	r three	years
Sam	pling Point (Sampling Point ID)		Monitorin	g Period	Collect	ion Perio	d Comp	liance S	Status
			1/1/23 - 1	2/31/25					
_	Chemicals (VOCS)						1 routine (-
	pling Point (Sampling Point ID)		Monitorin		Collect	ion Perio		liance S	
ENTF	RY POINT (3)		1/1/19 - 1					omplet	
			1/1/20 - 1	• •			С	omplet	e
			1/1/21 - 1	· ·					
- "		Other Co	ompliance Sched						
	ce Schedule Activity			ue Date		Achieve	d Date		
	TION SYSTEM MATERIALS EVALUA	TION		31/2019					
CROSS CO	NNECTION SURVEY REPORT			/1/2024					
	Water	System Facili	ity and Sampling	Point Ir	ivento	•			
Water	Makey Contain Fraility	Committee Baint	Committee Daint		Total	Lead an			. .
System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description		Coliform Rule		r er Asbestos	. MOD	Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	<u>Status</u> A	Υ	Nuie Tie	ASDESTO:	vvqr	Z DDF1
00000	DISTRIBUTION STSTEM	·	WITHIN 5 SERVICE CON	A	'				
		PR-2FHS1	2ND FL HAND SINK 1	A	Υ	N			
		PR-2FHS2	2ND FL HAND SINK 2	A	Y	N			
		PR-2FM	2ND FLOOR MENS RM	A	Υ	N			
		PR-2FW	2ND FLOOR WOMENS R		Y	N			
		PR-BHS1	BAR HAND SINK 1	Α	Υ	N			
		PR-HS1	HAND SINK #1	Α	Υ	N	Υ		
		PR-HS2	HAND SINK #2	Α	Υ	N	Υ		
		PR-HS3	HAND SINK #3	Α	Υ	N	Υ		
		PR-MRL	MENS ROOM LEFT SINK	Α	Υ	N			
		PR-MRR	MENS ROOM RIGHT SIN	IK A	Υ	N			
		PR-POTS	POT SINK	Α	Υ	N			
		PR-PROD	PRODUCE SINK	Α	Υ	N			
		PR-WRC	WOMENS ROOM CENTE S	ER A	Υ	N			
		PR-WRL	WOMENS ROOM LEFT S	SIN A	Υ	N			
		PR-WRR	WOMENS ROOM RIGHT	- A	Υ	N			
				_					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	UPSTREAM 3	WITHIN 5 SERVICE CON ENTRY POINT	A					

	Water Quality Monit	oring and	d Con	npl	liance S	Schedul	le	
PWS ID PWS Name Classification Population Owner Type Primary S							Primary Source	
CT0820051	POWDER RIDGE SKI LODGE-MAIN BLDG				NTNC	100	Р	GW
Local Address (v	Local Address (where applicable) Service Resid					al Industri	al Combine	ed Agricultural
99 POWDER HIL	L ROAD	Connections			2			

Connecticut Department of Public Health Drinking Water Section

Towns Served: MIDDLEFIELD

Certified Operator Information

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

Facility Classification: SMALL W	/ATER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
RADICCHI, PAUL J.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2020

				Cont	tact Info	ormation				
Name				Org	ganization				Job Title	
Mr. Sean Hayes				Pov	Powdr Ridge Mtn Prk&Resort,LLC Owner					
Mailing Address Line One Mailing Add				Address	Line Two			City	State	Zip Code
161 Brownstone Av	enue						Portland		СТ	06480
Business Phone	Extension	Fax		Mobile	e Phone	Emergency Phone	Email Ac	ldress		
860-918-3092 860-342-5017							shayes@	brownston	epark.com	

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

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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

End of schedule

	Connecticut Department o	f Public I	Health	Dr	inkin	ıg W	/ater	Se	ection	
	Water Quality Moni					_				
PWS ID	PWS Name	toring an		_					ner Type P	rimary Sourc
CT0820072	THE ROGERS MANUFACTURING COMPANY	,			NTNC		100	- · · ·	P	GW
	(where applicable)	Service	Resident		Commer		 Industri	al	Combined	Agricultura
72 MAIN STRI		Connections								
Towns Served	: MIDDLEFIELD									
	Monit	toring Req	uiremer	nts						
Water Syste	m Facility: DISTRIBUTION SYSTEM (WSF	ID: 00600)								
Asbestos (1	.094)						1 rc	outin	e (RT) pe	r nine years
Sampling	g Point (Sampling Point ID)		Monitorin	ng Pe	riod	Collec	tion Pe	riod	Compli	ance Status
Select fro	om Inventory of Active Sampling Points		1/1/11 - 1	12/31	L/19				Co	mplete
			1/1/20 - 1	12/31	L/28					
Total Colifo										per quarter
	g Point (Sampling Point ID)		Monitorin			Collec	tion Pe	riod		ance Status
Select fro	om Inventory of Active Sampling Points		7/1/19 - 9		-					mplete
			10/1/19 -		-				Сс	mplete
			1/1/20 - 3							
			4/1/20 -		-					
Lood And C	OPPOR (DDCII)		7/1/20 - 9	9/30	/20		F 40.	.4:	/DT\ max	+huaaaaua
	opper (PBCU) g Point (Sampling Point ID)		Monitorin	na Da	riod	Collec	tion Pe			three years <i>ance Status</i>
	om Inventory of Active Sampling Points		1/1/18 - 1				/1-9/30		Сотгрп	unce Status
JCICCI III	on inventory of Active Sampling Forms		1/1/21 - 1				/1-9/30			
Physical Par	rameters (PPS)		-/-/	,0-	-, -3				ıtine (RT)	per quarter
•	g Point (Sampling Point ID)		Monitorin	ng Pe	riod	Collec	tion Pe			ance Status
	om Inventory of Active Sampling Points		7/1/19 - 9							mplete
			10/1/19 -	12/3	1/19				Co	mplete
			1/1/20 - 3	3/31	/20					
			4/1/20 -	6/30	/20					
			7/1/20 -	9/30	/20					
Water Syste	m Facility: ENTRY POINT (WSF ID: 00700									
Nitrate (10	40)						1	l rou	itine (RT)	per quarter
Sampling	g Point (Sampling Point ID)		Monitorin	ng Pe	eriod	Collec	tion Pe	riod	Compli	ance Status
ENTRY P	OINT (3)		7/1/19 - 9							mplete
			10/1/19 -						Сс	mplete
			1/1/20 - :							
			4/1/20 -		-					
			7/1/20 -	9/30,	/20					·-·
Nitrite (104	•		Moulton		out a at	C=!!-	Alexa D		=	RT) per year
	g Point (Sampling Point ID)		Monitorin			Collec	tion Pe	riod		ance Status
ENTRY P	UINT (3)		1/1/19 - 1 1/1/20 - 1						Co	mplete
			1/1/20 - 1	14/31	L/ ZU					

1/1/21 - 12/31/23

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.

1/1/21 - 12/31/21

Monitoring Period

1/1/18 - 12/31/20

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

Collection Period

	Connecticut De	nartment of	Public Health	Drink	ing W	ater Se	ction		
		*	oring and Con		U		Ction		
PWS ID	PWS Name		U	_		lation Owr	ner Type P	rimarv	Source
CT0820072	THE ROGERS MANUFACT	URING COMPANY		NTNC		00	P	G۷	
Local Address	(where applicable)		Service Residen	tial Comn	nercial Ir	ndustrial	Combined	Agric	cultural
72 MAIN STRE			Connections 1						
	: MIDDLEFIELD		_						
		Monito	oring Requireme	nts					
Water Syster	m Facility: ENTRY POINT	(WSF ID: 00700)							
Pesticides, I	Herbicides and PCBs - Pha	se II & V (SOCS)				1 routine	(RT) per	three	years
Sampling	Point (Sampling Point ID)		Monitori	ng Period	Collect	ion Period	Compli		•
ENTRY PO			1/1/17 -	_			Co	mplet	e
	. ,		1/1/20 -					•	
			1/1/23 -						
Organic Che	emicals (VOCS)		· · ·	•		1 routine	(RT) per	three	years
•	Point (Sampling Point ID)		Monitori	ng Period	Collect	ion Period	Compli		-
ENTRY PO	DINT (3)		1/1/17 -	12/31/19			Co	mplet	e
			1/1/20 -	12/31/22				-	
			1/1/23 -	12/31/25					
Water Syster	m Facility: WELL (WSF II	D: 10393)							
E. Coli (301	4)					1 rou	tine (RT)	per qu	uarter
-	Point (Sampling Point ID)		Monitori	ng Period	Collect	ion Period	Compli		
WELL (2)			7/1/19 -	9/30/19			Co	mplet	e
			10/1/19 -	12/31/19			Со	mplet	е
			1/1/20 -	3/31/20				•	
			4/1/20 -						
				9/30/20					
		Other Co	ompliance Sched	lules					
Compliance S	chedule Activity		-	Due Date		Achieved I	Date		
DISTRIBUTION	I SYSTEM MATERIALS EVALU	ATION	8	/31/2019					
CROSS CONNE	ECTION SURVEY REPORT			3/1/2020					
	Water	System Facili	ity and Sampling	Point I	nvento	ry			
Water		-			Total	Lead and			
System Wo	iter System Facility	Sampling Point	Sampling Point		Coliform	Copper			Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
00600 DIS	TRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		5	OFF WR SINK	Α	Υ	2	Υ	Υ	
		6	OFF MR SINK	Α	Υ	2	Υ	Υ	
		7	PLANT MR SINK	Α	Υ	2	Υ	Υ	
		8	PLANT LMR SINK	Α	Υ	2			
		9	PLANT RWR SINK	Α	Υ	2	Υ	Υ	
		DOWNSTREAM	WITHIN 5 SERVICE CON	N A					
		UPSTREAM	WITHIN 5 SERVICE CON	N A					
00700 EN	TRY POINT	3	ENTRY POINT	Α					
40202 \			\A/F!!						

Α

WELL

2

10393 WELL

47792 UV TREATMENT

	Water Quality Monitoring and Compliance Schedule									
PWS ID PWS Name Classification Population Owner Type							Primary Source			
CT0820072	THE ROGERS MANUFACTURING COMPANY				NTNC	100	Р	GW		
Local Address (Local Address (where applicable)				Commerci	al Industri	al Combine	ed Agricultural		
72 MAIN STREE	T	Connections	1							

Connecticut Department of Public Health Drinking Water Section

Towns Served: MIDDLEFIELD

Certified Operator Information

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

Facility Classification: SMALL WATER SYS	TEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
HELMING, TRAVIS	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	9/30/2022
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2022
BOLTE, LUTZ	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2020
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2020

Contact Information										
Name				Organization	1		Job Title			
Ms. Elizabeth Bitel				The Rogers N	Manufacturing Co.	; Co. Hr Manager				
Mailing Address Lin	e One		Mailing Add	ress Line Two			City	State	Zip Code	
72 Main St			PO Box 155			Rockfall		СТ	06481	
Business Phone Extension Fax M			obile Phone	Emergency Phone	Email Add	mail Address				
860-346-8648					ebitel@rı	nc1891.com				

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

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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

End of schedule

Schedule Generation Date: 3/10/2020

Page 6

Connecticut Department of	of Public Health Drinki	ing Water Se	ection
*	toring and Compliand		
PWS ID PWS Name	Classificati		ner Type Primary Source
CT0820172 COOPER-ATKINS CORP	NTNC	86	P GW
Local Address (where applicable)	Service Residential Comm	ercial Industrial	Combined Agricultural
33 REEDS GAP ROAD	Connections 1		
Towns Served: MIDDLEFIELD			
	toring Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF	ID: 00600)		
Asbestos (1094)			ne (RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)			itine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		Complete
	7/1/20 - 9/30/20		
Load And Conner (DDCII)	7/1/20 - 9/30/20	E routin	o (DT) nor six months
Lead And Copper (PBCU) Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	e (RT) per six months Compliance Status
Select from Inventory of Active Sampling Points	7/1/19 - 12/31/19	Conection r eriou	Complete
Scient non inventory of Active Sumpling Forms	1/1/20 - 6/30/20		complete
	7/1/20 - 12/31/20		
Physical Parameters (PPS)	., -, -,,,,,,,,,	1 rou	ıtine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/19 - 9/30/19		Complete
, 1 5	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	0)		
Inorganic Chemicals (IOCS)		1 routine	e (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1	routine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		Complete
	1/1/21 - 12/31/21		
Pesticides, Herbicides and PCBs-Phase II (SOC2)			e (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 12/21/22		

1/1/20 - 12/31/22 1/1/23 - 12/31/25

Monitoring Period

1 routine (RT) per three years

Compliance Status

Collection Period

Schedule Generation Date: 3/10/2020 Page 7

Pesticides, Herbicides and PCBs-Phase V (SOC5)

Sampling Point (Sampling Point ID)

	Connecticut Dep								ection	
	Water Qu	ality Monit	coring an	d Con	npli	iance	e Sch	edule		
PWS ID	PWS Name				Class	sificatio	n Popu	lation Ow	ner Type P	rimary Sourc
CT0820172	COOPER-ATKINS CORP				ſ	NTNC	8	36	Р	GW
Local Address	(where applicable)		Service	Resider	ntial	Comme	rcial Ir	ndustrial	Combined	Agricultura
33 REEDS GAP	ROAD		Connections			1				
Towns Served:	: MIDDLEFIELD									
		Monit	oring Requ	uireme	ents					
Water Syster	m Facility: ENTRY POINT	(WSF ID: 00700)								
Pesticides, F	Herbicides and PCBs-Phase	V (SOC5)						1 routin	e (RT) per	three years
Sampling	Point (Sampling Point ID)			Monitor	ring Pe	eriod	Collect	ion Period	Compl	iance Status
ENTRY PO	DINT (3)			1/1/17 -	- 12/3:	1/19	_		Co	omplete
				1/1/20 -	- 12/3:	1/22				
				1/1/23 -	- 12/3	1/25				
Organic Che	micals (VOCS)							1	routine (RT) per year
Sampling	Point (Sampling Point ID)			Monitor	ring Pe	eriod	Collect	ion Period	Compl	iance Status
ENTRY PO	DINT (3)			1/1/19 -	12/3	1/19			Co	omplete
				1/1/20 -	12/3	1/20				
				1/1/21 -	- 12/3:	1/21				
		Other C	ompliance	e Sched	dule	S				
Compliance So	chedule Activity		-		Due L	Date		Achieved	Date Date	
	I SYSTEM MATERIALS EVALUA	TION			8/31/2	2019				
CROSS CONNE	ECTION EXEMPTION				3/1/2					
	Water	System Facil	ity and Sa	mpling	g Poi	int In	vento	rv		
Water		•	•				Total	Lead and	1	
System Wa	iter System Facility	Sampling Point	Sampling Po	int		(Coliform	Copper		Stage
Facility ID		ID	Description		S	Status	Rule	Rule Tie	r Asbestos	WQP 2 DBP
00600 DIS	TRIBUTION SYSTEM	4	DISTRIBUTIO	N SYSTEM	Λ	Α	Υ			
		COOPER001	CAFETERIA			Α	Υ	2	Υ	
		COOPER002	LADIES RESTI	ROOM		Α	Υ	2	Υ	
		COOPER003	MENS RESTR	OOM		Α	Υ	2	Υ	
		COOPER004	FIRST AID			Α	Υ	2	Υ	
		COOPER005	MAINTENAN	CE		Α	Υ	2	Υ	
		COOPER006	MDPARTS			Α	Υ	2	Υ	
		COOPER007	MECHANICA	L		Α	Υ	2	Υ	
		COOPER008	BRAZE			Α	Υ	2	Υ	
		DOWNSTREAM	WITHIN 5 SE	RVICE CO	N	Α				
		UPSTREAM	WITHIN 5 SE	RVICE CO	N	Α				
00700 EN	TRY POINT	3	ENTRY POIN	Γ		Α				
10394 WE	<u>LL</u>	2	WELL			Α				
		Certified	Operator	Inform	natio	on				
Water Syster	m Facility: DISTRIBUTION									
•	fication: SMALL WATER SYSTE	•								Certification
Operator Nam		Operator Typ	e C	ertificatio	on(s)					Expiration
LEMAY, REALE		CHIEF OPERATO								6/30/2020
,								RATOR - C		12/31/2022
KILBOURN, ER	IC M	ASSIGNED OPEI						OR - CLASS		12/31/2022
ALDOUNN, ER	IC IVI.	MODIGINED OFFI	MATON D	ווטטוווכו	IOIN 3	191 LIVI	OI LINAT	ON CLASS	, ,	12/31/202

WATER TREATMENT PLANT OPERATOR - CLASS II

12/31/2022

	Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source			
CT0820172	20172 COOPER-ATKINS CORP					86	Р	GW			
Local Address	(where applicable)	Service	Residen	ntial	Commerci	al Industri	al Combin	ed Agricultural			
33 REEDS GAP	33 REEDS GAP ROAD				1						
Towns Served	owns Served: MIDDLEFIELD										

Connecticut Department of Public Health Drinking Water Section

				Contact In	formation						
Name				Organizatio	on			Job Title			
Mr. John Rakowski				Cooper Ins	trument Corp		Supervisor				
Mailing Address Lin	e One		Mailing	Address Line Tw	0		City State Zi				
33 Reeds Gap Road						Middlefi	ield	СТ	06455		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	mail Address				
860-894-4396		860-349-	8994		203-687-7467 jrakow			ski@cooper-atkins.com			
Contact Role(s): Ac	lministrative	Contact	·			·					
Name				Organizatio	n			Job Title			
Ms. Carol P. Wallac	e			Cooper-Atk	ins Corp.		President A	nd Ceo			
Mailing Address Lin	e One		Mailing	Address Line Tw	0		City	State	Zip Code		
33 Reeds Gap Road						Middlefi	ield	СТ	06455		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress				
860-894-4440		860-349-	3014		860-558-5458	cwallace	@cooper-at	kins.com			
Contact Role(s): Le	gal Contact, C	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

		<u> </u>			_
	Connecticut Department	of Public Health	Drinkin	g Water Se	ection
	Water Quality Mon	itoring and Cor	npliance	Schedule	
PWS ID	PWS Name		Classification	Population Ow	ner Type Primary Source
СТ0820362	MIDDLEFIELD FEDERATED CHURCH		NTNC	30	P GW
Local Address (w	vhere applicable)	Service Resider	ntial Commerc	cial Industrial	Combined Agricultural
390 MAIN STREE	ET	Connections	1		
Towns Served: N	MIDDLEFIELD				
	Moni	toring Requireme	ents		
Water System	Facility: DISTRIBUTION SYSTEM (WSF	: ID: 00600)			
Asbestos (109	•			1 routi	ne (RT) per nine years
	Point (Sampling Point ID)			Collection Period	Compliance Status
Select from	Inventory of Active Sampling Points		12/31/19		Complete
		1/1/20 -	12/31/28		
Total Coliform	•				utine (RT) per quarter
	Point (Sampling Point ID)			Collection Period	•
Select from	Inventory of Active Sampling Points		9/30/19		Complete
			- 12/31/19		Complete
			- 3/31/20 - 6/30/20		
			- 0/30/20 - 9/30/20		
Lead And Cop	nor (DRCII)	7/1/20	- 3/30/20	E	routine (RT) per year
•	Point (Sampling Point ID)	Monitor	ing Period	Collection Period	
	Inventory of Active Sampling Points		12/31/19	6/1-9/30	Complete
Sciect from	inventory of Active Sumpling Forms		12/31/10	6/1-9/30	complete
			12/31/21	6/1-9/30	
Physical Parar	meters (PPS)	, ,	, - ,		utine (RT) per quarter
•	Point (Sampling Point ID)	Monitor	ing Period	Collection Period	
	Inventory of Active Sampling Points	7/1/19	- 9/30/19		Complete
	, , , ,	10/1/19	- 12/31/19		Complete
		1/1/20	- 3/31/20		
		4/1/20	- 6/30/20		
		7/1/20	- 9/30/20		
Water System	Facility: ENTRY POINT (WSF ID: 0070	0)			
Inorganic Che	micals (IOCS)			1 routin	e (RT) per three years
Sampling P	Point (Sampling Point ID)	Monitor	ing Period	Collection Period	Compliance Status
ENTRY POI	NT (3)	1/1/18 -	12/31/20		
		1/1/21 -	12/31/23		
Nitrate And N	itrite (NOX)			1	routine (RT) per year
	Point (Sampling Point ID)			Collection Period	•
ENTRY POI	NT (3)		12/31/19		Complete
			12/31/20		
		1/1/21 -	12/31/21		(2-)
	rbicides and PCBs-Phase II (SOC2)		lma Davia I		e (RT) per three years
	Point (Sampling Point ID)			Collection Period	•
ENTRY POI	NI (5)		12/31/19		Complete
			12/31/22 12/31/25		
		1/1/23 -	12/31/25		

Monitoring Period

Schedule Generation Date: 3/10/2020

Pesticides, Herbicides and PCBs-Phase V (SOC5)

Sampling Point (Sampling Point ID)

1 routine (RT) per three years

Compliance Status

Collection Period

PWS ID PWS Name CT0820362 MIDDLEFIE	LD FEDERATED CHURCH		Classific		ulation Own 30	P Primary Source P GW
Local Address (where applic		ervice				Combined Agricultural
390 MAIN STREET		onnections		1		
Towns Served: MIDDLEFIELD		I			I	
	Monitori	ing Reau	irements			
Water System Facility: E	NTRY POINT (WSF ID: 00700)					
Pesticides, Herbicides ar	nd PCBs-Phase V (SOC5)				1 routine	(RT) per three years
Sampling Point (Samp	ling Point ID)	I	Monitoring Perio	od Collec	tion Period	Compliance Status
ENTRY POINT (3)		:	L/1/17 - 12/31/1	9		Complete
			L/1/20 - 12/31/2			
		:	L/1/23 - 12/31/2	5		
Organic Chemicals (VOC						(RT) per three years
Sampling Point (Sample	ling Point ID)		Monitoring Perio		tion Period	Compliance Status
ENTRY POINT (3)			L/1/19 - 12/31/2			
Matau Cuatana Fasilitus I	WELL #4 (MCE ID: 107C3)		1/1/22 - 12/31/2	4		
Water System Facility: V	VELL #1 (WSF ID: 10/62)				4	*: (DT)
E. Coli (3014) Sampling Point (Sample)	ling Point ID		Monitoring Perio	nd Collec	1 rou tion Period	tine (RT) per quarter Compliance Status
WELL #1 (2)	ing Foint ID)		7/1/19 - 9/30/19		tion Periou	Complete
VVLLL #1 (2)			0/1/19 - 12/31/1			Complete
			1/1/20 - 3/31/20			complete
			4/1/20 - 6/30/20			
			7/1/20 - 9/30/20			
Mon	thly Water System Facility	(WSF) L	evel Monito	oring Re	guireme	nts
	NTRY POINT (WSFID: 00700)	(1101)		, 6 e	10	
	Monitoring Requirement (Summary	Type)	Operating Li	mit		Samples Req/Month
Analyte	Monitoring Requirement (Summary Entry Point pH Monitoring (PHRD)	Туре)	Operating Li Minimum: 7			Samples Req/Month 4
Analyte				7.0 PH		•
Analyte pH		Complia Monitori	Minimum: 7 nce History: ng Period	7.0 PH Operat	ing Limit ance Status:	4 Monitoring
Analyte pH		Complia Monitori 10/1/201	Minimum: 7 nce History: ng Period 9 - 10/31/2019	7.0 PH Operat	ing Limit	4 Monitoring
Analyte pH		Complia Monitori 10/1/201 11/1/201	Minimum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019	7.0 PH Operat	ing Limit	4 Monitoring
Analyte pH		Complia Monitori 10/1/201 11/1/201 12/1/201	Minimum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019 9 - 12/31/2019	7.0 PH Operat	ing Limit	4 Monitoring
Analyte pH		Complia Monitori 10/1/201 11/1/201 12/1/201 1/1/2020	Minimum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019 9 - 12/31/2019 1 - 1/31/2020	7.0 PH Operat	ing Limit	4 Monitoring
Analyte pH Start Date: 10/1/2016	Entry Point pH Monitoring (PHRD)	Complia Monitori 10/1/201 11/1/201 12/1/201 1/1/2020 2/1/2020	Minimum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019 9 - 12/31/2019 1 - 1/31/2020 1 - 2/29/2020	7.0 PH Operat Compli	ing Limit ance Status:	4 Monitoring Compliance Status:
Analyte pH Start Date: 10/1/2016 Analyte	Entry Point pH Monitoring (PHRD) Monitoring Requirement (Summary	Complia Monitori 10/1/201 11/1/201 12/1/201 1/1/2020 2/1/2020	Minimum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019 9 - 12/31/2019 - 1/31/2020 - 2/29/2020 Operating Li	7.0 PH Operat Compli	ing Limit ance Status:	4 Monitoring Compliance Status:
Analyte pH Start Date: 10/1/2016 Analyte pH	Entry Point pH Monitoring (PHRD)	Complia Monitori 10/1/201 11/1/201 12/1/201 1/1/2020 2/1/2020 Type)	Minimum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019 9 - 12/31/2019 1 - 1/31/2020 1 - 2/29/2020 Operating Li Maximum: 7	7.0 PH Operat Compli	ing Limit ance Status:	4 Monitoring Compliance Status: Samples Req/Month 4
Analyte pH Start Date: 10/1/2016 Analyte	Entry Point pH Monitoring (PHRD) Monitoring Requirement (Summary	Complia Monitori 10/1/201 11/1/201 12/1/201 1/1/2020 2/1/2020 Type)	Minimum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019 9 - 12/31/2019 1 - 1/31/2020 1 - 2/29/2020 Operating Li Maximum: 7 nce History:	7.0 PH Operat Compli	ing Limit ance Status:	4 Monitoring Compliance Status: Samples Req/Month 4 Monitoring
Analyte pH Start Date: 10/1/2016 Analyte pH	Entry Point pH Monitoring (PHRD) Monitoring Requirement (Summary	Complia Monitori 10/1/201 11/1/201 12/1/201 1/1/2020 2/1/2020 Type) Complia Monitori	Minimum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019 9 - 12/31/2019 1- 1/31/2020 1- 2/29/2020 Operating Li Maximum: 7 nce History: ng Period	7.0 PH Operat Compli	ing Limit ance Status:	4 Monitoring Compliance Status: Samples Req/Month 4 Monitoring
Analyte pH Start Date: 10/1/2016 Analyte pH	Entry Point pH Monitoring (PHRD) Monitoring Requirement (Summary	Complia Monitori 10/1/201 11/1/201 12/1/201 1/1/2020 2/1/2020 Type) Complia Monitori 10/1/201	Minimum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019 9 - 12/31/2019 1 - 1/31/2020 1 - 2/29/2020 Operating Li Maximum: 7 nce History: ng Period 9 - 10/31/2019	7.0 PH Operat Compli	ing Limit ance Status:	4 Monitoring Compliance Status: Samples Req/Month 4 Monitoring
Analyte pH Start Date: 10/1/2016 Analyte pH	Entry Point pH Monitoring (PHRD) Monitoring Requirement (Summary	Complia Monitori 10/1/201 11/1/201 12/1/201 1/1/2020 2/1/2020 Type) Complia Monitori 10/1/201 11/1/201	Minimum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019 9 - 12/31/2019 1- 1/31/2020 1- 2/29/2020 Operating Li Maximum: 7 nce History: ng Period	7.0 PH Operat Compli	ing Limit ance Status:	4 Monitoring Compliance Status: Samples Req/Month 4 Monitoring
Analyte pH Start Date: 10/1/2016 Analyte pH	Entry Point pH Monitoring (PHRD) Monitoring Requirement (Summary	Complia Monitori 10/1/201 11/1/201 12/1/201 2/1/2020 Type) Complia Monitori 10/1/201 11/1/201 12/1/201	Minimum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019 9 - 12/31/2019 1- 1/31/2020 1- 2/29/2020 Operating Li Maximum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019	7.0 PH Operat Compli	ing Limit ance Status:	4 Monitoring Compliance Status: Samples Req/Month 4 Monitoring
Analyte pH Start Date: 10/1/2016 Analyte pH	Entry Point pH Monitoring (PHRD) Monitoring Requirement (Summary	Complia Monitori 10/1/201 11/1/201 12/1/202 2/1/2020 Type) Complia Monitori 10/1/201 11/1/201 12/1/201 1/1/2020	Minimum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019 9 - 12/31/2019 1 - 1/31/2020 0 - 2/29/2020 Operating Li Maximum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019 9 - 12/31/2019	7.0 PH Operat Compli	ing Limit ance Status:	4 Monitoring Compliance Status: Samples Req/Month 4 Monitoring
Analyte pH Start Date: 10/1/2016 Analyte pH	Entry Point pH Monitoring (PHRD) Monitoring Requirement (Summary Entry Point pH Monitoring (PHRD)	Complia Monitori 10/1/201 11/1/201 12/1/201 1/1/2020 2/1/2020 Type) Complia Monitori 10/1/201 11/1/201 12/1/201 2/1/2020	Minimum: 7 nce History: ng Period 9 - 10/31/2019 9 - 11/30/2019 9 - 12/31/2019 1 - 1/31/2020 1 - 2/29/2020	7.0 PH Operat Compli	ing Limit ance Status:	4 Monitoring Compliance Status: Samples Req/Month 4 Monitoring

		Department o Quality Moni				_			
PWS ID	PWS Name	Quality 110111	toring an	a dom	_				Primary Source
CT082036		ATED CHURCH				NTNC	30	P	GW
	ress (where applicable)		Service	Resident		Commercia			_
390 MAIN			Connections			1			
	rved: MIDDLEFIELD								
		Other (Compliance	Sched	ule	S			
Complian	ce Schedule Activity			L	Due D	ate	Achiev	ed Date	
SUBMIT LE	EAD CONSUMER NOTICE CE	RTIFICATE		12	2/29/	2010			
SUBMIT LE	EAD CONSUMER NOTICE CE	RTIFICATE		12	2/29/	2011			
CROSS CO	NNECTION EXEMPTION			3	3/1/2	015			
DISTRIBUT	TION SYSTEM MATERIALS EV	'ALUATION		8	/31/2	2019			
		Public No	tification R	equire	me	nts			
		(Compliance	Notice		Public No	<u>tification</u>	PN Ce	<u>rtification</u>
Violation/			Period	Tier		Required	Performed	Due to DPI	
	ality Parameters - Basic M&I		/05 - 12/31/05	3		/17/2010		3/27/2010	
Lead and (Copper M&R Violation	10/	1/10 - 9/30/11	3	3,	/20/2012		3/30/2012	
Water System Facility and Sampling Point Inventory									
Water							tal Lead a	nd	
System Facility ID	Water System Facility	Sampling Point ID	t Sampling Poi Description	nt	S	-	form Coppe ule Rule T		Stage s WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	10002	WS2720-10			Α .	Y		
		10003	GENERATED I	BY BATCH		Α .	Y		
		10004	GENERATED I	BY BATCH		Α '	Y		
		10012	GENERATED I	BY BATCH		Α '	Y		
		10013	GENERATED I	BY BATCH		Α '	Y		
		20007	WS2720-33			Α '	Y		
		20008	GENERATED I	ВҮ ВАТСН		Α .	Y		
		20010	GENERATED I	BY BATCH		Α '	Y		
		20011	DISTRIBUTIO	N SYSTEM		Α '	Y		
		4	DISTRIBUTIO	N SYSTEM		Α '	Y		
		DOWNSTREAM	1 WITHIN 5 SEF	RVICE CON	1	Α			
		UPSTREAM	WITHIN 5 SEF	RVICE CON	J	Α			
00700	ENTRY POINT	3	ENTRY POINT			Α			
10762	WELL #1	2	WELL #1			Α			
46416	MIDDLEFIELD FEDERATED TREATMENT STATION								
		Certified	Operator	Inform	atio	n			
Water Sy	stem Facility: DISTRIBU		<u> </u>						
•	assification: SMALL WATER								Certification
Operator	-	Operator Ty	pe Co	ertificatio	n(s)				Expiration
	HNESSY, WILLIAM J.	CHIEF OPERAT				ENT PLANT	OPERATOR	- CLASS II	6/30/2021
	32.,		ntact Infori						-,,
Name			Organization					Job Title	
Name			n garrization					Jon Title	

Mailing Address Line Two

P. O. Box 200

Middlefield Federated Church

State

Zip Code

06455

Administrative

City

Middlefield

Mr. Robert Newcomb

102 Main Street

Mailing Address Line One

Connecticut Department of Public Health Drinking Water Section											
Vater Qua	lity Mor	nite	oring a	nd Con	npli	ance S	Schedul	e			
					Class	ification	Population	Own	er Type	Prima	ry Source
FEDERATED CI	HURCH				N	TNC	30		Р	(GW
ole)			Service	Residential		ommerci	ial Industri	al (Combine	d Ag	ricultural
			Connectio	ns		1	1				
owns Served: MIDDLEFIELD											
Business Phone Extension Fax N			ile Phone Emergency Phone			e Email /	Address				
				860-623-1979							
ive Contact											
		Or	Organization				Job Title				
h Inc											
	Mailing Add	ress	Line Two				City		State	Zip	Code
						Middle	efield		СТ	0	6455
n Fax	М	obil	e Phone	Emergence	y Phon	e Email <i>i</i>	Address				
ontact Role(s): Legal Contact, Owner											
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Vater Qua D FEDERATED CH ble) Dn Fax Eive Contact h Inc	Vater Quality More Description Fax Mailing Add on Fax Mailing Add	Vater Quality Monitor D FEDERATED CHURCH ble) Dn Fax Mobil Eive Contact Or Mailing Address Dn Fax Mobil	Vater Quality Monitoring a D FEDERATED CHURCH ble) Service Connection The Mobile Phone Service Connection Mobile Phone Mailing Address Line Two Mobile Phone Mobile Phone	Vater Quality Monitoring and Con D FEDERATED CHURCH ble) Service Connections Resider Connections On Fax Mobile Phone Emergence 860-623 tive Contact Organization h Inc Mailing Address Line Two	Vater Quality Monitoring and Complia Class D FEDERATED CHURCH ble) Service Connections Mobile Phone Emergency Phone 860-623-1979 Sive Contact Organization h Inc Mailing Address Line Two	Vater Quality Monitoring and Compliance School Classification D FEDERATED CHURCH ble) Service Connections Connections Service Connections 1 D Fax Mobile Phone Emergency Phone Email A 860-623-1979 Sive Contact Organization h Inc Mailing Address Line Two Middle Con Fax Mobile Phone Emergency Phone Email A Middle Con Fax Mobile Phone Emergency Phone Email A Middle Con Fax Mobile Phone Emergency Phone Email A Middle Con Fax Mobile Phone Emergency Phone Email A Middle Con Fax Mobile Phone Emergency Phone Email A Middle Con Fax Mobile Phone Emergency Phone Email A Middle Con Fax Mobile Phone Emergency Phone Email A Middle Con Fax Mobile Phone Emergency Phone Email A Middle Con Fax Mobile Phone Emergency Phone Email A Middle Con Fax Mobile Phone Emergency Phone Email A Middle Con Fax Mobile Phone Emergency Phone Email A Middle Con Fax Mobile Phone Emergency Phone Email A Middle Con Fax Mobile Phone Emergency Phone Email A Middle Con Fax Mobile Phone Email A Middle Con Fax Middle Con Fax Mobile Phone Email A Middle Con Fax Middle Co	Vater Quality Monitoring and Compliance Schedul Classification Population NTNC 30 ble) Service Connections Residential Commercial Industrial Connections 1 Diagram Fax Mobile Phone Emergency Phone Email Address Service Connections 1 Diagram Fax Mobile Phone Emergency Phone Email Address Service Connections 1 Diagram Fax Mobile Phone Emergency Phone Email Address Service Connections 1 Diagram Fax Mobile Phone Emergency Phone Email Address Mailing Address Line Two City Middlefield Diagram Fax Mobile Phone Emergency Phone Email Address	Vater Quality Monitoring and Compliance Schedule Classification Population Own	Vater Quality Monitoring and Compliance Schedule Classification Population Owner Type	Classification Population Owner Type Primary

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 H	lealth	Dı	rinking	g Water	S	ection	
	Water Quality Monit	oring an	d Con	npl	iance	Schedul	le		
PWS ID	PWS Name	<u> </u>		-			_	ner Type I	Primary Source
CT0820382	THE INDEPENDENT DAY SCHOOL				NTNC	199		P	GW
Local Address (v	where applicable)	Service	Residen	tial	Commerc	ial Industri	al	Combined	Agricultural
LAUREL BROOK	ROAD	Connections	1						
Towns Served:	MIDDLEFIELD					·			
	Monito	oring Requ	iireme	nts					
Water System	Facility: DISTRIBUTION SYSTEM (WSF I	D: 00600)							
Asbestos (10	94)					1 rc	uti	ne (RT) pe	r nine years
Sampling	Point (Sampling Point ID)		Monitori	ing P	Period C	Collection Pe	rioa	l Comp	liance Status
Select from	n Inventory of Active Sampling Points		1/1/11 -	12/3	31/19			C	omplete
			1/1/20 -	12/3	31/28				
Total Coliforn									per quarter
	Point (Sampling Point ID)		Monitori			Collection Pe	rioa		liance Status
Select fron	n Inventory of Active Sampling Points		7/1/19 -						omplete
			10/1/19 -						omplete
			1/1/20 -					C	omplete
			4/1/20 -						
	anor (DDCII)		7/1/20 -	9/3	0/20	Г ио		o (DT) nor	*h****
Lead And Cop	Point (Sampling Point ID)		Monitori	ina D	Period (rou כ Collection Pe			three years liance Status
	n Inventory of Active Sampling Points		1/1/18 -			6/1-9/30	iiou	Comp	idilce Status
Sciect iron	in inventory of Active Sumpling Forms		1/1/21 -		-	6/1-9/30			
Physical Para	meters (PPS)		1, 1, 21	12/0	,1,23		ro	utine (RT)	per quarter
	Point (Sampling Point ID)		Monitori	ing P	Period (collection Pe			liance Status
Select from	n Inventory of Active Sampling Points		7/1/19 -						omplete
	· · · · · · · · · · · · · · · · · · ·		10/1/19 -	12/	31/19			С	omplete
			1/1/20 -	3/3	1/20			С	omplete
			4/1/20 -	6/3	0/20				
			7/1/20 -	9/3	0/20				
Water System	Facility: ENTRY POINT (WSF ID: 00700)								
Inorganic Che	emicals (IOCS)					1 rou	ıtin	e (RT) per	three years
Sampling	Point (Sampling Point ID)		Monitori	ing P	Period C	Collection Pe	rioa	l Comp	liance Status
ENTRY POI	NT (3)		1/1/17 -	12/3	31/19			С	omplete
			1/1/20 -						
			1/1/23 -	12/3	31/25				
Nitrate And N	• •							=	RT) per year
	Point (Sampling Point ID)		Monitori			Collection Pe	rioa		liance Status
ENTRY POI	N1 (3)		1/1/19 -						omplete
			1/1/20 - 1/1/21 -					C	omplete
Docticidos III	erbicides and PCBs-Phase II(SOC2)		1/1/21-	12/3) T C T	1	.+:	o (DT) non	thron woors
-	Point (Sampling Point ID)		Monitori	ina P	Period (rou Collection Pe			three years liance Status
ENTRY POI			1/1/17 -			J. C.			omplete
21411(1110)	(5)		1/1/20 -		-				opictc
			-, -, -0	, _	-,				

1/1/23 - 12/31/25

Monitoring Period

Schedule Generation Date: 3/10/2020

Pesticides, Herbicides and PCBs-Phase V (SOC5)

Sampling Point (Sampling Point ID)

1 routine (RT) per three years

Compliance Status

Collection Period

	Connectic	•					_		ection	
	Wat	ter Quality	y Monit	oring a	and Co	mplia	nce Sch	iedule		
PWS ID	PWS Name					Classifi	cation Pop	ulation Owi	ner Type	Primary Source
СТ0820382	THE INDEPENDE	NT DAY SCHOOL	•			NT	NC	199	Р	GW
Local Address (where applicable)			Service	Reside	ential Co	mmercial	Industrial	Combine	d Agricultural
LAUREL BROOK	(ROAD			Connectio	ons 1					
Towns Served:	MIDDLEFIELD					·				
			Monito	oring Re	quirem	ents				
Water System	Facility: ENTRY	POINT (WSF	ID: 00700)							
Pesticides, H	erbicides and PC	Bs-Phase V (S	OC5)					1 routine	(RT) pei	three years
Sampling	Point (Sampling P	oint ID)			Monito	oring Perio	od Collec	tion Period	Comp	liance Status
ENTRY PO	INT (3)				1/1/17	- 12/31/1	.9		С	omplete
					1/1/20	- 12/31/2	!2			
					1/1/23	- 12/31/2	!5			
Organic Cher	micals (VOCS)							1 rou	itine (RT)	per quarter
Sampling	Point (Sampling P	oint ID)			Monito	oring Perio	od Collec	tion Period	Comp	liance Status
ENTRY PO	INT (3)				7/1/19	9 - 9/30/1	9		С	omplete
					10/1/19	9 - 12/31/	19		С	omplete
					1/1/20) - 3/31/2	0		С	omplete
					4/1/20	0 - 6/30/2	0			
					7/1/20	0 - 9/30/2	0			
			Other C	omplian	ice Sche	dules				
Compliance Sci	hedule Activity					Due Dat	e	Achieved	Date	
CROSS CONNEC	CTION SURVEY REP	ORT				3/1/201	9			
DISTRIBUTION	SYSTEM MATERIAL	S EVALUATION				8/31/20	19			
CROSS CONNEC	CTION SURVEY REP	ORT				3/1/202	0			
		Water Syst	em Facili	ity and S	Samplin	g Point	Invento	ory		
Water							Total	Lead and		
	ter System Facility	Sam	pling Point				-	n Copper		Stage
Facility ID			ID	Descriptio	n	Sta	tus Rule	Rule Tier	Asbestos	WQP 2 DBPR
00600 DIST	TRIBUTION SYSTEM		4	DISTRIBUT			Y			
			WNSTREAM	WITHIN 5	SERVICE CO	ON A	١			
		U	PSTREAM	WITHIN 5	SERVICE CO	ON A	١			
00700 ENT	RY POINT		3	ENTRY PO	INT	P	١			
10395 WEI	_L		2	WELL		<i>P</i>	١			
		(Certified	Operato	or Infor	mation				
Water System	Facility: DISTR	IBUTION SYSTI	EM (WSF II	D: 00600)						
Facility Classifi	cation: SMALL WA	TER SYSTEM								Certification
Operator Nam	e	0	perator Typ	е	Certificat	tion(s)				Expiration
ROWLEY, BREN	IDAN	CHI	EF OPERATO)R	DISTRIBU	TION SYS	TEM OPERA	TOR - CLASS	1	12/31/2022
					WATER T	REATMEN	T PLANT OF	ERATOR - CI	ASS II	12/31/2022
			Con	tact Info	ormatio	n				
Name				rganization					Job Title	
Ms. Jessi Chris	tiansen			dependent	Day Schoo	ol	He	ead of Schoo		
Mailing Addres		Ma	iling Address		•			City	State	Zip Code
115 Laurel Bro							Middlefield	•	СТ	06455
Business Pho	ne Extension	Fax	Mobi	le Phone	Emergen	cy Phone	Email Addr	ess	1	
860-347-723	35	860-347-8852	2					n@independ	dentdaysc	hool.org

	Connecticut Department	of Public	пеани	וע ו	rmkmg	vvater	Section		
	Water Quality Mor	nitoring a	nd Con	npl	liance S	Schedul	e		
PWS ID	PWS Name	<u> </u>					Classification Population Owner Type Prim		
СТ0820382	THE INDEPENDENT DAY SCHOOL				NTNC	199	Р	GW	
Local Address	(where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural	

Connections

Connecticut Department of Dublic Health Drinking Water Costion

Towns Served: MIDDLEFIELD

LAUREL BROOK ROAD

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

Page 16

	Connecticut Department				_		ection	
	Water Quality Mo	nitoring an	d Comp	olianc	e Sc	hedule		
PWS ID CT0820392	PWS Name MEMORIAL MIDDLE SCHOOL		Cl	lassification	on Po	pulation Ov 359	wner Type P	rimary Source GW
Local Address	(where applicable)	Service	Residentia	I Comme	ercial	Industrial	Combined	Agricultura
124 HUBBARD	STREET	Connections	1					
Towns Served:	: MIDDLEFIELD	,						'
	Mo	nitoring Requ	iirement	ts				
Water Syster	m Facility: DISTRIBUTION SYSTEM (W	/SF ID: 00600)						
Asbestos (1	094)					1 rout	ine (RT) pe	r nine years
Sampling	Point (Sampling Point ID)		Monitoring	Period	Colle	ection Perio	d Compl	iance Status
Select fro	om Inventory of Active Sampling Points		1/1/11 - 12	/31/19	_		Co	mplete
			1/1/20 - 12	/31/28				
Total Colifor						1 rc	outine (RT)	per quarter
Sampling	Point (Sampling Point ID)		Monitoring	Period	Colle	ection Perio	d Compl	iance Status
Select fro	om Inventory of Active Sampling Points		7/1/19 - 9/	/30/19			Co	mplete
			10/1/19 - 12	2/31/19			Co	mplete
			1/1/20 - 3/				Co	mplete
			4/1/20 - 6/	-				
			7/1/20 - 9/	/30/20				
	opper (PBCU)					5 routir		three years
	y Point (Sampling Point ID)		Monitoring		Colle	ection Perio	d Compl	iance Status
Select fro	om Inventory of Active Sampling Points		1/1/18 - 12			6/1-9/30		
			1/1/21 - 12	/31/23	-	6/1-9/30		
-	ameters (PPS)							per quarter
	g Point (Sampling Point ID)		Monitoring		Colle	ection Perio		iance Status
Select fro	om Inventory of Active Sampling Points		7/1/19 - 9/					mplete
			10/1/19 - 12					mplete
			1/1/20 - 3/				Cc	mplete
			4/1/20 - 6/					
A/=+= C+=	F	700\	7/1/20 - 9/	/30/20				
•	m Facility: ENTRY POINT (WSF ID: 007	700)				4	(DT)	
_	nemicals (IOCS)		Manitarina	Dorlad	Call			three years iance Status
ENTRY PO	g Point (Sampling Point ID)		Monitoring 1/1/19 - 12		Cone	ection Perio	a Compi	iance Status
ENINTPO	ווער (3)		1/1/19 - 12					
Nitrata And	Nitrita (NOV)		1/1/22 - 12	/31/24			1 routing/	OT) nor year
	Nitrite (NOX) Point (Sampling Point ID)		Monitoring	Period	Colle	ection Perio	=	RT) per year iance Status
ENTRY PO			1/1/19 - 12		Conc	ection remo		mplete
	J (J)		1/1/20 - 12					pictc
			1/1/21 - 12					
Pesticides F	Herbicides and PCBs-Phase II (SOC2)		_, _, _ 12	, , , , , , ,		1 routir	ne (RT) ner	three years
	Point (Sampling Point ID)		Monitoring	Period	Colle	ection Perio		iance Status
ENTRY PO			1/1/17 - 12					mplete
	. ,		1/1/20 - 12					

1/1/23 - 12/31/25

Monitoring Period

1/1/17 - 12/31/19

Schedule Generation Date: 3/10/2020

ENTRY POINT (3)

Pesticides, Herbicides and PCBs-Phase V (SOC5)

Sampling Point (Sampling Point ID)

1 routine (RT) per three years

Compliance Status

Complete

Collection Period

	Connecticut De	epartment of	Public H	ealth	Drink	ing W	ater S	ection	
		uality Monit							
PWS ID	PWS Name	eddirey 1-10111e	oring and		<u> </u>			wner Type F	rimary Sou
СТ082039	MEMORIAL MIDDLE SCI	HOOL			NTNC		359	L	GW
Local Add	ress (where applicable)		Service	Resident	ial Comn	nercial I	ndustrial	Combined	l Agricultu
124 HUBB	BARD STREET		Connections	1					
Towns Sei	rved: MIDDLEFIELD				1	'			'
		Monito	oring Requ	iremer	nts				
Water Sy	stem Facility: ENTRY POIN	T (WSF ID: 00700)							
Pesticid	es, Herbicides and PCBs-Pha	ase V (SOC5)					1 routi	ne (RT) per	three yea
Sam	pling Point (Sampling Point ID))	ı	Monitorin	ng Period	Collec	tion Perio	d Compl	iance Statu
				1/1/20 - 1	12/31/22				
				1/1/23 - 1	12/31/25				
Organic	Chemicals (VOCS)							1 routine (RT) per ye
Sam	pling Point (Sampling Point ID)			Monitorin	ng Period	Collec	tion Perio	d Compl	iance Statu
ENTF	RY POINT (3)			1/1/19 - 1				Co	omplete
				1/1/20 - 1					
				1/1/21 - 1	12/31/21				
		Other Co	ompliance	Sched	ules				
Complian	ce Schedule Activity			D	Due Date		Achieve	d Date	
DISTRIBU	TION SYSTEM MATERIALS EVAL	UATION			/31/2019				
CROSS CO	NNECTION SURVEY REPORT				3/1/2020				
	Wate	er System Facili	ity and San	npling	Point I	nvento	ry		
Water						Total	Lead an		
System	Water System Facility	Sampling Point ID		it		Coliforn			Sta
Facility ID 00201		טו	Description		Status	Rule	Kule H	er Asbestos	WQP Z DE
	ATM STORAGE #1								
00202	ATM STORAGE #2								
00302	TRANSFER PUMPS		CENEDIC DICT	DIDLITION					
00600	DISTRIBUTION SYSTEM	4	GENERIC DIST			Υ			
		DOWNSTREAM MEMSCH001	KITCHEN SINK			Υ	2	Υ	
		MEMSCH001		_	A A	Υ	2	Υ	
		MEMSCH003			A	Y	2	Υ	
			KITCHEN SINK	_	A	Y	2	Y	
				7	$\overline{}$	•	_	•	
				OM	Δ	V	2	V	
		MEMSCH005	BOYS BATHRO		A A	Y	2	Y	
		MEMSCH005 MEMSCH006	BOYS BATHRO		Α	Υ	2	Υ	
		MEMSCH005 MEMSCH006 MEMSCH007	BOYS BATHRO GIRLS BATHRO LOCKER RM	MOO					
		MEMSCH005 MEMSCH006 MEMSCH007 MEMSCH008	BOYS BATHRO GIRLS BATHRO LOCKER RM TEACHER LOU	OOM NGE	A A A	Y Y	2 2 2	Y Y Y	
		MEMSCH005 MEMSCH006 MEMSCH007	BOYS BATHRO GIRLS BATHRO LOCKER RM TEACHER LOU SCIENCE ROOI	OOM NGE M	A A	Y Y Y	2 2	Y Y	
		MEMSCH005 MEMSCH006 MEMSCH007 MEMSCH008 MEMSCH009 MEMSCH010	BOYS BATHRO GIRLS BATHRO LOCKER RM TEACHER LOU SCIENCE ROOI	OOM NGE M	A A A	Y Y Y	2 2 2 2	Y Y Y	
		MEMSCH005 MEMSCH006 MEMSCH007 MEMSCH008 MEMSCH009 MEMSCH010	BOYS BATHRO GIRLS BATHRO LOCKER RM TEACHER LOU SCIENCE ROOI NURSES OFFICE	OOM NGE W	A A A A	Y Y Y Y	2 2 2 2 2	Y Y Y Y	
00700	ENTRY POINT	MEMSCH005 MEMSCH006 MEMSCH007 MEMSCH008 MEMSCH009 MEMSCH010 MEMSCH011	BOYS BATHRO GIRLS BATHRO LOCKER RM TEACHER LOU SCIENCE ROOI NURSES OFFIC ART ROOM	OOM NGE W	A A A A	Y Y Y Y	2 2 2 2 2	Y Y Y Y	

Α

WELL #5

2

10405

WELL #5

	Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source			
СТ0820392	MEMORIAL MIDDLE SCHOOL				NTNC	359	L	GW			
Local Address (v	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural				
124 HUBBARD S	STREET	Connections	1								

Connecticut Department of Public Health Drinking Water Section

Towns Served: MIDDLEFIELD

Certified Operator Information

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

Facility Classification: SMALL WA		Certification	
Operator Name	Operator Type	Certification(s)	Expiration
FUNK, CHRISTOPHER B.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2022
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2022

Contact Information									
Name				1	Job Title				
Dr. Kathryn Y. Veronesi				Regional School District #13 Superintendent					
Mailing Address Line One Mailing Addr			dress Line Two			City	State	Zip Code	
					Durham		СТ	06424	
Extension	Fax	N	Nobile Phone	Emergency Phone	Email Ac	ldress			
	860-349-7	7203		860-849-3464 kveronesi@rsd13.org					
	One Extension	One Extension Fax 860-349-7	oesi One Mailing Add	Organization Regional Sch One Mailing Address Line Two Extension Fax Mobile Phone 860-349-7203	Organization Regional School District #13 One Mailing Address Line Two Extension Fax Mobile Phone Emergency Phone 860-349-7203 860-849-3464	Organization Regional School District #13 One Mailing Address Line Two Durham Extension Fax Mobile Phone Emergency Phone Email Act 860-349-7203 860-849-3464 kverone	Organization Regional School District #13 One Mailing Address Line Two City Durham Extension Fax Mobile Phone Emergency Phone Email Address 860-349-7203 860-849-3464 kveronesi@rsd13.org	Organization Job Title Regional School District #13 Superintendent One Mailing Address Line Two City State Durham CT Extension Fax Mobile Phone Emergency Phone Email Address 860-349-7203 860-849-3464 kveronesi@rsd13.org	

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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

End of schedule

Commontiant Domestry and	CDleli e II e elel	. Daialaia	- 117-4	Car	Li			
Connecticut Department o		•	_		tion			
Water Quality Moni	toring and Co	_			. Turn o Dui			
PWS ID PWS Name		Classification	-					
CT0829013 JOHN LYMAN SCHOOL	Comica Decide	NTNC ntial Commerc	285	L		GW		
Local Address (where applicable) 106 WAY ROAD		ntiai Commerc	ial Industri	ai CC	ombined	Agricultura		
Towns Served: MIDDLEFIELD	Connections 1							
	toring Requirem	onts						
Water System Facility: DISTRIBUTION SYSTEM (WSF								
Asbestos (1094)	15.00000		1 ro	utine	(RT) ner	nine years		
Sampling Point (Sampling Point ID)	Monito	ring Period (Collection Pe			ince Status		
Select from Inventory of Active Sampling Points		- 12/31/19		1100		nplete		
Scient from inventory of Active Sumpling Forms		- 12/31/28				Прістс		
Total Coliform (3100)	1/1/20	12/31/20	1	routii	ne (RT) n	er quarter		
Sampling Point (Sampling Point ID)	Monito	ring Period (د Collection Pe			nce Status		
Select from Inventory of Active Sampling Points		- 9/30/19	concentration re	iiou		nplete		
select from inventory of Active Sampling Forms		- 12/31/19				nplete		
		- 3/31/20				nplete		
		- 6/30/20				прістс		
		- 9/30/20						
Lead And Copper (PBCU)	7,1,20	3,30,20		5 ro	utine (R)	Γ) per year		
Sampling Point (Sampling Point ID)	Monito	ring Period (Collection Pe		=	ince Status		
Select from Inventory of Active Sampling Points		- 12/31/19	6/1-9/30	iiou		nplete		
Scient from inventory of Active Sumpling Forms		- 12/31/20	6/1-9/30			Прістс		
		- 12/31/21	6/1-9/30					
Physical Parameters (PPS)	1/1/21	12/31/21		routii	ne (RT) n	er quarter		
Sampling Point (Sampling Point ID)	Monito	ring Period (Collection Pe			ince Status		
Select from Inventory of Active Sampling Points		- 9/30/19	concetton r c	iiou		nplete		
Select from inventory of Active Sumpling Forms		- 12/31/19				nplete		
		- 3/31/20				nplete		
		- 6/30/20			C01	пріссс		
		- 9/30/20						
Water System Facility: ENTRY POINT - WELLS 1 & 3 (- 3/30/20						
Inorganic Chemicals (IOCS)			1 roı	ıtine (I	RT) per t	hree years		
Sampling Point (Sampling Point ID)	Monito	ring Period (Collection Pe	-		nce Status		
ENTRY POINT (3)		- 12/31/19				nplete		
. ,		- 12/31/22						
		- 12/31/25						
Nitrate And Nitrite (NOX)	, ,==			1 ro	utine (R	Γ) per year		
Sampling Point (Sampling Point ID)	Monito	ring Period (Collection Pe		=	nce Status		
ENTRY POINT (3)		- 12/31/19				nplete		
		- 12/31/20				. **		
		- 12/31/21						
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		· ·	1 roı	ıtine (I	RT) per t	hree years		
Sampling Point (Sampling Point ID)		ring Period (Collection Pe	-		nce Status		
ENTRY POINT (3)		- 12/31/19				nplete		
- \-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\	-, -, =.	1/1/17 - 12/31/13 COII						

1/1/20 - 12/31/22 1/1/23 - 12/31/25

	Connecticut Dep	partment of	Public H	ealtŀ	n Dr	inki	ng W	ater S	ection	
	Water Qu	ality Monit	oring and	d Cor	npl	ianc	e Sch	edule		
PWS ID	PWS Name	<u> </u>	<u> </u>						vner Type Pr	rimary Source
CT082901	3 JOHN LYMAN SCHOOL				1	NTNC	2	85	L	GW
Local Add	ress (where applicable)		Service	Reside	ntial	Comme	ercial Ir	ndustrial	Combined	Agricultural
106 WAY	ROAD		Connections	1						
Towns Ser	rved: MIDDLEFIELD									
		Monito	oring Requ	ireme	ents					
Water Sy	stem Facility: ENTRY POINT	- WELLS 1 & 3 (V	VSF ID: 00700)						
Organic	Chemicals (VOCS)							:	L routine (R	T) per year
Sam	pling Point (Sampling Point ID)		ı	Monito	ring P	eriod	Collect	ion Period	d Compli	ance Status
ENTF	RY POINT (3)			1/1/19 -	- 12/3	1/19			Со	mplete
				1/1/20 -	- 12/3	1/20				
				1/1/21 -	- 12/3	1/21				
		Other C	ompliance	Sche	dule	:S				
Complian	ce Schedule Activity				Due L	Date		Achieved	d Date	
DISTRIBUT	TION SYSTEM MATERIALS EVALUA	TION			8/31/	2019				
CROSS CO	NNECTION SURVEY REPORT				3/1/2	2020				
	Water	System Facili	ity and San	npling	g Poi	int In	vento	ry		
Water							Total	Lead an	d	
System	Water System Facility	Sampling Point		it			Coliform			Stage
Facility ID		ID	Description			Status	Rule	Rule Tie	r Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DIST			Α	Υ			
		DOWNSTREAM			N	A				
		JOHNLY001	KITCHEN SINK			A	Y	2	Y	
		JOHNLY002	BOYS BATHRO			A	Y	2	Y	
		JOHNLY003	GIRLS BATHRO	OM		A	Y	2	Y	
		JOHNLY004	ART ROOM	·-		A	Y	2	Y	
		JOHNLY005	NURSES OFFIC			A	Y	2	Y	
		JOHNLY006	MEDIA HALLW	/AY		A	Y			
		JOHNLY007	ROOM 2B			A	Y			
		JOHNLY008 JOHNLY009	MEDIA BOYS PORTABLE #1			A	Y Y			
		JOHNLY010	PORTABLE #1			A	Υ			
		UPSTREAM	WITHIN 5 SER	VICE CO	NNI	A A	ı			
00700	ENTRY POINT - WELLS 1 & 3	3	ENTRY POINT	VICE CO	/IN	A				
10397	WELL #1	2	WELL 1			A				
58015 58022	WELL #3 PUMP STATION	2	WELL 3			Α				
ST01	ATMOSPHERIC TANK 1									
ST02	ATMOSPHERIC TANK 2		•							
		Certified	Operator I	ntorn	natio	on				

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

Facility Classification:SMALL WATER SYSTEMCertificationOperator NameOperator TypeCertification(s)ExpirationFUNK, CHRISTOPHER B.CHIEF OPERATORDISTRIBUTION SYSTEM OPERATOR - CLASS II6/30/2022WATER TREATMENT PLANT OPERATOR - CLASS II6/30/2022

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.

	Water Quality Monitoring and Compliance Schedule									
WS ID	S ID PWS Name				ssification	Population	Owner Type	Primary Source		
T0829013 JOHN LYMAN SCHOOL				NTNC		285	L	GW		
ocal Address (where applicable)		Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural		

Connections

Connecticut Department of Public Health Drinking Water Section

Towns Served: MIDDLEFIELD

106 WAY ROAD

PV CT

Contact Information									
Name				Organization	า	Job Title			
Dr. Kathryn Y. Veronesi				Regional Sch	Regional School District #13 Superintende				
Mailing Address Line One Mailing Addr			ddress Line Two	ess Line Two			State	Zip Code	
135A Pickett Lane				Durham		СТ	06424		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address			
860-349-7200		860-349-7203			860-849-3464	kveronesi@rsd13.org			

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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

End of schedule

	Connecticut Department of	Public H	lealth	Dı	rinkin	g W	ater	Se	ction		
	Water Quality Monit					_					
PWS ID	PWS Name	011119 0111	0. 0011	_	ssification	_			er Tyne I	Primary S	ource
CT0829023	LYMAN ORCHARD COUNTRY FARMS COMPI	-FX			NTNC		84	· · · · ·	P	GW	00.00
	where applicable)	Service	Residential Comm				ndustria	al (Combine		ltural
32 REEDS GAP F		Connections	6							4	
Towns Served: I											
	Monite	oring Requ	ıireme	nts	}						
Water System	Facility: DISTRIBUTION SYSTEM (WSF I	D: 00600)									
Asbestos (10	· · · · · · · · · · · · · · · · · · ·	<u> </u>					1 ro	utine	e (RT) pe	r nine y	ears
•	Point (Sampling Point ID)		Monitor	ing P	Period	Collec	tion Per			liance Sta	
Select fron	n Inventory of Active Sampling Points		1/1/11 -	12/3	31/19				C	omplete	
		_	1/1/20 -	12/3	31/28			-			
Total Coliforn	n (3100)						1	rout	tine (RT)	per qua	rter
Sampling I	Point (Sampling Point ID)		Monitor	ing P	Period	Collec	tion Per	iod	Comp	liance Sta	itus
Select fron	n Inventory of Active Sampling Points		7/1/19 -	9/30	0/19				С	omplete	
			10/1/19 -	- 12/3	31/19				С	omplete	
			1/1/20 -	- 3/3:	1/20				С	omplete	
			4/1/20 -								
			7/1/20 -	9/30	0/20						
Lead And Cop	• • •							5 r	-	RT) per y	
Sampling Point (Sampling Point ID)			Monitori			Collec	tion Per	iod	Comp	liance Sta	itus
Select from Inventory of Active Sampling Points			1/1/19 -				/1-9/30		С	omplete	
			1/1/20 -				/1-9/30				
			1/1/21 - 12/31/21			6/	/1-9/30				
Physical Para										per qua	
	Point (Sampling Point ID)		Monitori			Collec	tion Per	iod		liance Sta	itus
Select fron	n Inventory of Active Sampling Points		7/1/19 -							omplete	
			10/1/19 -							omplete	
			1/1/20 -						C	omplete	
			4/1/20 -								
Matar Custam	Facility FAITRY POINT (MCF ID. 00700)		7/1/20 -	- 9/30	0/20						
-	Facility: ENTRY POINT (WSF ID: 00700)						1	4 ! a	(DT)	. 46	
	emicals (IOCS) Point (Sampling Point ID)		Monitor	ina D	Pariod	Collac	tion Per			three yo liance Sta	
ENTRY POI	, , , , , , , , , , , , , , , , , , , ,		1/1/19 -			Conec	tion Per	iou	Comp	nunce Stu	itus
LIVIKI FOI	(3)		1/1/22 -								
Nitrate And N	litrite (NOX)		1/1/22	12/3	71/24			1 r	outine (RT) per y	/ear
	Point (Sampling Point ID)		Monitori	ina P	Period	Collec	tion Per		-	liance Sta	
ENTRY POI			1/1/19 -							omplete	
ENTRY FORCE (5)			1/1/20 -							1- 2	
			1/1/21 -								
Pesticides, He	erbicides and PCBs-Phase II(SOC2)		• •	,	•		1 rou	tine	(RT) per	three y	ears
					Period	Collec	tion Per			liance Sta	
ENTRY POINT (3)			1/1/17 - 12/31/19						C	omplete	
			1/1/20 - 12/31/22								
							-				

1/1/23 - 12/31/25

Monitoring Period

Schedule Generation Date: 3/10/2020

Pesticides, Herbicides and PCBs-Phase V (SOC5)

Sampling Point (Sampling Point ID)

1 routine (RT) per three years

Compliance Status

Collection Period

	Connecticut D	epartment of	Public Heal	lth D	rinki	ng W	ater Se	ction	
	Water (Quality Monit	oring and C	omp	lianc	e Sch	edule		
PWS ID	PWS Name	<u> </u>	<u> </u>	_				ner Type P	rimary Source
CT082902	3 LYMAN ORCHARD COL	JNTRY FARMS COMPL	.EX		NTNC	8	34	Р	GW
Local Addı	ress (where applicable)		Service Res	idential	Comm	ercial li	ndustrial	Combined	Agricultural
32 REEDS	GAP ROAD		Connections	6					4
Towns Ser	ved: MIDDLEFIELD					,			
		Monite	oring Require	ments	5				
Water Sy	stem Facility: ENTRY POIN	NT (WSF ID: 00700)							
Pesticide	es, Herbicides and PCBs-Ph	ase V (SOC5)					1 routine	(RT) per	three years
Samp	oling Point (Sampling Point ID))	Mon	itoring l	Period	Collect	ion Period	Compl	iance Status
ENTR	RY POINT (3)		1/1/	17 - 12/	31/19			Co	mplete
			1/1/2	20 - 12/	31/22				
			1/1/2	23 - 12/	31/25				
_	Chemicals (VOCS)						1	routine (F	RT) per year
•	oling Point (Sampling Point ID))		itoring l		Collect	tion Period		iance Status
ENTR	RY POINT (3)			19 - 12/				Co	mplete
				20 - 12/					
				21 - 12/					
		Other C	ompliance Sch	nedul	es				
Complian	ce Schedule Activity			Due	Date		Achieved	Date	
DISTRIBUT	TION SYSTEM MATERIALS EVA	LUATION			/2019				
CROSS CO	NNECTION SURVEY REPORT			3/1/	/2024				
	Wat	er System Facili	ity and Sampli	ing Po	oint In	vento	ry		
Water						Total	Lead and		_
System	Water System Facility	Sampling Point ID	Sampling Point Description			-	Copper	Ashastas	Stage WQP 2 DBPF
Facility ID 00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYS	TENA	Status ^	Rule Y	Kule Her	ASDESTOS	WQP 2 DBPF
00000	DISTRIBUTION STSTEIN	•	WITHIN 5 SERVICE		A A	ī			
		MW001	MENS ROOM	CON	A	Υ			
		MW002	LADIES ROOM		A	Ϋ́	2		
		MW004	PRODUCE SINK		Α	Y	_		
		MW004-B	BAKERY SINK		Α	Y	2		
		MW004-D	DELI SINK		Α	Y	2		
		MW004-PRO	PRODUCE SINK		Α	Υ	2		
		MW01	MENS ROOM		Α	Υ	2	Υ	
		UPSTREAM	WITHIN 5 SERVICE	CON	Α				
00700	ENTRY POINT	3	ENTRY POINT		Α				
10398	WELL #4 (GOLF MAINTENANG BLDG)	CE 2	WELL #4		Α				
10399	WELL #3 (SOUTH WELL)	2	WELL #3		Α				
10763	WELL #5 (CLUB HOUSE)	2	WELL #5		Α				
59358	BLADDER TANKS (CLUB HOUS	SE)							

59360

HYDROPNEUMATIC TANK

59362 HYDROPNEUMATIC TANK (GOLF MAINTENANCE)

(SOUTH WELL)

Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
СТ0829023	LYMAN ORCHARD COUNTRY FARMS COMPLEX				NTNC	84	Р	GW	
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural	
32 REEDS GAP ROAD		Connections	6					4	

Connecticut Department of Public Health Drinking Water Section

Towns Served: MIDDLEFIELD

Certified Operator Information

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

Facility Classification: SMALL V	VATER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
BRAIG, ALLEN L.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2022
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	12/31/2021

PO Box 453 Middlefield CT 064	Contact Information											
Mailing Address Line One Mailing Address Line Two City State Zip C PO Box 453 Middlefield CT 064	Name					Organization		Job Title				
PO Box 453 Middlefield CT 064	Mr. John Lyman					Lyman Orcha	Lyman Orchards Country Farms Owner					
	Mailing Address Line One Mailing Addr			Addr	ess Line Two		City	State	Zip Code			
	PO Box 453							Middlefi	eld	СТ	06455	
Business Phone Extension Fax Mobile Phone Emergency Phone Email Address	Business Phone	Extension	Fax		Мо	bile Phone	Emergency Phone	Email Ad	ldress			
860-349-1793 6001 203-349-1424 JLYMAN3@LYMANORCHARDS.COM	860-349-1793	6001	203-349-2	1424				JLYMAN3@LYMANORCHARDS.COM			ОМ	

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 H	lealth	Dı	rinkinį	g V	Vater	Se	ection		
	Water Quality Monit	oring and	d Con	npl	iance	Sc	hedul	e			
PWS ID	PWS Name			_		_			ner Type	Primary Source	e
CT0829084	6 WAY ROAD				NTNC		78		Р	GW	
Local Address (w	vhere applicable)	Service	Residen	itial	Commerc	ial	Industri	al	Combine	ed Agricultur	al
6 WAY ROAD		Connections	1		1						
Towns Served: N	MIDDLEFIELD										
	Monito	oring Requ	ireme	nts							
Water System	Facility: DISTRIBUTION SYSTEM (WSF I	D: 00600)									
Asbestos (109	94)		1 routine (RT							er nine years	;
Sampling P	Point (Sampling Point ID)		Monitori	ing P	Period (Colle	ection Pe	riod	Com	oliance Status	
Select from	Inventory of Active Sampling Points		1/1/11 -	12/3	31/19					Complete	
			1/1/20 -	12/3	31/28						
Total Coliform	n (3100)						1	ro	utine (R1) per quarte	•
Sampling P	Point (Sampling Point ID)		Monitori	ing P	Period (Colle	ection Pe	riod	Com	oliance Status	
Select from	Inventory of Active Sampling Points		7/1/19 -	9/3	0/19					Complete	
		:	10/1/19 -	- 12/	31/19					Complete	
			1/1/20 -	3/3	1/20						
			4/1/20 -	- 6/3	0/20						
			7/1/20 -	9/3	0/20						
Lead And Cop	per (PBCU)							5	routine	(RT) per yea	•
Sampling P	Point (Sampling Point ID)		Monitori	ing P	Period (Colle	ection Pe	riod	Com	oliance Status	
Select from	Inventory of Active Sampling Points		1/1/19 -	12/3	31/19	(6/1-9/30			Complete	
			1/1/20 -	12/3	31/20	(6/1-9/30				
			1/1/21 -	12/3	31/21	(6/1-9/30				
Physical Parar	meters (PPS)						1	ro	utine (R1) per quarte	•
	Point (Sampling Point ID)		Monitori	ing P	Period (Colle	ection Pe	riod	Com	oliance Status	
Select from	Inventory of Active Sampling Points		7/1/19 -	- 9/3	0/19					Complete	
		-	10/1/19 -	- 12/	31/19					Complete	
			1/1/20 -								
			4/1/20 -	- 6/3	0/20						
			7/1/20 -	- 9/3	0/20						
Water System	Facility: ENTRY POINT (WSF ID: 00700)										
Inorganic Che	micals (IOCS)						1 rou	ıtin	e (RT) pe	r three years	;
Sampling P	Point (Sampling Point ID)		Monitori			Colle	ection Pe	riod	Com	oliance Status	
ENTRY POI	NT (3)		1/1/18 -								
			1/1/21 -	12/3	31/23						
Nitrate And N							1		(RT) per yea	•	
	Point (Sampling Point ID)		Monitori			Colle	ection Pe	riod		oliance Status	
ENTRY POI	NT (3)		1/1/19 -							Complete	4
		1/1/20 - 12/31/20									
					31/21						
-	rbicides and PCBs - Phase II & V (SOCS)									r three years	;
Sampling Point (Sampling Point ID)				Ionitoring Period			ection Pe		Com	oliance Status	
ENTRY POI	· ·		1/1/17 -	12/3	31/19	1	./1-12/31			Waiver	
Pesticides, He	rbicides and PCBs - Phase II & V (SOCS)						1 rou	ıtin	e (RT) pe	r three years	;

Monitoring Period

1/1/20 - 12/31/22 1/1/23 - 12/31/25 **Collection Period**

Schedule Generation Date: 3/10/2020

ENTRY POINT (3)

Sampling Point (Sampling Point ID)

Compliance Status

Connecticut Department of Public Health Drinking Water Section									
Water Quality Monitoring and Compliance Schedule									
PWS ID PWS Name			С	lassification P	opulation O	wner Type Pr	imary Source		
CT0829084 6 WAY ROAD				NTNC	78	P	GW		
Local Address (where applicable)		Service	Residentia	l Commercial	Industrial	Combined	Agricultural		
6 WAY ROAD		Connectio	ns 1	1					
Towns Served: MIDDLEFIELD									
Monitoring Requirements									
Water System Facility: ENTRY POINT (\	NSF ID: 00700)								
Organic Chemicals (VOCS)						1 routine (R	T) per year		
Sampling Point (Sampling Point ID)			Monitoring		lection Perio		ance Status		
ENTRY POINT (3)			1/1/19 - 12			Со	mplete		
			1/1/20 - 12	* *					
			1/1/21 - 12	· ·					
	Other C	omplian	ce Schedu	les					
Compliance Schedule Activity				e Date	Achieve	ed Date			
SUBMIT LEAD CONSUMER NOTICE CERTIFICA	TE			8/2015					
CROSS CONNECTION SURVEY REPORT				1/2019					
DISTRIBUTION SYSTEM MATERIALS EVALUATION				1/2019					
SUBMIT LEAD CONSUMER NOTICE CERTIFICA	TE			29/2019					
CROSS CONNECTION SURVEY REPORT				1/2020					
	Public Not	tification	n Requiren	nents					
	C	Compliance	Notice	<u>Public Not</u>	<u>ification</u>	<u>PN Cert</u>	i <u>fication</u>		
Violation/Situation		Period	Tier		Performed	Due to DPH	Received		
Lead and Copper M&R Violation		7/1/16 -	3	9/27/2017		10/7/2017			
	ystem Facil	ity and S	Sampling P		<u>-</u>				
Water	Sampling Point	Camplina	Doint	Tota			Stance		
System Water System Facility Facility ID	ID	Description 1		Colifo			Stage WQP 2 DBPR		
00600 DISTRIBUTION SYSTEM	4		ION SYSTEM	<u>Status</u> Rui A	- 11410 11	<u>., ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	222711		
DISTRIBUTION STATEM	DOWNSTREAM			A					
	UPSTREAM		SERVICE CON	A					
00700 ENTRY POINT	3	ENTRY POI		Α					
59452 WELL 1	2	WELL 1	···	Α					
	Certified	Operato	or Informa	tion					
Certified Operator Information Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)									
Water System Facility: DISTRIBUTION S		<u> </u>							
	YSTEM (WSF I	<u> </u>					Certification		
Water System Facility: DISTRIBUTION S Facility Classification: SMALL WATER SYSTEM Operator Name	YSTEM (WSF I	D: 00600)	Certification(s)			Certification Expiration		
Facility Classification: SMALL WATER SYSTEM	YSTEM (WSF I	D: 00600)	<u> </u>	S)	OPERATOR -		-		
Facility Classification: SMALL WATER SYSTEM Operator Name	YSTEM (WSF I M Operator Typ	D: 00600)	WATER TREAT	•		CLASS II	Expiration		
Facility Classification: SMALL WATER SYSTEM Operator Name	YSTEM (WSF I M Operator Typ CHIEF OPERATO	D: 00600) DE DIR	WATER TREAT	TMENT PLANT		CLASS II	Expiration 9/30/2020		
Facility Classification: SMALL WATER SYSTEM Operator Name	Operator Typ CHIEF OPERATO	D: 00600) DE DIR	WATER TREAT	TMENT PLANT		CLASS II	Expiration 9/30/2020		
Facility Classification: SMALL WATER SYSTEM Operator Name SIMA, III, JOHN F.	Operator Typ CHIEF OPERATO	D: 00600) e DR atact Info	WATER TREAT	TMENT PLANT		CLASS II SS I	Expiration 9/30/2020		
Facility Classification: SMALL WATER SYSTEM Operator Name SIMA, III, JOHN F.	Operator Typ CHIEF OPERATO	D: 00600) DE DR DR DR DR DR DR DR DR DR	WATER TREAT	TMENT PLANT		CLASS II SS I	Expiration 9/30/2020		
Facility Classification: SMALL WATER SYSTEM Operator Name SIMA, III, JOHN F. Name Mr. Mickey Fowler	Operator Typ CHIEF OPERATO O Mailing Addres	D: 00600) DR DR Tact Information s Line Two	WATER TREAT DISTRIBUTION Drmation	MIDDER	City	CLASS II SS I Job Title	Expiration 9/30/2020 6/30/2020		
Facility Classification: SMALL WATER SYSTEM Operator Name SIMA, III, JOHN F. Name Mr. Mickey Fowler Mailing Address Line One	CON Mailing Addres	D: 00600) DE DR DR DR DR DR DR DR DR DR	WATER TREAT DISTRIBUTION Drmation	Middlefichone Email Ad	City	Job Title State CT	9/30/2020 6/30/2020 Zip Code		

Connecticut Department of Public Health Drinking Water Section												
Water Quality Monitoring and Compliance Schedule												
PWS ID	PWS Name					Classification Population Owner Type Primary Source						
CT0829084	6 WAY ROAD						ı	NTNC	78	Р	GW	
Local Address (w	ocal Address (where applicable)				Service	Residen		Commercial	Industrial	Combine	d Agricultural	
6 WAY ROAD	WAY ROAD				Connection	ns 1		1				
Towns Served: MIDDLEFIELD												
Contact Role(s): Administrative Contact, Legal Contact, Owner												
Name				О	rganization				Job Title			
Mr. Lester Fowler				The 6 Way Road Venture				Executive Officer				
Mailing Address I	Address Line One Mailing Address			ss Line Two				City		Zip Code		
6 Way Road							Middlefie	Middlefield		06455		
Business Phone	Extension	Fax		Mob	ile Phone	Emergence	y Phoi	ne Email Address				
860-349-7017		860-349-	7032			860-759	-6385	6385 mickey@execof		coff.com		
Contact Role(s):	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