

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0990011	BLUE TRAILS WATER ASSOCIATION			C	228	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			57				

Towns Served: DURHAM, NORTH BRANFORD

Monitoring Requirements

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

Asbestos (1094)		1 routine (RT) per nine years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/13 - 12/31/21		
Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/19 - 9/30/19		Complete
	10/1/19 - 12/31/19		Complete
	1/1/20 - 3/31/20		
	4/1/20 - 6/30/20		
	7/1/20 - 9/30/20		
Lead And Copper (PBCU)		5 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/19 - 9/30/19		Complete
	10/1/19 - 12/31/19		Complete
	1/1/20 - 3/31/20		
	4/1/20 - 6/30/20		
	7/1/20 - 9/30/20		

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

Net Gross Alpha (4000)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
Uranium (4006)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
Combined Radium-226/228 (4010)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/19 - 12/31/21		

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Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			57				

Towns Served: DURHAM, NORTH BRANFORD

Monitoring Requirements

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

Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/22 - 12/31/24		
Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
	1/1/21 - 12/31/21		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
Organic Chemicals (VOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
SUBMIT CCR TO THE DEPARTMENT	7/1/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	
CROSS CONNECTION EXEMPTION	3/1/2024	

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		BT01	PUMPHOUSE	A	Y	3	Y	
		BT02	13 BARBARA LANE	A	Y	3	Y	
		BT03	31 GINNY LANE	A	Y	3	Y	
		BT04	33 GINNY LANE	A	Y	3	Y	
		BT05	58 BARBARA LANE	A	Y	3	Y	
		BT06	59 BARBARA LANE	A	Y	3	Y	
		BT07	60 BLUE TRAILS	A	Y	3	Y	
		BT08	62 BARBARA LANE	A	Y	3	Y	
		BT09	73 CAMERA RD	A	Y	3	Y	
		BT10	75 CAMERA RD	A	Y	3	Y	
	DOWNSTREAM WITHIN 5 SERVICE CON			A				

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0990011	BLUE TRAILS WATER ASSOCIATION			C	228	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			57				

Towns Served: DURHAM, NORTH BRANFORD

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
57739	ATMOSPHERIC TANKS							
57741	PUMP STATION							
57743	PRESSURE TANK							
723	WELL #1	2	WELL #1	A				

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
DEKOEYER, JAMES	CHIEF OPERATOR	SMALL WATER SYSTEM OPERATOR CONDITIONAL	9/30/2020

Contact Information

Name		Organization		Job Title	
Blue Trails Association, Coporation					
Mailing Address Line One		Mailing Address Line Two		City	State Zip Code
Barbara Lane				Durham	CT 06422
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
609-748-9186					
Contact Role(s): Owner					
Name		Organization		Job Title	
Mr. Richard Hintz		Blue Trails Water Association		President	
Mailing Address Line One		Mailing Address Line Two		City	State Zip Code
62 Barbara Lane				Durham	CT 06422
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-463-8547					rhintz01@comcast.net
Contact Role(s): Administrative Contact					
Name		Organization		Job Title	
Mr. Pasquale Young		Berdon, Young & Margolis, Pc		Attorney	
Mailing Address Line One		Mailing Address Line Two		City	State Zip Code
350 Orange St.		2Nd Floor		New Haven	CT 06511
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-772-8414		203-492-4444			
Contact Role(s): Legal Contact					

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0990011	BLUE TRAILS WATER ASSOCIATION			C	228	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
				57				

Towns Served: DURHAM, NORTH BRANFORD

Please note the following:

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

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

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

End of schedule

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0990031	NORTHFORD GLEN CONDOMINIUM ASSOCIATION			C	84	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 REEDS GAP RD				21				
Towns Served: NORTH BRANFORD								

Monitoring Requirements

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

Chlorine Residual (1012)		1 routine (RT) per month	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/19 - 10/31/19		Complete
	11/1/19 - 11/30/19		Complete
	12/1/19 - 12/31/19		Complete
	1/1/20 - 1/31/20		Complete
	2/1/20 - 2/29/20		Complete
	3/1/20 - 3/31/20		
	4/1/20 - 4/30/20		
	5/1/20 - 5/31/20		
	6/1/20 - 6/30/20		
	7/1/20 - 7/31/20		
	8/1/20 - 8/31/20		
	9/1/20 - 9/30/20		
Asbestos (1094)		1 routine (RT) per nine years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/13 - 12/31/21		
Total Coliform (3100)		1 routine (RT) per month	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/19 - 10/31/19		Complete
	11/1/19 - 11/30/19		Complete
	12/1/19 - 12/31/19		Complete
	1/1/20 - 1/31/20		Complete
	2/1/20 - 2/29/20		Complete
	3/1/20 - 3/31/20		Complete
	4/1/20 - 4/30/20		
	5/1/20 - 5/31/20		
	6/1/20 - 6/30/20		
	7/1/20 - 7/31/20		
	8/1/20 - 8/31/20		
	9/1/20 - 9/30/20		
Disinfectant Byproducts - TTHM & HAA5 (DBP)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
BUILDINGS 1 & 2 UNITS (NGCDDBP1)	1/1/19 - 12/31/19	7/1-7/31	Complete
	1/1/20 - 12/31/20	7/1-7/31	
	1/1/21 - 12/31/21	7/1-7/31	
Lead And Copper (PBCU)		5 routine (RT) per six months	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/19 - 12/31/19		Complete
	1/1/20 - 6/30/20		

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0990031	NORTHFORD GLEN CONDOMINIUM ASSOCIATION			C	84	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 REEDS GAP RD				21				
Towns Served: NORTH BRANFORD								

Monitoring Requirements

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

Lead And Copper (PBCU) **5 routine (RT) per six months**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	7/1/20 - 12/31/20		

Physical Parameters (PPS) **1 routine (RT) per month**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/19 - 10/31/19		Complete
	11/1/19 - 11/30/19		Complete
	12/1/19 - 12/31/19		Complete
	1/1/20 - 1/31/20		Complete
	2/1/20 - 2/29/20		Complete
	3/1/20 - 3/31/20		
	4/1/20 - 4/30/20		
	5/1/20 - 5/31/20		
	6/1/20 - 6/30/20		
	7/1/20 - 7/31/20		
	8/1/20 - 8/31/20		
	9/1/20 - 9/30/20		

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

Nitrate (1040) **1 routine (RT) per quarter**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	7/1/19 - 9/30/19		Complete
	10/1/19 - 12/31/19		Complete
	1/1/20 - 3/31/20		Complete
	4/1/20 - 6/30/20		
	7/1/20 - 9/30/20		

Nitrite (1041) **1 routine (RT) per year**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		Complete
	1/1/21 - 12/31/21		

Net Gross Alpha (4000) **1 routine (RT) per three years**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		

Uranium (4006) **1 routine (RT) per three years**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0990031	NORTHFORD GLEN CONDOMINIUM ASSOCIATION			C	84	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 REEDS GAP RD				21				
Towns Served: NORTH BRANFORD								

Monitoring Requirements

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

Combined Radium-226/228 (4010)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
Organic Chemicals (VOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		

Water System Facility: **WELL #1 (WSF ID: 709)**

E. Coli (3014)		1 routine (RT) per month	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL #1 (2)	10/1/19 - 10/31/19		Complete
	11/1/19 - 11/30/19		Complete
	12/1/19 - 12/31/19		Complete
	1/1/20 - 1/31/20		Complete
	2/1/20 - 2/29/20		Complete
	3/1/20 - 3/31/20		
	4/1/20 - 4/30/20		
	5/1/20 - 5/31/20		
	6/1/20 - 6/30/20		
	7/1/20 - 7/31/20		
	8/1/20 - 8/31/20		
	9/1/20 - 9/30/20		

Monthly Water System Facility (WSF) Level Monitoring Requirements

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
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Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 REEDS GAP RD				21				

Towns Served: NORTH BRANFORD

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

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily
Start Date: 7/1/2003	Compliance History:	Operating Limit	Monitoring
	Monitoring Period	Compliance Status:	Compliance Status:
	10/1/2019 - 10/31/2019		
	11/1/2019 - 11/30/2019		
	12/1/2019 - 12/31/2019		
	1/1/2020 - 1/31/2020		
	2/1/2020 - 2/29/2020		
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Phosphate (as PO4)	Entry Point Phosphate Monitoring (PHOS)	Minimum: 0.1 MG/L	2
Start Date: 7/1/2003	Compliance History:	Operating Limit	Monitoring
	Monitoring Period	Compliance Status:	Compliance Status:
	10/1/2019 - 10/31/2019		
	11/1/2019 - 11/30/2019		
	12/1/2019 - 12/31/2019		
	1/1/2020 - 1/31/2020		
	2/1/2020 - 2/29/2020		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CCTS 2: DWS REVIEW & APPROVAL OF OCCT		
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	10/1/2019	9/30/2019
LEAD PUBLIC EDUCATION REPORT TO STATE	10/11/2019	9/30/2019
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	11/1/2019	10/31/2019
LEAD PUBLIC EDUCATION REPORT TO STATE	11/11/2019	10/31/2019
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	12/1/2019	11/27/2019
LEAD PUBLIC EDUCATION REPORT TO STATE	12/11/2019	12/2/2019
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	1/1/2020	1/1/2020
LEAD PUBLIC EDUCATION REPORT TO STATE	1/11/2020	1/1/2020
CCTS 1: PWS TO RECOMMEND OCCT	1/18/2020	2/2/2020
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	2/11/2020	2/10/2020
LEAD PUBLIC EDUCATION REPORT TO STATE	2/11/2020	2/10/2020
CROSS CONNECTION SURVEY REPORT	3/1/2020	
LEAD PUBLIC EDUCATION REPORT TO STATE	3/11/2020	
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	3/11/2020	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/30/2020	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	10/31/2020	3/15/2019

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0990031	NORTHFORD GLEN CONDOMINIUM ASSOCIATION			C	84	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 REEDS GAP RD				21				
Towns Served: NORTH BRANFORD								

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
Water Quality Parameters M&R Violation	1/1/16 - 12/31/18	3	3/6/2020		3/16/2020	
Water Quality Parameters - Basic M&R Violation	1/1/16 - 12/31/18	3	3/6/2020		3/16/2020	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		NGCDDBP1	BUILDINGS 1 & 2 UNIT	A				Y
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
333	NORTHFORD GLEN PUMPHOUSE							
51644	ATMOSPHERIC STORAGE TANK							
51646	HYDROPNEUMATIC STORAGE TANK							
51648	BOOSTER PUMPING FACILITIES							
709	WELL #1	2	WELL #1	A				

Certified Operator Information

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

Facility Classification: DISTRIBUTION SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
COSSETTE, EVAN J	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2021
		DISTRIBUTION SYSTEM OPERATOR IN TRAINING	6/30/2021
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2021

Water System Facility: **NORTHFORD GLEN PUMPHOUSE (WSF ID: 333)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
COSSETTE, EVAN J	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2021
		DISTRIBUTION SYSTEM OPERATOR IN TRAINING	6/30/2021
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2021

Contact Information

Name				Organization			Job Title		
Northford Glen Condominium Association									
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
Emergency Contact						Emergency Contact		CT	06000
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
203-484-4869									
Contact Role(s):	Owner								

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0990031	NORTHFORD GLEN CONDOMINIUM ASSOCIATION	C	84	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial
246 REEDS GAP RD		21			
Towns Served: NORTH BRANFORD					
Name		Organization		Job Title	
Mr. Michael Barulli		Northford Glen Condo Assn.		President	
Mailing Address Line One		Mailing Address Line Two		City	State
246 Reeds Gap Road		Unit 2D		Northford	CT
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-506-3888				203-589-8396	julieandmak@att.net
Contact Role(s): Legal Contact, Owner					
Name		Organization		Job Title	
Mr. Norman Goodman		Northford Glen Condo Assn		Property Manager	
Mailing Address Line One		Mailing Address Line Two		City	State
P. O. Box 351				West Haven	CT
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-933-7960		203-937-8784			NORMG45@AOL.COM
Contact Role(s): Administrative Contact					
<p>Please note the following:</p> <ol style="list-style-type: none"> 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