	Connectic	•							_			ction		
	Wat	ter Qual	lity M	onit	oring a	nd Com	ıplia	nce	Sch	edul	e			
PWS ID	PWS Name						Classif	ication	Popu	lation	Owr	ner Type P	rimary S	ource
CT1010094	POND HILL BAPT	IST CHURCH					N	IC	2	25		Р	GW	
Local Address (w	vhere applicable)				Service	Residen	tial Co	mmer	cial In	ndustria	al	Combined	Agricu	ıltural
85 POND HILL R	OAD				Connection	ns		1						
Towns Served: N	NORTH HAVEN						,							
			M	lonito	oring Red	guireme	nts							
Water System	Facility: DISTR	IBUTION SY												
<b>Total Coliform</b>	າ (3100)									1	rou	tine (RT)	per qua	ırter
	Point (Sampling P					Monitori			Collect	ion Per	riod		iance Sta	atus
Select from	Inventory of Act	ve Sampling	Points			7/1/19 -							mplete	
						10/1/19 -							mplete	
						1/1/20 -						Co	mplete	
						4/1/20 -								
						7/1/20 -	9/30/2	20						
Physical Parar	meters (PPS) Point (Sampling P	oint ID)				Monitori	na Peri	od (	Collect	1 ion Per		tine (RT)	per qua	
	Inventory of Acti		Points			7/1/19 -							mplete	
						10/1/19 -							mplete	
						1/1/20 -							mplete	
						4/1/20 -								
						7/1/20 -								
Water System	Facility: ENTRY	POINT (W	/SF ID: 0	0700)		, , -	-,,							
Nitrate And N	•	•		•						1	rou	tine (RT)	per qua	arter
	Point (Sampling P	oint ID)				Monitori	ng Peri	od (	Collect	ion Per			iance Sta	
ENTRY POI		•				7/1/19 -							mplete	
	. ,					10/1/19 -							mplete	
						1/1/20 -							mplete	
						4/1/20 -								
						7/1/20 -								
		Water Sy	/stem	Facili	ity and S				ento	ry				
Water								7	Total	Lead (	and			
	er System Facility	2			Sampling P				liform					itage
Facility ID			ID		Description			itus	Rule	Rule	Tier	Asbestos	WQP 2	DBPR
00600 DISTE	RIBUTION SYSTEM		4			ON SYSTEM		A	Υ					
					WITHIN 5 S			A						
			UPSTR	EAM		ERVICE CON		Д						
	Y POINT		3		ENTRY POI	NT		Д						
21779 WELL	-		2		WELL		/	Α						
				Con	tact Info	rmation								
Name				Or	rganization							Job Title		
Mr. Mike Carba	ugh			Pc	ond Hill Bapt	ist Church			Pas	tor				
Mailing Address	Line One		Mailing /	Address	s Line Two				Ci	ty		State	Zip Cod	de
85 Pond Hill Roa	nd							North	Haver	1		СТ	06473	3
Business Phon	e Extension	Fax		Mobi	le Phone	Emergency	Phone	Email	Addre	SS				
203-239-7708	3							pasto	rm@po	ondhill.	net			
Contact Role(s):	Administrative	Contact, Leg	al Conta	ct										

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.

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

						_ <u> </u>			
PWS ID	PWS Name					Classification	Population	Owner Type	<b>Primary Source</b>
CT1010094	POND HILL BAPTIST C	HURCH				NC	25	Р	GW
Local Address (where applicable)		Service	Resider	ntial Commerc	ial Industri	al Combine	ed Agricultural		
85 POND HILL RO	DAD			Connections		1			

Towns Served: NORTH HAVEN

### 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 2

	Connecticut Department	of Public H	[ealth	Drinki	ng V	Nater S	ection	
	Water Quality Mon						cction	
PWS ID		intornig an						i ma a m . Ca
	PWS Name			Classification	on Po		vner Type Pr	
T1019024	THE ONLY GAME IN TOWN	c ·	5 1 1	NC		30	P	GW
	where applicable)	Service Connections	Resident		ercial	Industrial	Combined	Agricultura
75 VALLEY SEF		Connections		1				
owns Servea:	NORTH HAVEN	•• • •	•		_			
		nitoring Requ	ııremei	nts				
Vater System	,	SF ID: 00600)					(>=\	
Total Coliforn					- "		outine (RT)	-
	Point (Sampling Point ID)		Monitorir		Colle	ection Period	-	ance Status
Select fror	n Inventory of Active Sampling Points			10/31/19	_		Co	mplete
				11/30/19				
				12/31/19				
			1/1/20 -					
			2/1/20 -					
			3/1/20 -					
			4/1/20 -					
			5/1/20 -					
			6/1/20 -					
			7/1/20 -					
			8/1/20 -	8/31/20				
			9/1/20 -	9/30/20				
Physical Para	meters (PPS)					1 r	outine (RT)	per month
Sampling	Point (Sampling Point ID)		Monitorir	ng Period	Colle	ection Period	d Compli	ance Status
DISTRIBUT	TION (4)		10/1/19 -	10/31/19			Со	mplete
			11/1/19 -	11/30/19				
			12/1/19 -	12/31/19				
			1/1/20 -	1/31/20				
			2/1/20 -	2/29/20				
			3/1/20 -	3/31/20				
			4/1/20 -	4/30/20				
			5/1/20 -	5/31/20				
			6/1/20 -	6/30/20				
			7/1/20 -	7/31/20				
			8/1/20 -					
		_	9/1/20 -	9/30/20				
Vater System	Facility: ENTRY POINT (WSF ID: 007	00)						
Nitrate (104	0)					1 ro	utine (RT) <sub>I</sub>	er quarte
Sampling	Point (Sampling Point ID)		Monitorir	ng Period	Colle	ection Period	d Compli	ance Status
ENTRY PO	INT (3)		7/1/19 -	9/30/19			Co	mplete
			10/1/19 -	12/31/19			Co	mplete
			1/1/20 -	3/31/20				
			4/1/20 -	6/30/20				
				0/20/20				

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7/1/20 - 9/30/20

**Monitoring Period** 

1/1/19 - 12/31/19

1/1/20 - 12/31/20

Schedule Generation Date: 3/10/2020

Nitrite (1041)

**ENTRY POINT (3)** 

Sampling Point (Sampling Point ID)

1 routine (RT) per year

**Compliance Status** 

Complete

**Collection Period** 

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

PWS ID PWS Name				Cla	ssification	Population	Owner Type	Primary Source
CT1019024	THE ONLY GAME IN TOWN				NC	30	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
275 VALLEY SI	ERVICE ROAD	Connections			1			

Towns Served: NORTH HAVEN

## **Monitoring Requirements**

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

Nitrite (1041) 1 routine (RT) per year

Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status

1/1/21 - 12/31/21

#### **Public Notification Requirements Compliance** Notice **Public Notification PN Certification** Violation/Situation Period Tier Required Performed Due to DPH Received Total Coliform M&R Violation 4/1/18 - 4/30/18 9/10/2019 9/20/2019 3 Physical Parameters M&R Violation 4/1/18 - 4/30/18 3 9/10/2019 9/20/2019 Total Coliform M&R Violation 11/1/18 - 11/30/18 3 5/7/2020 5/17/2020 Total Coliform M&R Violation 12/1/18 - 12/31/18 3 5/7/2020 5/17/2020 Total Coliform M&R Violation 1/1/19 - 1/31/19 5/7/2020 5/17/2020 Total Coliform M&R Violation 2/1/19 - 2/28/19 3 5/7/2020 5/17/2020 Total Coliform M&R Violation 3/1/19 - 3/31/19 3 5/7/2020 5/17/2020 Physical Parameters M&R Violation 11/1/18 - 11/30/18 3 5/7/2020 5/17/2020 Physical Parameters M&R Violation 12/1/18 - 12/31/18 3 5/7/2020 5/17/2020 Physical Parameters M&R Violation 1/1/19 - 1/31/19 3 5/7/2020 5/17/2020 2/1/19 - 2/28/19 Physical Parameters M&R Violation 3 5/7/2020 5/17/2020 3 Physical Parameters M&R Violation 3/1/19 - 3/31/19 5/7/2020 5/17/2020 Nitrate M&R Violation 1/1/19 - 3/31/19 5/8/2020 5/18/2020

# Water System Facility and Sampling Point Inventory

Water System	Water System Facility	Sampling Point	Sampling Point		Total Coliform	Lead and Copper			Stage
Facility ID	)	ID	Description	Status	Seed-	Rule Tier	Asbestos	WQP	_
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	Α					
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
52316	WELL 1	2	WELL 1	Α					
F767F	TOTATA ACAIT OLANIT								

57675 TREATMENT PLANT

_		
Contact	Inform	ation

Name				Organization	Job Title					
Mr. Erik Golinowsk	i i		The Only Game In Town Owner							
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code	
275 Valley Service F	₹d					North Ha	aven	ven CT 0647		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address				
203-239-4653				203-988-0835		egolinowski@aol.com				

Contact Role(s): Administrative Contact

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	Connectic	ut Depa	rtment	of Public	Health	ı Di	inking	g Water	· Sectior	1	
	Wa	ter Qua	lity Mor	nitoring a	nd Con	npl	iance S	Schedul	le		
PWS ID	PWS Name						sification	Population	Owner Type	Pr	imary Source
CT1019024	THE ONLY GAMI	E IN TOWN			NC			30	Р		GW
Local Address (where applicable)				Service	Resider	ntial	Commerci	al Industri	ial Combin	ed	Agricultural
275 VALLEY SERV	75 VALLEY SERVICE ROAD			Connection	ns	1					
Towns Served: N	ORTH HAVEN			,							
Name				Organization			Job Title				
Mrs. Lorraine Ve	lardi			Stillman Road	Associates	LLC		Manager	Member		
Mailing Address I	ine One		Mailing Add	ress Line Two				City	State		Zip Code
265 River Road							Hamde	en	СТ		06518
Business Phone	ne Extension Fax M		obile Phone	Emergence	y Pho	ne Email A	Email Address				
							macko	mom@att.r	net		
Contact Role(s):	Owner		,	,							

## Please note the following:

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End of schedule

Schedule Generation Date: 3/10/2020

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