	Connectic	ut Department	of Public F	lealth I	Drin	king V	Water	Se	ction	
		ter Quality Mon							Ction	
PWS ID	PWS Name	ter Quality Mon	intorning air						er Tyne P	rimary Source
CT106006		VFW			N(		25	OWII	P	GW
	ress (where applicable)	V1 VV	Service	Residentia		mmercial	Industria	al (	Combined	
315 ESSEX			Connections	Residentia	01	1	maastric	41	combined	Agricultural
	ved: OLD SAYBROOK					-				
TOWNS SET	Ved. GED SATEROOK	Mon	itoring Requ	ıiremen	ts					
Water Sy:	stem Facility: <b>DISTR</b>	IBUTION SYSTEM (WS		an emen						
•	liform (3100)		,				1	rou	tine (RT)	per quarter
	oling Point (Sampling Po	oint ID)		Monitoring	a Perio	od Coll	ection Per			ance Status
	t from Inventory of Acti			7/1/19 - 9						mplete
33.33				10/1/19 - 1						mplete
				1/1/20 - 3						piece
				4/1/20 - 6						
				7/1/20 - 9						
Physical	Parameters (PPS)						1	rou		per quarter
	oling Point (Sampling Po			Monitoring	g Perio	od Coll	ection Per	riod	Compli	ance Status
Selec	t from Inventory of Acti	ve Sampling Points		7/1/19 - 9	/30/19	9			Со	mplete
				10/1/19 - 1	2/31/1	19			Со	mplete
				1/1/20 - 3	/31/20	)				
				4/1/20 - 6	/30/20	)				
				7/1/20 - 9	/30/20	כ				
Water Sy:	stem Facility: ENTRY	POINT (WSF ID: 0070	0)							
Nitrate A	And Nitrite (NOX)							1 r	outine (R	T) per year
Samp	oling Point (Sampling Po	oint ID)		Monitoring	g Perio	od Coll	ection Per	iod	Compli	ance Status
ENTR	Y POINT (3)			1/1/19 - 12	2/31/1	.9			Co	mplete
				1/1/20 - 12	2/31/2	0				
				1/1/21 - 12	2/31/2	1				
		Other	Compliance	Schedu	iles					
Compliand	ce Schedule Activity			Du	ıe Dat	е	Achie	ved L	Date	
RESPOND	TO SANITARY SURVEY			3/2	25/202	20				
CORRECTI	VE ACTION/CORRECTIVE	ACTION PLAN		6/2	23/202	20				
		Water System Fac	cility and Sai	mpling F	oint	Inven	tory			
Water						Tota	ıl Lead	and		
System	Water System Facility		int Sampling Poi	int		Colifo				Stage
Facility ID	)	ID	Description		Stat	tus Rul	e Rule	Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTIO	N SYSTEM	Α	. Y				
		DOWNSTREA	M WITHIN 5 SEF	RVICE CON	Α					
		UPSTREAM	I WITHIN 5 SEF	RVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	-	Α	<b>L</b>				
21859	WELL	2	WELL		Α	<b>L</b>				
61795	TREATMENT PLANT									
		Co	ontact Infori	mation						
Name			Organization						Job Title	
Mr. Rober	rt Bailey		Old Saybrook VF	W Post 101	L53		Command	er		
Mailing Ac	ddress Line One	Mailing Add	ess Line Two				City		State	Zip Code
315 Essex	Road					Old Sayb	rook		СТ	06475
			1			t .				

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.

	Wat	er Quality l	Monito	oring an	nd Con	npl	iance S	Schedul	le	
PWS ID	PWS Name	•				Clas	ssification	Population	Owner Type	Primary Source
CT1060064	OLD SAYBROOK	<b>/FW</b>					NC	25	Р	GW
Local Address (w	here applicable)			Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
315 ESSEX ROAD	1			Connections			1			
Towns Served: C	LD SAYBROOK				·					·
Business Phon	e Extension	Fax	Mobile	e Phone E	Emergency	/ Pho	ne Email A	Address		
860-388-1155	i		203-68	87-8569	860-227	-5382	2			

Connecticut Department of Public Health Drinking Water Section

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

	Co	onnectic	•							_			ction	
			ter Qua	ility Mol	IIIL	oring ar	ia Con			_		1		
PWS ID		/S Name							ication			Owr		Primary Sou
CT1060084		2 MIDDLESEX	TURNPIKE			1.			IC		00		Р	GW
Local Addre	ess (whe	re applicable)				Service Connection:	Residen	tial Co	mmerc 1	cial Ir	ndustri	al	Combine	d Agricultu
Towns Serv	ed: OLD	SAYBROOK												
				Moı	nito	oring Req	uireme	nts						
Water Syst	tem Fac	cility: DISTR	IBUTION S	YSTEM (W	SF II	D: 00600)								
<b>Total Coli</b>	form (3	3100)									1	l rou	tine (RT	per quart
Sampl	ing Poin	t (Sampling Po	oint ID)				Monitori	ng Peri	od (	Collect	ion Pe	riod	Comp	liance Statu
Select	from Inv	entory of Acti	ve Sampling	g Points			7/1/19 -	9/30/1	.9				C	omplete
							10/1/19 -	12/31/	/19					omplete
							1/1/20 -	3/31/2	20				C	omplete
							4/1/20 -	6/30/2	20					
							7/1/20 -	9/30/2	20					
Physical P													=	per quart
		t (Sampling Po					Monitori			Collect	ion Pe	riod		liance Statu
Select	from Inv	entory of Acti	ve Sampling	g Points			7/1/19 -							omplete
							10/1/19 -							omplete
							1/1/20 -						C	omplete
							4/1/20 -							
							7/1/20 -	9/30/2	20					
•		cility: ENTRY	/ POINT (\	WSF ID: 007	00)									
Nitrate Ar														RT) per ye
		t (Sampling Po	oint ID)				Monitori			Collect	ion Pe	riod		liance Statu
ENTRY	POINT (	3)					1/1/19 -							omplete
							1/1/20 -						C	omplete
							1/1/21 -							
			Water S	ystem Fa	cili	ty and Sa	mpling	Poin	t Inve	ento	ry			
Water										otal	Lead			
	Water S <sub>j</sub>	stem Facility		Sampling Po	oint	Sampling Po	oint			liform			0 -14 -	Sta
Facility ID						Description			itus	Rule	Kuie	Her	Aspesto	s WQP 2 DE
00600	DISTRIBU	JTION SYSTEM	İ	4		DISTRIBUTIO			Α .	Y				
						5 SERVICE C			A	Y				
00700		O.L. T		UPSTREAM	VI	5 SERVICE C			Α .	Υ				
	ENTRY P	OINT		3		ENTRY POIN	1		Α .					
56727 \	WELL			2		WELL			A					
				C		tact Infor	rmation							
Name						ganization							Job Title	
Ms. Juliana						Marea								
Mailing Add				Mailing Add	dress	s Line Two					ity		State	Zip Code
732 Middle		i i							Old Sa	-			СТ	06475
Business I		Extension	Fax	N	1obi	le Phone I	Emergency	Phone						
860-581-									ni71pi	i@yah	oo.con	n		
Contact Rol	le(s): A	dministrative	Contact, Le	gal Contact, (	Owr	ier								

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.

	Lonnectic	ut Depa	rtment of	Public	Health	urii	nking	, water	. Sec	ction		
	Wat	ter Qua	lity Monito	oring ar	nd Con	nplia	nce S	Schedu	le			
PWS ID	PWS Name					Classif	ication	Population	Owne	er Type	Prim	ary Source
CT1060084	732 MIDDLESEX	TURNPIKE				N	IC	200		Р		GW
Local Address (w	here applicable)			Service	Residen	tial Co	mmerci	al Industri	al C	ombine	ed A	gricultural
				Connection	S		1					
Towns Served: O	LD SAYBROOK							·				
Name			Org	ganization						Job Title	5	
Mr. Alfonso Pisa	nzio		733	2 Middlesex	Turnpike							
Mailing Address I	ine One		Mailing Address	Line Two				City		State	Zi	p Code
157 Union St							Deep R	iver		CT	(	06417
Business Phone	Extension	Fax	Mobile	e Phone	Emergency	/ Phone	Email A	Address				
Contact Role(s):	Legal Contact											

CD 1-11-11-1-1-1 D -1-1-1- MI-1-- C

## 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

		epartment of							n		
	Water Q	uality Monit	oring an	d Comp	oliano	e Sch	redule	)			
PWS ID	PWS Name			С	lassificat	on Pop	ulation	wner Typ	oe Pr	imary S	ource
CT1069014	PASTA VITA				NC		49	Р		GW	
Local Addres	ss (where applicable)		Service	Residentia	l Comm	ercial	Industrial	Comb	ined	Agricu	ltural
225 ELM STR	REET		Connections		1	•					
Towns Serve	d: OLD SAYBROOK										
		Monite	oring Requ	uirement	ts						
Water Syste	em Facility: DISTRIBUTIO	N SYSTEM (WSF I	D: 00600)								
Total Colife	orm (3100)						1 r	outine (	RT) p	er qua	rter
	ng Point (Sampling Point ID)			Monitoring	Period	Collec	ction Perio	-		ance Sto	
	rom Inventory of Active Sam	oling Points		7/1/19 - 9/						mplete	
	·			10/1/19 - 12	2/31/19					nplete	-
				1/1/20 - 3/						nplete	
				4/1/20 - 6,						-	
				7/1/20 - 9,	-						
Physical Pa	arameters (PPS)						1 r	outine (	RT) r	er qua	rter
-	ng Point (Sampling Point ID)			Monitoring	Period	Colle	ction Perio	=		ance Sto	
	rom Inventory of Active Sam	oling Points		7/1/19 - 9,						nplete	
	·			10/1/19 - 12	2/31/19				Co	nplete	
				1/1/20 - 3,	/31/20				Co	nplete	
				4/1/20 - 6,	/30/20						
				7/1/20 - 9/							
Water Syste	em Facility: ENTRY POIN	(WSF ID: 00700)									
•	d Nitrite (NOX)							1 routir	ne (R	T) per	vear
	ng Point (Sampling Point ID)			Monitoring	Period	Collec	ction Perio		-	ance Sto	-
	POINT (3)			1/1/19 - 12						mplete	
	. ,									-	
				1/1/20 - 12	/31/20				Co	mplete	
				1/1/20 - 12 1/1/21 - 12					Co	mplete	
	Wate	r Svstem Facil	itv and Sai	1/1/21 - 12	/31/21	nvento	orv		Co	mplete	
Water	Wate	r System Facil	ity and Saı	1/1/21 - 12	/31/21		<u>-</u>	nd	Co	mplete	
Water System W	Wate	r System Facil	-	1/1/21 - 12 <b>mpling P</b>	/31/21	Total Coliforn	Lead a		Cor		Stage
			-	1/1/21 - 12 <b>mpling P</b>	/31/21	Total	Lead a			5	
System W Facility ID		Sampling Point	Sampling Poi	1/1/21 - 12 mpling P	/31/21 oint Ir	Total Coliforn	Lead a	er		5	
System W Facility ID	Vater System Facility	Sampling Point ID	Sampling Poi Description	1/1/21 - 12 <b>mpling P</b> Int BY BATCH	/31/21 Point Ir	Total Coliforn Rule	Lead a	er		5	
System W Facility ID	Vater System Facility	Sampling Point ID	Sampling Poi Description GENERATED I	1/1/21 - 12 mpling P int BY BATCH N SYSTEM	oint Ir  Status A	Total Coliforn Rule	Lead a	er		5	
System W Facility ID	Vater System Facility	Sampling Point ID 3 4	Sampling Poi Description GENERATED I	1/1/21 - 12 mpling P int BY BATCH N SYSTEM RVICE CON	oint Ir  Status A A	Total Coliforn Rule	Lead a	er		5	
System W Facility ID	Vater System Facility	Sampling Point ID 3 4 DOWNSTREAM	Sampling Poi Description  GENERATED I DISTRIBUTION  WITHIN 5 SEE	1/1/21 - 12 mpling P int BY BATCH N SYSTEM RVICE CON D SINK #4	Status A A A	Total Coliforn Rule Y	Lead a	er		5	
System W Facility ID	Vater System Facility	Sampling Point ID  3 4 DOWNSTREAM PVLHS4	Sampling Poil Description GENERATED II DISTRIBUTION WITHIN 5 SER LOWER HAND	1/1/21 - 12 mpling P int BY BATCH N SYSTEM RVICE CON D SINK #4 D SINK #5	Status A A A A	Total Coliforn Rule Y	Lead a	er		5	
System W Facility ID	Vater System Facility	Sampling Point ID  3 4  DOWNSTREAM PVLHS4 PVLHS5	Sampling Poil Description GENERATED II DISTRIBUTION WITHIN 5 SEE LOWER HAND	1/1/21 - 12 mpling P  nt  BY BATCH N SYSTEM RVICE CON D SINK #4 D SINK #5 N SINK #1	Status A A A A A A	Total Coliforn Rule Y Y Y	Lead a	er		5	
System W Facility ID	Vater System Facility	Sampling Point ID  3 4  DOWNSTREAM PVLHS4 PVLHS5 PVLKS1	Sampling Poil Description  GENERATED II DISTRIBUTION WITHIN 5 SER LOWER HAND	nt  BY BATCH N SYSTEM RVICE CON O SINK #4 O SINK #5 N SINK #1 N SINK #2	Status A A A A A A A	Total Coliforn Rule Y Y Y Y Y	Lead a	er		5	
System W Facility ID	Vater System Facility	Sampling Point ID  3 4 DOWNSTREAM PVLHS4 PVLHS5 PVLKS1 PVLKS2	Sampling Poil Description  GENERATED II DISTRIBUTION WITHIN 5 SEF LOWER HAND LOWER HAND LOW KITCHEN LOW KITCHEN	1/1/21 - 12 mpling P Int BY BATCH N SYSTEM RVICE CON D SINK #4 D SINK #5 N SINK #1 N SINK #2 N SINK #3	Status A A A A A A A A A A A A A A A A A A A	Total Coliforn Rule Y Y Y Y Y	Lead a	er		5	
System W Facility ID	Vater System Facility	Sampling Point ID  3 4 DOWNSTREAM PVLHS4 PVLHS5 PVLKS1 PVLKS2 PVLKS3	Sampling Poil Description  GENERATED II DISTRIBUTION WITHIN 5 SEF LOWER HAND LOWER HAND LOW KITCHEN LOW KITCHEN LOW KITCHEN LOW KITCHEN	1/1/21 - 12 mpling P  Int  BY BATCH N SYSTEM RVICE CON D SINK #4 D SINK #5 N SINK #1 N SINK #2 N SINK #3 S	Status A A A A A A A A A A A A A A A A A A A	Total Coliforn Rule Y  Y  Y  Y  Y  Y  Y  Y  Y  Y  Y  Y	Lead a	er		5	
System W Facility ID	Vater System Facility	Sampling Point ID  3 4 DOWNSTREAM PVLHS4 PVLHS5 PVLKS1 PVLKS2 PVLKS3 PVLMR	Sampling Poil Description  GENERATED II DISTRIBUTION WITHIN 5 SEF LOWER HAND LOWER HAND LOW KITCHEN LOW KITCHEN LOW KITCHEN LOW KITCHEN LOWER MEN' RESTROOM LOWER WOM	1/1/21 - 12  mpling P  nt  BY BATCH N SYSTEM RVICE CON D SINK #4 D SINK #5 N SINK #1 N SINK #2 N SINK #3 S  MEN'S		Total Coliforn Rule Y  Y  Y  Y  Y  Y  Y  Y  Y  Y  Y  Y  Y	Lead a	er		5	
System W Facility ID	Vater System Facility	Sampling Point ID  3 4 DOWNSTREAM PVLHS4 PVLHS5 PVLKS1 PVLKS2 PVLKS3 PVLMR PVLWR	Sampling Poil Description  GENERATED II DISTRIBUTION WITHIN 5 SER LOWER HAND LOWER HAND LOW KITCHEN LOW KITCHEN LOW KITCHEN LOWER MEN' RESTROOM LOWER WOM RESTRO	1/1/21 - 12 mpling P Int BY BATCH N SYSTEM RVICE CON O SINK #4 O SINK #5 N SINK #1 N SINK #2 N SINK #3 S MEN'S	Status	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Lead a	er		5	
System W Facility ID	Vater System Facility	Sampling Point ID  3 4 DOWNSTREAM PVLHS4 PVLHS5 PVLKS1 PVLKS2 PVLKS3 PVLMR PVLWR	Sampling Poil Description  GENERATED II DISTRIBUTION WITHIN 5 SEF LOWER HAND LOWER HAND LOW KITCHEN LOW KITCHEN LOW KITCHEN LOWER MEN' RESTROOM LOWER WON RESTRO UPPER HAND	nt  BY BATCH N SYSTEM RVICE CON D SINK #4 D SINK #5 N SINK #1 N SINK #3 S MEN'S SINK #8 SINK #8	Status	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Lead a	er		5	

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 l	Monitoring and	d Con	npliance	Schedul	le	
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1069014	PASTA VITA			NC	49	Р	GW
Local Address	(where applicable)	Service	Residen	itial Commerc	ial Industri	al Combin	ed Agricultural
225 FLM STRE	FT		1				

Connecticut Department of Public Health Drinking Water Section

Towns Served: OLD SAYBROOK

	Wa	iter System Facili	ity and Sampling P	oint li	nvento	ry			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
60362	WELL 1	2	WELL 1	Α					

## **Certified Operator Information**

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

Facility Classification:			Certification
Operator Name	Operator Type	Certification(s)	Expiration
FILANDA, MICHAEL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2022
SUSCO, VINCENT	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2021
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2021

			(	Contact Inf	ormation				
Name			Organization	1		Job Title			
Mr. Richard Cersosimo RIc Properties, LLC					es, LLC				
Mailing Address Line One Mailing Addr				dress Line Two		City		State	Zip Code
P.O. Box 523						Old Sayb	rook	СТ	06475
Business Phone	Extension	Fax	N	Nobile Phone	Emergency Phone	Email Ad	dress		
860-395-1452 860-395-0541					860-391-3744	pastavita	@aol.com		
		860-395-0	0541	noshe i none		pastavita@aol.com			

Contact Role(s): Administrative Contact, Legal Contact

## Please note the following:

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

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

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

End of schedule

Schedule Generation Date: 3/10/2020