

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT1080112	CHRIST EPISCOPAL CHURCH	NTNC	34	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
470 QUAKER FARMS RD				1			

Towns Served: OXFORD

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	1/1/11 - 12/31/19		Complete		
	1/1/20 - 12/31/28				
Total Coliform (3100)		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		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				
Lead And Copper (PBCU)		5 routine (RT) per year			
<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 - 12/31/19	6/1-9/30	Complete		
	1/1/20 - 12/31/20	6/1-9/30			
	1/1/21 - 12/31/21	6/1-9/30			
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		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				
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>		

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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Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
470 QUAKER FARMS RD				1			
Towns Served: OXFORD							

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>		
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			
<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				
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 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				

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
RESPOND TO SANITARY SURVEY	4/29/2006	
L1 ASSESSMENT (MULTIPLE TC+)	9/2/2016	
CROSS CONNECTION EXEMPTION	3/1/2019	

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			
		CEC001	RR MEN RM MAIN FLR L	A	Y	2	Y	
		CEC002	RR MEN RM MAIN FLR R	A	Y	2	Y	
		CEC003	RR LADY RM MN FLR L	A	Y	2	Y	
		CEC004	RR LADY RM MN FLR R	A	Y	2	Y	
		CEC005	RR CHURCH OFFICE	A	Y	2	Y	
		CEC006	RR PRIEST OFFICE	A	Y	2	Y	
		CEC007	KIT SNK TRP LWR LEVL	A	Y	2	Y	
		CEC008	KIT SNK TRP LWR LEVR	A	Y	2	Y	
		CEC009	KIT SNK SING LWR LEV	A	Y	2	Y	
		CEC010	KIT SNK HAND LWR LEV	A	Y	2	Y	

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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		
CT1080112	CHRIST EPISCOPAL CHURCH	NTNC	34	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
470 QUAKER FARMS RD				1			
Towns Served: OXFORD							

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
		CEC011	RR UNISEX	A	Y	2	Y	
			DOWNSTREAM	A				
			UPSTREAM	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10813	WELL 1	2	WELL 1	A				
50568	WELL-X-TROL BLADDER STORAGE							

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
Facility Classification: SMALL WATER SYSTEM			Certification Expiration
Operator Name	Operator Type	Certification(s)	Certification Expiration
GRANT, SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2020 9/30/2020

Contact Information

Name		Organization			Job Title	
Reverend John Donnelly		Christ Episcopal Church			Reverend	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
470 Quaker Farms Road				Oxford	CT	06478
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-888-4936					jdonnellyccqf@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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT1085013	144 OXFORD ROAD, LLC	NTNC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
144 OXFORD ROAD				13			
Towns Served: OXFORD							

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	1/1/11 - 12/31/19		Complete		
	1/1/20 - 12/31/28				
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		Complete		
	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		Complete		
	4/1/20 - 6/30/20				
	7/1/20 - 9/30/20				
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>		
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			
<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				
Pesticides, Herbicides and PCBs-Phase II (SOC2)		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				
Pesticides, Herbicides and PCBs-Phase V (SOC5)		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>		

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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		
CT1085013	144 OXFORD ROAD, LLC	NTNC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
144 OXFORD ROAD				13			
Towns Served: OXFORD							

Monitoring Requirements

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

Pesticides, Herbicides and PCBs-Phase V (SOC5)			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		Complete
	1/1/21 - 12/31/23		

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
SANITARY SURVEY PROGRESS REPORT	1/15/2009	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2018	
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
CROSS CONNECTION SURVEY REPORT	3/1/2020	

Public Notification Requirements

<i>Violation/Situation</i>	<i>Compliance Period</i>	<i>Notice Tier</i>	<i>Public Notification</i>		<i>PN Certification</i>	
			<i>Required</i>	<i>Performed</i>	<i>Due to DPH</i>	<i>Received</i>
Physical Parameters M&R Violation	4/1/09 - 6/30/09	3	9/1/2010		9/11/2010	
Physical Parameters M&R Violation	7/1/16 - 9/30/16	3	2/10/2018		2/20/2018	
Total Coliform M&R Violation	7/1/16 - 9/30/16	3	2/10/2018		2/20/2018	

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			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		TK001	VALLEY ORTHO RR	A	Y	2	Y	
		TK002	VALLEY ORTHO KIT	A	Y	2	Y	
		TK003	TANNING SALON RR	A	Y	2	Y	
		TK004	SUBWAY HAND SNK FRNT	A	Y	2	Y	
		TK005	SUBWAY HAND SNK BACK	A	Y	2	Y	
		TK006	SUBWAY SINGLE SINK	A	Y	2	Y	
		TK007	SUBWAY HAND SINK	A	Y	2	Y	
		TK008	SUBWAY TRIPLE SINK	A	Y	2	Y	
		TK009	SUBWAY SLOP SINK	A	Y	2	Y	
		TK010	PRIMARY CARE	A	Y	2	Y	

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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		
CT1085013	144 OXFORD ROAD, LLC	NTNC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
144 OXFORD ROAD				13			
Towns Served: OXFORD							

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
		TK011	NAIL SALON	A	Y	2	Y	
		TK012	COUNTRY CREAMERY	A	Y	2	Y	
		TK013	ART AND CRAFT STUDIO	A	Y	2	Y	
		TK014	CHINESE RESTAURANT	A	Y	2	Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10504	WELL #1	2	WELL #1	A				
10505	WELL #2	2	WELL #2	A				
55057	WELL #3	2	WELL #3	A				
57411	TREATMENT PLANT							

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 57411)			
Facility Classification: CLASS 1 TREATMENT PLANT			
			<i>Certification Expiration</i>
Operator Name	Operator Type	Certification(s)	
FOLEY, JAMES	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2023

Contact Information

Name		Organization			Job Title			
Mr. Thomas Kelleher		144 Oxford Road LLC			Member			
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
1636 Dixwell Avenue						Hamden	CT	06514
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-281-5521	308			203-248-8313				

Contact Role(s): Legal Contact								
Name		Organization			Job Title			
Mr. Edward J. Kelleher		144 Oxford Road, LLC						
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
1636 Dixwell Avenue						Hamden	CT	06514
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-281-5521	307	203-288-5222		203-494-7344	ed@tommyk.com			

Contact Role(s): Administrative Contact								
Name		Organization			Job Title			
144 Oxford Road LLC								
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
1636 Dixwell Ave						Hamden	CT	06514
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
Contact Role(s): Owner								

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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		
CT1085013	144 OXFORD ROAD, LLC	NTNC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
144 OXFORD ROAD				13			
Towns Served: OXFORD							

Please note the following:

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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.

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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		
CT1085033	PLEASANT VALLEY SHOPPING PLAZA	NTNC	89	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
248 OXFORD ROAD			15				
Towns Served: OXFORD							

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	1/1/11 - 12/31/19		Complete		
	1/1/20 - 12/31/28				
Total Haloacetic Acids (2456)		1 routine (RT) per year			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
UNIT 1-2 ROSES SINK (PVSC007)	1/1/19 - 12/31/19	7/1-7/30	Complete		
	1/1/20 - 12/31/20	7/1-7/30			
	1/1/21 - 12/31/21	7/1-7/30			
Total Trihalomethanes (2950)		1 routine (RT) per year			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
PLAYSCHOOL KITCHEN (PVSC004)	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			
Total Coliform (3100)		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		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				
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>		
Select from Inventory of Active Sampling Points	7/1/19 - 12/31/19		Complete		
	1/1/20 - 6/30/20				
	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		

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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		
CT1085033	PLEASANT VALLEY SHOPPING PLAZA	NTNC	89	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
248 OXFORD ROAD			15				
Towns Served: OXFORD							

Monitoring Requirements

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

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>
	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)**

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)	1/1/17 - 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		
<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		

Pesticides, Herbicides and PCBs-Phase II (SOC2)	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		

Pesticides, Herbicides and PCBs-Phase V (SOC5)	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)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		

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
CT1085033	PLEASANT VALLEY SHOPPING PLAZA	NTNC	89	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
248 OXFORD ROAD		15				

Towns Served: OXFORD

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point RDC (EPRD)	Minimum: 0.5 MG/L	Continuous
Start Date: 4/1/2018			
	Compliance History:	Operating Limit	Monitoring
	Monitoring Period	Compliance Status:	Compliance Status:
	10/1/2019 - 10/31/2019	Y	
	11/1/2019 - 11/30/2019	Y	
	12/1/2019 - 12/31/2019	Y	
	1/1/2020 - 1/31/2020	Y	
	2/1/2020 - 2/29/2020		

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	4
Start Date: 1/1/2004			
	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
CROSS CONNECTION EXEMPTION	3/1/2020	

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	GENERIC DISTRIBUTION	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		PVSC001	UNIT 9 NONNAS KS	A	Y	2	Y	
		PVSC002	UNIT 8 NU LOOK SINK	A	Y	2	Y	
		PVSC003	PLAYSHOOL STAFF BR	A	Y	2	Y	
		PVSC004	PLAYSCHOOL KITCHEN	A	Y	2	Y	Y
		PVSC005	UNIT 13 OXFORD PC	A	Y	2	Y	
		PVSC006	UNIT 4 OXFORD DENTAL	A	Y	2	Y	
		PVSC007	UNIT 1-2 ROSES SINK	A	Y	2	Y	Y
		PVSC008	UNIT 6-7 BAR SINK	A	Y	2	Y	
		PVSC009	UNIT 11 CUSTOM BLD	A	Y	2	Y	
		PVSC010	UNIT 14 KITCHEN SPLY	A		2	Y	
		PVSC011	UNIT 12 MTG CO SINK	A	Y	2	Y	
		PVSC012	THE OFFICE BR	A	Y	2	Y	
		PVSC013	CPM KITCHEN SINK	A	Y	2	Y	
		PVSC014	KINDER CARE TOD SINK	A	Y	2	Y	

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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		
CT1085033	PLEASANT VALLEY SHOPPING PLAZA	NTNC	89	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
248 OXFORD ROAD			15				
Towns Served: OXFORD							

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				
10506	WELL #2	2	WELL #2	A				
10507	WELL #1	2	WELL #1	A				
10513	COMBINED WELL #1 AND #2	2	COMBINED WELL #1 AND	A				
48695	PLEASANT VALLEY TREATMENT STATION							
53946	BLADDER TANKS							

Certified Operator Information

Water System Facility: PLEASANT VALLEY TREATMENT STATION (WSF ID: 48695)			
Facility Classification: CLASS 1 TREATMENT PLANT			
Operator Name	Operator Type	Certification(s)	Certification Expiration
GRANT, SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2020 9/30/2020

Contact Information

Name		Organization			Job Title	
Mr. Michael Giansanti					Owner	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
1 Oakview Drive				Stratford	CT	06614
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-209-9815				203-375-9120		

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

Name		Organization			Job Title	
Ms. Marissa Giansanti					Owner	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
1 Oakview Drive				Stratford	CT	06614
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-209-9815				203-375-9120		

Contact Role(s): Owner

- Please note the following:**
- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
 - If a Collection Period is specified, all water quality samples must be collected during the specified period.
 - 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

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		
CT1085061	AQUARION WATER CO OF CT-OXFORD TOWN CTR	NTNC	25	P	GWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
ROUTE 67			150	80			
Towns Served: OXFORD							

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	1/1/17 - 12/31/25				
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		Complete		
	4/1/20 - 6/30/20				
	7/1/20 - 9/30/20				
Disinfectant Byproducts - TTHM & HAA5 (DBP)		1 routine (RT) per year			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
OTC 357 OXFORD RD SS (00572)	1/1/19 - 12/31/19	9/1-9/30	Complete		
	1/1/20 - 12/31/20	9/1-9/30			
	1/1/21 - 12/31/21	9/1-9/30			
Lead And Copper (PBCU)		5 routine (RT) per year			
<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 - 12/31/19	6/1-9/30	Complete		
	1/1/20 - 12/31/20	6/1-9/30			
	1/1/21 - 12/31/21	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		Complete		
	4/1/20 - 6/30/20				
	7/1/20 - 9/30/20				

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CCTS 7: DWS TO SPECIFY OPTIMAL WQPS	6/30/2019	
CROSS CONNECTION SURVEY REPORT	3/1/2020	

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	00004	OXFORD TOWNE CTR SS	A	Y			
		00572	OTC 357 OXFORD RD SS	A	Y		Y	Y
		00573	PRICE CHOPPER MARKET	A	Y			
		4	DISTRIBUTION SYSTEM	A				
		PB8053	OTC 170 OXFORD RD	A		N		

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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		
CT1085061	AQUARION WATER CO OF CT-OXFORD TOWN CTR	NTNC	25	P	GWP		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
ROUTE 67			150	80			
Towns Served: OXFORD							

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
		PB8081	OTC 150 MAIN ST	A		N		
		PB8084	OTC 154 MAIN ST	A		N		
		PB8085	OTC 160 MAIN ST	A		N		
		PB8086	OTC 304 OXFORD RD	A		N		
		PB8087	OTC 274 OXFORD RD	A		N		
		PB8088	OTC 280 OXFORD RD	A		N		
		PB8089	OTC 159 MAIN ST	A		N		
60122	INTERCONNECTION - HERITAGE WATER CO.	00571	OXFORD TOWN CENTER M	A	Y			

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
Facility Classification: SMALL WATER SYSTEM			
Operator Name	Operator Type	Certification(s)	Certification Expiration
LOTT, LESTER	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2021

Contact Information

Name		Organization			Job Title	
Mr. John P. Walsh		Aquarion Water Company			Vice President	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
835 Main Street		Mail Stop 700		Bridgeport	CT	06604
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-337-5852		203-337-5938		781-413-6175	jwalsh@aquarionwater.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.

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End of schedule