

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1140011	PRESTON PLAINS WATER COMPANY			C	550	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
				104	1			

Towns Served: PRESTON

### 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 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)		10 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 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)			
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		

**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
CT1140011	PRESTON PLAINS WATER COMPANY			C	550	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			104	1			

Towns Served: PRESTON

### Monitoring Requirements

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

<b>Net Gross Alpha (4000)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/23 - 12/31/25		
<b>Uranium (4006)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Combined Radium-226/228 (4010)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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		
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>		
<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>
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
RESPOND TO SANITARY SURVEY	1/30/2020	1/29/2020
CROSS CONNECTION SURVEY REPORT	3/1/2020	
SUBMIT CCR TO THE DEPARTMENT	6/30/2020	
SUBMIT CCR CERTIFICATION FORM	8/9/2020	

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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	
CT1140011	PRESTON PLAINS WATER COMPANY			C	550	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			104	1				

Towns Served: PRESTON

### 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				
		PPWC01	15 OVERLOOK DRIVE	A	Y			
		PPWC010	33 LYNN DRIVE	A	Y		Y	
		PPWC011	SCHOOL 1 RT 164	A	Y	3		
		PPWC012	7 TANGLEWOOD DRIVE	A		3		
		PPWC013	11 TANGLEWOOD DRIVE	A		1		
		PPWC014	17 TANGLEWOOD DRIVE	A		1		
		PPWC015	12 MEADOW DRIVE	A		1		
		PPWC016	39 RT. 164	A		3		
		PPWC017	41 RT. 164	A		3		
		PPWC02	25 LYNN DRIVE	A	Y		Y	
		PPWC03	2 MEADOW DRIVE	A	Y			
		PPWC04	33 ROUTE 164	A	Y			
		PPWC05	9 TANGLEWOOD DRIVE	A	Y	1		
		PPWC06	13 TANGLEWOOD DRIVE	A		1		
		PPWC07	15 TANGLEWOOD DRIVE	A		1		
		PPWC08	19 TANGLEWOOD DRIVE	A		1		
		PPWC09	21 TANGLEWOOD DRIVE	A		1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
1948	WELL#2	2	WELL#2	A				
51114	10K ATMOSPHERIC TANK							
51118	ATMOSPHERIC STORAGE TANK							
56246	INTERCONNECTION - CT0723011- MASHANTUCKET							
844	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
JOHNSON, MICHAEL W.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	12/31/2020
		WATER TREATMENT PLANT OPERATOR - CLASS IV	12/31/2020

### Contact Information

Name		Organization	Job Title		
Mr. Bryan Charity		Mashantucket Pequot Tribal	Assistant Director		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code	
2 Matts Path	PO Box 3060	Mashantucket	CT	06338-3060	

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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
<b>CT1140011</b>	<b>PRESTON PLAINS WATER COMPANY</b>	<b>C</b>	<b>550</b>	<b>P</b>	<b>GW</b>
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial
		<b>104</b>	<b>1</b>		
Towns Served: PRESTON					
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-396-7552				860-396-6100	bcharity@mptn-nsn.gov
Contact Role(s): <b>Administrative Contact, Legal Contact</b>					
Name			Organization		Job Title
<b>Mr. Keith Gove</b>					
Mailing Address Line One		Mailing Address Line Two		City	State
103 Pequod Trail		P.O. Box 3201		Mashantucket	CT
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-312-2502					kgove@mptn-nsn.gov
Contact Role(s): <b>Legal Contact</b>					
<b>Please note the following:</b> <ol style="list-style-type: none"> <li>1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.</li> <li>2. If a Collection Period is specified, all water quality samples must be collected during the specified period.</li> <li>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.</li> </ol>					

***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	
CT1140021	LINCOLN PARK ELDERLY HOUSING			C	80	L	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
11 LINCOLN PARK ROAD EXTENSION				11				

Towns Served: PRESTON

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>	
<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		
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>	
<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		
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per year</b>	
<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	
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>	
<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)		<b>1 routine (RT) per three years</b>	
<b>Net Gross Alpha (4000)</b>			
<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

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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
CT1140021	LINCOLN PARK ELDERLY HOUSING			C	80	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
11 LINCOLN PARK ROAD EXTENSION			11				
Towns Served: PRESTON							

### Monitoring Requirements

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

<b>Net Gross Alpha (4000)</b>		<b>1 routine (RT) per three years</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		
<b>Uranium (4006)</b>		<b>1 routine (RT) per three years</b>	
<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		
<b>Combined Radium-226/228 (4010)</b>		<b>1 routine (RT) per three years</b>	
<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		
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>	
<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		
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>	
<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		
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>		<b>1 routine (RT) per three years</b>	
<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		
<b>Organic Chemicals (VOCS)</b>		<b>1 routine (RT) per three years</b>	
<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		
<b>Other Compliance Schedules</b>			
<i>Compliance Schedule Activity</i>		<i>Due Date</i>	<i>Achieved Date</i>
DISTRIBUTION SYSTEM MATERIALS EVALUATION		8/31/2019	
SUBMIT CCR TO THE DEPARTMENT		6/30/2020	
SUBMIT CCR CERTIFICATION FORM		8/9/2020	
CROSS CONNECTION EXEMPTION		3/1/2024	

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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	
CT1140021	LINCOLN PARK ELDERLY HOUSING			C	80	L	GW	
Local Address (where applicable)			Service	Residential	Commercial	Industrial	Combined	Agricultural
11 LINCOLN PARK ROAD EXTENSION			Connections	11				
Towns Served: PRESTON								

### 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			
		5	SINK 1 DIST. SYST.	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		LPEH01	9B LINCOLN PARK RD 0	A	Y			
		LPEH02	6B LINCOLN PARK RD 0	A	Y			
		LPEH03	3D LINCOLN PARK RD 0	A	Y			
		LPEH04	COMMUNITY CENTER 04	A	Y			
		LPEH05	COMMUNITY CENTER 05	A	Y			
		LPEH06	6C LINCOLN PARK RD.	A	Y			
		LPEH07	12D LINCOLN PARK RD.	A	Y			
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
50913	HYDROPNEUMATIC STORAGE							
50915	ATMOSPHERIC STORAGE							
796	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
THOMPSON, WAYNE J.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	12/31/2020
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	12/31/2021
SIPULESKI, PAUL	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020

### Contact Information

Name			Organization			Job Title		
<b>Ms. Carol Onderdonk</b>			Lincoln Park Elderly Housing			Exec. Director		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
11 Lincoln Park Rd Ext						Preston	CT	06365
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-887-4865		860-887-4865		860-889-2366				

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
<b>CT1140021</b>	<b>LINCOLN PARK ELDERLY HOUSING</b>	<b>C</b>	<b>80</b>	<b>L</b>	<b>GW</b>

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
11 LINCOLN PARK ROAD EXTENSION		11				

Towns Served: PRESTON

Name				Organization			Job Title		
Ms. Mary Lou Jensen				Lincoln Park Elderly Housing			Secretary		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
601 Route 165						Preston		CT	06365
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
860-889-6400									

Contact Role(s): **Legal Contact**

Name				Organization		Job Title			
Mr. Robert Byrnes				Lincoln Park Elderly Housing		Treasurer			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
5 Lincoln Park Rd Ext.			Apt C			Preston		CT	06365
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address			
860-886-8596									

Contact Role(s): **Legal Contact**

Name				Organization			Job Title		
Mr. David Goss				Lincoln Park Elderly Housing			Vice Chairman		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
4 Nelson Drive						Preston		CT	06365
Business Phone	Extension	Fax	Mobile Phone		Emergency Phone	Email Address			
860-887-0442									

Contact Role(s): **Legal Contact**

Name				Organization		Job Title			
Mr. Joseph Cansler				SCWA		General Manager			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
P.O. Box 415			1649 Route 12			Gales Ferry		CT	06335-0415
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
860-464-0232			860-464-2876		860-941-3406		j.cansler@waterauthority.org		

Contact Role(s): **Administrative 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**