	Connecticut Departmen					-			ection		
	Water Quality M	onitoring an	a com				1		-	D :	6
PWS ID	PWS Name	CTENA #1		Clas	sification C	Рор	ulation 32	Ow	vner Type P		
CT1210011	SALEM MANOR CONDOMINIUMS, SYS	Service	Decident	Hal	Commerci		32 Industria		P Combine		GW
	(where applicable) CHESTER ROAD	Connections	Resident 12	lidi	commerci	Idl	maustria	dI	Compine	u Ag	ricultur
owns Served		connections	12								
owns served		onitoring Dog	iromo	-							
Nator Syster	n Facility: DISTRIBUTION SYSTEM (ireme	nts							_
Asbestos (1	, , ,	WSF ID: 00000)					1 ro	+:	ne (RT) p	or nin	0.1007
-	994) Point (Sampling Point ID)		Monitorii	na D	priod C	allor	tion Per				e year Status
	om Inventory of Active Sampling Points		1/1/11 - 1	-		Unet		iou	-	Comple	
Selecting	in inventory of Active Sampling Fonts		1/1/13 - 1							Joinpic	
			1/1/20 - 2								
Total Colifor	rm (3100)		<u>_,_,_</u>	, 5	-,			1 ra	outine (R	T) per	mont
	Point (Sampling Point ID)		Monitorii	na Pe	eriod C	olled	tion Pe		-		e Status
	om Inventory of Active Sampling Points		10/1/19 -	_						Comple	
			11/1/19 -							Comple	
			<i></i> 12/1/19 -							Comple	
			1/1/20 -	1/31	/20				(Comple	ete
			2/1/20 - 2/29/20						(Comple	ete
			3/1/20 -	3/31	/20				(Comple	ete
			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						
	opper (PBCU)								e (RT) pe		-
	Point (Sampling Point ID)		Monitorii	-			tion Pe	riod	l Com	oliance	e Status
DIST SYS	#1 (4)		1/1/18 - 1				/1-9/30				
	(1/1/21 - 1	12/3	1/23	6,	/1-9/30			-1	
-	ameters (PPS)								outine (R		
	Point (Sampling Point ID)		Monitorii	-		ollec	tion Pe	rioa			e Status
Select fro	om Inventory of Active Sampling Points		10/1/19 -							Comple	
			11/1/19 -							Comple	
			12/1/19 - 1/1/20 -							Comple Comple	
			2/1/20 -							Comple	
			3/1/20 -		-				(Joinple	
			4/1/20 -								
			5/1/20 -	-	-						
			6/1/20 -								
			7/1/20 -								
			8/1/20 -								
			9/1/20 -								
Vater Syster	m Facility: ENTRY POINT SYSTEM (V	VSF ID: 00700)									
	lpha (4000)						1 rou	ıtin	e (RT) pe	r thre	e year
	Point (Sampling Point ID)		Monitorii	-			tion Per				e Status

	Connecticut Departmen				<u> </u>			ection	
	Water Quality M	onitoring an	L.				1		
PWS ID	PWS Name		(Owi		Primary Source
CT1210011	SALEM MANOR CONDOMINIUMS, SY			C		32		Р	GW
	where applicable)	Service	Residenti	ial Co	mmercia	al Industri	ial	Combine	d Agricultura
688 OLD COLCH	HESTER ROAD	Connections	12						
Towns Served:	SALEM								
	Μ	onitoring Requ	iiremen	nts					
Water System	n Facility: ENTRY POINT SYSTEM (V	VSF ID: 00700)							
Net Gross Alp	pha (4000)					1 ro	utine	e (RT) pei	three years
Sampling	Point (Sampling Point ID)		Monitorin	ig Perio	od Co	ollection Pe	riod	Сотр	liance Status
ENTRY PO	INT (3)		1/1/17 - 1	.2/31/1	19			С	omplete
			1/1/20 - 1	2/31/2	22				-
			1/1/23 - 1						
Uranium (40	06)		,,	. ,		1 ro	utine	e (RT) nei	three years
•	Point (Sampling Point ID)		Monitorin	a Perio	od Co	ollection Pe			liance Status
ENTRY PO			1/1/17 - 1	-					omplete
			1/1/20 - 1					C	
			1/1/23 - 1						
Combined Ba	adium-226/228 (4010)		1/1/23-1	.2/31/2		1	utina	(DT) no.	three years
	Point (Sampling Point ID)		Monitorin	a Dori	ad C	Dillection Pe			liance Status
ENTRY PO			1/1/17 - 1	-			nou		
ENTRY PU	INT (3)							Ľ	omplete
			1/1/20 - 1						
			1/1/23 - 1	.2/31/2	25			()	
-	emicals (IOCS)								three years
	Point (Sampling Point ID)		Monitorin	-		ollection Pe	eriod	Comp	liance Status
ENTRY PO	INT (3)		1/1/19 - 1						
	· · ·		1/1/22 - 1	.2/31/2	24				
	Nitrite (NOX)							-	RT) per year
	Point (Sampling Point ID)		Monitorin	-		ollection Pe	eriod		liance Status
ENTRY PO	INT (3)		1/1/19 - 1					C	omplete
			1/1/20 - 1						
			1/1/21 - 1	.2/31/2	21				
Organic Chen	nicals (VOCS)						1	routine (RT) per year
Sampling	Point (Sampling Point ID)		Monitorin	i <mark>g Per</mark> io	od Co	ollection Pe	riod	Сотр	liance Status
ENTRY PO	INT (3)		1/1/19 - 1	.2/31/1	19			C	omplete
			1/1/20 - 1	.2/31/2	20				
			1/1/21 - 1	.2/31/2	21				
	Oth	ner Compliance	Schedu	ules					
Compliance Sch	hedule Activity		D	ue Dat	te	Achie	eved	Date	
	SYSTEM MATERIALS EVALUATION		8/	/31/201	19				
	D THE DEPARTMENT			/30/202					
	ERTIFICATION FORM			/9/202					
				/1/202					
		c Notification R							
		Compliance	Notice			otification		DNI Co	rtification
Violation/Situa	ation	Period	Tier		quired	Performe		Due to DPF	-
	COLIFORM RULE (RTCR) TT Violation	5/7/19 - 5/14/19	2		5/2019	reijonne		5/16/2019	
ILVISED TOTAL		5/ 1/ 15 5/ 14/ 15	۲	0/0	72013				

	Connecticut De	partmen	t of Public H	lealth I	Drinkir	ıg W	ater	Section	
	Water Q	uality Mo	nitoring an	d Com	oliance	Sch	edule	è	
PWS ID	PWS Name		0		lassificatio				Primary Source
CT1210011	SALEM MANOR CONDO	MINIUMS, SYST	TEM #1		С		32	P	GW
Local Address (\	where applicable)		Service	Residentia	l Commer	cial I	ndustria	Combined	Agricultura
688 OLD COLCH	IESTER ROAD		Connections	12					
Towns Served:	SALEM								
		Public	Notification R	equiren	nents				
			Compliance	Notice	Public	Notific	ation	PN Cer	<u>tification</u>
Violation/Situa	tion		Period	Tier	Required	d Pe	rformed	Due to DPH	Received
Total Coliform N	M&R Violation		9/1/18 - 9/30/18	3	12/5/201	9		12/15/2019)
Physical Parame	eters M&R Violation		9/1/18 - 9/30/18	3	12/5/201	9		12/15/2019)
	Wate	r System Fa	acility and Sar	npling P	oint Inv	ento	ry		
Water						Total	Lead a	nd	
	er System Facility		Point Sampling Poi	nt	C	oliform			Stage
Facility ID		ID	Description		Status	Rule	Rule T	ier Asbestos	WQP 2 DBPI
00500 SYST STOF	EM #1 ATMOSPHERIC RAGE								
00600 DIST	RIBUTION SYSTEM	4	DIST SYS #1		А	Υ			
		DOWNSTR	EAM WITHIN 5 SER	VICE CON	А				
		SM01	UNIT 1		А	Y	Ν	Y	
		SM02	UNIT 2		А	Y	Ν	Y	
		SM03	UNIT 3		А	Y	Ν	Y	
		SM04	UNIT 4		А	Y	Ν	Y	
		SM05	UNIT 5		А	Y	Ν	Y	
		SM06	UNIT 6		А	Y	Ν	Y	
		SM07	UNIT 6		А	Y	Ν	Y	
		SM08	UNIT 8		А	Υ	Ν	Y	
		SM09	UNIT 9		А	Y	Ν		
		SM10	UNIT 10		А	Υ	Ν	Y	
		SM11	UNIT 11		А	Y	Ν	Y	
		SM12	UNIT 12		А	Υ	Ν	Y	
		SM13	UNIT 13		А	Υ	Ν	Y	
		SM14	UNIT 14		А	Y	Ν	Y	
		SM15	UNIT 15		А	Y	Ν	Y	
		SM16	UNIT 16		А	Y	Ν	Y	
		UNIT 1	UNIT 1		А	Y			
		UNIT 1	7 DISTRIBUTION	SYSTEM	А	Y			
		UNIT 1	8 DISTRIBUTION	SYSTEM	А	Y			
		UNIT 3	UNIT 3		А	Υ			
		UNIT 4	UNIT 4		А	Y			
		UNIT 5	UNIT 5		А	Y			
		UPSTREA	M WITHIN 5 SER	VICE CON	А				
00700 ENT	RY POINT SYSTEM	3	ENTRY POINT		А				
496 WEL	L #1	2	WELL 1		А				
50634 WEL	L-X-TROL BLADDER STORA	GE							
		Certif	ied Operator	Informa	tion				

	Connectic	ut Depa	rtment	of Public	: Health	Dri	nking	Water	Sect	tion	
	Wa	ter Qua	lity Mon	itoring a	ind Con	nplia	ance S	chedu	le		
PWS ID	PWS Name					Classi	fication	Population	Owner	r Type	Primary Source
CT1210011	SALEM MANOR	CONDOMIN	IUMS, SYSTER	И #1			С	32	Р)	GW
Local Address (w	here applicable)			Service	Residen	tial C	ommercia	al Industri	al Co	ombine	d Agricultural
688 OLD COLCHE	STER ROAD			Connectio	ins 12						
Towns Served: SA	ALEM					·			·		
			Certifie	d Operato	or Inform	natio	n				
Water System I	Facility: DISTR	IBUTION S	YSTEM (WSI	ID: 00600)							
Facility Classifica	ntion: SMALL WA	ATER SYSTEM	1								Certification
Operator Name			Operator T	уре	Certificatio	on(s)					Expiration
COSSETTE, EVAN	J		CHIEF OPERA	TOR	WATER TRE	EATME	NT PLANT	OPERATO	R - CLAS	SS IV	6/30/2021
					DISTRIBUTI	ON SYS	STEM OPE	RATOR IN	TRAININ	١G	6/30/2021
					DISTRIBUTI	ON SYS	STEM OPE	ERATOR - CL	ASS II		9/30/2021
			Co	ontact Info	ormation	1					
Name				Organization					Jo	ob Title	
Ms. Jennifer Arn	dt							Administr	ative		
Mailing Address	Line One		Mailing Addr	ess Line Two				City		State	Zip Code
C/O All Things Bu	isiness		P. O. Box 615				Niantic			СТ	06357
Business Phone	e Extension	Fax	Mo	bile Phone	Emergency	Phone	e Email A	ddress			
860-444-6844							atb@al	lthingsbusir	nessllc.c	com	
Contact Role(s):	Administrative	Contact									
Name				Organization					Jo	ob Title	
Mr. Robert Gagr	ion			Rmd Properti	es LLC			Owner			
Mailing Address	Line One		Mailing Addr	ess Line Two				City		State	Zip Code
627 Norwich-Sale	em Turnpike		Unit 5				Oakdal	9		СТ	06370
Business Phone	e Extension	Fax	Mo	bile Phone	Emergency	Phone	e Email A	ddress			
860-892-8035		860-892-	8074		860-303-	-6758	rgagnoi	n@colchest	erconst	tructior	i.com
Contact Role(s):	Legal Contact										
Please note the	following:										
1. The residual d	isinfectant concen	tration must b	e measured at	the same locati	on and time a	as each	total colifo	orm sample.			
2. If a Collection	Period is specified	, all water qua	lity samples mu	ust be collected	during the sp	ecified	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 Drinki	ng Water Se	ction
	Water Ouality Mor	nitoring and Compliance	e Schedule	
PWS ID	PWS Name	U	1	er Type Primary Sourc
CT1210021		C	184	P GW
	where applicable)	Service Residential Comme		Combined Agricultura
(Connections 74		
Towns Served:	SALEM			
	Mon	itoring Requirements		
Water System	Facility: DISTRIBUTION SYSTEM (WS	<u> </u>		
Chlorine Resi		·	1 rou	tine (RT) per month
	Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	m 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		Somplete
		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		
Ashester (ac	204	9/1/20 - 9/30/20	4	
Asbestos (10	-	Monitoring Devied		e (RT) per nine years
	Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	m Inventory of Active Sampling Points	1/1/13 - 12/31/21		
Total Colifor				itine (RT) per month
	Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from	m 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		
Disinfectant	Byproducts - TTHM & HAA5 (DBP)		1 r	outine (RT) per year
Sampling	Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
63G (CL01	1)	1/1/19 - 12/31/19	7/1-7/31	
		1/1/20 - 12/31/20	7/1-7/31	
		1/1/21 - 12/31/21	7/1-7/31	
Lead And Co	pper (PBCU)		10 routine	(RT) per six months
	Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	m Inventory of Active Sampling Points	7/1/19 - 12/31/19		Complete
	, , , , , , , , , , , , , , , , , , , ,	1/1/20 - 6/30/20		

	Connecticut Department	t of Public I	Health	D	rinkin	g Water	· Se	ection	
	Water Quality Mo					0			
PWS ID	PWS Name					T	1	ner Type P	Primary Sourc
CT1210021	CRYSTAL LAKE CONDOMINIUMS				С	184		P	GW
Local Address ((where applicable)	Service	Residen	tial	Commerc	ial Industri	ial	Combined	Agricultura
		Connections	74						
Towns Served:	SALEM				I				
	Мо	nitoring Req	uireme	nts					
Water System	n Facility: DISTRIBUTION SYSTEM (W								
Lead And Co	pper (PBCU)					10 ro	utin	e (RT) pei	r six months
	Point (Sampling Point ID)		Monitori	ing P	Period (Collection Pe			iance Status
			7/1/20 -	12/3	31/20				
Physical Para	ameters (PPS)						1 ro	utine (RT) per month
Sampling	Point (Sampling Point ID)		Monitori	ing P	Period (Collection Pe	riod	Compl	iance Status
Select fro	m Inventory of Active Sampling Points		10/1/19 -	10/	31/19			Co	omplete
			11/1/19 -	11/	30/19			C	omplete
			12/1/19 -	12/	31/19		_	C	omplete
			1/1/20 -	1/3	1/20			Co	omplete
			2/1/20 -	2/2	9/20			Co	omplete
			3/1/20 -	3/3	1/20				
			4/1/20 -	4/3	0/20				
			5/1/20 -	5/3	1/20				
			6/1/20 -	6/3	0/20				
			7/1/20 -						
			8/1/20 -	8/3	1/20				
			9/1/20 -	9/3	0/20				
	n Facility: ENTRY POINT (WSF ID: 00)	700)							
Net Gross Al	• • •								three years
	Point (Sampling Point ID)		Monitori	_		Collection Pe	riod		iance Status
ENTRY PO	DINT (3)		1/1/17 -					Co	omplete
			1/1/20 -		-				
			1/1/23 -	12/3	31/25				
Uranium (40	-								three years
	Point (Sampling Point ID)		Monitori	-		Collection Pe	riod	-	iance Status
ENTRY PO	DINT (3)		1/1/17 -					Co	omplete
			1/1/20 -						
0			1/1/23 -	12/3	\$1/25				•••
	adium-226/228 (4010)		Marit		auto d				three years
	Point (Sampling Point ID)		Monitori			Collection Pe	riod	-	iance Status
ENTRY PO	(3)		1/1/17 -					C	omplete
			1/1/20 -						
	omianla (IOCS)		1/1/23 -	12/3	1/25	4			+
-	emicals (IOCS) Point (Sampling Point ID)		Monitor	ina D	Deriod	1 roı Collection Pe			three years <i>iance Status</i>
ENTRY PO			<i>Monitori</i> 1/1/19 -	_		Lonection Pe	nod	compl	iunce status
	(5)		1/1/19 -						
Nitrata And	Nitrita (NOX)		1/1/22-	12/3	, 1/ 24		1	routino /	RT) per year
	Nitrite (NOX) Point (Sampling Point ID)		Monitori	ina P	Period	Collection Pe		-	liance Status
ENTRY PO			1/1/19 -	_					omplete
				12/3	, 1, 1, J				mpiere

Connecticut Department of Publi	Ŭ	
Water Quality Monitoring	A	
PWS ID PWS Name		Owner Type Primary Source
CT1210021 CRYSTAL LAKE CONDOMINIUMS	C 184	P GW
Local Address (where applicable) Service Connecti	Residential Commercial Industria	l Combined Agricultural
Towns Served: SALEM	,,,	
Monitoring R	equirements	
Water System Facility: ENTRY POINT (WSF ID: 00700)		
Nitrate And Nitrite (NOX)		1 routine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period Collection Per	
	1/1/20 - 12/31/20	Complete
	1/1/21 - 12/31/21	
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)	1 rou	tine (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period Collection Per	iod Compliance Status
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)		tine (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period Collection Per	
ENTRY POINT (3)	1/1/18 - 12/31/20	Complete
Water System Facility: WELL 1B (WSF ID: 1503)	1/1/21 - 12/31/23	
		routing (DT) nor month
E. Coli (3014) Sampling Point (Sampling Point ID)	L Monitoring Period Collection Per	routine (RT) per month iod Compliance Status
WELL 1B (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	
Water System Facility: WELL 3B (WSF ID: 1504)		
E. Coli (3014)		routine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period Collection Per	
(2)	10/1/19 - 10/31/19	Complete
	11/1/19 - 11/30/19 12/1/19 - 12/31/19	Complete 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	

	Connecticut Departmer	nt of Public H	lealth	Dr	inking	g W	Vater	Se	ection	
	Water Quality Mo	onitoring an	d Con	npl	iance	Scł	nedul	e		
PWS ID	PWS Name	0							ner Type	Primary Source
CT1210021					С		184		P	GW
	(where applicable)	Service	Residen	tial	Commerc		Industria	al	Combine	
	(Connections	74							
Towns Served	: SALEM									
	N/I	onitoring Requ	iromo	ntc						
Water Syster	m Facility: WELL 3B (WSF ID: 1504)	onnoring keqt	meme	1113	_	_	_	_	_	
E. Coli (3014	4)							1 ro	outine (RT) per month
-	Point (Sampling Point ID)		Monitori	ng P	eriod C	Colle	ction Per		-	liance Status
			7/1/20 -	_						
			8/1/20 -							
			9/1/20 -							
Water Syster	m Facility: WELL 4 (WSF ID: 749)		-,, -	-,	-, -					
E. Coli (3014								1 r	outine (PT) per month
-	↔) Point (Sampling Point ID)		Monitori	na P	eriod (Colle	ction Per		-	liance Status
(2)			10/1/19 -	-				100		of Service
(2)			11/1/19 -							of Service
			12/1/19 -							of Service
			1/1/20 -						Out	
			2/1/20 -							
			3/1/20 -							
			4/1/20 -							
			5/1/20 -							
			6/1/20 -							
			7/1/20 -							
			8/1/20 -							
			9/1/20 -							
Mator Syster	m Facility: WELL 5 (WSF ID: 750)		5/1/20	5750	<i>,720</i>					
E. Coli (3014								1	utino (PT) nor month
-	+) Point (Sampling Point ID)		Monitori	na D	ariad (Collo	ction Per		-) per month <i>liance Status</i>
(2)			10/1/19 -	-		.one	cuon Per	100		omplete
(2)			10/1/19 - 11/1/19 -							omplete
			11/1/19 - 12/1/19 -							omplete
			1/1/20 -							omplete
			2/1/20 -							omplete
			3/1/20 -							ompiete
			4/1/20 -							
			4/1/20 - 5/1/20 -							
			6/1/20 -							
			7/1/20 -							
			8/1/20 -							
			9/1/20 -	-	•					
Water Syster	m Facility: WELL 2 (WSF ID: 751)		9/1/20-	5/50	<i>J</i> / 20					
E. Coli (3014								1 ro	outine (RT) per month
-	Point (Sampling Point ID)		Monitori	ng P	eriod (Colle	ction Per		-	liance Status
(2)			10/1/19 -	_						omplete
. ,			11/1/19 -							omplete
			, -, -,	/~					C	

Water Quality Monitoring and Compliance Schedule PWS ID PWS Name Classification Population Own CT1210021 CRYSTAL LAKE CONDOMINIUMS C 184 184 Local Address (where applicable) Service Residential Commercial Industrial Towns Served: SALEM Monitoring Requirements Water System Facility: WELL 2 (WSF ID: 751) 1000000000000000000000000000000000000	ner Type Primary Source P GW Combined Agricultura
CT1210021 CRYSTAL LAKE CONDOMINIUMS C 184 Local Address (where applicable) Service Residential Commercial Industrial Connections 74 Industrial Industrial Towns Served: SALEM Monitoring Requirements Industrial	P GW
Local Address (where applicable) Service Residential Commercial Industrial Connections 74 Industrial Industrial Towns Served: SALEM Monitoring Requirements Industrial	
Connections 74 Towns Served: SALEM Monitoring Requirements	Combined Agricultura
Towns Served: SALEM Monitoring Requirements	
Monitoring Requirements	
•	
	utine (RT) per month
Sampling Point (Sampling Point ID) Monitoring Period Collection Period	Compliance Status
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: WELL 1A (WSF ID: 752)	
E. Coli (3014) 1 ro	utine (RT) per month
Sampling Point (Sampling Point ID) Monitoring Period Collection Period	Compliance Status
WELL 1A (2) 10/1/19 - 10/31/19	Out of Service
11/1/19 - 11/30/19	Out of Service
12/1/19 - 12/31/19	Out of Service
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 - 8/31/20	
9/1/20 - 9/30/20	
Water System Facility: WELL 3A (WSF ID: 753)	
	utine (RT) per month
Sampling Point (Sampling Point ID)Monitoring PeriodCollection Period	Compliance Status
(2) 10/1/19 - 10/31/19	Out of Service
11/1/19 - 11/30/19	Out of Service
12/1/19 - 12/31/19	Out of Service
1/1/20 - 1/31/20	
2/1/20 - 2/29/20	
3/1/20 - 3/31/20	
3/1/20 - 3/31/20 4/1/20 - 4/30/20	
3/1/20 - 3/31/20 4/1/20 - 4/30/20 5/1/20 - 5/31/20	
3/1/20 - 3/31/20 4/1/20 - 4/30/20	

		icut Depai					0			ection		
		/ater Qual	ity Monit	oring and								
	PWS Name				Cla	assificat	ion Po		Ow	ner Type P		
			MS			C		184		P	G۱	
Local Address (w	here applicab	ole)		Service Connections	Residential	I Comm	nercial	Industr	ial	Combined	Agri	cultural
Towns Served: S				connections	74							
Towns Served. S			Monite	aring Degu	iromont							
Water System I	Facility: WE	ELL 3A (WSF ID		oring Requ	irement	.5						
E. Coli (3014)									1 ro	utine (RT)	per r	nonth
Sampling Pe	oint (Samplin	g Point ID)			Monitoring	Period	Colle	ction Pe	eriod	Compl	iance S	Status
					8/1/20 - 8/							
					9/1/20 - 9/	30/20						
	Month	nly Water Sy	stem Facil	ity (WSF) L	evel Mo	onitori	ing Re	equire	me	nts		
Water System F	Facility: EN1	TRY POINT (WS	SFID: 00700)									
Analyte	M	onitoring Requir	ement (Summa	ary Type)	Operat	ing Limi	t			Samples R	eq/Mo	onth
Chlorine	En	ntry Point Chlorin	e Residual Mor	nitoring (CHLR)	Minimu	um: 0.2	MG/L			Da	ily	
Start Date:	10/1/2003			Complia	nce History	' :	Opera	ting Lim	nit	Monito	ring	
				Monitor	ng Period		-	liance St		: Complia	ance St	tatus:
				10/1/202	19 - 10/31/2	2019						
				11/1/202	19 - 11/30/2	2019						
				12/1/202	12/31/2	2019						
				1/1/2020) - 1/31/202	20						
				2/1/2020) - 2/29/202	20						
			Other Co	ompliance	Schedul	les						
Compliance Sche						e Date		Achie	eved	Date		
DISTRIBUTION SY			N			1/2019						
CROSS CONNECT						L/2020						
SUBMIT CCR TO						0/2020						
SUBMIT CCR CER	RIFICATION F					9/2020						
		water Sy	stem Facili	ity and San	npling Po	oint li		-				
Water	v Cuctore Fa-th	litu	annulium Daiut	Complian Dal			Total					C4
System Wate Facility ID	er System Facil	inty S	ampling Point ID	Sampling Poli Description		Charl	Colifor Rule		-	Asbestos	WOP	Stage 2 DBPR
-	RIBUTION SYST	FM	4	DISTRIBUTION	SYSTEM	<u>Status</u> A	Y	nuic		,		2 201 1
			- CL001	65B		A	Ý		2	Y		
			CL001	65H		A	Ý		2	•		
			CL002	105C		A	Ŷ		2			
			CL003	83A		A	Ŷ		2			
			CL005	105H		A	Ŷ		2			
				103F		А	Y		2			
			CL006	103F								
			CL006 CL007	103F 103B		A	Y		2			
							Y Y		2 2			
			CL007	103B		А						
			CL007 CL008	103B 83D		A A	Y	:	2			
			CL007 CL008 CL009	103B 83D 103G		A A A	Y Y		2 2	Y		Y
		C	CL007 CL008 CL009 CL010	103B 83D 103G 111E 63G	VICE CON	A A A A	Y Y Y		2 2 2	Y		Y

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

				P -			-	
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT1210021	CRYSTAL LAKE CONDOMINIUMS				С	184	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
		Connections	74					

Towns Served: SALEM

Towns Sei	rved: SALEM								
	W	ater System Facili	ity and Sa	ampling Point	Invent	ory			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling P Description		0.1-	m Copper	Asbestos		Stage 2 DBPF
00700	ENTRY POINT	3	ENTRY POIN	IT A					
1503	WELL 1B	2	WELL 1B	А					
1504	WELL 3B	2		A					
57981	ATMOSPHERIC STORAGE 1	ANK							
57983	JOCKEY PUMP TANK								
57985	PRESSURE STORAGE								
749	WELL 4	2		A					
750	WELL 5	2		A					
751	WELL 2	2		A	L.				
752	WELL 1A	2	WELL 1A	A	L.				
753	WELL 3A	2		A					
808	CRYSTAL LAKE TREATMEN STATION	Т							
		Certified	Operato	r Information					
Water Sy	stem Facility: DISTRIBU	TION SYSTEM (WSF II	D: 00600)						
Facility Cl	assification: DISTRIBUTION	SYSTEM						Certifi	ication
Operator	Name	Operator Typ	е	Certification(s)				-	ration
WITTENZE	ELLNER, ROBERT	CHIEF OPERATO	DR I	DISTRIBUTION SYST	EM OPERA	ATOR - CLASS	III	6/30)/2022
			,	WATER TREATMEN	T PLANT O	PERATOR - CI	LASS III	9/30)/2021
HARKINS,	STUART A.	ASSIGNED OPER	RATOR	DISTRIBUTION SYST	EM OPERA	ATOR - CLASS	III	6/30)/2022
				WATER TREATMEN	T PLANT O	PERATOR - C	LASS II	6/30)/2022
Water Sy	stem Facility: CRYSTAL	LAKE TREATMENT STA	ATION (WS	F ID: 808)					
Facility Cl	assification: CLASS 1 TREA	IMENT PLANT						Certifi	ication
Operator	Name	Operator Typ	е	Certification(s)				Expii	ration
WITTENZE	ELLNER, ROBERT	CHIEF OPERATO	DR I	DISTRIBUTION SYST	EM OPERA	ATOR - CLASS	III	-)/2022
				WATER TREATMEN	T PLANT O	PERATOR - C	LASS III	9/30)/2021
HARKINS,	STUART A.	ASSIGNED OPER	RATOR	DISTRIBUTION SYST	EM OPERA	ATOR - CLASS	III	6/30)/2022
				WATER TREATMEN	T PLANT O	PERATOR - C	LASS II	6/30)/2022
		Con	tact Info	rmation					
Name		O	rganization				Job Title		
Mr. Josh I	Parsons	Sc	ound Real Est	ate Services					
Mailing A	ddress Line One	Mailing Addres	s Line Two			City	State	Zip C	ode
29 Main S	treet				Mystic		СТ	063	55
Busines	s Phone Extension	Fax Mobi	le Phone	Emergency Phone	Email Add	ress			
860-33	3-6535	860-9	961-0461		jparsons@	sresct.com			
Contact R	ole(s): Administrative Con	tact, Legal Contact, Owr	ner						

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

		0		L			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1210021	CRYSTAL LAKE CONDOMINIUMS			C	184	Р	GW
Local Addres	s (where applicable)	Service	Resider	ntial Commerc	ial Industri	ial Combin	ed Agricultural
		Connections	74				
Towns Serve	d: SALEM						1
Please note t	he following:						
1. The residu	al disinfectant concentration must be measured at the	e same location	and time a	as each total coli	form sample.		
2. If a Collect	ion Period is specified, all water quality samples must	be collected du	ring the sp	pecified period.			
	g on results, additional monitoring may be required (i.e dence sent by the DWS on or after the generation date			1 1	-		

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 H	lealth	D	rinking	g Wat	ter S	Sect	ion	
	Water Quality Monito	oring an	d Con	ıpl	liance	Schee	dule	ò		
PWS ID	PWS Name	0				1			Type P	rimary Source
CT1219111	SALEM MANOR CONDOMINIUMS, SYSTEM #	2			С	25		Р		GW
Local Address	(where applicable)	Service	Residen	tial	Commerci	ial Ind	ustrial	Cor	nbined	Agricultura
688 OLD COLC	HESTER ROAD	Connections	2							
Towns Served:	SALEM									
	Monito	oring Requ	iireme	nts	;					
Water Systen	n Facility: DISTRIBUTION SYSTEM (WSF ID): 00600)								
Asbestos (10	094)						1 rou	tine (F	RT) pe	r nine years
Sampling	Point (Sampling Point ID)		Monitori	ng F	Period C	ollectio	n Peri	od	Compli	ance Status
Select fro	m Inventory of Active Sampling Points		1/1/11 -	12/3	31/19				Co	mplete
			1/1/13 -	12/3	31/21				Co	mplete
			1/1/20 -	12/3	31/28					-
Total Colifor	m (3100)						11	outin	e (RT)	per quarter
	Point (Sampling Point ID)		Monitori	ng F	Period C	ollectio				ance Status
	m Inventory of Active Sampling Points		7/1/19 -	-				0 Complete 0 0 1 routine (RT) per qu	mplete	
			10/1/19 -	12/	31/19					
			1/1/20 -	3/3	1/20				Co	mplete
			4/1/20 -	6/3	0/20					
			7/1/20 -	9/3	0/20					
Lead And Co	pper (PBCU)							5 rou	tine (F	T) per year
Sampling	Point (Sampling Point ID)		Monitori	ng F	Period C	ollectio	n Peri	od	Compli	ance Status
Select fro	m Inventory of Active Sampling Points		1/1/19 -	12/3	31/19	6/1-9	9/30		Co	mplete
			1/1/20 -	12/3	31/20	6/1-9	9/30			
			1/1/21 -	12/3	31/21	6/1-9	9/30			
Physical Para	ameters (PPS)						11	outin	e (RT)	per quarter
•	Point (Sampling Point ID)		Monitori	ng F	Period C	ollectio	n Peri	od	Compli	ance Status
Select fro	m Inventory of Active Sampling Points		7/1/19 -	9/3	0/19				Co	mplete
			10/1/19 -	12/	31/19				Co	mplete
			1/1/20 -	3/3	1/20				Co	mplete
			4/1/20 -	6/3	0/20					
			7/1/20 -							
Water Systen	n Facility: ENTRY POINT (WSF ID: 00700)									
Di(2-Ethylhe	xyl) - Phthalate (2039)						11	routine	e (RT)	per quarter
Sampling	Point (Sampling Point ID)		Monitori	ng P	Period C	ollectio	n Peri	od	Compli	ance Status
ENTRY PC	NNT (3)		7/1/19 -		-				Co	mplete
			10/1/19 -	12/	31/19				Co	mplete
			1/1/20 -							
			4/1/20 -	6/3	0/20					
			7/1/20 -	9/3	0/20					
Net Gross Al	pha (4000)					1	rout	ine (R	T) per	three years
Sampling	Point (Sampling Point ID)		Monitori			Collectio	n Peri	od	Compli	ance Status
ENTRY PC	NNT (3)		1/1/17 -	12/3	31/19				Co	mplete
			1/1/20 -							
			1/1/23 -	12/3	31/25					
Uranium (40	006)					1	rout	-		three years
Sampling	Point (Sampling Point ID)		Monitori	-		Collectio	n Peri	od	Compli	ance Status
ENTRY PC	DINT (3)		1/1/17 -	12/3	31/19				Co	mplete

	Connecticut Department	of Public H	Iealth D	rinkin	g Water S	Section	
	Water Quality Mor	nitoring an	d Comp	liance	Schedule		
PWS ID	PWS Name	0	CI	assificatior	Population C	wner Type	Primary Source
CT1219111	SALEM MANOR CONDOMINIUMS, SYSTE	M #2		С	25	Р	GW
Local Address	(where applicable)	Service	Residentia	l Commer	cial Industrial	Combine	d Agricultura
688 OLD COLC	HESTER ROAD	Connections	2				
Towns Served	SALEM						
	Mor	nitoring Requ	uirement	S			
Water Syster	m Facility: ENTRY POINT (WSF ID: 0070	00)					
Uranium (4	006)				1 routi	ne (RT) pe	r three years
Sampling	Point (Sampling Point ID)		Monitoring	Period	Collection Perio	od Comp	liance Status
			1/1/20 - 12,	/31/22			
			1/1/23 - 12,	/31/25			
	adium-226/228 (4010)					· · ·	r three years
	Point (Sampling Point ID)		Monitoring		Collection Perio		liance Status
ENTRY PC	DINT (3)		1/1/17 - 12,			C	omplete
			1/1/20 - 12,				
			1/1/23 - 12,	/31/25			
•	nemicals (IOCS)						three years
	Point (Sampling Point ID)		Monitoring		Collection Perio	od Comp	liance Status
ENTRY PC	DINT (3)		1/1/18 - 12				
			1/1/21 - 12,	/31/23			
	Nitrite (NOX)			Devie			RT) per year
	Point (Sampling Point ID)		Monitoring		Collection Perio	-	liance Status
ENTRY PC	JINT (3)		1/1/19 - 12			Ľ	omplete
			1/1/20 - 12, 1/1/21 - 12,				
Posticidos H	lerbicides and PCBs-Phase II (SOC2)		1/1/21-12,	/51/21	1 routi	no (RT) no	r three years
	Point (Sampling Point ID)		Monitoring	Period	Collection Perio	• • •	liance Status
ENTRY PC			1/1/17 - 12,				omplete
2.11.1.1.1	(0)		1/1/20 - 12				ompiete
			1/1/23 - 12				
Pesticides. H	lerbicides and PCBs-Phase V (SOC5)		_, _, _ ~ ,	,	1 routi	ne (RT) pe	r three years
-	Point (Sampling Point ID)		Monitoring	Period	Collection Perio		liance Status
ENTRY PC			1/1/17 - 12,			-	omplete
			1/1/20 - 12				
			1/1/23 - 12				
Organic Che	micals (VOCS)					1 routine	RT) per year
-	Point (Sampling Point ID)		Monitoring	Period	Collection Perio		liance Status
ENTRY PO	DINT (3)		1/1/19 - 12,	/31/19		C	omplete
			1/1/20 - 12,	/31/20			
			1/1/21 - 12,	/31/21			
	Other	^r Compliance	Schedu	les			
Compliance So	hedule Activity		Du	e Date	Achieve	ed Date	
DISTRIBUTION	SYSTEM MATERIALS EVALUATION		8/3	1/2019			
SUBMIT LEAD	CONSUMER NOTICE CERTIFICATE		12/2	9/2019	12/29	/2019	
SUBMIT CCR T	O THE DEPARTMENT		6/3	0/2020			
SUBMIT CCR C	ERTIFICATION FORM		8/9	9/2020			
CROSS CONNE	CTION EXEMPTION		3/1	/2024			

Connecticut Department of Public Health Drinking Water Section

YSTEM #2 Service Connection Facility and S Pag Point Description Contact Info STREAM WITHIN 5 : M2 01 01 M2 02 02 M2 03 03 M2 04 04 M2 05 05 M2 05 05 M2 05 05 M2 04 04 M2 05 05 M2 05 05 M17 UNIT 17 M18 UNIT 18 REAM WITHIN 5 : B ENTRY POI 2 WELL #2 tified Operato (WSF ID: 00600) MODERATOR CONTACT Info C/O All Thing: 3 Address Line Two x 615 Mobile Phone	ampling coint ERVICE COI	sta Sta Sta A N A A A A A A A A A A A A A	t Invertional to the second se	25 Il Indu ntory tal Le	ad and	P Combined	imary Source GW Agricultura Stage WQP 2 DBP
Service Connection Facility and S a Facility and S a Facility and S b Contact Info (WSF ID: 00600) ator Type DERATOR Stream Contact Info Contact Info C/O All Things 3 Address Line Two x 615 Mobile Phone	ampling coint ERVICE COI	s Point s Point Sta // / / / / / / / / / / / / / / / / /	mmercia	ntory tal Le form C ule R Y Y Y Y Y	ad and opper ule Tier 3	Combined Asbestos	Agricultura
Connection	ampling coint ERVICE COI	g Point	t Inve To Colij tus Ri A A A A A A A A A A A A A	ntory tal Le form C ule R Y Y Y Y Y Y Y	ad and opper ule Tier 3	Asbestos	Stag
a Facility and S ag Point Sampling D bg Point Old M bg Point 01 M2 01 01 M2 02 02 M2 03 03 M2 04 04 M2 05 05 117 UNIT 17 118 UNIT 18 REAM WITHIN 5 3 ENTRY POI 2 WELL #2 tified Operato (WSF ID: 00600) D ator Type D DPERATOR Contact Info Organization C/O All Things 3 Address Line Two X 615 Mobile Phone Nobile Phone	ampling point ERVICE COL ERVICE COL NT r Inform	Sta // // // // // // // // // // // //////	To Colij tus Ri A A A A A A A A A A A A A A A A A A A	tal Le form C ule R Y Y Y Y Y Y Y	opper ule Tier 3	Y	
Image Point Sampling in Description D Description 4 STREAM WITHIN 5 : M2 01 01 M2 02 02 M2 03 03 M2 04 04 M2 05 05 M17 UNIT 17 M18 UNIT 18 REAM WITHIN 5 : 3 ENTRY POI 2 WELL #2 tified Operator (WSF ID: 00600) Otherward and a stress in a stress	ERVICE CO	Sta // // // // // // // // // // // //////	To Colij tus Ri A A A A A A A A A A A A A A A A A A A	tal Le form C ule R Y Y Y Y Y Y Y	opper ule Tier 3	Y	
Image Point Sampling in Description D Description 4 STREAM WITHIN 5 : M2 01 01 M2 02 02 M2 03 03 M2 04 04 M2 05 05 M17 UNIT 17 M18 UNIT 18 REAM WITHIN 5 : 3 ENTRY POI 2 WELL #2 tified Operator (WSF ID: 00600) Otherward and a stress in a stress	ERVICE CO	Sta // // // // // // // // // // // //////	To Colij tus Ri A A A A A A A A A A A A A A A A A A A	tal Le form C ule R Y Y Y Y Y Y Y	opper ule Tier 3	Y	
D Description 4 STREAM WITHIN 5 (1) STREAM WITHIN 5 (1) M2 01 01 M2 02 02 M2 03 03 M2 04 04 M2 05 05 M17 UNIT 17 M18 UNIT 18 REAM WITHIN 5 (1) M2 ENTRY POI M2 WELL #2 tified Operato (WSF ID: 00600) Mobile MOPERATOR Contact Info C/O All Things Address Line Two X 615 Mobile Phone	ERVICE COI NT r Inform	IN 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Colij tus Ri A A A A A A A A A A A A A A A A A A A	form C ule R Y Y Y Y Y Y Y	opper ule Tier 3	Y	
D Description 4 STREAM WITHIN 5 (1) STREAM WITHIN 5 (1) M2 01 01 M2 02 02 M2 03 03 M2 04 04 M2 05 05 M17 UNIT 17 M18 UNIT 18 REAM WITHIN 5 (1) M2 ENTRY POI M2 WELL #2 tified Operato (WSF ID: 00600) Mobile MOPERATOR Contact Info C/O All Things Address Line Two X 615 Mobile Phone	ERVICE COI NT r Inform	IN 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	<u>tus</u> Ri A A A A A A A A A A A A A A A A	Ile R Y Y Y Y Y Y	3 N	Y	
4 STREAM WITHIN 5 S M2 01 01 M2 02 02 M2 03 03 M2 04 04 M2 05 05 M17 UNIT 17 M18 UNIT 18 REAM WITHIN 5 S 3 ENTRY POI 2 WELL #2 tified Operato (WSF ID: 00600) 0 ator Type OPERATOR Contact Info C/O All Things 3 Address Line Two x 615 Mobile Phone 0	ERVICE COI NT r Inform	IN 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		Y Y Y Y Y Y	3 N	Y	WQP 2 DB
STREAM WITHIN 5 : M2 01 01 M2 02 02 M2 03 03 M2 04 04 M2 05 05 M17 UNIT 17 M18 UNIT 18 REAM WITHIN 5 : 3 ENTRY POI 2 WELL #2 tified Operato (WSF ID: 00600) 0 ator Type 0 OPERATOR C/O All Thing: 3 Line Two x 615 Mobile Phone	ERVICE COI NT r Inform	N 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		4 4 4 4 4 4	Ν		
M2 01 01 M2 02 02 M2 03 03 M2 04 04 M2 05 05 M17 UNIT 17 M8 UNIT 18 REAM WITHIN 5 B ENTRY POI 2 WELL #2 tified Operato (WSF ID: 00600) MODERATOR Contact Info Organization C/O All Things 3 Address Line Two x 615 Mobile Phone	ERVICE COI NT r Inform	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		Y Y Y Y			
M2 02 02 M2 03 03 M2 04 04 M2 05 05 M17 UNIT 17 M18 UNIT 18 REAM WITHIN 53 3 ENTRY POI 2 WELL #2 tified Operator (WSF ID: 00600) MODERATOR Contact Info Organization C/O All Things 3 Address Line Two x 615 Mobile Phone	nt r Inform	 		Y Y Y Y			
M2 03 03 M2 04 04 M2 05 05 M17 UNIT 17 M18 UNIT 18 REAM WITHIN 53 3 ENTRY POI 2 WELL #2 tified Operato (WSF ID: 00600) Mobile Phone CONTACT Info C/O All Things 3 Address Line Two x 615 Mobile Phone	nt r Inform	4 4 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		4 4 4 4			
M2 04 04 M2 05 05 M17 UNIT 17 M18 UNIT 18 REAM WITHIN 5 3 ENTRY POI 2 WELL #2 tified Operato (WSF ID: 00600) ator Type OPERATOR Contact Info Organization C/O All Things Address Line Two x 615 Mobile Phone	nt r Inform	4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Y Y Y			
M2 05 05 117 UNIT 17 118 UNIT 18 REAM WITHIN 5 1 3 ENTRY POI 2 WELL #2 tified Operato (WSF ID: 00600) Ator Type DPERATOR Contact Info Organization C/O All Things 3 Address Line Two x 615 Mobile Phone	nt r Inform	4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Y Y			
117 UNIT 17 118 UNIT 18 REAM WITHIN 5 1 3 ENTRY POI 2 WELL #2 tified Operato (WSF ID: 00600) ator Type OPERATOR CONTACT Info C/O All Thing: 3 Address Line Two x 615 Mobile Phone	nt r Inform	4 4 1 <u>N 4</u> 4 4	A	Y			
118 UNIT 18 REAM WITHIN 5 3 ENTRY POI 2 WELL #2 tified Operato (WSF ID: 00600) ator Type OPERATOR Contact Info C/O All Things 3 Address Line Two x 615 Mobile Phone	nt r Inform	4 N 4 4 4	A				
REAM WITHIN 5 3 3 ENTRY POI 2 WELL #2 tified Operato (WSF ID: 00600) ator Type OPERATOR Contact Info Organization C/O All Things 3 Address Line Two x 615 Mobile Phone	nt r Inform	N /	4 4 4	Y	N	Y	
3 ENTRY POI 2 WELL #2 tified Operato (WSF ID: 00600) ator Type OPERATOR Contact Info Organization C/O All Things 3 Address Line Two 1 Ad	nt r Inform	ļ ļ	4	_			
2 WELL #2 tified Operato (WSF ID: 00600) ator Type DPERATOR Contact Info Organization C/O All Things Address Line Two x 615 Mobile Phone	r Inform	ŀ	4				
tified Operato (WSF ID: 00600) ator Type OPERATOR Contact Info Organization C/O All Thing: 3 Address Line Two x 615 Mobile Phone							
(WSF ID: 00600) ator Type DPERATOR Contact Info Organization C/O All Things Address Line Two x 615 Mobile Phone		nation)				
(WSF ID: 00600) ator Type DPERATOR Contact Info Organization C/O All Things Address Line Two x 615 Mobile Phone		Ilation					
DPERATOR DPERATOR Contact Info Organization C/O All Things 3 Address Line Two x 615 Mobile Phone	Certificatio						
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Contact Info Organization C/O All Things Address Line Two x 615 Mobile Phone							Expiration
Organization C/O All Things Address Line Two x 615 Mobile Phone	COSSETTE, EVAN J CHIEF OPERATOR WATER TREATMENT I						6/30/2022
Organization C/O All Things Address Line Two x 615 Mobile Phone	DISTRIBUTI	ION SYS	ΤΕΜ ΟΡΕ	RATOR	N TRAI	NING	6/30/2022
Organization C/O All Things Address Line Two x 615 Mobile Phone	DISTRIBUTI	ION SYS	ΤΕΜ ΟΡΕ	RATOR	- CLASS		9/30/2021
C/O All Things Address Line Two x 615 Mobile Phone	rmatior	n					
x 615 Mobile Phone						Job Title	
x 615 Mobile Phone	Business						
Mobile Phone				City		State	Zip Code
			Niantic			СТ	06357
Organization	Emergency	y Phone	Email A	ddress			
Organization	860-444	-6844					
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						Job Title	
				Admin	istrative	2	
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	1				U		atb@allthingsbusinessllc.com

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

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PWS ID	PWS Name					Classif	cation	Population Owner Type Primary So				
CT1219111	SALEM MANOR CONDO	MINIUMS	, SYSTEM #	#2		(2	25	Р		GW	
Local Address (w	nere applicable)			Service	Resider	ntial Co	mmerci	al Industri	al Combir	ned	Agricultural	
688 OLD COLCHE	STER ROAD			Connection	IS 2							
Towns Served: SA	LEM										I	
Name			01	rganization					Job Tit	tle		
Mr. Robert Gagn	on		Rr	nd Propertie	s LLC			Owner				
Mailing Address I	ine One	Maili	ng Address	s Line Two				City	State	é	Zip Code	
627 Norwich-Sale	m Turnpike	Unit	5				Oakdal	е	СТ		06370	
Business Phone	Extension	Fax	Mobi	le Phone	Emergency	/ Phone	one Email Address					
860-892-8035	860-	892-8074			860-303	-6758	rgagno	non@colchesterconstruction.com				
Contact Role(s):	Legal Contact			I								
Please note the f	ollowing:											

ase note the following:

The residual disinfectant concentration must be measured at the same location and time as each total coliform sample. 1

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