

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT1280212	THE MASTERS SCHOOL	NTNC	372	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
36 WESTLEDGE ROAD				9			

Towns Served: SIMSBURY

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	1/1/17 - 12/31/19	6/1-9/30	Complete		
	1/1/20 - 12/31/22	6/1-9/30			
	1/1/23 - 12/31/25	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				
	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				

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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Towns Served: SIMSBURY							

Monitoring Requirements

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

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		

Other Compliance Schedules

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

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				
		TMS01	BLDG 11 RM 12	A	Y	2	Y	
		TMS02	BLDG 4 RM 4	A	Y	2		
		TMS03	BLDG 10 RM 118	A		N		
		TMS04	BLDG 3 RM 9	A	Y	2		
		TMS05	BLDG 6 MEN'S RM	A		2		
		TMS06	BLDG 5 RM 19	A		2		
		TMS07	BLDG 9 KITCHEN NE	A	Y	N	Y	
		TMS08	BLDG 3 MENS RM	A	Y	2		
		TMS09	BLDG 10 FACULTY BATH	A		N		
		TMS10	BLDG 11 GIRLS LOCKER	A	Y	2		
		TMS11	BLDG 4 LADIES RM	A		2		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10578	WELL	2	WELL	A				
56358	ATMOSPHERIC TANK -NEW							
61499	BLADDER STORAGE TANK WITH 2 VFDS							

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

<i>Operator Name</i>	<i>Operator Type</i>	<i>Certification(s)</i>	<i>Certification Expiration</i>
HELMING, TRAVIS	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	9/30/2022
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2022

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Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
BOLTE, LUTZ	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2020
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2020

Contact Information

Name		Organization			Job Title		
Mr. Jonathan Dahlstrom		The Masters School			Dir. of Operations		
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
36 Westledge Road					West Simsbury	CT	06092
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-651-9361	1110	860-651-9363		860-944-6774	jdahlstrom@masterschool.org		

Contact Role(s): **Administrative Contact**

Name		Organization			Job Title		
Mr. Ray Lagan		The Master's School			Chief Officer		
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
36 Westledge Road					West Simsbury	CT	06092
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-651-9361	5014	860-651-9363			rlagan@masterschool.org		

Contact Role(s): **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.

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

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

End of schedule