

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1330062 | AMGRAPH PACKAGING INC. | NTNC | 125 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 90 VERSAILLES ROAD | | | 1 | | | | |
| Towns Served: SPRAGUE | | | | | | | |

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 | | | | |
| | 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> | | |

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

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|----------------------------------|------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1330062 | AMGRAPH PACKAGING INC. | NTNC | 125 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 90 VERSAILLES ROAD | | | 1 | | | | |
| Towns Served: SPRAGUE | | | | | | | |

Monitoring Requirements

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

Pesticides, Herbicides and PCBs-Phase V (SOC5) 1 routine (RT) per three years

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | 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) 1 routine (RT) per year

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| 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

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|-----------|---------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| 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 | 1-LDRM | LADIES ROOM SINK | A | Y | 3 | | |
| | | 2-KIT | KITCHEN SINK | A | Y | 3 | | |
| | | 3-LDRM | LADIES ROOM SINK | A | Y | 3 | | |
| | | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | 4-LKRM | LOCKER ROOM | A | Y | | | |
| | | 4-LOCKERRM | LOCKER ROOM | A | Y | 3 | | |
| | | 5-MENSROOM | MENS ROOM | A | Y | 3 | | |
| | | 5-MNRM | MENS ROOM | A | Y | | | |
| | | | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10590 | WELL 1 | 2 | WELL 1 | A | | | | |
| 61160 | TREATMENT PLANT | | | | | | | |

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|-----------------------|-------------------|---|--------------------------|
| NIGRO, JR., VICTOR N. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2021 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS III | 6/30/2020 |
| NIGRO, SCOTT A. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 6/30/2022 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |

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 | | |
| CT1330062 | AMGRAPH PACKAGING INC. | NTNC | 125 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 90 VERSAILLES ROAD | | | 1 | | | | |
| Towns Served: SPRAGUE | | | | | | | |

Contact Information

| | | | | | | | | |
|-----------------------------|-----------|--------------|--------------------------|-----------------|----------------------|-----------|-------|----------|
| Name | | | Organization | | | Job Title | | |
| Mr. Kenneth Fontaine | | | Amgraph Packaging, Inc. | | | President | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 90 Papermill Road | | | | | | Baltic | CT | 06330 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-822-2031 | | 860-822-9941 | | 860-961-3585 | kafontai@amgraph.com | | | |

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

| | | | | | | | | |
|-----------------------------|-----------|--------------|--------------------------|-----------------|------------------------------|----------------------|-------|----------|
| Name | | | Organization | | | Job Title | | |
| Ms. Pamela Thibeault | | | Amgraph Packaging, Inc. | | | Maint & Reli Manager | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 90 Papermill Rd | | | | | | Baltic | CT | 06330 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-822-2043 | | 860-822-6458 | | 860-822-2000 | pamela.thibeault@amgraph.com | | | |

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1331033 | MOHEGAN SUN CC PAUTIPAUG - CLUBHOUSE | NTNC | 40 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 7 DOWS LANE | | | | 3 | | | |

Towns Served: SPRAGUE

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) | | 3 repeat (RP) per period | | | |
| <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 | 9/6/19 - 9/11/19 | | Complete | | |
| Total Coliform (3100) | | 2 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 | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Total Coliform (3100) | | 3 temporary routine (TR) 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 | | | | |
| Lead And Copper (PBCU) | | 10 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) | | 2 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 | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |

Water System Facility: **CLUB HOUSE TREATMENT PLANT (WSF ID: 53250)**

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Arsenic (1005) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| CLUBHOUSE TP ENTRY POINT (MSCC011) | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| 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> | | |
| CLUBHOUSE TP ENTRY POINT (MSCC011) | 1/1/18 - 12/31/20 | | | | |
| | 1/1/21 - 12/31/23 | | | | |
| 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> | | |
| CLUBHOUSE TP ENTRY POINT (MSCC011) | 1/1/19 - 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 | | |
| CT1331033 | MOHEGAN SUN CC PAUTIPAUG - CLUBHOUSE | NTNC | 40 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 7 DOWS LANE | | | | 3 | | | |
| Towns Served: SPRAGUE | | | | | | | |

Monitoring Requirements

Water System Facility: CLUB HOUSE TREATMENT PLANT (WSF ID: 53250)

| 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> |
| | 1/1/20 - 12/31/20 | | |
| | 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> |
| CLUBHOUSE TP ENTRY POINT (MSCC011) | 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 quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| CLUBHOUSE TP ENTRY POINT (MSCC011) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: MAINTENANCE BARN TREATMENT PLANT (WSF ID: 53251)

| Arsenic (1005) | 1 routine (RT) per quarter | | |
|--|---------------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| MAINTENANCE TP EP (MSCC012) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |
| Di(2-Ethylhexyl) - Phthalate (2039) | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| MAINTENANCE TP EP (MSCC012) | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |
| 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> |
| MAINTENANCE TP EP (MSCC012) | 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> |
| MAINTENANCE TP EP (MSCC012) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | |
| | 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> |
| MAINTENANCE TP EP (MSCC012) | 1/1/17 - 12/31/19 | 4/1-12/31 | 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 | | |
|----------------------------------|--------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| CT1331033 | MOHEGAN SUN CC PAUTIPAUG - CLUBHOUSE | NTNC | 40 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 7 DOWS LANE | | | | 3 | | | |
| Towns Served: SPRAGUE | | | | | | | |

Monitoring Requirements

Water System Facility: MAINTENANCE BARN TREATMENT PLANT (WSF ID: 53251)

Pesticides, Herbicides and PCBs - Phase II & V (SOCS) 1 routine (RT) per three years

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| | 1/1/20 - 12/31/22 | 4/1-12/31 | |
| | 1/1/23 - 12/31/25 | 4/1-12/31 | |

Organic Chemicals (VOCS) 1 routine (RT) per quarter

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|--------------------|-------------------|-------------------|
| MAINTENANCE TP EP (MSCC012) | 7/1/19 - 9/30/19 | | Complete |
| | 10/1/19 - 12/31/19 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |

Water System Facility: WELL 14 (WSF ID: 58758)

E. Coli (3014) 1 triggered (TG) per period

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| WELL 14 (MSCC014) | 9/5/19 - 9/11/19 | | |

Water System Facility: WELL 7 (WSF ID: 58760)

E. Coli (3014) 1 triggered (TG) per period

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| WELL 7 (MSCC013) | 9/5/19 - 9/11/19 | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|-----------|---------------|
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| SEASONAL START UP COMPLETION | 4/1/2020 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2021 | |

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 | | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | MSCC 004X | CLUB KITCHEN #1 | I | Y | 2 | Y | |
| | | MSCC 007X | MENS ROOM SINK DS | I | Y | 2 | | |
| | | MSCC 008X | MENS ROOM SINK US | I | Y | 2 | | |
| | | MSCC 009X | MAIN BLDG SINK #1 | I | Y | 2 | | |
| | | MSCC001 | MSCC 001 | I | Y | | | |
| | | MSCC002 | MSCC 002 | I | Y | | | |
| | | MSCC003 | MSCC 003 | I | Y | | | |
| | | MSCC004 | CLUB KITCHEN #1 | A | Y | 2 | Y | |
| | | MSCC005 | CLUB KITCHEN #2 | A | Y | 2 | | |
| | | MSCC006 | CLUBHOUSE BAR | A | Y | 2 | | |

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| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1331033 | MOHEGAN SUN CC PAUTIPAUG - CLUBHOUSE | NTNC | 40 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 7 DOWS LANE | | | | 3 | | | |
| Towns Served: SPRAGUE | | | | | | | |

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 |
|--------------------------|----------------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | MSCC007 | CLUB MENS D-STAIRS | A | Y | 2 | | |
| | | MSCC008 | CLUB MENS U-STAIRS | A | Y | 2 | | |
| | | MSCC009 | MAINT SINK #1 | A | Y | 2 | | |
| | | MSCC010 | TRIPLE T KITCHEN SIN | A | Y | 2 | | |
| | | MSCC015 | TRIPLE T MENS ROOM | A | | 2 | | |
| | | MSCC016 | TRIPLE T WOMENS ROOM | A | Y | 2 | | |
| | | MSCC017 | TRIPLE T KITCHEN SIN | A | Y | 2 | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 53238 | PRESSURE TANK | | | | | | | |
| 53250 | CLUB HOUSE TREATMENT PLANT | MSCC002 | EP - CLUB HOUSE TP | I | | | | |
| | | MSCC011 | CLUBHOUSE TP ENTRY P | A | | | | |
| 53251 | MAINTENANCE BARN TREATMENT PLANT | MSCC003 | EP - MAINT BARN TP | I | | | | |
| | | MSCC012 | MAINTENANCE TP EP | A | | | | |
| 58758 | WELL 14 | MSCC014 | WELL 14 | A | | | | |
| 58760 | WELL 7 | MSCC013 | WELL 7 | A | | | | |
| 61687 | ATMOSPHERIC STORAGE TANKS (5) | | | | | | | |

Certified Operator Information

| | | | |
|---|----------------------|--|---------------------------------|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
| Facility Classification: SMALL WATER SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| CLARK, CHRIS C. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 6/30/2021 |

Contact Information

| | | | | | | | | |
|--------------------------|-----------|---------------------------|--------------------------|-----------------|------------------------|------------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Mr. Chris C. Clark | | Mohegan Utility Authority | | | Operations Mng | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 3 Crow Hill Road | | | | | | Uncasville | CT | 06382 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-862-6280 | | 860-862-6367 | | 860-204-4008 | cclark@moheganmail.com | | | |
| Contact Role(s): | | Administrative Contact | | | | | | |

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 | | |
| CT1331033 | MOHEGAN SUN CC PAUTIPAUG - CLUBHOUSE | NTNC | 40 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 7 DOWS LANE | | | | 3 | | | |
| Towns Served: SPRAGUE | | | | | | | |
| Name | | | Organization | | Job Title | | |
| Ms. Marcia Seligman | | | Mohegan Sun | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| 1 Mohegan Sun Blvd | | | | | Uncasville | CT | 06382 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 860-862-7108 | | | | 860-862-7108 | | | |
| Contact Role(s): | | Legal Contact | | | | | |
| Name | | | Organization | | Job Title | | |
| Mr. Raymond Pineault | | | Mohegan Golf, LLC | | Owner | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| One Mohegan Sun Boulevard | | | | | Uncasville | CT | 06382 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 860-862-6339 | | 860-862-3100 | | 860-961-2263 | rpineault@moheganmail.com | | |
| Contact Role(s): | | 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