	Connectic	ut Depa	rtmei	nt of	^F Public	Health	Drii	nking	Wa	ater S	ectior	ו	
		ter Qual						U				-	
PWS ID	PWS Name	ter quu		01110								e Pr	imary Source
CT1400054	EAGLE ROCK CO	NG. CHURCH						IC		5	P		GW
Local Address (w	nere applicable)				Service	Residen	tial Co	ommercia	al In	dustrial	Combin	ed	Agricultura
110 REYNOLDS B	RIDGE ROAD				Connection	IS		1					
Towns Served: TH	IOMASTON								·				
			Μ	onit	oring Rec	luireme	nts						
Water System F	acility: DISTR	IBUTION SY	(STEM (WSF I	D: 00600)								
Total Coliform	• •										•	•••	oer quarter
	oint (Sampling P	-				Monitori	-		ollecti	ion Perio	d Con	-	ance Status
Select from	Inventory of Act	ive Sampling	Points			7/1/19 -							nplete
						10/1/19 -							nplete
						1/1/20 -						Сог	nplete
						4/1/20 -							
						7/1/20 -	9/30/2	20				_	
Physical Param		1									-		er quarter
	oint (Sampling P		.			Monitori	-		ollecti	ion Perio	d Con		nce Status
Select from	Inventory of Act	ive Sampling	Points			7/1/19 -							nplete
						10/1/19 -							nplete
						1/1/20 -						CO	nplete
						4/1/20 - 7/1/20 -							
Water System F	acility: ENTD			0700)		//1/20-	9/50/2	20					
			/3F ID. U	0700)							1	. / D [.]	T)
Nitrate And Ni	oint (Sampling P	oint ID)				Monitori	na Dori	ind C	allecti	ion Perio		-	T) per year ance Status
ENTRY POIN						1/1/19 -			Jilecti	ion reno	u com	-	nplete
ENTRITOIN	1 (3)					1/1/20 -							nplete
						1/1/20 -						COI	npiete
		Mator S	stom	Eacili	ity and Sa				ntor	~			
		water Sy	stem	гасш	ity and So	amping	POIN			-	,		
Water System Water	System Facility		Samplina	Point	Sampling P	oint			otal form	Lead an Coppe			Stage
Facility ID	<i><i>cystern r acinty</i></i>		ID		Description		Sto	-	ule			os	WQP 2 DBPI
	BUTION SYSTEM	1	4		DISTRIBUTI	ON SYSTEM		itus	Y				
			DOWNST	REAM	WITHIN 5 S			A					
			UPSTRE		WITHIN 5 S			A					
00700 ENTRY	POINT		3		ENTRY POIN	IT		A					
22294 WELL			2		WELL			A					
				Con	tact Info	rmation							
Name					rganization						Job Tit	le	
Ms. Donna Sever	son				agle Rock Cor	ng Church			Tru	stee		-	
Mailing Address I			Mailing A		s Line Two	<u> </u>			Ci		State		Zip Code
110 Reynolds Brid			PO Box 4					Thoma			СТ		06787
Business Phone	-	Fax			le Phone	Emergency	Phone			SS	1	-	
860-309-8462						203-598-				wtbyhos	p.org		
	Administrative	.	I					1	-		-		

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. Schedule Generation Date: 3/10/2020

		0		L			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1400054	EAGLE ROCK CONG. CHURCH			NC	25	Р	GW
Local Address	(where applicable)	Service	Residen	tial Commerc	ial Industri	ial Combine	ed Agricultura
110 REYNOLD	S BRIDGE ROAD	Connections		1			
Towns Served	: THOMASTON			·			·
Please note t	ne following:						
1. The residua	al disinfectant concentration must be mea	sured at the same location	and time a	as each total colif	form sample.		
2. If a Collecti	on Period is specified, all water quality sa	mples must be collected du	ring the sp	ecified period.			
1 0	on results, additional monitoring may be lence sent by the DWS on or after the gen			1 1			'

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

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	Сс		*	rtment of					0			ction	
	1	Wat	ter Qual	ity Monit	oring a	nd Com							
PWS ID		'S Name					Classif				Own		imary Sourc
CT1400104		VERBACKS BA	R AND GRILI					IC		.5		P	GW
		e applicable)			Service Connectior	Resident	tial Co	mmer	rcial Ir	Idustria		Combined	Agricultura
2627 WAT					connection	15		1					
Towns Serv	ved: THO	MASION			• -						_		
					oring Red	quireme	nts						
			IBUTION SY	'STEM (WSF I	D: 00600)								
Total Coli	-	•	aint (D)			Monitori	na Davi	ad	Collact				per quarter
-	-	t (Sampling Po entory of Acti		Points		<i>Monitori</i> 7/1/19 -	-		Collect	ion Per	100		ance Status mplete
Select		entory of Acti		POINTS									mplete
						1/1/20 -							mplete
						4/1/20 -							inpiete
						7/1/20 -							
Physical I	Paramet	ers (PPS)				,, -				1	rout	tine (RT) j	per quarter
-		t (Sampling Po	oint ID)			Monitori	ng Peri	od	Collect				ance Status
Select	t from Inv	entory of Acti	ve Sampling	Points		7/1/19 -	9/30/1	9				Со	mplete
						10/1/19 -	12/31/	/19				Со	mplete
						1/1/20 -	3/31/2	20				Со	mplete
						4/1/20 -	6/30/2	20					
						7/1/20 -	9/30/2	20					
Water Sys	stem Fac	ility: ENTR	POINT (W	/SF ID: 00700)									
Nitrate A		• •									1 r	-	T) per year
-		t (Sampling Po	oint ID)			Monitori	-		Collect	ion Per	iod		ance Status
ENTRY	Y POINT (3)				1/1/19 -							mplete
						1/1/20 - 1						Со	mplete
						1/1/21 - 1							
			Water Sy	stem Facil	ity and Sa	ampling	Poin	t Inv	ento	ry			
Water									Total	Lead a			
	-	stem Facility	9	Sampling Point ID	Sampling P Description				oliform	Copp		Achastas	Stage
Facility ID								ntus ^	Rule	Rule	ier	Aspestos	WQP 2 DBP
00600	DISTRIBU	TION SYSTEM				ON SYSTEM		A ^	Y				
						ERVICE CON		А ^	v				
				SP2 UPSTREAM		ERVICE CON		А ^	Y				
00700	ENTRY PO	דואור		3	ENTRY POI			A					
	WELL			2	WELL	NI		А А					
22233	VVLLL							¬					
Nie wei e					tact Info	rmation						Lab TO	
Name Pat Pack M	Antorouch	o Club		0	rganization							Job Title	
Rat Pack M Mailing Ad				Mailing Addres	s Line Two				C	ty		State	Zip Code
P.O. Box 47		e Une		maning Addres	S LINE I WU			\ \ /~+/	erbury	ιγ			21p Code 06704-4788
Business		Extension	Fax	Mohi	le Phone	Emergency	Phone		-	\$\$			50704-4700
203-754		EACCIBIUIT	I ax	IVIODI		Emergency	inone	-	l2@hotr		m		
Contact Ro		vner						11301	201101				
NOTE: This in	formation h	has heen nrovide	d to heln owner	s and operators of	nublic water sy	stems mainta	in compli	iance w	uith drinki	na water	auali	ity monitorin	a requirement

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. Schedule Generation Date: 3/10/2020

							×	- P '							
PWS ID	PWS Name							Class	fication	Ро	pulation	Owne	er Type	Prir	mary Source
CT1400104	SILVERBACKS BA	AR AND GRII	L						NC		25		Р		GW
Local Address (w	here applicable)				Service	Resi	dent	ial C	ommerci	ial	Industri	al C	ombine	ed	Agricultural
2627 WATERBUI	RY ROAD				Connection	ns			1						
Towns Served: T	HOMASTON														
Name				0	rganization								lob Title	e	
Mr. Eric Palladin	o, Esq.			Ra	at Pack Moto	orcycle C	Club			ļ	Attorney				
Mailing Address	Line One		Mailing Add	dres	s Line Two						City		State	Z	Zip Code
P.O. Box 4788									Water	bur	У		СТ	06	5705-4788
Business Phon	e Extension	Fax	N	1obi	le Phone	Emerge	ency	Phon	e Email /	Adc	lress				
860-274-5570)														
Contact Role(s):	Legal Contact								÷						
Name				0	rganization								lob Title	е	
Mr. Fran Dabbo				Ri	ders Realty					٦	Treasurer				
Mailing Address	Line One		Mailing Add	dres	s Line Two						City		State	2	Zip Code
PO Box 4788									Water	bur	У		СТ		06704
Business Phon	e Extension	Fax	N	1obi	le Phone	Emerge	ency	Phon	e Email /	Adc	lress				
203-232-1493	3					203-2	232-1	1793	franwp	pd@	photmail.	com			
Contact Role(s):	Administrative	Contact							÷						
Please note the	following:														
1. The residual d	isinfectant concen	tration must b	pe measured a	at the	e same locatio	on and tir	me as	s each	total colif	forn	n 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.

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	•	uanty Monit	oring an	u com						
-	/S Name							ion Ov		rimary Sourc
	OMASTON DAM VISTA	A PICNIC AREA			NC	-	31		F	GW
Local Address (when			Service Connections	Resident	tial Cor	nmercia	il Indu	strial	Combined	Agricultur
331 HILL ROAD (ROI Towns Served: THO			connections			1				
Towns Served: THO	MASTON									
		Monite	oring Requ	lireme	nts					
Water System Fac	cility: DISTRIBUTIO	N SYSTEM (WSF I	D: 00600)							
Total Coliform (3	3100)							1 r	outine (RT) per month
Sampling Poin	t (Sampling Point ID)			Monitori	n <mark>g Per</mark> io	d Co	llection	Period	l Compl	iance Status
Select from Inv	entory of Active Samp	ling Points		10/1/19 -	10/31/1	19			Co	omplete
				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)				
Physical Paramet	ters (PPS)							1 r	outine (RT) per month
Sampling Poin	t (Sampling Point ID)			Monitori	n <mark>g Peri</mark> o	d Co	llection	Period	l Compl	iance Status
Select from Inv	entory of Active Samp	ling Points		10/1/19 -	10/31/1	19			Co	omplete
				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 Fac	cility: ENTRY POINT	(WSF ID: 00700)								
Nitrate And Nitri	te (NOX)							1	l routine (I	RT) per yeai
Sampling Poin	t (Sampling Point ID)			Monitori	ng Perio	d Co	llection	Period	l Compl	iance Status
ENTRY POINT (3)			1/1/19 - 2	12/31/1	9			Co	omplete
				1/1/20 - 2	12/31/2	0				
				1/1/21 - 2	12/31/2	1				
		Other C	ompliance	Sched	ules					
Compliance Schedu	le Activity				Due Dat	e	A	chieved	l Date	
SEASONAL START U	· · · · · ·				5/1/2020					
		System Facili	ity and Say				atory			
	vvater	System racin	ity and Sal	inhime	FUIII		-		,	
Water System Water Sy	stem Facility	Sampling Point	Sampling Poi	nt				ead and Copper	-	Staa
Facility ID	stem rucinty	ID	Description	inc.	C 1-1	0				Stage WQP 2 DBP
-	JTION SYSTEM	4	VISTA PARK F	ΟΠΝΤΔΙΝ	<u>Stat</u> A	us	Y Y			
		4TDM	TD PUBLIC RR		A		Y			
		4TDW	TD PUBLIC RR	-	A		Y			
		4VPH	VISTA PARK H		A		Y			
		4VPM	VISTA PARK N				Y			
		4VPW	VISTA PARK V				Y			
		DOWNSTREAM					•			
		DOWNDINLAW	VIIII J JEN							
		UPSTRFAM	WITHIN 5 SEE		Ι Δ					
	OINT	UPSTREAM 3	WITHIN 5 SER							
00700 ENTRY P(22305 VISTA W		UPSTREAM 3 2VISTA	WITHIN 5 SER ENTRY POINT WELL		I A A A					

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.

		TT CA	ver Quan	mey mom	toring a			anoo	JUII	Cuui	<u> </u>			
PWS ID	PWS	Name					Class	ification	Рори	lation	Own	er Type	Prima	ary Source
CT1400184	тно	MASTON DA	M VISTA PIC	CNIC AREA				NC	3	31		F		GW
Local Address	(where	applicable)			Service	Resider	ntial C	commerci	ial Ir	ndustria	al (Combine	ed Ag	gricultural
331 HILL ROA	D (ROUT	FE 222)			Connection	IS		1						
Towns Served	: THOM	IASTON							1					
			Water Sy	ystem Faci	lity and Sa	ampling	g Poii	nt Inve	ento	ry				
Water System Wo Facility ID	ater Sys	tem Facility	5	Sampling Poin ID	t Sampling P Description		St	Col	otal iform Rule		per	Asbesta	os WC	Stage QP 2 DBPR
52715 MA	AIN WEL	.L		2MAIN	MAIN WELL			А						
				Co	ntact Info	rmatior	า							
Name				C	Organization							Job Title	5	
Mr. Michael G	Green			ι	J.S. Army Corp	os of Engin	eers		Ma	intena	nce V	Vorker		
Mailing Addre	ess Line	One		Mailing Addre	ss Line Two				С	ity		State	Zip	p Code
331 Hill Road								Thoma	ston			СТ	0	6787
Business Ph	one	Extension	Fax	Mot	oile Phone	Emergency	y Phon	e Email /	Addre	SS				
860-283-55	540		860-283-0	0303		860-283	-5540	Michae	el.P.G	reen3@	ousac	ce.army.	mil	
Contact Role(s): Adn	ninistrative	Contact, Leg	al Contact, Ow	/ner			·						
Please note t	he follo	wing:												
1. The residua	al disinfe	ctant concent	ration must b	e measured at tl	ne same locatio	n and time	as each	total colif	orm sa	ample.				
2. If a Collecti	ion Perio	d is specified,	all water qual	lity samples mus	t be collected o	during the sp	pecified	period.						

3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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	Connecticut Department o	f Public H	lealth	n Di	rinking	Water	' Se	ection	
	Water Quality Moni	toring an	d Con	npl	iance S	chedul	le		
PWS ID	PWS Name	0		1			1	ner Type Pi	rimary Sourc
CT1400204	THOMASTON LANES INC.				NC	25		Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commercia	l Industri	al	Combined	Agricultura
180 WATERTO	WN ROAD	Connections			1				
Towns Served:	THOMASTON	- I	1						
	Monit	oring Requ	uireme	ents					
Water Syster	m Facility: DISTRIBUTION SYSTEM (WSF	ID: 00600)							
Total Colifor	m (3100)					1	l rou	utine (RT)	per quarter
Sampling	Point (Sampling Point ID)		Monitor	ing P	Period Co	llection Pe	riod	Compli	ance Status
Select fro	m Inventory of Active Sampling Points		7/1/19	- 9/3	0/19			Co	mplete
			10/1/19	- 12/3	31/19			Со	mplete
			1/1/20	- 3/3	1/20			Со	mplete
			4/1/20	- 6/3	0/20				
			7/1/20	- 9/3	0/20				
Physical Para	ameters (PPS)					1	l rou	utine (RT)	per quarter
Sampling	Point (Sampling Point ID)		Monitor	ing P	Period Co	llection Pe	riod	Compli	ance Status
Select fro	m Inventory of Active Sampling Points		7/1/19	- 9/3	0/19			Со	mplete
			10/1/19	- 12/3	31/19			Со	mplete
			1/1/20	- 3/3	1/20			Со	mplete
			4/1/20	- 6/3	0/20				
			7/1/20	- 9/3	0/20				
Water Syster	m Facility: ENTRY POINT (WSF ID: 00700)							
Nitrate (104	10)					1	l rou	utine (RT)	per quarter
Sampling	Point (Sampling Point ID)		Monitor	ing P	Period Co	llection Pe	riod	Compli	ance Status
ENTRY PC	DINT (3)		7/1/19	- 9/3	0/19			Со	mplete
			10/1/19	- 12/3	31/19			Со	mplete
			1/1/20	- 3/3	1/20			Со	mplete
			4/1/20	- 6/3	0/20				
			7/1/20	- 9/3	0/20				
Nitrite (104	1)						1	routine (R	T) per year
Sampling	Point (Sampling Point ID)		Monitor	ing P	Period Co	llection Pe	riod	Compli	ance Status
ENTRY PC	DINT (3)		1/1/19 -	12/3	31/19			Со	mplete
			1/1/20 -	12/3	31/20			Со	mplete
			1/1/21 -	12/3	31/21				
	Monthly Water System Faci	lity (WSF)	Level N	Nor	nitoring	Require	me	nts	
Water Syster	m Facility: ENTRY POINT (WSFID: 00700)								
Analyte	Monitoring Requirement (Sumn	nary Type)	Оре	eratir	ng Limit			Samples Re	eq/Month
рН	Entry Point pH Monitoring (PHR				n: 7.0 PH			4	-
	· · · · · · · · · · · · · · · · · · ·								

11/1/2019 - 11/30/2019	
12/1/2019 - 12/31/2019	
1/1/2020 - 1/31/2020	
2/1/2020 - 2/29/2020	

Start Date: 7/1/2014

Compliance History:

10/1/2019 - 10/31/2019

Monitoring Period

Monitoring

Compliance Status:

Operating Limit

Compliance Status:

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. Schedule Generation Date: 3/10/2020 Page 7

	Connectic	ut Depa	rtment of	f Public	Health	Drii	nking	W	ater Se	ection	
	Wa	ter Qual	lity Monit	toring a	nd Con	nplia	nce S	Sch	edule		
PWS ID	PWS Name					Classif	ication	Рорі	ulation Ow	ner Type	Primary Source
CT1400204	THOMASTON LA	NES INC.				N	IC		25	Р	GW
Local Address	(where applicable)			Service	Residen	tial Co	mmercia	al I	ndustrial	Combine	ed Agricultural
180 WATERTO	WN ROAD			Connection	าร		1				
Towns Served	: THOMASTON				·						
		Water Sy	/stem Facil	ity and Sa	ampling	Poin	t Inve	nto	ry		
Water							То	tal	Lead and	I	
	iter System Facility		Sampling Point					form			Stage
Facility ID			ID	Description			ius	ule	Rule Tiel	[•] Asbesto	os WQP 2 DBPR
00600 DIS	TRIBUTION SYSTEM		4	DISTRIBUTI				Y			
			DOWNSTREAM				4				
			UPSTREAM	WITHIN 5 S			4				
	TRY POINT		3	ENTRY POIN	NT		4				
22307 WE			2	WELL			4				
55233 HY	DROPNEUMATIC ST	ORAGE									
55235 TR	ATMENT PLANT										
			Con	ntact Info	rmation						
Name			0	rganization						Job Title	e
Mr. Louis Ber	ardi							Pre	esident		
Mailing Addre	ss Line One		Mailing Addres	s Line Two				C	City	State	Zip Code
180 Watertow	n Rd						Thoma	ston		СТ	06787
Business Ph	one Extension	Fax	Mob	ile Phone	Emergency	Phone	Email A	ddre	ess		
860-283-47	30				203-509-	2891	loubera	ardi@	procketma	il.com	
Contact Role(b): Administrative	Contact, Leg	al Contact, Ow	ner							
Name			0	rganization						Job Title	5
Twin Realty L							1				
Mailing Addre	ss Line One		Mailing Addres	s Line Two				C	City	State	Zip Code
180 Watertow	ın Rd	1					Thoma			СТ	06787
Business Ph	one Extension	Fax	Mobi	ile Phone	Emergency	Phone	Email A	ddre	ess		
Contact Role(t): Owner										
Please note t											
	Il disinfectant concen	tration must h	e measured at th	e same locatio	on and time a	s each t	otal colife	orm s	ample		
	on Period is specified										
	on results, additional							nedul	e is subject t	o change.	and any related
	ence sent by the DW	S on or after th	ne generation dat	e of this sched	dule will have	preced	ence ovei	r wha	t is containe	ed in this so	
	If you l	have any que	stions, please o	contact the D	Drinking Wa	iter Sec	tion at (860)	509-7333.	_	

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	Connecticut De	partment of uality Monit				<u> </u>		ection	
PWS ID	PWS Name		of fing all						rimary Sourc
CT1400234		REC AREA (LIPPER CS)		NC		25	F	GW
	ess (where applicable)		Service	Residen	-		ndustrial	Combined	Agricultura
	(ROUTE 222)		Connections		1				, Burdandar a
	red: THOMASTON								
		Monito	oring Requ	iireme	nts				
Water Sys	tem Facility: DISTRIBUTIO								
Total Coli	form (3100)						1 r	outine (RT)	per month
	ling Point (Sampling Point ID)				ing Period	Collect	tion Perio	-	ance Status
Select	from Inventory of Active Samp	oling Points			- 10/31/19			Out	of Service
					- 5/31/20				
					- 6/30/20				
					- 7/31/20 - 8/31/20				
					· 8/31/20 · 9/30/20				
Physical P	Parameters (PPS)			5/1/20-	- 5/ 50/ 20		1 r	outing (RT)	per month
•	ling Point (Sampling Point ID)			Monitor	ing Period	Collect	tion Perio		ance Status
	from Inventory of Active Samp	oling Points			- 10/31/19				of Service
	,	0			· 5/31/20				
				6/1/20 -	- 6/30/20				
				7/1/20 -	- 7/31/20				
					- 8/31/20				
				9/1/20 -	9/30/20				
	tem Facility: ENTRY POINT	(WSF ID: 00700)							
	nd Nitrite (NOX)							-	T) per year
	ling Point (Sampling Point ID)				ing Period	Collect	tion Perio		ance Status
ENTRY	POINT (3)				12/31/19			Out	of Service
					12/31/20				
		Oth ar C	o monti o mon		12/31/21				
Commission	Cabadula Activity	Other Co	ompliance				Achieve	d Data	
-	e Schedule Activity START UP COMPLETION				<i>Due Date</i> 5/1/2019		Achieve	a Date	
	RESS DEFICIENCY				0/31/2019		10/29/	2019	
	INECTION SURVEY REPORT				3/1/2020		10/25/	2015	
	START UP COMPLETION				5/1/2020				
CAP - ADDR	RESS DEFICIENCY				9/30/2020				
		r System Facili	ity and Sar			vento	ry		
Water				10		Total	Lead an	d	
System	Water System Facility	Sampling Point		nt		Coliform	Copper		Stage
Facility ID		ID	Description		Status		Rule Tie	er Asbestos	WQP 2 DBP
00600	DISTRIBUTION SYSTEM	4	FOUNTAIN		А	Y			
		4MSL	MENS SINK LE		A	Y			
		4MSR	MENS SINK R		A	Y			
		4WSL	WOMENS SIN	IK LEFT	A	Y			

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.

DOWNSTREAM WITHIN 5 SERVICE CON

WOMENS SINK RIGHT

А

А

Y

4WSR

		vvau	lei Qua	mey m	onne	Ji mg un	u uom	pin	11100		ncuu	10		
PWS ID	PWS N	Name						Classi	ficatio	n Po	pulatior	n Owi	ner Type F	rimary Sourc
CT1400234	NORT	HFIELD BR	K LAKE REC	AREA (UPI	PER CS)				NC		25		F	GW
Local Addres	s (where a	applicable)				Service	Resident	tial C	omme	rcial	Industi	ial	Combined	Agricultura
HILL ROAD (F	ROUTE 222	2)				Connections	5		1					
Towns Serve	d: THOMA	ASTON												1
			Water S	ystem I	acili	ty and Sa	mpling	Poir	nt In	vent	tory			
Water										Tota	l Lead	l and		
System W	Vater Syste	em Facility		Sampling	Point	Sampling Po	oint		0	Colifo	rm Cop	oper		Stage
Facility ID				ID		Description		St	atus	Rule	e Rule	e Tier	Asbestos	WQP 2 DBP
				UPSTRE	AM	WITHIN 5 SE	RVICE CON	I	А					
00700 Ef	NTRY POIN	ΝT		3		ENTRY POIN	Т		А					
22830 W	/ELL			2		WELL #1			А					
					Cont	tact Infor	mation							
Name					Or	ganization							Job Title	
Mr. Michael	Green				U.9	S. Army Corp	s of Engine	ers			Mainten	ance	Worker	
Mailing Addr	ress Line O)ne		Mailing A	ddress	Line Two					City		State	Zip Code
331 Hill Road	b								Tho	masto	on		СТ	06787
Business P	hone E	Extension	Fax		Mobil	e Phone E	Emergency	Phone	e Ema	il Ado	dress			
860-283-5	5540		860-283-	0303			860-283-	5540	Mic	hael.F	.Green3	@usa	ice.army.n	nil
			· · · · · · · · · · · ·	al Contac	• •									

If a Collection Period is specified, all water quality samples must be collected during the specified period. 2.

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