

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT1435053	UCONN - TORRINGTON CAMPUS	NTNC	200	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
855 UNIVERSITY DRIVE			1				
Towns Served: TORRINGTON							

### Monitoring Requirements

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)							
<b>Asbestos (1094)</b>			<b>1 routine (RT) per nine years</b>				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete				
	1/1/20 - 12/31/28						
<b>Total Coliform (3100)</b>			<b>1 routine (RT) per quarter</b>				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
Select from Inventory of Active Sampling Points	7/1/19 - 9/30/19		Complete				
	10/1/19 - 12/31/19		Complete				
	1/1/20 - 3/31/20						
	4/1/20 - 6/30/20						
	7/1/20 - 9/30/20						
<b>Lead And Copper (PBCU)</b>			<b>5 routine (RT) per three years</b>				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
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					
<b>Physical Parameters (PPS)</b>			<b>1 routine (RT) per quarter</b>				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
Select from Inventory of Active Sampling Points	7/1/19 - 9/30/19		Complete				
	10/1/19 - 12/31/19		Complete				
	1/1/20 - 3/31/20						
	4/1/20 - 6/30/20						
	7/1/20 - 9/30/20						
Water System Facility: ENTRY POINT (WSF ID: 00700)							
<b>Inorganic Chemicals (IOCS)</b>			<b>1 routine (RT) per three years</b>				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
ENTRY POINT (3)	1/1/19 - 12/31/21						
	1/1/22 - 12/31/24						
<b>Nitrate And Nitrite (NOX)</b>			<b>1 routine (RT) per year</b>				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
ENTRY POINT (3)	1/1/19 - 12/31/19		Complete				
	1/1/20 - 12/31/20						
	1/1/21 - 12/31/21						
<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>			<b>1 routine (RT) per three years</b>				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete				
	1/1/20 - 12/31/22						
	1/1/23 - 12/31/25						
<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>			<b>1 routine (RT) per three years</b>				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				

*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		
<b>CT1435053</b>	<b>UCONN - TORRINGTON CAMPUS</b>	NTNC	200	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
855 UNIVERSITY DRIVE			1				
Towns Served: TORRINGTON							

## Monitoring Requirements

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

<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>			<b>1 routine (RT) per three years</b>
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
	1/1/23 - 12/31/25		

<b>Organic Chemicals (VOCS)</b>			<b>1 routine (RT) per year</b>
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
	1/1/21 - 12/31/21		

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019	
CROSS CONNECTION SURVEY REPORT	3/1/2021	

## 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		Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UCTORR 001	GENERATED BY BATCH	A	Y			
		UCTORR 002	GENERATED BY BATCH	A	Y			
		UCTORR 003	GENERATED BY BATCH	A	Y			
		UCTORR 004	GENERATED BY BATCH	A	Y			
		UCTORR 005	GENERATED BY BATCH	A	Y			
		UCTORR001	CONFERENCE ROOM	A	Y	3	Y	
		UCTORR002	MAINTENANCE RM SINK	A	Y	3	Y	
		UCTORR003	WATER FOUNTAIN, MAIN	A	Y	3		
		UCTORR004	WATER FOUNTAIN, ART	A	Y	3	Y	
		UCTORR005	CAFE, HANDWASH	A	Y	3	Y	
		UCTORR006	AG KITCHEN	A	Y	N	Y	
		UCTORR007	AG MENS ROOM	A	Y	N	Y	
		UCTORR008	LIBRARY	A	Y	3	Y	
		UCTORR009	MAIN LADIES ROOM	A	Y	3	Y	
		UCTORR010	MENS RM/CONFERENCE	A	Y	3	Y	
		UCTORR011	OFFICE HAND SINK	A	Y	3	Y	
		UCTORR012	LAB	A	Y	3	Y	
		UCTORR013	MAIN MENS ROOM	A	Y	3	Y	
		UCTORR014	DISTRIBUTION SYSTEM	A	Y	3	Y	
		UCTORR015	AG LAB SINK	A	Y	N	Y	

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT1435053</b>	<b>UConn - Torrington Campus</b>	NTNC	200	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
855 UNIVERSITY DRIVE			1				
Towns Served: TORRINGTON							

## 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
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10633	WELL #2 (WEST WELL)	2	WELL (WEST WELL)	A				
58052	WELL #1 (NORTH WELL)	2	WELL #1 (NORTH WELL)	A				
58054	ATMOSPHERIC TANK							

## Certified Operator Information

Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
Facility Classification: SMALL WATER SYSTEM			
Operator Name	Operator Type	Certification(s)	Certification Expiration
LEMAY, REALE D.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2020
		WATER TREATMENT PLANT OPERATOR - CLASS III	12/31/2022
KILBOURN, ERIC	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2022
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2022

## Contact Information

Name		Organization			Job Title	
<b>Mr. Craig Wallett</b>		University of Connecticut			Facilities Manager	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
University of Connecticut		99 East Main Street		Waterbury	CT	06702
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-626-6827				860-207-4588	craig.wallett@uconn.edu	

Contact Role(s): <b>Administrative Contact</b>						
Name		Organization			Job Title	
<b>Mr. Scott Jordan</b>		University of Connecticut			Exec Vp Admin & Cfo	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
352 Mansfield Road		Unit 1122		Mansfield	CT	06269-1122
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-486-3455					Scott.jordan@uconn.edu	

Contact Role(s): **Legal 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**