Connecticut Department of Public	Health Drinki	ng Water Se	ction
Water Quality Monitoring a	and Complianc	e Schedule	
PWS ID PWS Name	Classificati	on Population Own	er Type Primary Source
CT1470014 CHUCKYS MOBIL	NC	25	P GW
Local Address (where applicable) Service	Residential Comm	ercial Industrial (	Combined Agricultural
251 MAIN STREET Connection	ons 1		
Towns Served: VOLUNTOWN			
Monitoring Re	quirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
Total Coliform (3100)		1 rou	itine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from 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		Complete
	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		
Physical Parameters (PPS)			itine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from 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		Complete
	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 - 8/31/20		
Water System Facility: ENTRY POINT (WSF ID: 00700)	9/1/20 - 9/30/20		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/19 - 12/31/19	20230.01. 7 01104	Complete
	1/1/20 - 12/31/20		Complete
	1/1/21 - 12/31/21		
Water System Facility: WELL (WSF ID: 22460)	, , = ==, ==, ==		
E. Coli (3014)		1 rout	tine (RT) per quarter
Sampling Point (Sampling Point ID)			
	Monitoring Period	Collection Period	Compliance Status
WELL (2)	<i>Monitoring Period</i> 7/1/19 - 9/30/19	Collection Period	Compliance Status Complete
		Collection Period	-

	0	. 5		CD 111	** 1.1	D 1 1			0		
	Connectic	•								ction	
	Wa	ter Qual	ity Monit	coring a	nd Con	npliand	ce Scl	nedul	e		
PWS ID	PWS Name					Classificat	ion Pop	oulation	Own	er Type Pı	rimary Source
CT1470014	CHUCKYS MOBI	<u>L</u>				NC		25		Р	GW
Local Address (w	here applicable)			Service	Residen	itial Comm	nercial	Industria	al (	Combined	Agricultural
251 MAIN STREE	T			Connection	ns		L				
Towns Served: V	OLUNTOWN										
			Monito	oring Red	quireme	nts					
Water System	Facility: WELL	(WSF ID: 2	2460)								
E. Coli (3014)								1	rout	ine (RT)	per quarter
Sampling P	oint (Sampling P	oint ID)			Monitori	ing Period	Colle	ction Per	iod	Compli	ance Status
					4/1/20 -	- 6/30/20					
					7/1/20 -	- 9/30/20					
		Water Sy	stem Facili	ity and S	ampling	Point li	nvent	ory			
Water							Total	Lead o	and		
System Wate	r System Facility		Sampling Point				Colifor	т Сорр	er		Stage
Facility ID			ID	Description	)	Status	Rule	Rule	Tier	Asbestos	WQP 2 DBPR
00600 DISTR	RIBUTION SYSTEM		4	DISTRIBUTI			Υ				
			DOWNSTREAM								
			UPSTREAM	WITHIN 5 S	ERVICE CO	N A					
	Y POINT		3	ENTRY POI	NT	Α					
22460 WELL			2	WELL		Α					
REATME - :UV DI	SINFECTION										
			Con	tact Info	rmation	1					
Name			Oı	rganization						Job Title	
Mr. David L. Sav	in		Sa	ivin Gasoline	Properties	LLC	P	resident			
Mailing Address	Line One		Mailing Address	s Line Two				City		State	Zip Code
77 Sterling Road						Ea	st Hartfo	ord		СТ	06108
Business Phon	e Extension	Fax	Mobi	le Phone	Emergency	/ Phone En	nail Add	ress			
860-282-0651		860-282-0	0015		860-282-	-0651					
Contact Role(s):	Administrative	Contact, Leg	al Contact								
Name			Oı	rganization						Job Title	
Savin Gasoline P	Properties LLC										
Mailing Address	Line One		Mailing Address	s Line Two				City		State	Zip Code
77 East Sterling I	Rd					Ea	st Hartfo	ord		СТ	06108
Business Phon	e Extension	Fax	Mobi	le Phone	Emergency	/ Phone En	nail Add	ress			

# 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

	Connectic Wa				f Public toring a			0			ection		
PWS ID	PWS Name				0 -						ner Type P	rimarv	Source
	RIVERSIDE MAL	L (TOWN PIZ	ZA)					IC	25		Р	G۱	
Local Address (w					Service	Residen	tial Co	mmercial	Ind	lustrial	Combined	Agri	cultural
104 BEACH PONE					Connection	ns		1					
Towns Served: V	DLUNTOWN												
			M	lonit	toring Red	nuireme	nts						
Water System F	•	RIBUTION S				<b>1</b>							
<b>Total Coliform</b>	• •									1 ro	utine (RT)		
	int (Sampling P					Monitori			llectio	n Period	<u> </u>		
Select from	nventory of Act	ive Sampling	Points			7/1/19 -						mplet	
						10/1/19 -						mplet	
						1/1/20 -					Co	mplet	e
						4/1/20 - 7/1/20 -							
<b>Physical Param</b>	eters (PPS)									1 ro	utine (RT)	per qu	uarter
-	int (Sampling P	Point ID)				Monitori	ng Peri	od Col	llectio	n Period	Compl	iance S	Status
Select from	nventory of Act	ive Sampling	Points			7/1/19 -	9/30/1	.9			Co	mplet	e
						10/1/19 -	12/31/	<b>′</b> 19			Co	mplet	e
						1/1/20 -	3/31/2	20			Co	mplet	e
						4/1/20 -	6/30/2	20					
						7/1/20 -	9/30/2	20					
Water System F	acility: <b>ENTR</b>	Y POINT (V	VSF ID: 0	0700	)								
<b>Nitrate And Ni</b>	trite (NOX)									1	routine (I	RT) pe	r year
Sampling Po	int (Sampling P	Point ID)				Monitori	ng Peri	od Col	llectio	n Period	Compl	iance S	Status
ENTRY POIN	T (3)					1/1/19 -	12/31/	19			Co	mplet	e
						1/1/20 -	12/31/	20			Co	mplet	e
						1/1/21 -	12/31/	21					
			Oth	ner (	Complian								
Compliance Sche							Due Da			Achieved	Date		
RESPOND TO SAN	IITARY SURVEY						/17/20						
Water		Water Sy	ystem	Faci	lity and S	ampling	Poin	t Inven	-	<b>/</b> Lead and	1		
	System Facility	,	Sampling	, Poin	t Sampling P	Point		Colife		Copper			Stage
Facility ID			ID		Description	1	Sta	itus Ru			Asbestos	WQP	2 DBPR
00600 DISTR	BUTION SYSTEM	1	4		DISTRIBUTI	ON SYSTEM	,	A Y	•				
			DOWNST	REAN	/ WITHIN 5 S	SERVICE CON	1 ,	А					
			UPSTR	EAM	WITHIN 5 S	ERVICE CON	1 /	А					
00700 ENTRY	POINT		3		ENTRY POI	NT	,	А					
22461 WELL			2		WELL		,	Ą					
					ntact Info	rmation							
Name				C	Organization						Job Title		
Konalex LLC													
Mailing Address			Mailing /	Addre	ss Line Two				City	/	State	Zip C	
Business Phone		Fax		Mok	oile Phone	Emergency	Phone	Volunto		;	СТ	063	384

	Connecticut Department of Public Health Drinking Water Section												
	Wa	ter Qua	lity Mon	itoring a	nd Con	npl	liance S	Schedul	le				
PWS ID	PWS Name		-			Cla	ssification	Population	Owner Type	Primary Source			
CT1470024	RIVERSIDE MALI	. (TOWN PIZ	ZA)				NC	25	Р	GW			
Local Address (w	here applicable)			Service	Resider	itial	Commerci	al Industri	al Combine	ed Agricultural			
104 BEACH POND	04 BEACH POND ROAD				ns		1						
Towns Served: V	OLUNTOWN								'				
Contact Role(s):	Legal Contact, C	Owner											
Name				Organization					Job Title	е			
Mr. Rick Rarogie	wicz			Konalex LLC									
Mailing Address	Line One		Mailing Addr	ess Line Two				City	State	Zip Code			
333 Browning Rd							Griswo	old	СТ	06351			
Business Phone	Extension	Fax	Mo	bile Phone	Emergency	/ Pho	one Email A	Address					
860-376-8394			860	)-908-4842									
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.

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

End of schedule

	Connecticut Departr	nent of	Public H	Iealth 1	Drinki	ing V	Vater S	ection	
	Water Quality	Monit	oring an	d Com	plianc	e Scl	hedule		
PWS ID	PWS Name			(	Classificati	on Pop	pulation Ov	vner Type Pi	imary Source
CT1470034	SUNNYS MARKET				NC		25	Р	GW
Local Address (v	where applicable)		Service	Residenti	al Comm	ercial	Industrial	Combined	Agricultural
129 MAIN STRE	ET		Connections		1				
Towns Served: '	VOLUNTOWN								
		Monite	oring Requ	uiremen	ts				
Water System	Facility: <b>DISTRIBUTION SYSTE</b>	M (WSF I	D: 00600)						
<b>Total Coliforn</b>	n (3100)						1 rc	utine (RT) <sub> </sub>	per quarter
Sampling	Point (Sampling Point ID)			Monitorin		Colle	ction Perio	d Compli	ance Status
Select fron	n Inventory of Active Sampling Poir	its		7/1/19 - 8					mplete
				10/1/19 - 1					mplete
				1/1/20 - 3				Со	mplete
				4/1/20 - 6	•				
				7/1/20 - 9	/30/20				
•	meters (PPS)							outine (RT)	· -
	Point (Sampling Point ID)			Monitorin		Colle	ction Perio		ance Status
Select fron	n Inventory of Active Sampling Poir	its		7/1/19 - 9					mplete
				10/1/19 - 1					mplete
				1/1/20 - 3				Co	mplete
				4/1/20 - 6					
Matar Systam	Facility: ENTRY POINT (WSF I	D. 00700\		7/1/20 - 9	7/30/20				
•	,	ט: טטייטטן						1	<b>T</b> \
Nitrate And N	Point (Sampling Point ID)			Monitorin	a Pariod	Collo	ction Perio	1 routine (R	ance Status
ENTRY POI				1/1/19 - 1		Cone	Ction Ferio		mplete
LIVIKITOI	(3)			1/1/20 - 1					mplete
				1/1/21 - 1					impiete
		Other C	ompliance						
Compliance Sch		Other C	omphance				Achieve	d Deta	
-	•				ue Date		Achieved	Date	
RESPOND TO SA	ANITARY SURVEY	1.12 . 81 . 1	· (*		18/2017				
	Pu		ification R				-		
Wi-lati- a /Cita	At a se	C	ompliance	Notice		ic Notif			<u>ification</u>
Violation/Situa		10/1	<b>Period</b>	Tier	Requir		Performed	Due to DPH	Received
Total Coliform N			/15 - 12/31/15		1/14/2			1/24/2016	
	Water Syste	m Facili	ity and Sai	mpling l	oint Ir				
Water	or Sustam Ensility	nline Daint	Camanlin - D-	'n+		Total			64
System Water Facility ID	er System Facility Sam	oling Point ID	Sampling Poil Description	rit.		Colifori Rule			Stage WQP 2 DBPR
_	RIBUTION SYSTEM	4	DISTRIBUTION	N SYSTEM	Status A	Y	naie He	13063103	TO Z DOFN
30000 DIST			WITHIN 5 SEF		A	'			
		STREAM	WITHIN 5 SEF		A				
00700 ENT	RY POINT	3	ENTRY POINT		A				
22462 WEL		2	WELL		A				
LL-YUL VVLL	-		** L.L.						

Connecticut Department of Public Health	Dr	inl	king	g W	/at	er	Se	ction	1
Water Quality Monitoring and Con	npl	ian	ice S	Sch	ıed	lul	e		

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	<b>Primary Source</b>
CT1470034	SUNNYS MARKET				NC	25	Р	GW
Local Address (	where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
129 MAIN STRE	ET	Connections			1			

Contact Information												
Name					1	Job Title						
Mr. Vinod Patel				Sunny Super	market	Owner						
Mailing Address Lin	e One		Mailing Add	ress Line Two			City	State	Zip Code			
PO Box 397						Volunto	wn	СТ	06384			
Business Phone	Extension	Fax	М	obile Phone	Emergency Phone	Email Address		·				
860-376-3120												

Contact Role(s): Administrative Contact, 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.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Schedule Generation Date: 3/10/2020

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dominocione 2 open emicine	of Public H	ealth	Dr	inkir	ng V	Vater	Se	ction	
Water Quality Mon					_				
PWS ID PWS Name	meoring am	a dom	_					ner Tyne Pi	rimary Source
CT1470044 17 BEACH POND ROAD			Clas	NC	11 1 01	25	OVVI	P	GW
Local Address (where applicable)	Service	Resident	tial	Comme	rcial	Industria	ıl I	Combined	Agricultural
Edua Address (where applicable)	Connections	Resident	tiai	1	Clai	maastric	"	Combined	Agricultural
Towns Served: VOLUNTOWN									
	oitoring Pogu	iromo	ntc						
Water System Facility: DISTRIBUTION SYSTEM (W	nitoring Requ SF ID: 00600)	iremei	nts						
Total Coliform (3100)						1	rou	itine (RT)	per quarter
Sampling Point (Sampling Point ID)		Monitorii	ng Pe	eriod	Colle	ction Per	iod	Compli	ance Status
Select from Inventory of Active Sampling Points		7/1/19 -	9/30	)/19					
		10/1/19 -							
		1/1/20 -							
		4/1/20 -		-					
		7/1/20 -		-					
Physical Parameters (PPS)						1	rou	itine (RT)	per quarter
Sampling Point (Sampling Point ID)								ance Status	
Select from Inventory of Active Sampling Points		7/1/19 -	9/30	)/19					
	-	10/1/19 -	12/3	31/19					
		1/1/20 -	3/31	/20					
		4/1/20 -							
		7/1/20 -							
Water System Facility: ENTRY POINT (WSF ID: 007	00)	1, 2, 2	5,00	<u>,                                      </u>					
Water System Facility: ENTRY POINT (WSF ID: 007 Nitrate And Nitrite (NOX)	00)	-,-,	5,00				1	routine (R	T) per vear
Nitrate And Nitrite (NOX)	·				Colle	ction Per		<del>-</del>	T) per year
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID)		Monitorii	ng Pe	eriod	Colle	ction Per		Compli	ance Status
Nitrate And Nitrite (NOX)		<b>Monitorii</b> 1/1/19 - 1	ng Pe	<b>eriod</b> 1/19	Colle	ction Per		Compli	
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID)		<b>Monitorii</b> 1/1/19 - 1 1/1/20 - 1	ng Pe 12/3: 12/3:	<b>eriod</b> 1/19 1/20	Colle	ction Per		Compli	ance Status
Nitrate And Nitrite (NOX)  Sampling Point (Sampling Point ID)  ENTRY POINT (3)		<b>Monitorii</b> 1/1/19 - 1 1/1/20 - 1 1/1/21 - 1	ng Pe 12/3: 12/3: 12/3:	eriod 1/19 1/20 1/21	Colle	ction Per		Compli	ance Status
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) Other		Monitorii 1/1/19 - 1 1/1/20 - 1 1/1/21 - 1	ng Pe 12/3: 12/3: 12/3:	eriod 1/19 1/20 1/21	Colle		iod	<b>Compli</b> Co	ance Status
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other		Monitorii 1/1/19 - 1 1/1/20 - 1 1/1/21 - 1 Sched	ng Pe 12/3: 12/3: 12/3: ule	eriod 1/19 1/20 1/21 <b>S</b>	Colle	ction Per	iod	<b>Compli</b> Co	ance Status
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other Compliance Schedule Activity RESPOND TO SANITARY SURVEY		Monitoria 1/1/19 - 1 1/1/20 - 1 1/1/21 - 1 Sched	ng Pe 12/3: 12/3: 12/3: 12/3: <b>ule</b> Due L	eriod 1/19 1/20 1/21  S Date	Colle		iod	<b>Compli</b> Co	ance Status
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other Compliance Schedule Activity RESPOND TO SANITARY SURVEY CORRECTIVE ACTION/CORRECTIVE ACTION PLAN		Monitorii 1/1/19 - 1 1/1/20 - 1 1/1/21 - 1 Sched	ng Pe 12/3: 12/3: 12/3: 12/3: 1/23/ 1/23/	eriod 1/19 1/20 1/21 <b>S</b> Date /2012	Colle		iod	<b>Compli</b> Co	ance Status
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other Compliance Schedule Activity RESPOND TO SANITARY SURVEY		Monitorii 1/1/19 - 1 1/1/20 - 1 1/1/21 - 1 Sched	ng Pe 12/3: 12/3: 12/3: 12/3: 1/23/ 1/23/	eriod 1/19 1/20 1/21  S Date	Collec		iod	<b>Compli</b> Co	ance Status
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other Compliance Schedule Activity RESPOND TO SANITARY SURVEY CORRECTIVE ACTION/CORRECTIVE ACTION PLAN RESPOND TO SANITARY SURVEY		Monitoria 1/1/19 - 3 1/1/20 - 3 1/1/21 - 3 Sched  11 2 9	ng Pe 12/3: 12/3: 12/3: 12/3: 1/23: 1/23/ 1/20/: 1/18/:	eriod 1/19 1/20 1/21  S Date /2012 2013	Colle		iod	<b>Compli</b> Co	ance Status
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other Compliance Schedule Activity RESPOND TO SANITARY SURVEY CORRECTIVE ACTION/CORRECTIVE ACTION PLAN RESPOND TO SANITARY SURVEY	r Compliance	Monitoria 1/1/19 - 3 1/1/20 - 3 1/1/21 - 3 Sched  11 2 9	nng Pe 112/3: 112/3: 112/3: 112/3: 112/3: 112/3: 112/3: 11/23/: 1/20/: 1/18/:	eriod 1/19 1/20 1/21  S Date /2012 2013		Achiev	iod	Compli Co	ance Status
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other Compliance Schedule Activity RESPOND TO SANITARY SURVEY CORRECTIVE ACTION/CORRECTIVE ACTION PLAN RESPOND TO SANITARY SURVEY	r Compliance	Monitoria 1/1/19 - 1 1/1/20 - 1 1/1/21 - 1 Sched  11 2 equire	ng Pe 12/3: 112/3: 112/3: 112/3: 112/3: 11/23/ 1/20/: 1/18/:	eriod 1/19 1/20 1/21 <b>S</b> Date /2012 2013 2017	Notifi	Achiev	ved	Compli Co	mplete
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other Compliance Schedule Activity RESPOND TO SANITARY SURVEY CORRECTIVE ACTION/CORRECTIVE ACTION PLAN RESPOND TO SANITARY SURVEY  Public N  Violation/Situation	r Compliance Notification R Compliance	Monitoria 1/1/19 - 3 1/1/20 - 3 1/1/21 - 3 Sched  11 2 9 equire  Notice	ng Pe 12/3: 112/3: 112/3: 112/3: 112/3: 11/23/ 11/23/ 1/20/::	eriod 1/19 1/20 1/21  S Date /2012 2013 2017 ents Public	Notifi d P	Achiev ication	iod ved	Complia Co  Date	mplete  cification
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other  Compliance Schedule Activity RESPOND TO SANITARY SURVEY CORRECTIVE ACTION/CORRECTIVE ACTION PLAN RESPOND TO SANITARY SURVEY  Public N  Violation/Situation Total Coliform M&R Violation	r Compliance Notification R Compliance Period	Monitorii 1/1/19 - 3 1/1/20 - 3 1/1/21 - 3 Sched  11 2, 9 equire Notice Tier	nng Per 112/3: 112/3: 112/3: 112/3: 112/3: 11/23/: 12/20/: 18/:	eriod 1/19 1/20 1/21 <b>S</b> Date /2012 2013 2017 ents Public Require	Notifi d P	Achiev ication	ved l	Complia Co  Date  PN Cert  Due to DPH	mplete  cification
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other Compliance Schedule Activity RESPOND TO SANITARY SURVEY CORRECTIVE ACTION/CORRECTIVE ACTION PLAN RESPOND TO SANITARY SURVEY  Public N  Violation/Situation Total Coliform M&R Violation Nitrate And Nitrite M&R Violation	r Compliance Notification R Compliance Period 6/1/05 - 6/30/05	Monitorii 1/1/19 - : 1/1/20 - : 1/1/21 - : Sched  L	nng Pe 12/3: 112/3: 112/3: 112/3: 11/23/ 10/23/ 10/	eriod 1/19 1/20 1/21 <b>S</b> Oate /2012 2013 2017 •nts Public Required	Notifi d P	Achiev ication	iod  ved	Complia Co Date  PN Cert Due to DPH 1/28/2005	mplete  cification
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other  Compliance Schedule Activity RESPOND TO SANITARY SURVEY CORRECTIVE ACTION/CORRECTIVE ACTION PLAN RESPOND TO SANITARY SURVEY  Public N  Violation/Situation Total Coliform M&R Violation Nitrate And Nitrite M&R Violation Total Coliform M&R Violation	r Compliance Notification R Compliance Period 6/1/05 - 6/30/05 1/1/14 - 12/31/14	Monitoria 1/1/19 - 3 1/1/20 - 3 1/1/21 - 3 Sched  11 2 9 equire Notice Tier 2 2	nng Pee 112/3: 112/3: 112/3: 112/3: 112/3: 11/23/: 12/20/: 11/23/: 11/	eriod 1/19 1/20 1/21 S Date /2012 2013 2017 ents Public Required 1/18/200 5/7/201	Notifi d P 05 5	Achiev ication	ved l	Compliance	mplete  cification
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other  Compliance Schedule Activity RESPOND TO SANITARY SURVEY CORRECTIVE ACTION/CORRECTIVE ACTION PLAN RESPOND TO SANITARY SURVEY  Public N  Violation/Situation Total Coliform M&R Violation Nitrate And Nitrite M&R Violation Total Coliform M&R Violation Physical Parameters M&R Violation	r Compliance Notification R Compliance Period 6/1/05 - 6/30/05 1/1/14 - 12/31/14 7/1/19 - 9/30/19 7/1/19 - 9/30/19	Monitorii 1/1/19 - 3 1/1/20 - 3 1/1/21 - 3 Sched  11 2, 9 equire  Notice Tier 2 2 3 3	nng Pe 12/3: 112/3: 112/3: 112/3: 11/23/ 11/23/ 1/18/: 11 11 11	eriod 1/19 1/20 1/21 S Date /2012 2013 2017 ents Public Required 1/18/20 5/7/201 .2/2/202	Notifi d P 05 5 20	Achiev Cation erformed	ved l	PN Cert Due to DPH 1/28/2005 5/17/2015 2/12/2020	mplete  cification
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other  Compliance Schedule Activity RESPOND TO SANITARY SURVEY CORRECTIVE ACTION/CORRECTIVE ACTION PLAN RESPOND TO SANITARY SURVEY  Public N  Violation/Situation Total Coliform M&R Violation Nitrate And Nitrite M&R Violation Total Coliform M&R Violation Physical Parameters M&R Violation  Water System Fa	r Compliance Notification R Compliance Period 6/1/05 - 6/30/05 1/1/14 - 12/31/14 7/1/19 - 9/30/19 7/1/19 - 9/30/19	Monitorii 1/1/19 - 3 1/1/20 - 3 1/1/21 - 3 Sched  11 2, 9 equire  Notice Tier 2 2 3 3	nng Pe 12/3: 112/3: 112/3: 112/3: 11/23/ 11/23/ 1/18/: 11 11 11	eriod 1/19 1/20 1/21 S Date /2012 2013 2017 ents Public Required 1/18/20 5/7/201 .2/2/202	Notified P	Achiev Cation erformed	ved in the state of the state o	PN Cert Due to DPH 1/28/2005 5/17/2015 2/12/2020	mplete
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other  Compliance Schedule Activity RESPOND TO SANITARY SURVEY CORRECTIVE ACTION/CORRECTIVE ACTION PLAN RESPOND TO SANITARY SURVEY  Public N  Violation/Situation Total Coliform M&R Violation Nitrate And Nitrite M&R Violation Total Coliform M&R Violation Physical Parameters M&R Violation  Water System Fa  Water	r Compliance Notification R Compliance Period 6/1/05 - 6/30/05 1/1/14 - 12/31/14 7/1/19 - 9/30/19 7/1/19 - 9/30/19 icility and Sar	Monitorii 1/1/19 - : 1/1/20 - : 1/1/21 - : Sched  L	nng Pe 12/3: 112/3: 112/3: 112/3: 11/23/ 11/23/ 1/18/: 11 11 11	eriod 1/19 1/20 1/21  S Date /2012 2013 2017 Ints Public Required 1/18/20 5/7/201 2/2/202 int Inv	Notified POSS 5 20 20 Yento	Achiev  Cation erformed  Ory  Lead of	ved in the state of the state o	PN Cert Due to DPH 1/28/2005 5/17/2015 2/12/2020	mplete  mification  Received
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other  Compliance Schedule Activity RESPOND TO SANITARY SURVEY CORRECTIVE ACTION/CORRECTIVE ACTION PLAN RESPOND TO SANITARY SURVEY  Public N  Violation/Situation Total Coliform M&R Violation Nitrate And Nitrite M&R Violation Total Coliform M&R Violation Physical Parameters M&R Violation  Water System Fa  Water	r Compliance Notification R Compliance Period 6/1/05 - 6/30/05 1/1/14 - 12/31/14 7/1/19 - 9/30/19 7/1/19 - 9/30/19	Monitorii 1/1/19 - : 1/1/20 - : 1/1/21 - : Sched  L	ng Pe 12/3: 112/3: 112/3: 112/3: 112/3: 11/23/ 1/20/: 11/23/ 1/18/: 11/23/ 10/23/ 10/2	eriod 1/19 1/20 1/21 S Date /2012 2013 2017 ents Public Required 1/18/20 5/7/201 .2/2/202 .2/2/202	Notified P	Achiev  Cation erformed  Lead on Copp	ved land	Compliance	mplete  cification
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3)  Other  Compliance Schedule Activity RESPOND TO SANITARY SURVEY CORRECTIVE ACTION/CORRECTIVE ACTION PLAN RESPOND TO SANITARY SURVEY  Public N  Violation/Situation Total Coliform M&R Violation Nitrate And Nitrite M&R Violation Total Coliform M&R Violation Physical Parameters M&R Violation  Water System Fa  Water System Water System Facility Sampling Point ID)  Other  Othe	r Compliance Notification R Compliance Period 6/1/05 - 6/30/05 1/1/14 - 12/31/14 7/1/19 - 9/30/19 7/1/19 - 9/30/19 icility and Sar	Monitorii 1/1/19 - : 1/1/20 - : 1/1/21 - : Sched  L 11 2 9 equire Notice Tier 2 2 3 3 npling	nng Pee 112/3: 1	eriod 1/19 1/20 1/21  S Date /2012 2013 2017 Ints Public Required 1/18/20 5/7/201 2/2/202 int Inv	Notified P 05 5 20 20 Vento	Achiev  Cation erformed  Lead on Copp	ved land	Compliance	mplete  mification Received

WITHIN 5 SERVICE CON

Α

UPSTREAM

470044	17 REACH DOND DOAD	NC	25	D	GW						
SID	PWS Name	Classification	Population	Owner Type	Primary Source						
	Water Quality Monitoring and Compliance Schedule										
	Connecticut Department of Fublic Health Drinking Water Section										

Connecticut Department of Public Health Drinking Water Section

CT1470044	17 BEACH POND ROAD				NC	25	Р	GW
Local Address (w	vhere applicable)	Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural
		Connections			1			

Towns Served: VOLUNTOWN

**PWS** 

	Water System Facility and Sampling Point Inventory											
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	D. J.	Lead and Copper Rule Tier	Asbestos	WQP .	Stage 2 DBPR			
00700	ENTRY POINT	3	ENTRY POINT	Α								
22463	WELL	2	WELL	А								

				Co	ntact Info	ormation				
Name					Organization				Job Title	
Mr. David Andrews	3				17 Beach Por	nd Rd		Owner		
Mailing Address Lin	e One		Mailing	Addr	ess Line Two			City	State	Zip Code
368 Escoheag Road							Exitor		RI	02822
Business Phone	Extension	Fax		Mo	bile Phone	Emergency Phone	Email Ad	dress		
401-206-3967		860-376-5	5787			401-206-3967				
C++ D-1-/-\-		C44 1				•	•			

Contact Role(s): Administrative Contact, 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.

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

End of schedule

	Connecticut Departmen			•	_		ection	
	Water Quality Mo	nitoring and				1		
PWS ID	PWS Name		С	lassification		Ow		rimary Source
CT1470054	NATURE'S CAMPSITES, LLC			NC	25	.	Р	GW
	where applicable)	Service R Connections	esidentia		ial Industri	al	Combined	Agricultural
98 EKONK HILL		Connections		1				
Towns Served:						_		
Water System	Mon Facility: DISTRIBUTION SYSTEM (V	onitoring Requir	emen	ts				
Total Colifor		•			1	rou	utine (RT)	per quarter
	Point (Sampling Point ID)	М	onitoring	Period (	Collection Pe			iance Status
	m Inventory of Active Sampling Points		/1/19 - 7,					mplete
Total Colifor				•		1 ro		per month
	Point (Sampling Point ID)	М	onitoring	Period (	Collection Pe		= -	iance Status
	m Inventory of Active Sampling Points		/1/19 - 10					mplete
	, , , , , ,		/1/20 - 5,	· · · · · · · · · · · · · · · · · · ·				•
			/1/20 - 6,					
			/1/20 - 7 <sub>/</sub>					
		8	1/20 - 8	/31/20				
		9	/1/20 - 9,	/30/20				
Physical Para	meters (PPS)				1	rou	utine (RT)	per quarter
Sampling	Point (Sampling Point ID)	М	onitoring	Period (	Collection Pe	riod	Compl	iance Status
Select from	m Inventory of Active Sampling Points	7	/1/19 - 7,	/31/19	7/1-7/31		Co	omplete
Physical Para	meters (PPS)					1 ro	utine (RT	per month
Sampling	Point (Sampling Point ID)	М	onitoring	Period (	Collection Pe	riod	Compl	iance Status
Select fror	m Inventory of Active Sampling Points	10	/1/19 - 10	0/31/19			Co	omplete
		11	<b>/1/19 - 1</b> :	1/30/19				
		12	<mark>/1/19 - 1</mark> 2	2/31/19				
		1	<mark>/1/20 - 1</mark> ,	/31/20				
		2	<mark>/1/20 - 2</mark> ,	/29/20				
		3	<mark>/1/20 - 3</mark> ,	/31/20				
		4	<mark>/1/20 - 4</mark> ,	/30/20				
		5	<mark>/1/20 - 5</mark> ,	/31/20				
		6	<mark>/1/20 - 6</mark> ,	/30/20				
		7	<mark>/1/20 - 7</mark> ,	/31/20				
		8	<mark>/1/20 - 8</mark> ,	/31/20				
		9	/1/20 - 9,	/30/20				
Water System	n Facility: ENTRY POINT (WSF ID: 00	700)						
Nitrate And I	Nitrite (NOX)					1	routine (I	RT) per year
Sampling	Point (Sampling Point ID)	М	onitoring	Period (	Collection Pe	riod	Compl	iance Status
ENTRY PO	INT (3)	1/	1/19 - 12	/31/19			Co	omplete
		1/	1/20 - 12	2/31/20				
		1/	1/21 - 12	2/31/21				
- "		er Compliance S						
	hedule Activity		Du	ie Date	Achie	ved	Date	

3/22/2020

5/1/2020

2/28/2020

RESPOND TO SANITARY SURVEY

SEASONAL START UP COMPLETION

4 4 7 0 0 5 4	NATURE'S CANARCITES II C	NC	25	_	CVA
VS ID	PWS Name	Classification	Population	Owner Type	Primary Source
	Water Quality Monitoring and Con	npliance :	Schedul	e	
	Connecticut Department of Fublic Health	אוואווונעוו	3 Water	Section	

Connecticut Department of Dublic Health Drinking Water Section

CT1470054	NATURE'S CAMPSITES, LLC				NC	25	Р		GW
Local Address (w	here applicable)	Service	Residen	itial	Commercia	l Industri	al Comb	ined	Agricultural
98 EKONK HILL F	ROAD	Connections			1				

Towns Served: VOLUNTOWN

PW

	Public Notification R	equiren	nents			
	Compliance	Notice	Public No	<u>tification</u>	PN Certi	<u>fication</u>
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received
Total Coliform MCL Violation	6/1/12 - 6/30/12		8/11/2012		8/21/2012	
Total Coliform MCL Violation	5/1/12 - 5/31/12		8/11/2012		8/21/2012	
Total Coliform MCL Violation	10/1/12 - 12/31/12	2	11/17/2012		11/27/2012	

	Wat	er System Facili	ity and Sampling P	oint Ir	nvento	ry			
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		4-1	Cabin #1/30	Α	Υ				
		4-2	Playground	Α	Υ				
		4-3	Site 84	Α	Υ				
		4-4	Site 65	Α	Υ				
		4-5	#84	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
57422	PRESSURE STORAGE								
59873	WELL 250	2	WELL 250	Α					
59875	WELL 260	2	WELL 260	Α					
59877	ATMOSPHERIC TANK	·							
59879	PUMP STATION								

				<b>Contact Inf</b>	ormation			
Name				Organization	1		Job Title	
Mr. Peter A. Lazoui	rack, Jr.					Owner		
Mailing Address Lin	e One		Mailing A	ddress Line Two		City	State	Zip Code
96 Ekonk Hill Road						Voluntown	СТ	06384
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
860-376-4203		860-376-1	L753		860-376-5114	nathan@fspaintball.n	et	

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

# Please note the following:

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

End of schedule

	Connecticut Dep	artmer	nt of I	Public H	lealth	Dri	nkin	g W	ater	Section	on	
	Water Qua	ality Mo	onito	ring an	d Con	nplia	ance	Sch	edule	9		
PWS ID	PWS Name			0							/pe Pr	imary Source
CT1470064	VOLUNTOWN FIRE STATIO	N				1	NC		25	L		GW
Local Addres	s (where applicable)		5	Service	Residen	tial Co	ommer	cial II	ndustria	l Com	bined	Agricultural
205 PRESTON	N CITY RD (RT 165)		(	Connections			1					
Towns Serve	d: VOLUNTOWN											
		M	onitor	ing Requ	ireme	nts						
Water Syste	em Facility: DISTRIBUTION	SYSTEM (\	WSF ID:	00600)								
<b>Total Colifo</b>	orm (3100)								1	routine	(RT) <sub>I</sub>	er quarter
Samplin	g Point (Sampling Point ID)				Monitori	ing Per	riod	Collect	ion Peri	iod C	ompli	ance Status
Select fr	om Inventory of Active Samplin	g Points			7/1/19 -	9/30/	19				Со	mplete
					10/1/19 -	12/31	./19				Со	mplete
					1/1/20 -	3/31/	20				Со	mplete
					4/1/20 -	6/30/	20					
					7/1/20 -	9/30/	20					
_	rameters (PPS)							- <i>1</i> 1				per quarter
	g Point (Sampling Point ID)				Monitori			Collect	tion Peri	od C		ance Status
Select fr	om Inventory of Active Samplin	ig Points			7/1/19 -							mplete
					10/1/19 - 1/1/20 -							mplete mplete
					4/1/20 -						CO	ilibiere
					7/1/20 -							
Water Syste	em Facility: ENTRY POINT (	WSF ID: 00	0700)		7/1/20	3/30/	20					
-	d Nitrite (NOX)		,,,,,							1 routi	ine (R	T) per year
	g Point (Sampling Point ID)				Monitori	ing Per	riod	Collect	ion Peri		-	ance Status
	POINT (3)				1/1/19 -							mplete
					1/1/20 -							mplete
					1/1/21 -							•
		Public	Notif	ication R	equire	emen	nts					
				npliance	Notice	•	<u>Public l</u>	<u>Notific</u>	<u>ation</u>	<u>P</u>	N Cert	i <u>fication</u>
Violation/Sit				Period	Tier		equirea		rformed			Received
	Turbidity MCL Violation			4 - 9/30/04	2		/7/2005			1/17/		
	Turbidity MCL Violation			5 - 3/31/06	2		15/200			6/25/		
	Color MCL Violation			5 - 3/31/06	2		15/200			6/25/		
	Furbidity MCL Violation			6 - 6/30/06	2		23/200			9/2/2		
	Color MCL Violation			6 - 6/30/06	2		23/200			9/2/2		
	Furbidity MCL Violation			3 - 12/31/08 9 - 9/30/09	2		14/2009			2/24/		
Distribution	Turbidity MCL Violation	Cuesta na F			2		/22/200			12/2/	2009	
	water	system i	-acility	y and Sar	npiing	Poir			•			
Water System W	ater System Facility	Samplina	Point C	ampling Poi	nt			Total oliform	Lead a			Stage
Facility ID	ater system ruemty	ID		escription		C.		nijoriii Rule			estos	WQP 2 DBPR
	STRIBUTION SYSTEM	4		ISTRIBUTION	N SYSTFM		atus A	Y				
				VITHIN 5 SER			A	٠				
		UPSTRE		VITHIN 5 SER			Α					
00700 EN	NTRY POINT	3		NTRY POINT			Α					
	'ELL	2		VELL			A					

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

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT1470064	VOLUNTOWN FIRE STATION				NC	25	L	GW
Local Address	(where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
205 PRESTON	CITY RD (RT 165)	Connections			1			

# **Water System Facility and Sampling Point Inventory**

Water			Total	Lead and	
System Water System	Facility Sampling Point	t Sampling Point	Coliform	Copper	Stage
Facility ID	ID	Description	Status Rule	Rule Tier Asi	bestos WQP 2 DBPR

55470 SOFTENER

			Contact Info	ormation				
			Organization	ı			Job Title	
			Voluntown F	ire Department		Fire Chief		
ne		Mailing Ad	dress Line Two			City	State	Zip Code
		Preston Cit	ty Road		Voluntov	vn	СТ	06384
xtension	Fax	1	Mobile Phone	Emergency Phone	Email Ad	dress		
	860-376-0	475			VFD53@	COMCAST.NE	Γ	
		ctension Fax	Preston Cit	Voluntown F  Mailing Address Line Two Preston City Road  ktension Fax Mobile Phone	Voluntown Fire Department  Mailing Address Line Two Preston City Road  ktension Fax Mobile Phone Emergency Phone	Voluntown Fire Department  Mailing Address Line Two Preston City Road  Voluntov  tension Fax Mobile Phone Emergency Phone Email Address	Voluntown Fire Department  Mailing Address Line Two City Preston City Road Voluntown  ttension Fax Mobile Phone Emergency Phone Email Address	Voluntown Fire Department   Fire Chief

Contact Role(s): Administrative Contact, Legal Contact

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

End of schedule

	Connectic	•									ection		
		ter Qua	nty Mo	m	toring a	na Con							
PWS ID	PWS Name	214/21 11411									ner Type P		
CT1470074	VOLUNTOWN TO	OWN HALL			c ·	5 1	-		25		L	G۱	
	vhere applicable)				Service Connection	Residen	tiai Cc	ommercial	Ind	lustrial	Combined	Agri	cultural
115 MAIN STRE					Connection	13		1					
Towns Served:	OLUNIOWN			•.		•							
Water System	Facility: DISTR	IBUTION S			oring Red	quireme	nts						
<b>Total Coliforn</b>	n (3100)									1 rou	utine (RT)	per qı	uarter
Sampling	Point (Sampling P	oint ID)				Monitori	ng Peri	iod Col	llectio	n Period	Compl	iance S	Status
Select fron	n Inventory of Act	ive Sampling	Points			7/1/19 -	9/30/1	L9 <u> </u>			Co	mplet	e
						10/1/19 -	12/31,	/19			Co	mplet	e
						1/1/20 -	3/31/2	20			Co	mplet	e
						4/1/20 - 7/1/20 -							
Physical Para	meters (PPS)									1 rou	utine (RT)	per qu	uarter
-	Point (Sampling P	oint ID)				Monitori	ng Peri	iod Col	llectio	n Period	Compl		
Select fron	n Inventory of Act	ive Sampling	Points			7/1/19 -	9/30/1	L9			Co	mplet	e
						10/1/19 -	12/31,	/19			Co	mplet	e
						1/1/20 -	3/31/2	20			Co	mplet	e
						4/1/20 -	6/30/2	20					
						7/1/20 -	9/30/2	20					
Water System	Facility: ENTR	Y POINT (V	VSF ID: 00	700	)								
Nitrate And N	litrite (NOX)									1	routine (I	RT) pe	r year
Sampling I	Point (Sampling P	oint ID)				Monitori	ng Peri	iod Col	llectio	n Period	Compl	iance S	Status
ENTRY POI	NT (3)					1/1/19 -	12/31/	19			Co	mplet	e
						1/1/20 -					Co	mplet	e
						1/1/21 -	12/31/	21					
			Oth	er C	Complian	ce Sched	lules						
Compliance Sch	edule Activity					ı	Due Da	te	-	Achieved	Date		
RESPOND TO SA	NITARY SURVEY					1:	1/14/20	019					
		Water S	ystem F	acil	lity and S	ampling	Poin		-				
Water	er System Facility		Camplina	Doint	t Sampling F	Point		Tot		Lead and			Ctara
System Water Facility ID	er System Facility	,	Sumpling I ID	OIIII	Description		Ct.	Colife Stus Ru		Copper Rule Tier	Asbestos	WOP	Stage 2 DRPR
	RIBUTION SYSTEM	1	4			ON SYSTEM		<del>atus Ru</del> A Y		nuic rici	7155005		Z DDI K
00000 5131	MIDOTION SISTEN			FAN	1 WITHIN 5 S			Α '					
			UPSTREA			SERVICE CON		A					
00700 ENT	RY POINT		3		ENTRY POI			Α					
22466 WEL			2		WELL			Α					
				Cor	ntact Info	rmation							
Name				C	Organization						Job Title		
Voluntown													
Mailing Address	Line One		Mailing A	ddre	ss Line Two				City	/	State	Zip C	Code
Town Hall			115 Main	Stree	et			Volunto	wn		СТ		
Business Phor	ne Extension	Fax		Mob	ile Phone	Emergency	Phone	Email Ac	ddress	;	, ,		
860-376-408	9	860-376-3	3295										

	Connectic	ut Depa	irtment (	of Public	Health	Dri	nking	Water	Section	
	Wa	ter Qua	lity Mon	itoring a	nd Con	nplia	ance S	chedul	le	
PWS ID	PWS Name					Classi	fication	Population	Owner Type	Primary Source
CT1470074	VOLUNTOWN TO	OWN HALL				ı	NC	25	L	GW
Local Address (w	here applicable)			Service	Resider	ntial C	ommercia	al Industri	al Combine	ed Agricultural
115 MAIN STREE	Т			Connection	ns		1			
Towns Served: V	OLUNTOWN					,		,		·
Contact Role(s):	Owner									
Name				Organization					Job Title	9
Ms. Tracey Hans	on			Town of Volur	ntown			First Selec	ctman	
Mailing Address	Line One		Mailing Addr	ess Line Two				City	State	Zip Code
115 Main Street			PO Box 96				Volunto	own	СТ	06384
Business Phon	e Extension	Fax	Mo	bile Phone	Emergency	/ Phone	e Email A	ddress	,	
860-376-5880							thanso	n@voluntov	wn.gov	
Contact Role(s):	Administrative	Contact	,	<u>'</u>						

# Please note the following:

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

End of schedule

	Co	onnectic	ut Depa	artme	nt o	of Public	Неа	lth [	)rir	nking	Wate	r Se	ection	
		Wa	ter Qua	lity M	loni	toring a	and C	omr	olia	nce S	chedu	ıle		
PWS ID	PV	VS Name				8							ner Type P	rimary Source
CT1470084		MARACK LOD	OGE						N		25		Р	GW
Local Addr	ress (whe	re applicable)				Service	Res	identia	I Co	mmercial	Indust	rial	Combined	Agricultural
21 TEN RO		,				Connection	ons			1				
Towns Ser	ved: VOL	UNTOWN												
				N	/loni	toring Re	auire	ment	ts					
Water Sys	stem Fac	cility: DISTR	RIBUTION S				quiic							
<b>Total Col</b>	liform (3	3100)										1 rou	utine (RT)	per quarter
Samp	oling Poin	t (Sampling P	Point ID)				Mon	itoring	Perio	od Co	llection P	eriod	Compl	iance Status
Selec	t from Inv	entory of Act	ive Sampling	g Points			7/1,	/19 - 9/	/30/1	9			Cc	mplete
							10/1	/19 - 12	2/31/	19				
							1/1,	/20 - 3/	/31/2	0				
								/20 - 6/						
							7/1,	/20 - 9/	/30/2	0				
Physical	Paramet	ters (PPS)										1 rou	utine (RT)	per quarter
-		t (Sampling P						itoring			llection P	eriod		iance Status
Selec	t from Inv	entory of Act	ive Sampling	Points				/19 - 9/					Co	mplete
								/19 - 12						
								/20 - 3/						
								/20 - 6/						
							7/1,	/20 - 9/	/30/2	0				
Water Sys	stem Fac	cility: ENTR	Y POINT (V	WSF ID: (	00700	))								
		te (NOX)											-	RT) per year
-		t (Sampling P	Point ID)					itoring			llection P	eriod	Compl	iance Status
ENTR	Y POINT (	(3)						19 - 12						
								20 - 12						
								21 - 12		21				
				Ot	her (	Compliar	ice Scl	hedu	les					
Compliand	ce Schedu	le Activity						Du	e Dat	te	Ach	ieved	Date	
RESPOND	TO SANIT	ARY SURVEY						2/1	6/201	19				
			Water S	ystem	Faci	lity and S	Sampl	ing P	oint	t Inven	tory			
Water										Tot	al Lea	d and	1	
System		ystem Facility	,	Sampling	g Poin	t Sampling				Colife	orm Co	pper		Stage
Facility ID	)			IE	)	Description	n		Sta	tus Ru	le Rul	e Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBU	JTION SYSTEM	1	4	•	DISTRIBUT	TION SYS	TEM	Α	4 Y	•			
00700	ENTRY P	OINT		3		ENTRY PO	INT		A	4				
22467	WELL			2		WELL			Α	Α				
					Co	ntact Inf	ormat	ion						
Name					(	Organization							Job Title	
Ms. Valore	ee Longo					Гаmarack Lo	dge							
Mailing Ad		e One		Mailing		ess Line Two					City		State	Zip Code
29 Ten Ro										Volunto			СТ	06067
Business		Extension	Fax		Mol	oile Phone	Emerg	ency Pl	hone	Email Ac			1	
860-376	6-0224											nnect	icut@gmai	l.com
							1			1			*	

Schedule Generation Date: 3/10/2020 Page 15

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

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

						_ <u> </u>			
F	PWS ID	PWS Name				Classification	Population	Owner Type	Primary Source
(	T1470084	TAMARACK LODGE				NC	25	Р	GW
L	ocal Address (w	here applicable)		Service	Residen	itial Commerc	ial Industri	al Combine	ed Agricultural
2	1 TEN ROD ROA	AD.		Connections		1			

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End of schedule

		ut Departme ter Quality M										ection	
DIA/C ID		ter Quality M	UIIILL	n mg a	nu c						_	т	D.:
PWS ID CT147009	PWS Name	ADTICT CHURCH					Class	NC	n Po	25	n O	P P	Primary Source
	4 VOLUNTOWN BA ress (where applicable)	APTISI CHUKCH		Service	Por	sident	tial (	Comme	rcial	Indust	rial	Combine	GW d Agricultural
52 MAIN S				Connection		sideiit	lai	1	l Clai	muust	IIdi	Combine	u Agriculturai
	ved: VOLUNTOWN												
TOWIIS SCI	ved. Volontovin	D. (1	: <b>-</b> -	wine Do			-4-						
				ring Red	quire	emer	าเร						
•	stem Facility: DISTR	IBUTION SYSTEM (	WSF ID	: 00600)									
	liform (3100)												per quarter
	oling Point (Sampling Po					nitorin			Colle	ection F	Perio		liance Status
Selec	t from Inventory of Acti	ve Sampling Points			_	L/19 - 9	-						omplete
						L/19 - :							omplete
						L/20 - 3						C	omplete
						L/20 - (							
Dharainal	Damana tama (DDC)				//1	L/20 - 9	9/30	/20			4		
_	Parameters (PPS) pling Point (Sampling Po	oint ID)			Mai	nitorin	aa Da	oriod	Colle	ection F			per quarter liance Status
	t from Inventory of Acti					L/19 - 9			Cone	ection F	erio		omplete
Jeiec	t from inventory of Acti	ve sampling rollies				L/19 - :		•					omplete
						L/20 - 3							omplete
						L/20 - (							ompiete
					-	L/20 - 9		•					
Water Sv	stem Facility: ENTRY	POINT (WSF ID: 0	0700)		- , -	,	-,	, = -					
•	And Nitrite (NOX)											1 routine (	RT) per year
	oling Point (Sampling Po	oint ID)			Moi	nitorin	ng Pe	eriod	Colle	ection F		-	liance Status
	Y POINT (3)	•				/19 - 1	_						omplete
						/20 - 1							omplete
					1/1,	/21 - 1	12/31	1/21					-
		Public	. Noti	fication	Rea	uire	me	nts					
			T	mpliance		lotice			Noti	fication		PN Ce	rtification
Violation/	Situation			Period		Tier		Require		Perform		Due to DPI	
GROUNDV	VATER RULE TT Violatio	n	2/6/1	.8 - 3/14/18	8	2		7/5/201		,		7/15/2018	
		Water System	Facilit	v and S	amp	ling	Poi	nt Inv	/ent	torv			
Water				,	чр	6			Tota		d an	d	
System	Water System Facility	Sampling	Point S	Sampling F	Point			C	olifor		pper		Stage
Facility ID		ID		Description	1		S	tatus	Rule				WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	١	DISTRIBUTI	ON SY	STEM		Α	Υ				
		DOWNST	REAM Y	WITHIN 5 S	ERVIC	E CON	l	Α					
		UPSTRI	EAM \	WITHIN 5 S	ERVIC	E CON	l	Α					
00700	ENTRY POINT	3	l	ENTRY POII	NT			Α					
22468	WELL	2		WELL				Α					
			Cont	act Info	rmat	tion							
Name			Org	ganization								Job Title	
	David Larsen			untown Ba	ptist C	hurch	l		F	Pastor		<u> </u>	
Mailing Ac	ldress Line One			Line Two						City		State	Zip Code
52 Main St		P O Box							ntow			СТ	06384
Business		Fax	Mobile	Phone		•		ne Ema					
960_27¢	5_0/05	960_276_7925			060	_017_6	EUE 3	whee	acrat	ചവകം	املم	halnet	

	Connectic	ut Depa	rtmei	nt of	Public	Health	Dri	nking	g Water	Se	ction	
	Wat	ter Qua	lity M	onit	oring a	nd Con	nplia	nce S	Schedul	e		
PWS ID	PWS Name						Classif	ication	Population	Own	er Type	Primary Source
CT1470094	VOLUNTOWN BA	APTIST CHUR	RCH				N	IC	25		Р	GW
Local Address (w	here applicable)				Service	Residen	ntial Co	mmerci	al Industri	al	Combine	d Agricultural
52 MAIN STREET					Connection	ıs		1				
Towns Served: V						,	,					
000-370-3403		800-370-7	7033			000-317	-0055	vucsec	r <del>etary@suc</del>	gioba	i.net	
Contact Role(s):	Administrative (	Contact										
Name				Or	ganization						Job Title	
Voluntown Bapt	ist Church											
Mailing Address	Line One		Mailing A	ddress	s Line Two				City		State	Zip Code
52 Main Street			P O Box 5	808				Volunt	own		СТ	06384
Business Phon	e Extension	Fax		Mobil	le Phone	Emergency	/ Phone	Email A	Address			
860-376-9485	i											
Contact Role(s):	Legal Contact, C	)wner	,									

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End of schedule

				CD III I	r 1.1	D 1	1.	TAY		2		
	Connecticut Dep						_				n	
	Water Qu	ality M	onit	oring an	d Con	ıplia	ince S	Sche	dule			
PWS ID	PWS Name					Classif	ication	Popula	tion O	wner Typ	e Pri	imary Source
CT1470154	PACHAUG S.F./MOUNT M	ISERY PUMI	HOU	SE		N	IC	30		S		GW
Local Address	(where applicable)			Service	Residen	tial Co	mmerci	al Ind	ustrial	Combin	ned	Agricultural
ROUTES 49 AN	ID 138			Connections	5							
Towns Served	VOLUNTOWN											
		M	onit	oring Requ	ıireme	nts						
Water Syster	m Facility: <b>DISTRIBUTION</b>	SYSTEM (	WSF I	D: 00600)								
<b>Total Colifor</b>	m (3100)								1 r	outine (F	RT) p	er quarter
Sampling	Point (Sampling Point ID)				Monitori	ng Peri	iod C	ollectio	n Perio	od Cor	nplia	ince Status
Select fro	m Inventory of Active Sampli	ng Points			7/1/19 -	9/30/1	L9				Cor	nplete
					10/1/19 -	12/31/	/19				Cor	mplete
					1/1/20 -	3/31/2	20					
					4/1/20 -	6/30/2	20					
					7/1/20 -	9/30/2	20					
Physical Par	ameters (PPS)								1 r	outine (F	RT) p	er quarter
	Point (Sampling Point ID)				Monitori			ollectio	n Perio	od Con	nplia	ince Status
Select fro	m Inventory of Active Sampli	ng Points			7/1/19 -						Cor	nplete
					10/1/19 -						Cor	nplete
					1/1/20 -							
					4/1/20 -							
					7/1/20 -	9/30/2	20					
-	m Facility: ENTRY POINT	(WSF ID: 0	0700)									
	Nitrite (NOX)										•	T) per year
	Point (Sampling Point ID)				Monitori			ollectio	n Perio	od Con	•	ince Status
ENTRY PO	DINT (3)				1/1/19 -						Cor	mplete
					1/1/20 -							
					1/1/21 -							
		Public	Not	tification R	Require	men	ts					
			C	ompliance	Notice		<u>Public No</u>	-				<u>fication</u>
Violation/Situ			4.14	Period	Tier		equired	Perfo	rmed	Due to D		Received
	M&R Violation			/04 - 3/31/04	2		/8/2004			12/18/20		
	neters M&R Violation			/04 - 3/31/04	3		/8/2005			11/18/20		
Distribution 1	urbidity MCL Violation	-		/10 - 9/30/10	2		27/2011			4/6/20:	11	
	Water	System I	Facil	ity and Sar	mpling	Poin	t Inve	ntory	•			
Water	Ann Contain Fraille	C !!	Defeat	Communities on David					ead ar			
System Work Facility ID	ter System Facility	Sampling ID	Point	Sampling Poi Description	nt				Coppe		toc l	Stage WQP 2 DBPR
_	TDIDLITION CVCTCM	4		-	I CVCTENA		itus	Y	Nuie II	ei Asbes	103	WQP Z DDFK
00600 DIS	TRIBUTION SYSTEM		DEANA	DISTRIBUTION WITHIN 5 SER				T				
		UPSTRE		WITHIN 5 SER			A ^					
00700 EN	TRY POINT	3	./\\\	ENTRY POINT			A A					
22472 WE	LL	2	_	WELL	• •		A					
				tact Inform	nation							
Name				rganization						Job Ti	tle	
Mr. David Coo	<u> </u>			eep-Engineerin	g Unit			-		ngineer		
Mailing Addre	ss Line One	Mailing A	ddres	s Line Two				City	,	State	5	Zip Code

Connecticut Department of Public Health Drinking Water Section												
Water Quality Monitoring and Compliance Schedule												
PWS ID PWS Name Classification Population Owner Type Primary Source												
CT1470154 PACHAUG S.F./MOUNT MISERY PUMP HOUSE NC 30 S GW												
Local Address (w	here applicable)			Service	Resider	ntial Co	ommerci	al Industri	al Combine	ed Agricultural		
<b>ROUTES 49 AND</b>	138			Connections	5							
Towns Served: V												
103 Great Hill Ko	Jau						Portiar	iu	CI	00480		
Business Phon	e Extension	Fax	Mobil	le Phone E	Emergenc	y Phone	e Email A	Address				
860-342-2215	;	860-344-2	2560 860-2	05-7552	860-424	-3333	david.d	cooley@ct.g	ov			
Contact Role(s):	Contact Role(s): Administrative Contact, Legal Contact, Owner											

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End of schedule

С	onnectic	ut Depa	rtment o	f Public	Health	Drin	nking	Water	Se	ction	
	Wa	ter Qual	ity Monit	oring a	nd Con	plia	nce S	chedul	e		
PWS ID PV	WS Name									ner Type P	rimary Source
CT1470174 CI	RCLE "C" CAM	PGROUND - V	WELL #1				IC	25		P	GW
Local Address (whe	ere applicable)			Service	Residen	tial Co	mmercial	Industri	al	Combined	Agricultural
21 BAILEY POND R	DAD			Connectio	ns		1				_
Towns Served: VOI	UNTOWN										
			Monit	oring Re	quireme	nts					
Water System Fa	cility: DISTR	IBUTION SY	STEM (WSF I	D: 00600)							
Total Coliform (	3100)								1 ro	utine (RT)	per month
Sampling Poi	nt (Sampling P	oint ID)			Monitori	ng Peri	od Col	lection Pe	riod	Compli	ance Status
Select from In	ventory of Act	ive Sampling	Points		6/1/20 -	6/30/2	.0				
					7/1/20 -	7/31/2	.0				
					8/1/20 -	8/31/2	.0				
					9/1/20 -	9/30/2	.0				
<b>Physical Parame</b>	ters (PPS)								1 ro	utine (RT)	per month
Sampling Poil	nt (Sampling P	oint ID)			Monitori	ng Peri	od Col	lection Pe	riod	Compli	ance Status
Select from In	ventory of Act	ive Sampling	Points		6/1/20 -	6/30/2	.0				
					7/1/20 -	7/31/2	.0				
					8/1/20 -						
					9/1/20 -	9/30/2	.0				
Water System Fa	cility: ENTR	Y POINT (W	SF ID: 00700)								
Nitrate And Nitr	ite (NOX)								1	routine (F	RT) per year
Sampling Poil	nt (Sampling P	oint ID)			Monitori	ng Peri	od Col	lection Pe	riod	Compli	ance Status
ENTRY POINT	(3)				1/1/19 -	12/31/	19			Out	of Service
					1/1/20 -						
					1/1/21 -	12/31/	21				
			Other C	omplian	ce Sched	lules					
Compliance Sched	ule Activity					Due Da		Achie	ved	Date	
SEASONAL START U	JP COMPLETIO	N				5/1/202	20				
		<b>Water Sy</b>	stem Facil	ity and S	Sampling	Poin	t Inven	tory			
Water							Tot	al Lead	and		
7	ystem Facility	S	ampling Point				Colife				Stage
Facility ID			ID	Descriptio	n	Sta	itus Ru	le Rule	Tier	Asbestos	WQP 2 DBPR
00600 DISTRIB	UTION SYSTEM		4		ION SYSTEM		<b>4</b> Υ				
		[	OOWNSTREAM				4				
			UPSTREAM		SERVICE CON	١ /	4				
00700 ENTRY F	POINT		3	ENTRY POI	NT	,	4				
22474 WELL			2	WELL		/	4				
			Cor	tact Info	ormation						
Name			0	rganization						Job Title	
Ms. Michelle S. Bo	telho		C	ampground				Owner - P	resid	dent	
Mailing Address Lin	ne One		Mailing Addres	s Line Two				City		State	Zip Code
21 Bailey Pond Roa	ıd						Volunto	wn		СТ	06384
Business Phone	Extension	Fax	Mob	ile Phone	Emergency	Phone	Email Ad	dress			
860-564-4534		860-564-4	534				circlec@	comcast.n	et		

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

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

					0		1				
PW	'S ID	PWS Name					Classification	n Populat	ion C	Owner Type	<b>Primary Source</b>
CT1	L470174	CIRCLE "C" CAMPGRO	OUND -	WELL #1			NC	25		Р	GW
Loc	al Address (w	here applicable)			Service	Resider	ntial Comme	ercial Indu	strial	Combine	ed Agricultural
21	BAILEY POND	ROAD			Connections		1				

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End of schedule

	Connecticu	t Departme	ent of	f Public	Health	Dr	inki	ng W	ater	Se	ction	
	Wate	er Quality N	<b>Ionit</b>	coring a	nd Com	ıpl:	iance	e Sch	edul	e		
PWS ID	PWS Name					Clas	sificatio	n Pop	ulation	Owr	ner Type F	Primary Source
CT1470184	CIRCLE "C" CAMPO	GROUND - WELL#	3				NC		25		Р	GW
Local Address (v	where applicable)			Service	Resident	tial	Comme	ercial	ndustria	al	Combined	I Agricultural
21 BAILEY PONI	O ROAD			Connection	ns		1					
Towns Served:	VOLUNTOWN											
		r	<b>Monit</b>	oring Red	quireme	nts						
Water System	Facility: <b>DISTRIE</b>	BUTION SYSTEM	(WSF I	D: 00600)								
<b>Total Coliforn</b>	n (3100)								1	rou	itine (RT)	per quarter
Sampling	Point (Sampling Poi	nt ID)			Monitori	Collec	Collection Period C			Compliance Status		
Select fron	n Inventory of Active	e Sampling Points			7/1/19 -	7/1/19 - 9/30/19					C	omplete
					4/1/20 -		-					
					7/1/20 -	9/30	0/20					
	meters (PPS)											per quarter
Sampling	Point (Sampling Poi	nt ID)			Monitori	Collection Period Compliance				iance Status		
Select fron	n Inventory of Active	e Sampling Points			7/1/19 -						C	omplete
					4/1/20 -		•					
					7/1/20 -	9/30	0/20					
Water System	Facility: ENTRY	POINT (WSF ID:	00700)									
Nitrate And N	litrite (NOX)									1	routine (	RT) per year
	Point (Sampling Poi	nt ID)						Collection Period Compliance State				iance Status
ENTRY POI	NT (3)				1/1/19 - 1						C	omplete
					1/1/20 - 1							
					1/1/21 - :	12/3	1/21					
		Ot	her C	omplian	ce Sched	ule	!S					
Compliance Sch							Date		Achie	ved	Date	
SEASONAL STAI	RT UP COMPLETION		4/1/2020									
	V	Vater System	Facili	ity and S	ampling	Poi	int In	vento	ry			
Water								Total	Lead	and		
*	er System Facility	•	_	Sampling P			(	Coliforn				Stage
Facility ID			D	Description			Status	Rule	Rule	Tier	Asbestos	WQP 2 DBPR
00600 DIST	RIBUTION SYSTEM		4		ON SYSTEM		Α	Υ				
				WITHIN 5 S			Α					
			REAM		SERVICE CON	J	Α					
	RY POINT		3	ENTRY POII	NT		Α					
57005 WEL	L 3		2	WELL 3			Α					
				tact Info	rmation							
Name				rganization							Job Title	
Ms. Michelle S. Botelho				Campground					wner - P	resio		
Mailing Address		Mailing	Addres	s Line Two					City		State	Zip Code
21 Bailey Pond								untown			СТ	06384
Business Pho		Fax	Mobi	ile Phone	Emergency	Pho						
860-564-453	4	860-564-4534					circ	lec@co	mcast.n	et		

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

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

The state of the s										
PWS ID	PWS Name				sification	Population	Owner Type	Primary Source		
CT1470184	CIRCLE "C" CAMPGROUND - WELL #3				NC 25		Р	GW		
Local Address (where applicable)		Service	Residential		Commerci	al Industri	al Combine	ed Agricultural		
21 BAILEY POND ROAD		Connections			1					

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