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7/1/19	- 9/30/	'19			
10/1/19	- 12/31	1/19			
1/1/20	- 3/31/	20		Cc	omplete
7/1/20	- 9/30/	20			
					-
	-		lection Peri	-	iance Status
				Cc	omplete
1/1/20	- 12/31	/28			
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1/1/21	- 12/31	/21	8/1-8/31		
Manita	vin a Da	viad Cal	lastice Devi		
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1/1/21	- 12/31	/21		routing (PT)	por quartor
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, , -	. ,		5 rout	tine (RT) per	three years
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1/1/19	- 12/31	/21	6/1-9/30		
1/1/22	- 12/31	/24	6/1-9/30		
			1	routine (RT)	per quarter
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7/1/19	- 9/30/	19			
10/1/19	- 12/31	/19			
1/1/20	- 3/31/	20		Co	omplete
4/1/20	- 6/30/	20			
7/1/20	- 9/30/	20			
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Monitoring	Period	Colle				iance Status	
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1/1/19 - 12/	/31/19				Со	omplete	
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1/1/21 - 12/	/31/21						
						-	
		Colle	ection Pe	riod	Compli	iance Status	
					Со	omplete	
1/1/23 - 12/	/31/25						
						-	
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1/1/23 - 12/	/31/25			1	outino /r		
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	Connectio	cut Depar	tment of	Public	Healt	h Di	rinkir	ng W	ater Se	ection	
	Wa	iter Quali	ty Monit	oring a	nd Co	mpl	liance	Sch	edule		
PWS ID	PWS Name		<u> </u>	0			ssificatio			ner Type P	rimary Source
CT150005	2 JOHN DORR NA	TURE LAB					NTNC	3	30	Р	GW
Local Add	ress (where applicable))		Service	Resid	ential	Comme	rcial Ir	ndustrial	Combined	Agricultural
220 NETTI	ETON ROAD			Connectio	ns 1	L					
Towns Ser	ved: WASHINGTON				·		·	·	·		
			Other C	omplian	ce Sche	edule	es				
Compliand	ce Schedule Activity			-		Due	Date		Achieved	Date	
CROSS CO	NNECTION SURVEY RE	PORT				3/1/	2020				
		Water Sys	tem Facili	ity and S	amplin	ig Po	int Inv	vento	ry		
Water								Total	Lead and	1	
System Facility ID	Water System Facility	ı Sa	mpling Point ID	Sampling I Description			C Status	oliform Rule		Asbestos	Stage WQP 2 DBPR
00500	COMBINED RAW WAT DISCHARGE	ΓER									
00600	DISTRIBUTION SYSTEM	Л	4	DISTRIBUT	ION SYSTE	M	А	Y			
			AP11FBARN	APT 1 SINK	1F BARN		А	Y	1		
			AP21FBARN	APT 2 SINK	1F BARN		А	Y	1		
		D	OWNSTREAM	WITHIN 5 S	SERVICE C	ON	А				
			EQ1FMB	EQUIP RM	1F MN BL	.DG	А	Y	1		Y
			KS2FMB	KIT SINK 2F	MN BLD	G	А	Y	1		
			NECK	NE CABIN I	кIT		А	Y	1		
			NKIT	NELLS KIT			А	Y	1		
			ΡΚΙΤ	PAYNE KIT			А	Y	1		
			UPSTREAM	WITHIN 5 S	SERVICE C	ON	А				
			VABATH	VAN ALSTY	NE BATH		А	Y	1		
			WL2FBARN	WET LAB S	INK 2F BA	RN	А	Y	1		Y
00700	ENTRY POINT		3	ENTRY POI	NT		А				
10645	WELL #3		2	WELL #3			А				
10646	WELL #2		2	WELL #2			А				
10647	WELL #1		2	WELL #1			А				
45070	WATER TREATMENT	PLANT									
51749	PRESSURE STORAGE										
51751	ATMOSPHERIC STORA	GE									
52036	WELL #4		2	WELL #6			А				
			Certified	Operato	or Infor	mati	on				
Water Sy	stem Facility: WAT	ER TREATMEN	IT PLANT (W	/SF ID: 450	70)						
-	assification: CLASS 2 T	REATMENT PLA	NT								Certification
Operator	Name		Operator Typ	е	Certifica	tion(s)					Expiration
GRANT, SH	HANE	CI	HIEF OPERATC	DR					RATOR - C OR - CLASS		9/30/2020 9/30/2020
			Con	tact Info							
Name				rganization						Job Title	
Mr. Glenn	Sherratt										
	dress Line One	N	lailing Address	s Line Two				С	ity	State	Zip Code
PO Box 29							Was	hington		СТ	06794
Business	Phone Extension	Fax	Mobi	le Phone	Emergen	icy Pho				I I	
		1			-				···•		

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

								P						
PWS ID	PWS Name						0	Classif	ication	Populatio	n C	Owner Type	Primary Source	
CT1500052	JOHN DORR NA	TURE LAB				NT	NC	30		Р	GW			
Local Address (w	here applicable)			Service	Resid	lential Commercia		ercial Industria		Combine	ed Agricultural		
220 NETTLETON	ROAD				Connection	ns 1	L							
Towns Served: W													'	
860-868-2230									Glenn_	Sherratt@	phor	racemann.o	rg	
Contact Role(s):	Administrative	Contact							·					
Name				Org	ganization							Job Title	ē	
John Dorr Natur	e Lab-Horace M	ann School												
Mailing Address	Line One		Mailing Add	ress	Line Two					City		State	Zip Code	
231 W 246Th St									Bronx			NY	10471-3430	
Business Phone	e Extension	Fax	M	obile	e Phone	Emergen	icy F	hone	Email A	ail Address				
718-432-4000														
Contact Role(s):	Legal Contact,	Owner												
Please note the	following:													
1. The residual d	isinfectant concei	ntration must b	be measured at	the	same locatio	n and tim	e as	each t	otal colif	orm sampl	е.			
2. If a Collection	Period is specified	l, all water qua	ality samples m	ust b	pe collected o	during the	spec	cified p	period.					
	Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related													
corresponden	ce sent by the DW	'S on or after t	he generation of	date	of this sched	lule will ha	ave p	preced	ence ove	r what is co	ontai	ined in this so	hedule.	

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 H	lealth D	rinking	Water S	ection	
	Water Quality Mo	nitoring an	d Comp	liance S	Schedule		
PWS ID	PWS Name		Cla	assification	Population Ov	vner Type P	rimary Source
CT1500102	SHEPAUG MIDDLE/HIGH SCHOOL			NTNC	770	L	GW
Local Address ((where applicable)	Service	Residential	Commercia	al Industrial	Combined	Agricultura
159 SOUTH ST	REET	Connections	1				
Towns Served:	WASHINGTON						
	Mo	nitoring Requ	lirement	s			
Water System	n Facility: DISTRIBUTION SYSTEM (W	SF ID: 00600)					
Asbestos (10	094)				1 routi	ne (RT) pe	r nine years
Sampling	Point (Sampling Point ID)		Monitoring	Period Co	ollection Period	l Compli	ance Status
Select from	m Inventory of Active Sampling Points		1/1/11 - 12/	/31/19		Co	mplete
			1/1/20 - 12/	31/28			
Total Colifor	m (3100)				1 ro		per quarter
Sampling	Point (Sampling Point ID)		Monitoring	Period Co	ollection Period	Compli	ance Status
Select fro	m Inventory of Active Sampling Points		7/1/19 - 9/3	30/19		Co	mplete
			10/1/19 - 12	/31/19		Co	mplete
			1/1/20 - 3/3	31/20		Co	mplete
			4/1/20 - 6/3	30/20			
			7/1/20 - 9/3	30/20			
	Byproducts - TTHM & HAA5 (DBP)				1	-	RT) per year
Sampling	Point (Sampling Point ID)		Monitoring	Period Co	ollection Period	l Compli	ance Status
HANDICA	P BATH MS (SVS003)		1/1/19 - 12/	31/19	7/1-7/31	Co	mplete
			1/1/20 - 12/	/31/20	7/1-7/31		
			1/1/21 - 12/	31/21	7/1-7/31		
Lead And Co	•••••				10 routin	• • •	three years
	Point (Sampling Point ID)		Monitoring	Period Co	ollection Period	l Compli	ance Status
Select fro	m Inventory of Active Sampling Points		1/1/19 - 12/	-	6/1-9/30		
			1/1/22 - 12/	31/24	6/1-9/30		
•	ameters (PPS)					• •	per quarter
	Point (Sampling Point ID)		Monitoring		ollection Period		ance Status
Select fro	m Inventory of Active Sampling Points		7/1/19 - 9/3	-			mplete
			10/1/19 - 12				mplete
			1/1/20 - 3/3			Co	mplete
			4/1/20 - 6/3				
			7/1/20 - 9/3	30/20			
	n Facility: ENTRY POINT (WSF ID: 007	700)					
-	emicals (IOCS)						three years
	Point (Sampling Point ID)		Monitoring		ollection Period	l Compli	ance Status
ENTRY PO	DINT (3)		1/1/18 - 12/				
			1/1/21 - 12/	31/23			
	Nitrite (NOX)					-	RT) per year
	Point (Sampling Point ID)		Monitoring		ollection Period	-	ance Status
ENTRY PO	DINT (3)		1/1/19 - 12/			Co	mplete
			1/1/20 - 12/				
			1/1/21 - 12/	31/21		<i>i</i> `	
	erbicides and PCBs-Phase II (SOC2)						three years
	Point (Sampling Point ID)		Monitoring		ollection Period	-	ance Status
ENTRY PO	DINT (3)		1/1/17 - 12/	31/19		Co	mplete

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWS Name** Classification Population Owner Type Primary Source PWS ID CT1500102 SHEPAUG MIDDLE/HIGH SCHOOL NTNC 770 I. GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 159 SOUTH STREET 1 Towns Served: WASHINGTON **Monitoring Requirements** Water System Facility: ENTRY POINT (WSF ID: 00700) Pesticides, Herbicides and PCBs-Phase II (SOC2) 1 routine (RT) per three years **Compliance Status** Sampling Point (Sampling Point ID) Monitorina Period **Collection Period** 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 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 three years Sampling Point (Sampling Point ID) **Monitoring Period Collection Period Compliance Status** ENTRY POINT (3) 1/1/18 - 12/31/20 1/1/21 - 12/31/23 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700) Analyte **Monitoring Requirement (Summary Type) Operating Limit** Samples Reg/Month Chlorine Entry Point RDC (EPRD) Minimum: 0.2 MG/L Continuous **Compliance History:** Start Date: 9/1/2013 Monitoring **Operating Limit Monitoring Period Compliance Status: Compliance Status:** 10/1/2019 - 10/31/2019 γ 11/1/2019 - 11/30/2019 Υ 12/1/2019 - 12/31/2019 Υ 1/1/2020 - 1/31/2020 γ 2/1/2020 - 2/29/2020 **Monitoring Requirement (Summary Type) Operating Limit** Samples Req/Month Analyte pН Entry Point pH Monitoring (PHRD) Minimum: 7 PH Daily **Compliance History:** Start Date: 1/1/2002 Monitoring **Operating Limit Monitoring Period Compliance Status:** Compliance Status: 10/1/2019 - 10/31/2019 11/1/2019 - 11/30/2019 12/1/2019 - 12/31/2019 1/1/2020 - 1/31/2020 2/1/2020 - 2/29/2020 **Other Compliance Schedules Compliance Schedule Activity Due Date** Achieved Date DISTRIBUTION SYSTEM MATERIALS EVALUATION 8/31/2019 CROSS CONNECTION SURVEY REPORT 3/1/2021

Connecticut Department of Public Health Drinking Water Section

	Water Qua	ality Monit	oring and	d Con	iplianc	e Sch	ledule		
PWS ID	PWS Name				Classification	on Pop	ulation O	wner Type P	rimary Sourc
СТ1500102	2 SHEPAUG MIDDLE/HIGH SC	CHOOL			NTNC		770	L	GW
	ess (where applicable)		Service	Residen	tial Comm	ercial	Industrial	Combined	Agricultura
159 SOUTH	H STREET		Connections	1					
Towns Serv	ved: WASHINGTON								
	Water S	System Facili	ity and Sar	npling	Point In	vento	ory		
Water						Total	Lead an	d	
	Water System Facility	Sampling Point		nt		Coliforn			Stag
Facility ID		ID	Description		Status	Rule	Rule Tie	er Asbestos	WQP 2 DB
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	I SYSTEM	А	Y	2		
		DOWNSTREAM	WITHIN 5 SER	VICE CON	N A				
		SVS001	KITCHEN HAN	DWASH	А	Y	2	Y	
		SVS002	FACULTY OFFI	CE	А	Y	2	Y	
		SVS002 - FA	GENERATED E	Y BATCH	А	Y			
		SVS003	HANDICAP BA	TH MS	А	Y	2	Y	Y
		SVS003 - HA	GENERATED E	Y BATCH	А	Y			
		SVS004	HANDICAP BA	TH HS	А	Y	2	Y	
		SVS004 - HA	GENERATED B	Y BATCH	А	Y			
		SVS005	HOME EC SIN	K	А	Y	2	Y	
		SVS005 - HO	GENERATED E	Y BATCH	А	Y			
		SVS006	KITCHEN SINK	2	А	Y	2	Y	
		SVS007	NURSES ROOF	VI	А	Y	2	Y	
		SVS007 - NU	GENERATED B	Y BATCH	А	Y			
		SVS008	OFFICE BATH		А	Y	2	Y	
		SVS008 - OF	GENERATED E	у ватсн	А	Y			
		SVS009	FACULTY LAD	ES	А	Y	2	Y	
		SVS010	FACULTY MEN	IS	А	Y	2	Y	
		SVS010 - FA	GENERATED E	у ватсн	А	Y			
		SVS011	M.S. OFFICE B	ATH	А	Y	2	Y	
		SVS012	FRONT OFFICE		А	Y	2	Y	
		SVS013	FACULTY BATI	4	А	Y	2	Y	
		SVS014	CUSTODIAL BA	ATH	А	Y	2	Y	
		SVS014 - CU	GENERATED E	Y BATCH	А	Y			
		SVS015	H.S. BOYS LOC	CKER RM	А	Y	2	Y	
		SVS015 - H.	GENERATED B	Y BATCH	А	Y			
		SVS016	GIRLS POOL L	OCKER RI	A N	Y	2	Y	
		SVS016 - GI	GENERATED B	BY BATCH	А	Y			
		SVS017	SCIENCE LAB	SINK	А	Y	2	Y	
		UPSTREAM	WITHIN 5 SER	VICE CON	N A				
00700	ENTRY POINT	3	ENTRY POINT		А				
10650	WELL #3	2	WELL #3		А				
10651	WELL #1	2	WELL #1		А				
10652	WELL #2	2	WELL #2		А				
53624	UPPER ATMOSPHERIC STORAGE								
53626	LOWER ATMOSPHERIC STORAGE								
53629	HYDROPNEUMATIC STORAGE								
982	SHEPAUG MHS PLANT								

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWSID PWS Name** Classification Population Owner Type Primary Source SHEPAUG MIDDLE/HIGH SCHOOL CT1500102 NTNC 770 I. GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections **159 SOUTH STREET** 1 Towns Served: WASHINGTON **Certified Operator Information** Water System Facility: SHEPAUG MHS PLANT (WSF ID: 982) Facility Classification: CLASS 1 TREATMENT PLANT Certification Certification(s) **Operator Name Operator Type** 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 M. ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS I 12/31/2022 WATER TREATMENT PLANT OPERATOR - CLASS II 12/31/2022 **Contact Information** Organization Job Title Name Mr. Donald J. O'leary Regional School District - 12 Facility Director Mailing Address Line One Mailing Address Line Two State Zip Code City 11A School St СТ Washington 06794 **Business Phone** Extension Mobile Phone **Emergency Phone** Email Address Fax 860-868-6174 860-868-6103 860-868-6100 olearyd@region-12.org Contact Role(s): Administrative Contact Name Organization Job Title Ms. Megan Bennett Regional School District #12 Superintendent Mailing Address Line One Mailing Address Line Two City State Zip Code 11A School St Washington Depot СТ 06794 Email Address **Business Phone** Extension Fax Mobile Phone **Emergency Phone** 860-868-6100 860-868-6103 860-671-9028 bennettm@region-12.org 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

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWS Name** Classification Population Owner Type Primary Source PWS ID Р CT1500182 MAYFLOWER INN NTNC 109 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 118 WOODBURY ROAD 10 Towns Served: WASHINGTON **Monitoring Requirements** Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Chlorine Residual (1012) 1 routine (RT) per month Sampling Point (Sampling Point ID) **Compliance Status Monitoring Period Collection Period** 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 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 Asbestos (1094) 1 routine (RT) per nine years Sampling Point (Sampling Point ID) Monitoring Period **Collection Period Compliance Status** 1/1/11 - 12/31/19 Select from Inventory of Active Sampling Points Complete 1/1/20 - 12/31/28 1 routine (RT) per year **Total Haloacetic Acids (2456)** Sampling Point (Sampling Point ID) **Monitoring Period Collection Period Compliance Status** KITCHEN SINK #2 (MAYINN009) 1/1/19 - 12/31/19 9/1-9/30 Complete 1/1/20 - 12/31/20 9/1-9/30 1/1/21 - 12/31/21 9/1-9/30 1 routine (RT) per year Total Trihalomethanes (2950) Sampling Point (Sampling Point ID) **Monitoring Period Collection Period Compliance Status** TEA HOUSE KITCHEN (MAYINN047) 1/1/19 - 12/31/19 9/1-9/30 Complete 1/1/20 - 12/31/20 9/1-9/30 1/1/21 - 12/31/21 9/1-9/30 Total Coliform (3100) 1 routine (RT) per month **Collection Period Compliance Status** Sampling Point (Sampling Point ID) **Monitoring Period** Select from Inventory of Active Sampling Points 10/1/19 - 10/31/19 Complete Complete 11/1/19 - 11/30/19 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 4/1/20 - 4/30/20 5/1/20 - 5/31/20 6/1/20 - 6/30/20 7/1/20 - 7/31/20

	Connecticut Departme					0			ection	
	Water Quality N	Aonitoring and	d Com	npl	iance	Sc	hedul	le		
PWS ID	PWS Name			Clas	sificatior	n Po	pulation	Ow	ner Type P	rimary Source
CT1500182	MAYFLOWER INN				NTNC		109		Р	GW
Local Address	(where applicable)	Service	Resident	tial	Commer	cial	Industri	al	Combined	Agricultural
118 WOODBU	RY ROAD	Connections	10							
Towns Served:	: WASHINGTON									
	T	Monitoring Requ	ireme	nts						
Water Syster	m Facility: DISTRIBUTION SYSTEM	(WSF ID: 00600)								
Total Colifor	rm (3100)							1 rc	outine (RT)	per month
Sampling	Point (Sampling Point ID)		Monitori	ng Po	eriod	Colle	ection Pe	riod	Compl	ance Status
			8/1/20 -	8/31	L/20					
			9/1/20 -	9/30)/20					
Lead And Co	opper (PBCU)						5 rou	utin	e (RT) per	three years
Sampling	Point (Sampling Point ID)		Monitori	ng Po	eriod	Colle	ection Pe	riod	Compl	ance Status
Select fro	om Inventory of Active Sampling Points		1/1/19 - 1	12/3	1/21		6/1-9/30			
			1/1/22 - 1	12/3	1/24		6/1-9/30			
Physical Par	ameters (PPS)							1 rc	outine (RT)	per month
Sampling	Point (Sampling Point ID)		Monitori	ng Po	eriod	Colle	ection Pe	riod	Compl	ance Status
Select fro	om Inventory of Active Sampling Points	-	10/1/19 -	10/3	31/19				Co	mplete
		-	11/1/19 -	11/3	30/19				Co	mplete
		-	12/1/19 -	12/3	31/19				Co	mplete
			1/1/20 -	1/31	L/20				Co	mplete
			2/1/20 -	2/29	9/20				Co	mplete
			3/1/20 -	3/31	L/20					
			4/1/20 -	4/30	0/20					
			5/1/20 -	5/31	L/20					
			6/1/20 -	6/30	0/20					
			7/1/20 -	7/31	L/20					
			8/1/20 -	8/31	L/20					
			9/1/20 -	9/30	0/20					
Water Syster	m Facility: ENTRY POINT (WSF ID:	00700)								
Inorganic Ch	nemicals (IOCS)						1 rou	utin	e (RT) per	three years
Sampling	Point (Sampling Point ID)		Monitori	ng Po	eriod	Colle	ection Pe	riod	Compl	ance Status
ENTRY PC	DINT (3)		1/1/17 - 1		-				Co	mplete
			1/1/20 - 1	12/3	1/22					
			1/1/23 - 1	12/3	1/25					
Nitrate And	Nitrite (NOX)							1	routine (F	RT) per year
	Point (Sampling Point ID)		Monitori	_		Colle	ection Pe	riod		ance Status
ENTRY PC	DINT (3)		1/1/19 - 1						Co	mplete
			1/1/20 - 1		-					
			1/1/21 - 3	12/3	1/21					
-	Ierbicides and PCBs-Phase II (SOC2	•								three years
	Point (Sampling Point ID)		Monitori	-		Colle	ection Pe	riod	-	ance Status
ENTRY PC	DINT (3)		1/1/17 - 1						Co	mplete
			1/1/20 - 1							
			1/1/23 - 1	12/3	1/25					
-	Herbicides and PCBs-Phase V (SOC	•								three years
Sampling	Point (Sampling Point ID)		Monitori	ng Po	eriod	Colle	ection Pe	riod	Compl	ance Status

	Connecticut Departr				-				ection	
		Monitoring and	u con			1				
PWS ID	PWS Name							Ow		Primary Sourc
CT1500182	MAYFLOWER INN				NTNC	10		<u> </u>	Р	GW
	(where applicable)	Service	Residen	tial	Commerci	ial In	dustri	al	Combine	d Agricultura
118 WOODBU		Connections	10							
Towns Served:	WASHINGTON									
		Monitoring Requ	iireme	nts						
-	m Facility: ENTRY POINT (WSF I Herbicides and PCBs-Phase V (SC	-					1 rou	itin	o (PT) po	r three years
-	Point (Sampling Point ID)	•	Monitori	ina P	Period C	ollecti				liance Status
ENTRY PC			1/1/17 -	_		oncern	0111 01	100		Complete
	5		1/1/20 -							ompiere
			1/1/23 -		-					
Organic Che	micals (VOCS)		1, 1, 20	12,0			1 rou	itin	o (RT) no	r three years
-	Point (Sampling Point ID)		Monitori	ina P	Period C	ollecti			· · ·	liance Status
ENTRY PC			1/1/17 -	_		5				Complete
			1/1/20 -							
			1/1/23 -		-					
Water Syster	m Facility: WELL #2 (WSF ID: 10		_, _, _5	, -	_, _ _					
E. Coli (3014								1 rc	utine (R	「) per month
•	+) Point (Sampling Point ID)		Monitori	ina P	Period (ollecti			-	liance Status
WELL #2			10/1/19 -	_		oncern		iiou		Complete
	(2)		11/1/19 -							Complete
			12/1/19 -							Complete
			1/1/20 -							Complete
			2/1/20 -							Complete
			3/1/20 -							ompiere
			4/1/20 -							
			5/1/20 -	-	-					
			6/1/20 -							
			7/1/20 -		-					
			8/1/20 -							
			9/1/20 -							
Water Syster	m Facility: WELL #1 (WSF ID: 10	654)								
E. Coli (3014								1 rc	outine (R	r) per month
•	Point (Sampling Point ID)		Monitori	ing P	Period C	ollecti			-	liance Status
WELL #1			10/1/19 -	_						Complete
			11/1/19 -							omplete
			12/1/19 -							omplete
			1/1/20 -							omplete
			2/1/20 -	2/2	9/20				C	omplete
			3/1/20 -	3/3	1/20					
			4/1/20 -	4/3	0/20					
			5/1/20 -	5/3	1/20					
			6/1/20 -	6/3	0/20					
			7/1/20 -							
			8/1/20 -	8/3	1/20					
			9/1/20 -							

	Conne		epartment of				0		ection		
	PWS Nam		uality Monit	of fing and	1				n a r Turna D		. Course
PWS ID					CI	NTNC			ner Type P P	rimary G\	
CT1500182	MAYFLOW			Sorvico	Decidentia	-				-	vv cultural
Local Address (v 118 WOODBUR		cable)		Service Connections	Residentia 10	Comm	erciai Ir	ndustrial	Combined	Agri	cultural
Towns Served: N		אר		connections	10						
Towns Served.			an Culatana Facil								
		-	er System Facil	ity (WSF) L		nitori	ng keq	luireme	nts		
-	Facility:		r (WSFID: 00700)								
Analyte		-	Requirement (Summa		-	ing Limit			Samples R	-	onth
Chlorine		Entry Point C	Chlorine Residual Mor			um: 0.2	MG/L			ily	
Start Date:	1/1/2017			-	nce History	-	Operati	-	Monito	-	
					ng Period	010	Complia	nce Status	: Complia	ance S	tatus:
					.9 - 10/31/2 .9 - 11/30/2						
					.9 - 11/30/2 .9 - 12/31/2						
) - 1/31/202						
					- 2/29/202						
Analyte		Monitoring I	Requirement (Summa			ing Limit	:		Samples R	eq/M	onth
рН		_	H Monitoring (PHRD		-	um: 6.4 l			-	ily	
Start Date:	12/1/2008		0.		nce History	:	Operati	ng Limit	Monito	•	
				Monitori	ng Period		-	nce Status		-	tatus:
				10/1/201	.9 - 10/31/2	2019					
				11/1/201	9 - 11/30/2	2019					
				12/1/201	.9 - 12/31/2	2019					
					- 1/31/202						
					- 2/29/202						
			Other Co	ompliance	Schedu	les					
Compliance Sch		-			-	e Date		Achieved	Date		
CROSS CONNEC	TION SURV					/2020					
		Wate	er System Facili	ity and San	npling P	oint In	vento	ry			
Water							Total	Lead and			_
System Wate Facility ID	er System F	acility	Sampling Point ID	Sampling Poin Description	t		Coliform Rule	Copper	Asbestos		Stage
-		VCTENA	4	DISTRIBUTION	CVCTENA	<u>Status</u>	Y	Rule Hei	ASDESIOS	WQP	ZUDPK
00000 DIST	RIBUTION S	ISTEIVI	4 DOWNSTREAM			A A	T				
			MAYINN001	MAIN BLDG KI		A	Y	N		Y	
			MAYINN001	MAIN BLDG R		A	Y	N		•	
			MAYINN003	SPEEDWELL H		A	Ŷ	N	Y		
			MAYINN004	STANDISH HO		A	Ŷ	N			
			MAYINN005	BROOK HOUSE		А	Y	Ν			
			MAYINN006	TEA HOUSE		А	Y	Ν			
			MAYINN007	KITCHEN HW S	SINK	А	Y	Ν			
			MAYINN008	MN BLD PREP	KIT SINK	А	Y	Ν			
			MAYINN009	KITCHEN SINK	#2	А	Y	Ν			Y
			MAYINN010	KITCHEN SINK	#5	А	Y	Ν			
			MAYINN011	LOBBY MENS F		А	Y	Ν			
			MAYINN012	LOBBY HC BAT		А	Y	Ν			
			MAYINN013	LOBBY LADIES	ROOM	А	Y	Ν			

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

			0						
PWS ID	PWS Name				Cla	ssification Po	opulation	Owner Type	Primary Source
CT1500182	MAYFLOWER INN					NTNC	109	Р	GW
Local Address (v	where applicable)		Service	Resider	itial	Commercial	Industri	al Combine	ed Agricultural
118 WOODBUR	Y ROAD		Connections	10					
Towns Served: V	WASHINGTON		· · · · · ·						· · ·

	Water	System Facili	ity and Sampling Po	oint Ir	nvento	Г у			
Water					Total	Lead and			
System	Water System Facility		Sampling Point		Coliform	Copper			Stage
acility ID)	ID	Description	Status	Rule		Asbestos	WQP	2 DBP
		MAYINN014	ROOM 21 BATH	A	Y	Ν			
		MAYINN015	ROOM 22 BATH	A	Y	Ν			
		MAYINN016	ROOM 22 SINK	A	Y	Ν			
		MAYINN017	ROOM 23 BATH	Α	Y	Ν			
		MAYINN018	ROOM 24 SINK	А	Y	Ν			
		MAYINN019	ROOM 25 SINK	А	Y	Ν			
		MAYINN020	ROOM 26 BATH	А	Y	Ν			
		MAYINN021	ROOM 27 BATH	А	Y	Ν			
		MAYINN022	ROOM 31 BATH	А		Ν			
		MAYINN023	ROOM 32 BATH	А	Y	Ν			
		MAYINN024	ROOM 33 BATH	А	Y	Ν			
		MAYINN025	ROOM 34 BATH	А	Y	Ν			
		MAYINN026	ROOM 35 BATH	А	Y	Ν			
		MAYINN027	ROOM 36 BATH	А	Y	Ν			
		MAYINN028	ROOM 37 BATH	А	Y	Ν			
		MAYINN029	ROOM 38 BATH	А	Y	Ν			
		MAYINN030	BASEMENT PASTRY ROOM	А	Y	Ν			
		MAYINN031	BASEMENT MENS ROOM	А	Y	Ν			
		MAYINN032	MENS FITNESS SINK	А	Y	Ν			
		MAYINN033	LADIES FITNESS SINK	А	Y	Ν			
		MAYINN034	BASEMENT LADIES ROOM	А	Y	Ν			
		MAYINN035	BASEMENT LOUNGE SINK	А	Y	Ν			
		MAYINN036	SPEEDWELL ROOM 11	А	Y	Ν			
		MAYINN037	SPEEDWELL ROOM 12	А	Y	Ν			
		MAYINN038	SPEEDWELL ROOM 14	А	Y	Ν			
		MAYINN039	SPEEDWELL ROOM 15	А	Y	Ν			
		MAYINN040	SPEEDWELL LL BATH	А		Ν	Y		
		MAYINN041	SPEEDWELL LL MECH RO	А	Y	Ν			
		MAYINN042	STANDISH ROOM 20 BAT	А	Y	Ν			
		MAYINN043	STANDISH ROOM 17 BAT	А	Y	Ν			
		MAYINN044	STANDISH ROOM 18 BAT	А	Y	Ν			
		MAYINN045	STANDISH ROOM 19 BAT	А	Y	Ν			
		MAYINN046	TEA HOUSE BATH #2	A	Ŷ	N			
		MAYINN047	TEA HOUSE KITCHEN	A	Ŷ	N			Y
		UPSTREAM	WITHIN 5 SERVICE CON	A	•				•
00700	ENTRY POINT	3	ENTRY POINT	A					
10653	WELL #2	2	WELL #2	A					
10653	WELL #2	2	WELL #2	A					

C	onnecticut Dep	artmo	nto	f Dublic	- Ц	alth	Dr	inki	nσ	Nato	r So	oction	
C	*								<u> </u>			cuon	
	Water Qu	anty M	IONI	toring a	and	COII						_ [.	
	WS Name							sificati	on Po	-	n Owi		Primary Source
	IAYFLOWER INN							NTNC		109		P	GW
Local Address (who				Service Connectio		Residen	tial	Comm	ercial	Indust	trial	Combine	d Agricultural
118 WOODBURY R				connectio	5115	10							
Towns Served: WA		-			_								
	Water	System	Facil	ity and S	Sam	pling	Poi	int Ir	vent	tory			
Water		- "							Tota		id and		_
	System Facility	Samplin IL	-	Sampling Descriptio					Colifo Rule		pper	Achasta	Stage
Facility ID			, 	Descriptio			S	<u>Status</u>	Rule	e Ru	ie ner	Aspestos	S WQP 2 DBPR
	PHERIC STORAGE												
	ER PUMPS												
985 WATER	TREATMENT							_			_		
		Cer	tified	Operato	or Ir	nform	atio	on					
-	cility: DISTRIBUTION		(WSF I	D: 00600)									
	ion: DISTRIBUTION SYSTE												Certification
Operator Name			tor Typ			tificatio							Expiration
BLACK, RON W.		CHIEF C	PERAT	OR	WA	TER TRE	ATM	ENT P	LANT C	OPERAT	OR - CI	LASS II	6/30/2020
					DIST	RIBUTI	ON S'	YSTEM	I OPER	ATOR -	CLASS	11	6/30/2020
GIORDANO, DAVID) S.	ASSIGN	ED OPE	RATOR	-	RIBUTI		-	-	-			6/30/2020
					WA	TER TRE	ATM	ENT P	LANT C	OPERAT	OR - CI	LASS I	6/30/2020
Water System Fa	cility: WATER TREAT	MENT (W	SF ID:	985)									
Facility Classificat	ion: CLASS 1 TREATMENT	PLANT											Certification
Operator Name			tor Typ			tificatio							Expiration
BLACK, RON W.		CHIEF C	PERAT	OR	WA	TER TRE	ATM	ENT P	LANT C	OPERAT	OR - CI	LASS II	6/30/2020
						RIBUTI							6/30/2020
GIORDANO, DAVID) S.	ASSIGN	ED OPE	RATOR	DIST	RIBUTI	ON S'	YSTEM	I OPER	ATOR -	CLASS	II	6/30/2020
					WA	TER TRE	ATM	ENT P	LANT C	OPERAT	OR - CI	LASS I	6/30/2020
			Cor	ntact Info	orm	ation	l						
Name			0	rganization								Job Title	
Mr. Edward Linsle	у		A	uberge Reso	orts C	ollectio	n		(General	l Mana	ger	
Mailing Address Li	ne One	Mailing	Addres	s Line Two						City		State	Zip Code
118 Woodnury Ro	ad	Route 4	7					Wa	ashingt	on		СТ	06793
Business Phone	Extension Fa	іх	Mob	ile Phone	Em	ergency	Pho	ne Em	ail Ado	dress			
860-868-9466					8	60-868-	9466	ed	ward.li	nsley@	auber	geresorts.	com
Contact Role(s):	Administrative Contact, L	egal Conta	ict, Ow	ner									
Please note the fo	llowing:												
	nfectant concentration mus									n sample	2.		
	eriod is specified, all water q												
	esults, additional monitoring esent by the DWS on or afte												
correspondence	If you have any a												
		/							1			End	of schedule

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

End of schedule

	Connecticut Departmen				<u> </u>			ection	
	Water Quality Mo	onitoring an	d Com	iplia	nce So	chedu	le		
PWS ID	PWS Name			Classif	ication P	opulation	Ow	ner Type P	rimary Source
CT1500312	WASHINGTON PRIMARY SCHOOL				NC	247		Р	GW
Local Address	(where applicable)	Service	Resident	ial Co	mmercial	Industri	ial	Combined	Agricultura
11 A SCHOOL	L STREET	Connections	1						
Towns Served	: WASHINGTON								
	Mo	onitoring Requ	iiremer	nts					
Water Syster	m Facility: DISTRIBUTION SYSTEM (W	VSF ID: 00600)							
Asbestos (1	.094)					1 rc	outir	ne (RT) pe	r nine years
Sampling	y Point (Sampling Point ID)		Monitorin	ng Peri	od Col	lection Pe	riod	Compl	iance Status
Select fro	om Inventory of Active Sampling Points		1/1/11 - 1	12/31/	19			Cc	mplete
			1/1/20 - 1	12/31/2	28				
Total Colifo	rm (3100)					1	L rou	utine (RT)	per quarter
	g Point (Sampling Point ID)		Monitorin	ng Peri	od Col	lection Pe			iance Status
Select fro	om Inventory of Active Sampling Points		7/1/19 -	9/30/1	.9			Co	mplete
			10/1/19 -	12/31/	/19			Co	mplete
			1/1/20 - 3	3/31/2	20			Co	omplete
			4/1/20 -	6/30/2	20				
			7/1/20 -	9/30/2	20				
Lead And Co	opper (PBCU)					5 roi	utin	e (RT) per	three years
Sampling	g Point (Sampling Point ID)		Monitorin	n <mark>g Per</mark> i	od Col	lection Pe	riod	Compl	iance Status
Select fro	om Inventory of Active Sampling Points		1/1/19 - 1	12/31/2	21	6/1-9/30			
			1/1/22 - 1	12/31/2	24	6/1-9/30			
Physical Par	ameters (PPS)					1	L rou	utine (RT)	per quarter
Sampling	g Point (Sampling Point ID)		Monitorin	n <mark>g Per</mark> i	od Col	lection Pe	riod	Compl	iance Status
Select fro	om Inventory of Active Sampling Points		7/1/19 -	9/30/1	.9			Co	mplete
			10/1/19 -	12/31/	/19			Co	mplete
			1/1/20 - 3	3/31/2	20			Co	omplete
			4/1/20 -	6/30/2	20				
			7/1/20 -	9/30/2	20				
Water Syster	m Facility: ENTRY POINT (WSF ID: 00	700)							
Inorganic Ch	nemicals (IOCS)					1 ro	utin	e (RT) per	three years
Sampling	g Point (Sampling Point ID)		Monitorin	n <mark>g Per</mark> i	od Col	lection Pe	riod	Compl	iance Status
ENTRY PO	DINT (3)		1/1/17 - 1	12/31/	19			Cc	mplete
			1/1/20 - 1	12/31/2	22				
			1/1/23 - 1	12/31/2	25				
Nitrate And	Nitrite (NOX)						1	routine (F	RT) per year
Sampling	g Point (Sampling Point ID)		Monitorin	ng Peri	od Col	lection Pe	riod	Compl	iance Status
ENTRY PO	DINT (3)		1/1/19 - 1	12/31/	19			Co	omplete
			1/1/20 - 1	12/31/	20				
			1/1/21 - 1	12/31/	21				
Pesticides, H	Herbicides and PCBs - Phase II & V (SO	OCS)				1 ro	utin		three years
	g Point (Sampling Point ID)		Monitorin	-		lection Pe	riod	-	iance Status
ENTRY PO	DINT (3)		1/1/17 - 1					Co	mplete
			1/1/20 - 1						
			1/1/23 - 1	12/31/	25				
-	micals (VOCS)								three years
Sampling	g Point (Sampling Point ID)		Monitorin	ng Peri	od Col	lection Pe	riod	Compl	iance Status

	Connecticut D	^				<u> </u>		ection	
		Quality Monit	oring and		<u> </u>				
PWS ID	PWS Name			C					rimary Source
CT1500312		RY SCHOOL			NTNC		247	Р	GW
	ress (where applicable)				al Comm	ercial I	ndustrial	Combined	Agricultural
	OOL STREET		Connections	1					
Towns Ser	ved: WASHINGTON								
		Monite	oring Requir	emen	ts				
Water Sys	stem Facility: ENTRY POI	NT (WSF ID: 00700)							
Organic	Chemicals (VOCS)						1 routine	e (RT) per	three years
Samp	oling Point (Sampling Point IL))	Ма	onitoring	g Period	Collec	tion Period	Compli	ance Status
ENTR	Y POINT (3)		1/:	1/17 - 12	2/31/19			Co	mplete
			1/2	1/20 - 12	2/31/22				
			1/2	1/23 - 12	2/31/25				
		Other C	ompliance S	chedu	lles				
Compliand	ce Schedule Activity			Dı	ie Date		Achieved	Date	
SUBMIT LE	AD CONSUMER NOTICE CERT	IFICATE		12/	29/2012				
DISTRIBUT	ION SYSTEM MATERIALS EVA	LUATION		8/3	31/2019				
CROSS CO	NNECTION SURVEY REPORT			3/	1/2020				
	Wat	er System Facili	ity and Same	oling P	oint Ir	vento	ory		
Water		· · · / · · · · · ·				Total	Lead and		
System	Water System Facility	Sampling Point	Sampling Point			Coliform			Stage
Facility ID		ID	Description		Status	Rule	Rule Tier	Asbestos	WQP 2 DBPI
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION S	YSTEM	А	Y			
		DOWNSTREAM	WITHIN 5 SERVIO	CE CON	А				
		UPSTREAM	WITHIN 5 SERVIO	CE CON	А				
		WPS001	STAFF KITCHEN		А	Y	2	Y	
		WPS002	GRADE 1		А	Y	2	Y	
		WPS003	HANDICAP BATH	2	А	Y	2	Y	
		WPS004	MAIN OFFICE		А	Y	2	Y	
		WPS005	NURSES ROOM		А	Y	2	Y	
		WPS006	ROOM 103		A	Y	2	Y	
		WPS007	BOYS MAIN		A	Y	2	Y	
		WPS008	ROOM 108		A	Y	2	Y	
		WPS009	ROOM 109		A	Y	2	Y	
		WPS010	ROOM 110		A	Y	2	Y	
		WPS011	CUSTODIAN		A	Y	2	Y	
		WPS012	ROOM 116		A	Y Y	2	Y	
		WPS013 WPS014	BOYS LAV GIRLS LAV		A A	Y Y	2 2	Y Y	
		WPS014 WPS015	ROOM 118		A	r Y	2	Y Y	
00700	ENTRY POINT	3	ENTRY POINT		A	I	۷	1	
10655	WELL	2	WELL		A				
53630	PRESSURE STORAGE	۷	** LLL		~				
53030		Control	On orretory !	1					
			Operator In	orma	tion				
	stem Facility: DISTRIBUTI		D: 00600)						
-	assification: SMALL WATER S		0	ficetion	(c)				Certification
Operator l	Name	Operator Typ	e Certi	fication	(S)				Expiration
NOTE: This in	nformation has been provided to he	p owners and operators of	public water systems	maintain	compliance	with drink	king water qua	lity monitorir	g requirements.

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWSID PWS** Name Classification Population Owner Type Primary Source Р CT1500312 WASHINGTON PRIMARY SCHOOL NTNC 247 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections **11 A SCHOOL STREET** 1 Towns Served: WASHINGTON **Certified Operator Information** Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Facility Classification: SMALL WATER SYSTEM Certification **Operator Name** Certification(s) **Operator Type** 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 M. ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS I 12/31/2022 WATER TREATMENT PLANT OPERATOR - CLASS II 12/31/2022 **Contact Information** Job Title Name Organization Washington, Town Of Mailing Address Line Two Mailing Address Line One City State Zip Code P O Box 383 СТ Bryan Memorial Town Hall Washington 06794 **Business Phone** Extension **Mobile Phone** Emergency Phone Email Address Fax 860-868-2259 Contact Role(s): Owner Name Organization Job Title Mr. Donald J. O'leary Regional School District - 12 Facility Director Mailing Address Line One Mailing Address Line Two State Zip Code City 06794 11A School St Washington СТ Email Address **Business Phone** Extension Fax Mobile Phone **Emergency Phone** 860-868-6174 860-868-6103 860-868-6100 olearyd@region-12.org Contact Role(s): Administrative Contact Organization Job Title Name Ms. Megan Bennett Regional School District #12 Superintendent Mailing Address Line One Mailing Address Line Two City State Zip Code 11A School St Washington Depot CT 06794 **Business Phone** Extension Fax Mobile Phone Emergency Phone Email Address 860-868-6100 860-868-6103 860-671-9028 bennettm@region-12.org 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

	Connecticut Department	t of Public H	lealth	Dr	inkin	g V	Vater	Sec	tion	
	Water Quality Mo	nitoring an	d Com	npl	iance	Sc	hedul	е		
PWS ID	PWS Name			Clas	sification	n Po	pulation	Owne	r Type P	rimary Source
CT1500343	WASHINGTON MONTESSORI SCHOOL				NTNC		350	I	Р	GW
Local Address	(where applicable)	Service	Resident	tial	Commer	cial	Industria	I C	ombined	Agricultura
240 LITCHFIEL	D TURNPIKE (ROUTE 202)	Connections			1					
Towns Served	: WASHINGTON	÷				·				·
	Мо	nitoring Requ	ireme	nts						
Water Syster	m Facility: DISTRIBUTION SYSTEM (W									
Asbestos (1	094)						1 rou	utine	(RT) pe	r nine years
Sampling	p Point (Sampling Point ID)		Monitori	ng P	eriod	Colle	ection Per	iod	Compl	iance Status
Select fro	om Inventory of Active Sampling Points		1/1/11 - 2	12/3	1/19				Co	mplete
			1/1/20 - 2	12/3	1/28					
Total Colifo	rm (3100)						1	routi	ne (RT)	per quarter
Sampling	g Point (Sampling Point ID)		Monitori	ng P	eriod	Colle	ection Per	iod	Compl	iance Status
Select fro	om Inventory of Active Sampling Points		7/1/19 -	9/30	0/19				Co	omplete
			10/1/19 -						Co	omplete
			1/1/20 -		-					
			4/1/20 -	6/30	0/20					
			7/1/20 -	9/30	0/20					
	opper (PBCU)							5 rc	-	RT) per year
	y Point (Sampling Point ID)		Monitori			Colle	ection Per	iod		iance Status
Select fro	om Inventory of Active Sampling Points		1/1/19 - 3				6/1-9/30		Co	omplete
			1/1/20 - 3				6/1-9/30			
			1/1/21 - 1	12/3	1/21		6/1-9/30			
-	ameters (PPS)									per quarter
	y Point (Sampling Point ID)		Monitori	-		Colle	ection Per	iod		iance Status
Select fro	om Inventory of Active Sampling Points		7/1/19 -							omplete
			10/1/19 -						Co	omplete
			1/1/20 -							
			4/1/20 -		-					
			7/1/20 -	9/30	0/20					
	m Facility: ENTRY POINT (WSF ID: 007	700)								
-	nemicals (IOCS)							-		three years
	Point (Sampling Point ID)		Monitori	_		Colle	ection Per	iod	Compl	iance Status
ENTRY PO	DINT (3)		1/1/18 - 1							
			1/1/21 - 1	12/3	1/23					_
	Nitrite (NOX)								-	RT) per year
	Point (Sampling Point ID)		Monitori	_		Colle	ection Per	iod		iance Status
ENTRY PC	DINT (3)		1/1/19 - 1						Co	omplete
			1/1/20 - 1							
			1/1/21 - 1	12/3	1/21				•	
-	Herbicides and PCBs - Phase II & V (SO	•		-				-		three years
	g Point (Sampling Point ID)		Monitori	-		Colle	ection Per	iod		iance Status
ENTRY PC	JINT (3)		1/1/17 - 1						Co	mplete
			1/1/20 - 1							
• • •			1/1/23 - 1	12/3	1/25				/'	-
-	micals (VOCS) Point (Sampling Point ID)		Monitorii	ng P	eriod	Colle	1 ection Peri			per quarter <i>iance Status</i>

	Connec	cticut Depa	artment of	Public H	lealth	Drink	ting V	Vater	Se	ction	
	1	Water Qua	lity Monit	oring an	d Con	plian	ce Scł	nedul	le		
PWS ID	PWS Name		<u> </u>	0		A				ner Type P	rimary Sou
CT1500343	WASHINGT	ON MONTESSOR	RI SCHOOL			NTNC	2	350		Р	GW
Local Address ((where applic	able)		Service	Residen	tial Comr	mercial	Industri	al	Combined	Agricultu
240 LITCHFIELD	O TURNPIKE (F	ROUTE 202)		Connections			1				
Towns Served:	WASHINGTO	N									
			Monito	oring Requ	iireme	nts					
Water System	n Facility: E		WSF ID: 00700)								
Organic Cher	micals (VOC	CS)						1	l rou	tine (RT)	per quart
Sampling	Point (Sampl	ling Point ID)			Monitori	ng Period	Colle	ction Pe	riod	Compl	ance Statu
ENTRY PO)INT (3)				7/1/19 -	9/30/19				Co	mplete
					10/1/19 -	12/31/19				Co	mplete
					1/1/20 -	3/31/20					
						6/30/20					
					7/1/20 -	9/30/20					
	Mon	thly Water S	System Facil	ity (WSF) l	evel N	/lonitor	ing Re	quire	me	nts	
Water System	n Facility: El	NTRY POINT (V	VSFID: 00700)								
Analyte		Monitoring Requ	uirement (Summa	ary Type)	Оре	rating Lim	it			Samples R	eq/Month
рН		Entry Point pH N	Ionitoring (PHRD)	Mini	mum: 7.0) PH			Da	ily
Start Date:	9/1/2011			-	nce Histo		Opera	ting Lim	it	Monito	-
					ing Perio		Compl	iance St	atus	Complia	ince Statu
					19 - 10/3:						
					19 - 11/30	-					
					19 - 12/3	-					
					0 - 1/31/2 0 - 2/29/2						
			Other Co	ompliance							
Compliance Sc	hedule Activi	tv	other et	mphanee		Due Date		Achie	ved	Date	
-		ERIALS EVALUAT	ION			/31/2019		Active	, veu i	Dute	
CROSS CONNE						3/1/2020					
			ystem Facili	ty and Sar			nvent	orv			
Water			ystelli i delli	cy and our			Total	-	and		
	ter System Fa	cility	Sampling Point	Sampling Poi	nt		Colifor				Sta
Facility ID			ID	Description		Statu	s Rule	Rule	Tier	Asbestos	WQP 2 D
00600 DIST	TRIBUTION SY	STEM	4	DISTRIBUTION	N SYSTEM	А	Y				
			DOWNSTREAM	WITHIN 5 SER	VICE CON	N A					
			UPSTREAM	WITHIN 5 SER	VICE CON	N A					
			WASHMONT-01	-	ROOM	А		Ν		Y	
			WASHMONT-02			А	Y	Ν		Y	
			WASHMONT-03			А	Y	Ν		Y	
			WASHMONT-04			A	Y	N		Y	
			WASHMONT-05			A	Y	N		Y	
			WASHMONT-06			A	Y	N		Y	
			WASHMONT-07			A	Y	N		Y	
			WASHMONT-08			A	Y	N		Y	
			WASHMONT-09			A	Y	N		Y	
			WASHMONT-10	VALL 2 KOON	'I	A	Y	Ν	N	Y	

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWS** Name Classification Population Owner Type Primary Source PWS ID Р CT1500343 WASHINGTON MONTESSORI SCHOOL NTNC 350 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 240 LITCHFIELD TURNPIKE (ROUTE 202) 1 Towns Served: WASHINGTON Water System Facility and Sampling Point Inventory Water **Total** Lead and Sampling Point Sampling Point Coliform Water System Facility System Copper Stage Facility ID ID Description Rule Rule Tier Asbestos WQP 2 DBPR Status WASHMONT-11 JEN'S ROOM N Y Α 00700 ENTRY POINT 3 ENTRY POINT А 10942 WELL #1 2 **WELL #1** Α WELL #2 2 **WELL #2** 10943 А ATMOSPHERIC STORAGE 45959 45961 HYDROPNEUMATIC STORAGE 57801 TREATMENT PLANT **Certified Operator Information** Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Facility Classification: SMALL WATER SYSTEM Certification **Operator Name Operator Type** Certification(s) **Expiration** LEMAY. REALE D. CHIFF OPFRATOR **DISTRIBUTION SYSTEM OPERATOR - CLASS I** 6/30/2020 WATER TREATMENT PLANT OPERATOR - CLASS III 12/31/2022 KILBOURN, ERIC M. ASSIGNED OPERATOR **DISTRIBUTION SYSTEM OPERATOR - CLASS I** 12/31/2022 WATER TREATMENT PLANT OPERATOR - CLASS II 12/31/2022 Water System Facility: TREATMENT PLANT (WSF ID: 57801) Facility Classification: Certification **Operator Name Operator Type** Certification(s) Expiration CHIEF OPERATOR **DISTRIBUTION SYSTEM OPERATOR - CLASS I** LEMAY, REALE D. 6/30/2020 WATER TREATMENT PLANT OPERATOR - CLASS III 12/31/2022 KILBOURN, ERIC M. ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS I 12/31/2022 WATER TREATMENT PLANT OPERATOR - CLASS II 12/31/2022 **Contact Information** Organization Job Title Name Ms. Patricia Werner Washington Montessori School Head of School Mailing Address Line One Mailing Address Line Two City State Zip Code 240 Litchfield Turnpike New Preston СТ 06777 **Business Phone** Extension Fax **Mobile Phone** Emergency Phone Email Address 860-868-0551 860-868-1362 pwerner@washingtonmontessori.org Contact Role(s): Legal Contact, Owner Name Organization Job Title Mr. Erik H. Hawvermale Washington Montessori School Dir. of Facilities Mailing Address Line One Mailing Address Line Two Citv State Zip Code 240 Litchfield Turnpike New Preston 06777 CT **Business Phone** Extension Fax Mobile Phone **Emergency Phone** Email Address 860-868-1362 860-868-0551 107 203-266-7830 ehawvermale@washingtonmontessori.org

Contact Role(s): Administrative Contact

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

	C J	0		1			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1500343	WASHINGTON MONTESSORI SCHOOL			NTNC	350	Р	GW
Local Address	(where applicable)	Service	Resider	ntial Commerc	ial Industri	al Combine	ed Agricultura
240 LITCHFIEL	D TURNPIKE (ROUTE 202)	Connections		1			
Towns Served	: WASHINGTON						
Please note tl	ne following:						
1. The residua	I disinfectant concentration must be measured at th	e same location	and time a	as each total colif	orm sample.		
2. If a Collecti	on Period is specified, all water quality samples must	be collected du	ring the sp	pecified period.			
	on results, additional monitoring may be required (i. ence sent by the DWS on or after the generation dat			1 1			'

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					0			ection	
	Water Quality Mo	nitoring an	d Con					-		
PWS ID	PWS Name					n Pc		٥w		rimary Source
CT1501013	DEVEREUX GLENHOLME SCHOOL - MAI				NTNC		245		P	GW
	(where applicable)	Service Connections	Residen	itial	Commer	rcial	Industri	al	Combined	Agricultura
81 SABBADAY		connections			15					
Towns Served	: WASHINGTON									
	Мо	nitoring Requ	iireme	nts						
Water Syster	m Facility: DISTRIBUTION SYSTEM (W	/SF ID: 00600)								
Asbestos (1	.094)						1 rc	outi	ne (RT) pe	r nine years
Sampling	g Point (Sampling Point ID)		Monitori	ing Pe	eriod	Coll	ection Pe	rioa	l Compli	ance Status
Select fro	om Inventory of Active Sampling Points		1/1/13 -	12/3	1/21					
Total Colifo	rm (3100)						1	L ro	utine (RT)	per quarter
Sampling	g Point (Sampling Point ID)		Monitori	ing Pe	eriod	Coll	ection Pe	rioa	l Compli	ance Status
Select fro	om Inventory of Active Sampling Points		7/1/19 -	9/30	0/19				Co	mplete
			10/1/19 -	- 12/3	31/19				Cc	mplete
			1/1/20 -	- 3/31	L/20				Co	mplete
			4/1/20 -	- 6/30	0/20					
			7/1/20 -	9/30	0/20					
Lead And Co	opper (PBCU)						5 roi	utin	e (RT) per	three years
Sampling	g Point (Sampling Point ID)		Monitori	ing Pe	eriod	Coll	ection Pe	rioa	l Compli	ance Status
Select fro	om Inventory of Active Sampling Points		1/1/19 -	12/3	1/21		6/1-9/30			
			1/1/22 -	12/3	1/24		6/1-9/30			
Physical Par	ameters (PPS)						1	L ro	utine (RT)	per quarter
	g Point (Sampling Point ID)		Monitori	_		Coll	ection Pe	rioa	l Compli	ance Status
Select fro	om Inventory of Active Sampling Points		7/1/19 -						Co	mplete
			10/1/19 -	- 12/3	31/19					mplete
			1/1/20 -						Co	mplete
			4/1/20 -							
			7/1/20 -	- 9/30	0/20					
Water Syster	m Facility: ENTRY POINT (WSF ID: 00)	700)								
Inorganic Ch	nemicals (IOCS)						1 roi	utin	e (RT) per	three years
Sampling	g Point (Sampling Point ID)		Monitori	ing Pe	eriod	Coll	ection Pe	rioa	l Compli	ance Status
ENTRY PO	DINT (3)		1/1/17 -	12/3	1/19				Co	mplete
			1/1/20 -							
			1/1/23 -	12/3	1/25					
	Nitrite (NOX)							1	-	T) per year
	g Point (Sampling Point ID)		Monitori	-		Coll	ection Pe	rioa		ance Status
ENTRY PO	DINT (3)		1/1/19 -	-					Co	mplete
			1/1/20 -	-						
			1/1/21 -	12/3	1/21					
	Herbicides and PCBs-Phase II (SOC2)									three years
	y Point (Sampling Point ID)		Monitori	-		Coll	ection Pe	rioa		ance Status
ENTRY PO	DINT (3)		1/1/17 -		•					
			1/1/20 -							
			1/1/23 -	12/3	1/25					
	Herbicides and PCBs-Phase V (SOC5)									three years
	y Point (Sampling Point ID)		Monitori	-		Coll	ection Pe	rioa		ance Status
ENTRY PO	DINT (3)		1/1/17 -	12/3	1/19	Comple				

	Connecticut Dep	artment of	f Public H	ealth D	rink	ing W	ater Se	ction		
	Water Ou	ality Monit	oring and	l Comp	lianc	e Sch	edule			
PWS ID	PWS Name	5	0				lation Own	er Type P	rimary S	ource
CT1501013	DEVEREUX GLENHOLME SC	HOOL - MAIN CA	MPUS		NTNC	2	45	P	GW	
Local Address (v	where applicable)		Service	Residential	Comm	nercial Ir	ndustrial	Combined	Agricu	ltural
81 SABBADAY L	ANE		Connections		1	5				
Towns Served: V	WASHINGTON									
			oring Requi	irement	S					
	Facility: ENTRY POINT (<i></i>	-	
	erbicides and PCBs-Phase	V (SOC5)					1 routine		-	
Sampling I	Point (Sampling Point ID)			Monitoring		Collect	ion Period	Compli	ance Sto	itus
				L/1/20 - 12/ L/1/23 - 12/	-					
Organic Chan	nicola (VOCS)		-	1/1/23 - 12/	31/25		1 routino	(DT) por	throo w	0.0.FC
Organic Chen	Point (Sampling Point ID)			Monitoring	Period	Collect	1 routine ion Period	· · ·	iance Sta	
ENTRY POI				L/1/18 - 12/		conect	ion r enou		mplete	itus
				L/1/21 - 12/					mpiere	
		Other C	ompliance							
Compliance Sch	nedule Activity			Due	e Date		Achieved L	Date		
SUBMIT LEAD C	CONSUMER NOTICE CERTIFIC	ATE		12/2	9/2012					
CROSS CONNEC	TION SURVEY REPORT			3/1	/2020					
	Water S	System Facili	ity and Sam	npling Po	oint Ir	vento	ry			
Water						Total	Lead and			
	er System Facility	Sampling Point		t		Coliform	Copper			tage
Facility ID		ID	Description		Status		Rule Tier	Asbestos	WQP 2	DBPR
00600 DIST	RIBUTION SYSTEM	4	MAIN CAMPUS	5	A	Y				
		DEVGLEN001			A	Y	1			
		DEVGLEN002			A	Y Y	1			
		DEVGLEN003 DEVGLEN004	GLENHOLM		A	Y Y	1 1			
		DEVGLEN004 DEVGLEN005	PUEBLO		A A	Y	1			
		DOWNSTREAM		/ICE CON	A	•	-			
		UPSTREAM	WITHIN 5 SERV		A					
00700 ENT	RY POINT	3	ENTRY POINT	-	A					
1004 WEL	L1	2	WELL 1		А					
45428 PRES	SSURE STORAGE									
60316 WEL	L2	2	WELL 2		А					
60318 ATM	IOSPHERIC TANK									
		Certified	Operator I	nformat	ion					
Water System	Facility: DISTRIBUTION	SYSTEM (WSF II	D: 00600)							
Facility Classific	cation: SMALL WATER SYSTE	Μ							Certifico	ation
Operator Name	2	Operator Typ	e Ce	rtification(s)				Expira	tion
GRANT, SHANE		CHIEF OPERATO	DR WA	TER TREAT	MENT P	LANT OPE	RATOR - CL	ASS II	9/30/2	
			DIS	TRIBUTION	SYSTEM	1 OPERAT	OR - CLASS I	I	9/30/2	2020

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

	vva	ici Qua	incy m	ionntoi m _a	5 an	u con	npin		Circuu			
PWS ID	PWS Name						Class	fication	Population	Owner Typ	e Pr	imary Sourc
CT1501013	DEVEREUX GLEN	IHOLME SCI	HOOL - M	AIN CAMPUS			N	TNC	245	Р		GW
Local Address (w	here applicable)			Service	е	Resider	ntial C	ommercia	al Industri	al Combi	ned	Agricultura
81 SABBADAY LA	NE			Conne	ections			15				
Towns Served: W	ASHINGTON			·								1
				Contact I	nform	matior	ו					
Name				Organizat	ion					Job Ti	tle	
Mr. Fred Cass				Devereux	-Glenh	olme Sch	ool		Maint Sup	ot		
Mailing Address	Line One		Mailing	Address Line T	wo				City	State	e	Zip Code
81 Sabbaday Lan	e							Washin	gton	СТ		06793
Business Phone	e Extension	Fax		Mobile Phon	e Er	mergency	y Phon	e Email A	ddress			
860-868-7377		860-868	7204			860-868	-7377	fcass@	devereux.o	rg		
Contact Role(s):	Administrative	Contact, Le	gal Conta	ct	·			·				
Please note the	following:											
1. The residual d	sinfectant concent	tration must	be measur	ed at the same lo	ocation	and time a	as each	total colifo	orm sample.			

1. The residual disinfectant concentration must be measured at the same location and time as each total comorn sa

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 Departm					<u> </u>			ection	
	Water Quality	Monitoring and	d Com					-		
PWS ID	PWS Name					n Po	pulation	٥v	vner Type P	rimary Sourc
CT1501143	MAYFLOWER SPA				NTNC		72		Р	GW
	(where applicable)	Service	Resident	tial	Comme	rcial	Industr	ial	Combined	Agricultura
118 WOODBL		Connections			6					
Towns Served	I: WASHINGTON									
		Monitoring Requ	ireme	nts						
Water Syste	m Facility: DISTRIBUTION SYSTEM	M (WSF ID: 00600)								
Chlorine Re	sidual (1012)						-	1 ro	utine (RT)	per quarter
Samplin	g Point (Sampling Point ID)		Monitorii	ng Pe	eriod	Colle	ection Pe	riod	d Compl	iance Status
Select fro	om Inventory of Active Sampling Point	S	7/1/19 -	9/30	/19				Co	omplete
		:	10/1/19 -	12/3	1/19	-			Co	omplete
			1/1/20 -	3/31	/20				Co	omplete
			4/1/20 -	6/30	/20					
			7/1/20 -	9/30	/20					
Asbestos (1	-						1 ro	outi		r nine years
	g Point (Sampling Point ID)		Monitorii	-		Colle	ection Pe	erioc	-	iance Status
Select fro	om Inventory of Active Sampling Point		1/1/11 - 1						Co	omplete
			1/1/20 - 2	12/3:	1/28					
	cetic Acids (2456)								-	RT) per year
	g Point (Sampling Point ID)		Monitorii	_			ection Pe		-	iance Status
LL TREAT	IMENT PREP (MAYSPA010)		1/1/19 - 1		-		9/1-9/30		Co	omplete
			1/1/20 - 2		-		9/1-9/30			
			1/1/21 - 1	12/3:	1/21		9/1-9/30			
	omethanes (2950)			_					-	RT) per year
	g Point (Sampling Point ID)		Monitorii	-			ection Pe		-	iance Status
LL ALLER	TON LOCKER 1 (MAYSPA008)		1/1/19 - 1		-		9/1-9/30		Co	omplete
			1/1/20 - 1				9/1-9/30			
	(24.00)		1/1/21 - 1	12/3	1/21		9/1-9/30			
Total Colifo	• •				a uta al	Call				per quarter
	g Point (Sampling Point ID)		Monitorii 7/1/19 -	-		Com	ection Pe	rioc	_	iance Status
Select In	om Inventory of Active Sampling Point		10/1/19 -							omplete omplete
			1/1/20 -							omplete
			4/1/20 -							mpiete
			7/1/20 -							
Lead And C	opper (PBCU)		,,1,20-	5,50	, 20		5 ro	utin	e (RT) ner	three years
	g Point (Sampling Point ID)		Monitorii	na Pé	eriod	Coll	ection Pe			iance Status
	om Inventory of Active Sampling Point		1/1/17 - 1	_			6/1-9/30			
	opper (PBCU)								5 routine (I	RT) per year
	g Point (Sampling Point ID)		Monitoriı	ng Pe	eriod	Colle	ection Pe		-	iance Status
	om Inventory of Active Sampling Point		1/1/19 - 1	_			6/1-9/30			mplete
	· · · · ·		1/1/20 - 2				6/1-9/30			
			1/1/21 - 2	12/3:	1/21		6/1-9/30)		
Physical Pa	rameters (PPS)						:	1 ro	utine (RT)	per quarter
-	g Point (Sampling Point ID)		Monitorii	ng Pe	eriod	Colle	ection Pe			iance Status
Select fro	om Inventory of Active Sampling Point	S	7/1/19 -	9/30	/19				Co	omplete
			10/1/19 -	12/3	1/19				Co	mplete

PWS ID	PWS Name	Clas	sification Population Ov	wner Type Primary Sourc
CT1501143	MAYFLOWER SPA		NTNC 72	P GW
ocal Address	(where applicable)	Service Residential	Commercial Industrial	Combined Agricultur
.18 WOODBL	JRY ROAD	Connections	6	
owns Served	I: WASHINGTON	· · · · ·		1
		Monitoring Requirements		
Nater Syste	m Facility: DISTRIBUTION SYSTE	M (WSF ID: 00600)		
Physical Pa	rameters (PPS)		1 rc	outine (RT) per quarte
Sampling	g Point (Sampling Point ID)	Monitoring Pe	eriod Collection Period	d Compliance Status
		1/1/20 - 3/31	1/20	Complete
		4/1/20 - 6/30	0/20	
		7/1/20 - 9/30	0/20	
Nater Syste	m Facility: ENTRY POINT (WSF I	D: 00700)		
-	hemicals (IOCS)			ne (RT) per three years
	g Point (Sampling Point ID)	Monitoring Po		
ENTRY P	OINT (3)	1/1/17 - 12/3		Complete
		1/1/20 - 12/3		
		1/1/23 - 12/3		
	Nitrite (NOX)	Monitoring D		1 routine (RT) per year d Compliance Status
ENTRY P	g Point (Sampling Point ID)	Monitoring Po 1/1/19 - 12/3		Compliance Status Complete
ENIRTP		1/1/19 - 12/3		Complete
		1/1/20 - 12/3		
Pesticides I	Herbicides and PCBs - Phase II & V			ne (RT) per three years
-	g Point (Sampling Point ID)	Monitoring P		
ENTRY P		1/1/17 - 12/3		Complete
		1/1/20 - 12/3	1/22	· ·
		1/1/23 - 12/3	1/25	
Organic Che	emicals (VOCS)		1 routir	ne (RT) per three years
Sampling	g Point (Sampling Point ID)	Monitoring P	eriod Collection Period	d Compliance Status
ENTRY P	OINT (3)	1/1/17 - 12/3	1/19	Complete
		1/1/20 - 12/3		
		1/1/23 - 12/3	1/25	
	m Facility: WELL 1 (WSF ID: 528	83)		
E. Coli (301	•			outine (RT) per quarte
	g Point (Sampling Point ID)	Monitoring Po		
WELL 1 (2)	7/1/19 - 9/30		Complete
		10/1/19 - 12/3		Complete
		1/1/20 - 3/31		Complete
		4/1/20 - 6/30	-	
		7/1/20 - 9/30 m Facility (WSF) Level Mon	·	

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWS Name** Classification Population Owner Type Primary Source PWS ID Р CT1501143 MAYFLOWER SPA NTNC 72 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 118 WOODBURY ROAD 6 Towns Served: WASHINGTON Water System Facility: ENTRY POINT (WSFID: 00700) Monitoring Requirement (Summary Type) **Operating Limit** Samples Reg/Month Analyte Chlorine Entry Point Chlorine Residual Monitoring (CHLR) Minimum: 0.2 MG/L Daily **Compliance History:** Start Date: 8/1/2017 Monitoring **Operating Limit Monitoring Period Compliance Status: Compliance Status:** 10/1/2019 - 10/31/2019 11/1/2019 - 11/30/2019 12/1/2019 - 12/31/2019 1/1/2020 - 1/31/2020 2/1/2020 - 2/29/2020 **Other Compliance Schedules** Due Date Compliance Schedule Activity Achieved Date 3/1/2020 CROSS CONNECTION SURVEY REPORT Water System Facility and Sampling Point Inventory Water **Total** Lead and System Water System Facility Sampling Point Sampling Point Coliform Copper Stage Description ID Rule Tier Asbestos WQP 2 DBPR Facility ID Rule Status 00600 DISTRIBUTION SYSTEM 4 DISTRIBUTION Α DOWNSTREAM WITHIN 5 SERVICE CON А MAYSPA001 ALLERTON BACK L BAT Δ Υ Ν MAYSPA002 ALLERTON FRT L BATH Α Υ Ν ALLERTON BCK R BATH MAYSPA003 A γ N MAYSPA004 ALLERTON FRT R BATH Α Υ Ν MAYSPA005 SPA LOBBY POWDER RM Α γ N MAYSPA006 SPA BATHROOM AREA A γ N MAYSPA007 SPA BATHROOM AREA A Υ Ν MAYSPA008 LL ALLERTON LOCKER 1 Δ N γ γ MAYSPA009 LL ALLERTON LOCKER 2 A Υ Ν MAYSPA010 LL TREATMENT PREP Α Υ Ν v MAYSPA011 LL HOUSEKEEP CLOSET Δ Ν γ MAYSPA012 LL POWDER RM 1 A Υ Ν MAYSPA013 11 POWDFR RM 2 А Υ Ν Υ MAYSPA014 PREP KITCHEN SINK Α Υ N MAYSPA015 PREP KITCHEN HW SINK Υ Ν Α UPSTREAM WITHIN 5 SERVICE CON А 00700 ENTRY POINT 3 ENTRY POINT A MAYSPA016 **BARN PUMP STATION** A 52883 WELL 1 2 WELL 1 А 52889 ATMOSPHERIC TANKS 52891 PRESSURE TANKS

60900 TREATMENT PLANT

	Connectic	ut Depa	rtme	ent of I	Public	: He	ealth	Dr	inkin	g١	Nater	Se	ction		
	Wa	ter Qual	litv N	A onito	ring a	nd	Com	npl	iance	Sc	hedul	e			
PWS ID	PWS Name	V	- 5		0				sification		1		ner Type	Prim	ary Source
CT1501143	MAYFLOWER SP	A							NTNC		72		P		GW
Local Address (where applicable)			9	Service	F	Resident	tial	Commerc	ial	Industria	al	Combine	d A	gricultura
118 WOODBUR				(Connectio	ons			6						
Towns Served:	WASHINGTON														
			Cer	tified C	perato	or Ir	nform	atio	on						
Water System	Facility: DISTR	IBUTION SY	STEM	(WSF ID:	00600)										
Facility Classifi	cation:													Се	rtification
Operator Nam	е		Opera	ator Type		Cert	tificatio	n(s)							xpiration
BLACK, RON W			CHIEF C	OPERATOR		WA	TER TRE	ATM	IENT PLA	NT C	PERATOF	R - CL	ASS II	6	/30/2020
						DIST	RIBUTIO	ON S	YSTEM O	PER	ATOR - CL	ASS	П	6	/30/2020
GIORDANO, DA	VID S.		ASSIGN	IED OPERA	TOR	DIST	RIBUTIO	ON S	YSTEM O	PER	ATOR - CL	ASS	II	6	/30/2020
						WA	TER TRE	ATM	IENT PLA	NT C	PERATOF	R - CL	ASS I	6	/30/2020
Water System	Facility: TREA	MENT PLA	NT (W	SF ID: 60	900)										
Facility Classifi	cation: CLASS 1 TI	REATMENT P	LANT											Се	rtification
Operator Nam	е		Opera	ator Type		Cert	tificatio	n(s)							xpiration
BLACK, RON W			CHIEF C	OPERATOR		WA	TER TRE	ATM	IENT PLAN	NT C	PERATOR	۲ - CL	ASS II	6	/30/2020
						DISTRIBUTION SYSTEM OPERATOR - CLASS II 6/30/20								/30/2020	
GIORDANO, DA	VID S.		ASSIGN	IED OPERA	TOR	DIST	RIBUTIC	ON S	YSTEM O	PER	ATOR - CL	ASS.	II	6	/30/2020
						WA	TER TRE	ATM	IENT PLAN	NT C	PERATOF	R - CL	ASS I	6	/30/2020
				Conta	act Info	orm	ation								
Name				Org	anization								Job Title	9	
Mr. Edward Liı	nsley			Aub	erge Resc	orts C	ollectio	n		(General N	lana	ger		
Mailing Addres	s Line One		Mailing	g Address I	ine Two						City		State	Zi	p Code
118 Woodnury	Road		Route 4	47					Wash	ingt	on		СТ	(06793
Business Pho	ne Extension	Fax		Mobile	Phone	Eme	ergency	Pho	ne Email	Adc	lress				
860-868-946	56					8	60-868-9	9466	6 edwa	rd.li	nsley@au	iberg	geresorts.	com	
Contact Role(s)	: Administrative	Contact, Leg	al Conta	act, Owne	r										
Please note th	e following:														
	disinfectant concen									forn	n sample.				
	n Period is specified														
	on results, additional														
corresponde	ence sent by the DW	s on or after th Nave any que											a in this sc	nedul	e.

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

End of schedule