	Connecticut Dep					0			ction	
		ality Monit	oring an		<u> </u>					
PWS ID	PWS Name			(		ation Pop		Own		rimary Source
CT1530024				5	NC		25		P	GW
	ress (where applicable)		Service Connections	Residenti	al Com	mercial	Industria	al	Combined	Agricultural
	I POND ROAD		Connections			1				
Towns Serv	ved: WATERTOWN			-				_		
Water Sys	stem Facility: <b>DISTRIBUTION</b>		oring Requ D: 00600)	iiremen	ts					
•	iform (3100)	•	•				1	rou	tine (RT)	per quarter
	oling Point (Sampling Point ID)			Monitorin	g Period	d Colle	ction Per			ance Status
	t from Inventory of Active Samplin	ng Points		7/1/19 - 9						mplete
	·		_	10/1/19 - 1		<del>_</del>			Co	mplete
				1/1/20 - 3						
				4/1/20 - 6						
				7/1/20 - 9	-					
Physical I	Parameters (PPS)						1	rou	tine (RT)	per quarter
	lling Point (Sampling Point ID)			Monitorin	g Period	d Colle	ction Per	riod	Compli	ance Status
Select	t from Inventory of Active Sampli	ng Points		7/1/19 - 9					Co	mplete
				10/1/19 - 1		9			Со	mplete
				1/1/20 - 3						
				4/1/20 - 6						
				7/1/20 - 9	/30/20					
•	stem Facility: ENTRY POINT	(WSF ID: 00700)								
	and Nitrite (NOX)								=	RT) per year
	oling Point (Sampling Point ID)			Monitorin			ction Per	riod		ance Status
ENTR	Y POINT (3)			1/1/19 - 1					Со	mplete
				1/1/20 - 1	-					
				1/1/21 - 1				_		
		Other C	ompliance	Schedu	ıles					
Complianc	e Schedule Activity			D	ue Date		Achie	ved L	Date	
RESPOND 7	TO SANITARY SURVEY			9/	29/2019	)				
CROSS CON	NNECTION SURVEY REPORT			3/	1/2020					
	Water	System Facili	ity and Sar	mpling I	oint	Invent	ory			
Water						Total	Lead (	and		
	Water System Facility	Sampling Point		nt		Colifori				Stage
Facility ID		ID	Description		Statu		Rule	Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION		Α	Υ				
		DOWNSTREAM			Α					
		UPSTREAM	WITHIN 5 SER		Α					
	ENTRY POINT	3	ENTRY POINT		Α					
	WELL	2	WELL		Α					
61555	ATMOSPHERIC STORAGE									
61557	TREATMENT PLANT									
		Con	tact Inform	mation						
Name		0	rganization						Job Title	
Mr. Chris P	Pallatto	W	aterbury YMC	Α		S	enior Pro	gra,	Dir.	
Mailing Ad	ldress Line One	Mailing Addres	s Line Two				City		State	Zip Code

	Connectic	ut Depa	rtment o	of Public	Health	n Drii	nking	Water S	Section	l
	Wa	ter Qua	lity Moni	itoring a	and Cor	nplia	nce S	chedule	!	
PWS ID	PWS Name					Classif	ication F	Population O	wner Type	Primary Source
CT1530024	CAMP MATAUC	НА				N	IC	25	Р	GW
Local Address (wi	nere applicable)			Service	Resider	ntial Co	mmercia	Industrial	Combin	ed Agricultural
270 SMITH POND	ROAD			Connectio	ons		1			
Towns Served: W				·	·				·	
136 West Main S	reet	1					Watrebi	ury	СТ	06702
Business Phone	Extension	Fax	Mo	bile Phone	Emergenc	y Phone	Email Ad	ddress		
203-754-2181		203-754-9	9095		860-274	-4820	mataucl	na@heca.con	n	
Contact Role(s):	Legal Contact									
Name				Organization					Job Titl	e
Mr. Mike Tedesc	0		•	YMCA Camp	Mataucha			Camping Di	rector	
Mailing Address I	ine One		Mailing Addre	ess Line Two				City	State	Zip Code
136 West Main S	reet						Waterb	ury	СТ	06702
Business Phone	Extension	Fax	Мо	bile Phone	Emergenc	y Phone	Email Ad	ddress	·	
203-754-9622	118						mtedeso	co@waterbu	ryymca.org	
Contact Role(s):	Administrative	Contact								
Name				Organization					Job Titl	е
Mr. Adam Duboi	S		1	YMCA Camp	Mataucha			Outdoor Ce	nter Dir	
Mailing Address I	ine One		Mailing Addre	ess Line Two				City	State	Zip Code
136 West Main S	reet						Waterb	ury	СТ	06702
Business Phone	Extension	Fax	Mo	bile Phone	Emergenc	y Phone	Email Ad	ddress	'	
203-754-9622	118				860-706	-6036	adubois	@waterbury	ymca.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.

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

End of schedule

	Connecticut Depa	rtmer	nt of Public F	lealth	Drir	nking	Water	Section	
	•		onitoring an			Ŭ			
PWS ID	PWS Name	IILY IVI	officor fing an	u Con					Primary Source
CT1530054	720 THOMASTON ROAD				N		25	P P	GW
	vhere applicable)		Service	Residen		mmercia		-	
2000.710.0100(5			Connections			1			7.8
Towns Served: \	WATERTOWN								
		M	onitoring Requ	uireme	nts				
Water System	Facility: DISTRIBUTION SY								
<b>Total Coliform</b>	n (3100)						1	routine (R	Γ) per quarter
	Point (Sampling Point ID)			Monitori	ng Peri	od Co	llection Per	=	pliance Status
Select from	n Inventory of Active Sampling	Points		7/1/19 -	9/30/1	.9			Complete
				10/1/19 -	12/31/	19			Complete
				1/1/20 -	3/31/2	.0			Complete
				4/1/20 -	6/30/2	.0			
				7/1/20 -	9/30/2	.0			
Physical Para	meters (PPS)						1	routine (R	Γ) per quarter
Sampling F	Point (Sampling Point ID)			Monitori	ng Peri	od Co	llection Per	riod Com	pliance Status
Select from	n Inventory of Active Sampling	Points		7/1/19 -	9/30/1	.9			Complete
				10/1/19 -	12/31/	'19			Complete
				1/1/20 -	3/31/2	.0			Complete
				4/1/20 -	6/30/2	.0			
				7/1/20 -	9/30/2	.0			
Water System	Facility: ENTRY POINT (V	VSF ID: 0	0700)						
Nitrate And N	litrite (NOX)							1 routine	(RT) per year
Sampling F	Point (Sampling Point ID)			Monitori			llection Per	riod Com	pliance Status
ENTRY POI	NT (3)			1/1/19 -	12/31/	19			Complete
				1/1/20 -					Complete
				1/1/21 -					
		Public	Notification F	Require	emen	ts			
			Compliance	Notice	· <u>F</u>	Public No	<u>tification</u>	PN C	<u>ertification</u>
Violation/Situat			Period	Tier		quired	Performed		
<u> </u>	liform M&R Violation		7/1/09 - 9/30/09	2		.5/2010		1/25/201	
•	eters M&R Violation		1/1/18 - 3/31/18	3		0/2019		6/9/201	
Total Coliform N			1/1/18 - 3/31/18	3		0/2019		6/9/201	9
	Water Sy	ystem I	Facility and Sa	mpling	Poin	t Inver	ntory		
Water						To			
•	er System Facility		Point Sampling Po	int		Colif			Stage
Facility ID	DIBLITION OVETTA	ID	Description		Sta			Her Aspest	os WQP 2 DBPR
00600 DIST	RIBUTION SYSTEM	4	DISTRIBUTIO				(		
			REAM WITHIN 5 SEI			A ^			
00700 ENTE	DV DOINT	UPSTRE				<u>^</u>			
	RY POINT	3	ENTRY POINT						
23084 WELI		2	WELL Country to the form			1			
			Contact Infor	mation					
Name			Organization					Job Tit	e
Mr. John M. Da									
Mailing Address	Line One	Mailing A	address Line Two			Couthin	City	State	Zip Code

dominocitode Department of Laboration 21 minutes of the control									
Wa	ter Qual	ity Monite	oring an	nd Con	nplia	ince S	Schedul	e	
PWS Name					Classif	fication	Population	Owner Type	Primary Source
720 THOMASTO	N ROAD				١	1C	25	Р	GW
here applicable)			Service	Resider	ntial Co	ommercia	al Industri	al Combine	ed Agricultural
			Connections	S		1			
/ATERTOWN				·	·			·	·
						Soutiiii	igton	CI	00465
e Extension	Fax	Mobil	e Phone E	Emergency	/ Phone	one Email Address			
						JMDAD	DONA@GN	IAIL.COM	
	Wa PWS Name 720 THOMASTO here applicable) /ATERTOWN	Water Qual PWS Name 720 THOMASTON ROAD here applicable)  /ATERTOWN e Extension Fax	Water Quality Monitor  PWS Name  720 THOMASTON ROAD  here applicable)  /ATERTOWN  e Extension Fax Mobil	Water Quality Monitoring ar  PWS Name  720 THOMASTON ROAD  here applicable)  Service Connection  VATERTOWN  E Extension Fax Mobile Phone	Water Quality Monitoring and Con PWS Name 720 THOMASTON ROAD here applicable) Service Connections VATERTOWN  E Extension Fax Mobile Phone Emergency	Water Quality Monitoring and Complia  PWS Name Classif  720 THOMASTON ROAD  here applicable)  Service Connections  ATERTOWN  E Extension  Fax  Mobile Phone  Emergency Phone	Water Quality Monitoring and Compliance Service NC NC Nere applicable)  Service Connections 1  VATERTOWN  Extension Fax Mobile Phone Emergency Phone Email A	Water Quality Monitoring and Compliance Schedul PWS Name Classification Population NC 25 here applicable) Service Residential Commercial Industric Connections  ATERTOWN Extension Fax Mobile Phone Emergency Phone Email Address	720 THOMASTON ROAD  here applicable)  Service   Residential   Commercial   Industrial   Combine   Connections   1  VATERTOWN  E Extension   Fax   Mobile Phone   Emergency Phone   Email Address

Connecticut Department of Public Health Drinking Water Section

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

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

End of schedule

	Connecticut D	epartment of	Fublic Healt	n Drink	ing Wa	ater Se	ction	
		•	oring and Co					
PWS ID	PWS Name			_			ner Type Primary	Source
CT153006	SUNSET GRILLE			NC	2	5	P GV	٧
Local Add	ress (where applicable)		Service Reside	ntial Comm	nercial In	dustrial	Combined Agric	cultura
834 NORT	THFIELD ROAD		Connections	1	L			
Towns Sei	rved: WATERTOWN			,			,	
		Monite	oring Requirem	ents				
Water Sy	stem Facility: <b>DISTRIBUTIO</b>	ON SYSTEM (WSF I	D: 00600)					
Total Co	liform (3100)					1 rou	tine (RT) per qu	
Sam	pling Point (Sampling Point ID)	)		ring Period	Collecti	on Period	Compliance S	tatus
Selec	ct from Inventory of Active Sam	pling Points	7/1/19	- 9/30/19			Complete	5
			10/1/19	- 12/31/19			Complete	3
			1/1/20	- 3/31/20				
				- 6/30/20				
			7/1/20	- 9/30/20				
	Parameters (PPS)						tine (RT) per qu	
	pling Point (Sampling Point ID)	·		ring Period	Collecti	on Period	Compliance S	tatus
Selec	ct from Inventory of Active Sam	pling Points		- 9/30/19			Complete	
				- 12/31/19			Complete	5
				- 3/31/20				
				- 6/30/20				
				- 9/30/20				
Water Sy	stem Facility: ENTRY POIN	IT (WSF ID: 00700)						
	And Nitrite (NOX)						routine (RT) per	-
	pling Point (Sampling Point ID)	)		ring Period	Collecti	on Period	Compliance S	
ENTF	RY POINT (3)			- 12/31/19			Complete	5
				- 12/31/20				
				- 12/31/21				
		Other C	ompliance Sche	dules				
Complian	ce Schedule Activity			Due Date		<b>Achieved</b>	Date	
CROSS CO	NNECTION SURVEY REPORT			3/1/2020				
	Wate	er System Facili	ity and Samplin	g Point Ir	nventor	У		
Water		-			Total	Lead and		
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper		Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos WQP	2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTE	M A	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CO	ON A				
		UPSTREAM	WITHIN 5 SERVICE CO	ON A				
		WTNREST001	UPPER KITCHEN SINK	1 A	Υ			
		WTNREST002	UPPER KITCHEN SINK	2 A	Υ			
		WTNREST003	UPPER MENS BATHRI	M A	Υ			
		WTNREST004	UPPER LADIES BATHE	RM A	Υ			
		WTNREST005	UPPER BAR SINK 1	Α	Υ			
		WTNREST006	UPPER BAR SINK 2	Α	Υ			
		WTNREST007	LOWER BAR SINK 1	Α	Υ			

Υ

Υ

Υ

Α

WTNREST008 LOWER MENS BATHRM

WTNREST009 LOWER LADIES BATHRM

WTNREST010 LOWER KITCHEN SINK 1

	Water Quality Monito	oring and	d Con	npl	liance S	schedul	le	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1530064	SUNSET GRILLE				NC	25	Р	GW
Local Address (v	vhere applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
834 NORTHFIEL	D ROAD	Connections			1			

Connecticut Department of Public Health Drinking Water Section

	Wa	ter System Facili	ity and Sampling P	oint Ir	nvento	ſy			
Water					Total	Lead and			
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper			Stage
Facility ID	)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
		WTNREST011	LOWER KITCHEN SINK 2	Α	Υ				
00700	ENTRY POINT	3	ENTRY POINT	Α					
22767	WELL	2	WELL	Α					
61559	TREATMENT PLANT								
		Con	tact Information						
Name		O	rganization				Job Title		
Watertow	/n								

Mailing Address Lir	ie One		Mailing	g Address Line Two		City	State	Zip Code
Town Hall Annex			424 Ma	ain Street		Watertown	СТ	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
860-945-5255								

Towns Served: WATERTOWN

000-945-5255										
Contact Role(s): Le	egal Contact, (	Owner								
Name				Organization				Job Title		
Ms. Lisa L. Carew			Town of Watertown Director-Hs&L Svcs							
Mailing Address Lin	e One		Mailing A	ddress Line Two			City State Zip Co			
61 Echo Lake Road						Waterto	wn	СТ	06795	
<b>Business Phone</b>	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress			
860-945-5246		860-945-4	1734		203-704-0896	carew@	watertowno	t.org		
Contact Polo(s): A	dministrativo	Contact			•					

Contact Role(s): Administrative Contact

#### Please note the following:

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

End of schedule

	Connecticut De	enartment of	F Public He	alth l	Drinki	nσ W	ater	Se	ction			
		uality Monit							CCIOII			
PWS ID	PWS Name	dancy Monie	oring and		<u> </u>				er Tyne	Prima	ry Source	
CT153007		)-SHOP/MAINTENAN	ICE		NC		25		P		GW	
Local Add	ress (where applicable)	· · · · · · · · · · · · · · · · · · ·		Residentia	al Comm		ndustria	ıl	Combine	d Ag	ricultural	
	THFIELD ROAD		Connections		2						<u> </u>	
Towns Ser	rved: WATERTOWN					1						
		Monito	oring Requi	emen	ts							
Water Sy	stem Facility: DISTRIBUTIO	N SYSTEM (WSF I	D: 00600)									
<b>Total Co</b>	liform (3100)						1	rou	tine (RT	) per	quarter	
Sam	pling Point (Sampling Point ID)		M	onitoring	g Period	Collect	tion Per	iod	Comp	liance	Status	
Selec	ct from Inventory of Active Sam	pling Points	7	/1/19 - 9	/30/19				C	omple	ete	
			10	/1/19 - 1	2/31/19					Comple	ete	
			1	1/1/20 - 3/31/20								
			4	/1/20 - 6	/30/20							
			7	/30/20								
_	Parameters (PPS)			onitoring			1	rou	tine (RT	•	-	
Sam	pling Point (Sampling Point ID)						tion Per	iod	Comp	liance	Status .	
Selec	ct from Inventory of Active Sam	pling Points		/1/19 - 9	•				C	Comple	ete	
				/1/19 - 1					C	Complete		
				/1/20 - 3								
				/1/20 - 6								
				/1/20 - 9	/30/20							
Water Sy	stem Facility: ENTRY POIN	T (WSF ID: 00700)										
	And Nitrite (NOX)								routine (		-	
-	pling Point (Sampling Point ID)			onitoring		Collect	tion Per	iod			e Status	
ENTF	RY POINT (3)			1/19 - 12						omple	ete	
				1/20 - 12								
			1,	/1/21 - 12	2/31/21			_				
		Other C	ompliance S	chedu	ıles							
Complian	ce Schedule Activity			Di	ue Date		Achie	ved L	Date			
CROSS CO	NNECTION SURVEY REPORT			3/	1/2020							
	Wate	er System Facili	ity and Sam	pling F	oint Ir	vento	ry					
Water						Total	Lead o	and				
System	Water System Facility	Sampling Point	Sampling Point			Coliform					Stage	
Facility ID	)	ID	Description		Status	Rule	Rule	Tier	Asbesto	s WQ	P 2 DBPR	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION S	SYSTEM	Α	Υ						
		CRESTBK001	MAINT LOWER	SINK	Α	Υ						
		CRESTBK002	MAINT BATH UI		Α	Υ						
		CRESTBK003	PRO SHOP MEN		Α	Υ						
		CRESTBK004	PRO SHOP LADI	ES	Α	Υ						
		CRESTBK005	SNACK SHACK		Α	Υ						
			WITHIN 5 SERVI		A							
_		UPSTREAM	WITHIN 5 SERV	CE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT		Α							
22833	PRO-SHOP / MAINTENANCE	2	PS / MA WELL		Α							

WELL

	Water Quali	ity Monitoring and	d Con	npl	liance S	Schedul	le	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1530074	CRESTBROOK PARK PRO-SHO	P/MAINTENANCE			NC	25	Р	GW
Local Address	(where applicable)	Service	Residen	tial	Commercia	al Industri	al Combin	ed Agricultural
834 NORTHFI	ELD ROAD	Connections			2			
Towns Served	: WATERTOWN		•					

Connecticut Department of Public Health Drinking Water Section

				Contact Inf	ormation				
Name				Organization	1			Job Title	
Ms. Lisa L. Carew				Town of Wa	tertown		Director-H	s&L Svcs	
Mailing Address Lin	e One		Mailing	g Address Line Two			City	State	Zip Code
61 Echo Lake Road						Waterto	wn	СТ	06795
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress		
860-945-5246		860-945-	4734		203-704-0896	carew@	watertowno	ct.org	
Contact Role(s): A	dministrative	Contact							
Name				Organization	1			Job Title	
Mr. Robert M Scan	nell			Town of Wa	tertown		Town Man	ager	
Mailing Address Lin	e One		Mailing	g Address Line Two			City	State	Zip Code
Town Manager			424 Ma	ain Street		Waterto	wn	СТ	06795
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress		
860-945-5255						RSCANN	ELL@WATE	RTOWNCT.OF	RG
Contact Role(s): Le	gal Contact			1	1				

## 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.
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End of schedule

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*	t of Public He			_						
Water Quality Mo	nitoring and	Comp	liance	Sched	lule					
PWS ID PWS Name		Cla	assification	Populat	ion O	wner Type Pri	imary Source			
CT1530094 1030 LITCHFIELD ROAD			NC	25		Р	GW			
Local Address (where applicable)		Residential	Commer	cial Indu	strial	Combined	Agricultural			
	Connections									
Towns Served: WATERTOWN										
Mo	nitoring Requi	rement	S							
Water System Facility: DISTRIBUTION SYSTEM (W	/SF ID: 00600)									
Total Coliform (3100)					1 rc	outine (RT) p	er quarter			
Sampling Point (Sampling Point ID)	М	onitoring	Period	Collection	Perio	d Complic				
Select from Inventory of Active Sampling Points	7	/1/19 - 9/3	30/19			Cor	nplete			
	10	/1/19 - 12	/31/19			Cor	nplete			
	1	/1/20 - 3/3	31/20			Cor	nplete			
	4	/1/20 - 6/3	30/20							
	7	/1/20 - 9/3	30/20							
Physical Parameters (PPS)					1 rc	outine (RT) p	er quarter			
Sampling Point (Sampling Point ID)	М	onitoring	Period	Collection	Perio	d Complic	ance Status			
Select from Inventory of Active Sampling Points	7	/1/19 - 9/3	30/19			Cor	nplete			
	10	/1/19 - 12	/31/19			Cor	nplete			
	1	/1/20 - 3/3	31/20			Cor	nplete			
	4	/1/20 - 6/3	30/20							
	7	/1/20 - 9/3	30/20							
Water System Facility: ENTRY POINT (WSF ID: 00	700)									
Nitrate (1040)					1 r	outine (RT) p	er quarter			
Sampling Point (Sampling Point ID)	M	Monitoring Period Collection Period Compliance Status 7/1/19 - 9/30/19 Complete								
ENTRY POINT (3)	7	7/1/19 - 9/30/19								
	10									
	10	/1/19 - 12	/31/13			Cor	nplete			
		/1/19 - 12 /1/20 - 3/3					nplete nplete			
	1		31/20				_			
	1 4	/1/20 - 3/3	31/20 30/20				_			
Nitrite (1041)	1 4	/1/20 - 3/3 /1/20 - 6/3	31/20 30/20				mplete			
Nitrite (1041) Sampling Point (Sampling Point ID)	1 4 7	/1/20 - 3/3 /1/20 - 6/3	31/20 30/20 30/20	Collection		Cor 1 routine (R	mplete			
	1 4 7 <b>M</b>	/1/20 - 3/3 /1/20 - 6/3 /1/20 - 9/3 /0nitoring /1/19 - 12/	31/20 30/20 30/20 Period (31/19	Collection		Cor 1 routine (R' d Complia Cor	T) per year unce Status unplete			
Sampling Point (Sampling Point ID)	1 4 7 <b>M</b> 1/	/1/20 - 3/3 /1/20 - 6/3 /1/20 - 9/3 /0nitoring /1/19 - 12/ /1/20 - 12/	31/20 30/20 30/20 <b>Period</b> (31/19 (31/20	Collection		Cor 1 routine (R' d Complia Cor	T) per year			
Sampling Point (Sampling Point ID)	1 4 7 <b>M</b> 1/	/1/20 - 3/3 /1/20 - 6/3 /1/20 - 9/3 /0nitoring /1/19 - 12/	31/20 30/20 30/20 <b>Period</b> (31/19 (31/20	Collection		Cor 1 routine (R' d Complia Cor	T) per year unce Status unplete			
Sampling Point (Sampling Point ID) ENTRY POINT (3)	1 4 7 <b>M</b> 1/	/1/20 - 3/3 /1/20 - 6/3 /1/20 - 9/3 /0nitoring /1/19 - 12/ /1/20 - 12/ /1/21 - 12/	31/20 30/20 30/20 Period (31/19 (31/20	Collection		Cor 1 routine (R' d Complia Cor	T) per year unce Status unplete			
Sampling Point (Sampling Point ID) ENTRY POINT (3)	1 4 7  M 1 1 1 1 Notification Re	/1/20 - 3/3 /1/20 - 6/3 /1/20 - 9/3 /0nitoring /1/19 - 12/ /1/20 - 12/ /1/21 - 12/	31/20 30/20 30/20 <b>Period</b> (31/19 (31/20 (31/21 <b>ents</b>	Collection	Perio	Cor 1 routine (R' d Complia Cor	T) per year ince Status inplete inplete inplete			
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Sampling Point (Sampling Point ID) ENTRY POINT (3)  Public	1 4 7 M 1 1 1 1 Notification Re Compliance	/1/20 - 3/3 /1/20 - 6/3 /1/20 - 9/3 /0nitoring /1/19 - 12/ /1/20 - 12/ /1/21 - 12/ quirem Notice	31/20 30/20 30/20 Period (31/19 (31/20 (31/21 ents Public I	Notificatio	Perio	1 routine (R' d Complia Cor Cor	T) per year ance Status mplete mplete			
Sampling Point (Sampling Point ID)  ENTRY POINT (3)  Public  Violation/Situation	1 4 7 7 M 1/2 1/2 Notification Re  Compliance Period 7/1/15 - 9/30/15	/1/20 - 3/3 /1/20 - 6/3 /1/20 - 9/3 /0nitoring /1/19 - 12/ /1/20 - 12/ /1/21 - 12/ quirem Notice Tier 3	31/20 30/20 30/20 Period (31/19 (31/20 (31/21 ents Public (Required 1/31/201	Notificatio	Perio	1 routine (R' d Complid Cor Cor	T) per year ance Status mplete mplete			
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Sampling Point (Sampling Point ID)  ENTRY POINT (3)  Public  Violation/Situation  Nitrate M&R Violation  Water System Facility  Sampling P	M  1/ 1/ 1/ Notification Re  Compliance Period 7/1/15 - 9/30/15  acility and Sam	/1/20 - 3/3 /1/20 - 6/3 /1/20 - 9/3 /1/20 - 9/3 /1/19 - 12/ /1/20 - 12/ /1/21 - 12/ quirem Notice Tier 3	31/20 30/20 30/20 Period (31/19 (31/20 (31/21 ents Public (Required 1/31/201	Notification  Perfore  entory  Total Lea	Perio on omed	Cor  1 routine (R' d Complid Cor  Cor  PN Certi Due to DPH 2/10/2017	T) per year ance Status mplete mplete			
Sampling Point (Sampling Point ID)  ENTRY POINT (3)  Public  Violation/Situation  Nitrate M&R Violation  Water System Fa	M 1/ 1/ 1/ Notification Re Compliance Period 7/1/15 - 9/30/15 acility and Sam	/1/20 - 3/3 /1/20 - 6/3 /1/20 - 9/3 /1/20 - 9/3 /1/19 - 12/ /1/20 - 12/ /1/21 - 12/ quirem Notice Tier 3	31/20 30/20 30/20 Period (31/19 (31/20 (31/21 ents Public Interpretation of the control	Notification Perfore  mathematical Legistra (1988)	on med	Cor  1 routine (R' d Complid Cor  Cor  PN Certi Due to DPH 2/10/2017	T) per year ance Status mplete mplete fication Received			
Sampling Point (Sampling Point ID)  ENTRY POINT (3)  Public  Violation/Situation  Nitrate M&R Violation  Water System Facility  Sampling P	M  1/ 1/ 1/ Notification Re  Compliance Period 7/1/15 - 9/30/15  acility and Sam	/1/20 - 3/3 /1/20 - 6/3 /1/20 - 9/3 /1/20 - 9/3 /1/19 - 12/ /1/20 - 12/ /1/21 - 12/ quirem Notice Tier 3 pling Po	31/20 30/20 30/20 Period 31/19 31/20 31/21 ents Public I Required 1/31/201 Dint Inv	Notification Perfore  mathematical Legistra (1988)	on med	Cor  1 routine (R' d Complid Cor Cor  PN Certi Due to DPH 2/10/2017	T) per year ance Status mplete mplete fication Received			
Sampling Point (Sampling Point ID)  ENTRY POINT (3)  Public  Violation/Situation  Nitrate M&R Violation  Water System Facility  Sampling Pacility ID  00600 DISTRIBUTION SYSTEM  4	M 1/ 1/ 1/ Notification Re Compliance Period 7/1/15 - 9/30/15 acility and Sam Point Sampling Point Description	/1/20 - 3/3 /1/20 - 6/3 /1/20 - 9/3 /0nitoring /1/19 - 12/ /1/20 - 12/ /1/21 - 12/ quirem Notice Tier 3 pling Po	31/20 30/20 30/20 Period 31/19 31/20 31/21 ents Public   Required 1/31/201 pint Inv	Notification  Perfore  entory  Total Leadiform ( Rule R	on med	Cor  1 routine (R' d Complid Cor Cor  PN Certi Due to DPH 2/10/2017	T) per year ance Status mplete mplete fication Received			
Sampling Point (Sampling Point ID)  ENTRY POINT (3)  Public  Violation/Situation  Nitrate M&R Violation  Water System Facility  Sampling Pacility ID  00600 DISTRIBUTION SYSTEM  4	M 1/ 1/ 1/ Notification Re Compliance Period 7/1/15 - 9/30/15 Coint Sampling Point Description DISTRIBUTION SEAM WITHIN 5 SERVI	/1/20 - 3/3 /1/20 - 6/3 /1/20 - 9/3 /1/20 - 9/3 /1/19 - 12/ /1/20 - 12/ /1/21 - 12/ <b>quirem</b> Notice Tier 3 pling Po	31/20 30/20 30/20 Period (31/19 (31/20 (31/21 ents Public Insertion (20) A Status	Notification  Perfore  entory  Total Leadiform ( Rule R	on med	Cor  1 routine (R' d Complid Cor Cor  PN Certi Due to DPH 2/10/2017	T) per year ance Status mplete mplete fication Received			

	V	/ater Qua	ality Mo	nitoring	gan	a Comp	olia	nce S	cne	aule			
PWS ID PWS Name						Cl	assifi	cation P	opul	ation Ow	vner Type	Primary Source	
CT1530094	1030 LITCHFI	ELD ROAD						2	2!	5	Р	GW	
Local Address (	where applicat	ole)		Service		Residentia	I Cor	nmercial	In	dustrial	Combine	ed Agricultura	
				Connec	tions			1					
Towns Served:	WATERTOWN												
		Water 9	System Fa	acility and	d Sai	mpling P	oint	Inven	itor	у			
Water								Tot	al	Lead and	<del></del>		
	ter System Faci	lity	Sampling P	oint Samplir	_	int		Colife	orm	Copper		Stage	
Facility ID			ID	Descrip	tion		Sta	tus Ru	le	Rule Tie	r Asbesto	s WQP 2 DBF	
22988 WEI	L #1		2	WELL #:	1		Α						
			(	Contact Ir	ıforı	mation							
Name				Organizatio	on						Job Title	<u> </u>	
Mr. George No	rman			Norman Lt	d. Rea	al Estate			Owr	ner			
Mailing Address Line One Mailing Addr					ress Line Two				City			Zip Code	
1175 Main Street					Wate			Waterto	ertown CT			06795	
Business Pho	ne Extensio	n Fa:	x N	Mobile Phone	Ei	mergency Ph	none	Email Ac	ddres	S			
860-274-678	36					860-274-67	86						
Contact Role(s)	: Administrat	ive Contact, O	wner										
Name				Organizatio	Organization				Job Title				
Mr. Joseph P. \	/amin			Bank Stree	t Ven	tures, LLC							
Mailing Addres	s Line One		Mailing Ad	dress Line Tw	ress Line Two			City			State	Zip Code	
C/O Yamin & G	rant, LLC		83 Bank St	reet				Waterbu	ıry		СТ	06702	
Business Pho	ne Extensio	n Fa:	x 1	Mobile Phone	E	mergency Ph	none	Email Ac	ddres	S			
Contact Role(s)	: Legal Contac	ct, Owner											
Name					Organization				Job Title				
Jpg LLC													
Mailing Address Line One Mailing Addr					0				Cit	У	State	Zip Code	
1175 Main Stre	et							Waterto	wn		СТ	06795	
Business Pho	ne Extensio	n Fa:	x N	Mobile Phone	E	mergency Ph	none	Email Ac	ddres	S			
	i												

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

Contact Role(s): 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.
- 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

		_											
	Connection	ut Depa	ırtmei	nt of	Public	Health	Drink	ing	Wa	iter S	ectic	n	
	Wa	ter Qua	lity M	onit	oring a	nd Com	nnlian	ce S	che	dule			
PWS ID	PWS Name	ter qua	iicy i'i	Omi	or mg a	na don						no Dr	imary Source
CT1539024	VFW POST 5157		Classification Population Owner Type  NC 27 P						GW				
	ss (where applicable)				Service	Residen		nercial		dustrial	Comb	inad	Agricultural
866 THOMA					Connection			1	1110	austriai	COITIE	micu	Agricultural
	ed: WATERTOWN												
TOWNS SCIVE	d. WATERTOWN		D 4	l = :=:±.	ovina Do								
					oring Re	quireme	nts						
•	em Facility: <b>DISTF</b>	RIBUTION SY	YSTEM (	WSF I	D: 00600)								
	orm (3100)												oer quarter
	ng Point (Sampling F						ng Period	Col	llectio	on Perio	d Co		ance Status
Select f	rom Inventory of Act	ive Sampling	Points				9/30/19						mplete
							12/31/19						mplete
							3/31/20					Со	mplete
							6/30/20						
- · · · ·	. (220)					//1/20 -	9/30/20			_		/\	
-	arameters (PPS)	Doint ID)				Manitari	na Dovind	Co	lla ati				per quarter
-	ng Point (Sampling F rom Inventory of Act		Doints				ng Period 9/30/19	Col	ilectio	on Perio	a Co		ance Status
Select I	Tom inventory or Act	ive samping	Politis				12/31/19						mplete mplete
							3/31/20						mplete
							6/30/20					CO	impiete
							9/30/20						
Mater Syst	em Facility: ENTR	V POINT (M	VSE ID: 0	በፖበበነ		7/1/20	3/30/20						
-	d Nitrite (NOX)	110	13. 15. 0	07007							1 routi	no (P	T) per year
	ng Point (Sampling F	Point ID)				Monitori	ng Period	Col	llectio	on Perio		-	ance Status
	POINT (3)	······································				1/1/19 - 12/31/19 Complete							
	(-)					1/1/20 - 12/31/20 Complete							-
							12/31/21						Į
			Dublic	c Not	ification								
			rubii	1				. I: - NI -	.::::			1.6	! C! + !
Violation/Si	tuation			(	ompliance Period	Notice Tier	Requ	olic Not	-	ormed	Due to		i <u>fication</u> Received
E. Coli	tuution			4/1	/17 - 10/3/1		10/3/3		Perj	ormeu	10/13/3		Received
L. COII		Motor C	ustom						tor	.,	10/13/	2010	
		Water Sy	ystem	raciii	ity and 5	ampling	Point i			=			
Water System V	Vater System Facility	,	Samplina	ı Point	Sampling F	Point		Tot Colife		Lead ar Coppe			Stage
Facility ID	vater system racinty	•	Jamping ID		Description 1		Status	_				stos	WQP 2 DBPR
	ISTRIBUTION SYSTEN	1	4		DISTRIBUTI		A	•					
				REAM	WITHIN 5 S								
			UPSTRI			SERVICE CON							
00700 E	NTRY POINT		3		ENTRY POI		А						
	VELL 1		2		WELL 1		Α						
				Con	tact Info	rmation							
Name						mation					Job 1	Ti+lo	
Mr. Robert I	Neuman				rganization FW Post 515	7					100	ille	
IAII - LODGI L			Mailing /		s Line Two	,			Cit	V	Sta	te	Zip Code
Mailing Add	ress line (Ine				3 LIIIC I WU		1		CIL	y	Jid	-	-ip couc
Mailing Add							١٨	/aterto	wn				06795
Mailing Add P.O. Box 338 Business P	3	Fax	866 Thor	mastor		Emergency		/aterto		s	СТ		06795

	Connectic	ut Depa	rtment	of Public	Health	Drir	ıking	, Water	Sec	ction		
	Wa	ter Qua	lity Mon	itoring a	nd Con	nplia	nce S	Schedul	e			
PWS ID	PWS Name					Classifi	cation	Population	Owne	er Type	Primary Source	
CT1539024	VFW POST 5157					N	С	27		Р	GW	
Local Address (w	here applicable)			Service	Residen	ntial Co	mmerci	al Industri	al C	Combine	d Agricultura	
866 THOMASTO	N ROAD			Connection	S		1					
Towns Served: W	_			,								
800-274-1373					000-274	-13/3						
Contact Role(s):	Administrative	Contact, Leg	al Contact									
Name				Organization				Job Title				
Water Oak Post												
Mailing Address	Line One		Mailing Addr	ess Line Two					City State		Zip Code	
Thomaston Rd							Watert	own		СТ	06795-0000	
Business Phone Extension Fax Mo			obile Phone	Emergency	y Phone	Email A						
Contact Role(s):	Owner						•					
	*											

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