

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|--|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1660011 | LAKE HILLS VILLAGE CONDOMINIUMS | C | 102 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 264 LYMAN RD | | | 42 | | | | |
| Towns Served: WOLCOTT | | | | | | | |

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/13 - 12/31/21 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per month | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 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 | | Complete | | |
| | 5/1/20 - 5/31/20 | | Complete | | |
| | 6/1/20 - 6/30/20 | | Complete | | |
| | 7/1/20 - 7/31/20 | | Complete | | |
| | 8/1/20 - 8/31/20 | | Complete | | |
| | 9/1/20 - 9/30/20 | | Complete | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/18 - 12/31/20 | 6/1-9/30 | | | |
| | 1/1/21 - 12/31/23 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per month | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 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 | | Complete | | |
| | 5/1/20 - 5/31/20 | | Complete | | |
| | 6/1/20 - 6/30/20 | | Complete | | |
| | 7/1/20 - 7/31/20 | | Complete | | |
| | 8/1/20 - 8/31/20 | | Complete | | |
| | 9/1/20 - 9/30/20 | | Complete | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | |
| Net Gross Alpha (4000) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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

| | | | | | | | |
|----------------------------------|--|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1660011 | LAKE HILLS VILLAGE CONDOMINIUMS | C | 102 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 264 LYMAN RD | | | 42 | | | | |
| Towns Served: WOLCOTT | | | | | | | |

Monitoring Requirements

| | | | | | | | |
|--|--------------------------|--------------------------|---------------------------------------|--|--|--|--|
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | | | |
| Net Gross Alpha (4000) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| | 1/1/23 - 12/31/25 | | | | | | |
| Uranium (4006) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | | | |
| | 1/1/20 - 12/31/22 | | | | | | |
| | 1/1/23 - 12/31/25 | | | | | | |
| Combined Radium-226/228 (4010) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | | | |
| | 1/1/20 - 12/31/22 | | | | | | |
| | 1/1/23 - 12/31/25 | | | | | | |
| Inorganic Chemicals (IOCS) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/21 | | | | | | |
| | 1/1/22 - 12/31/24 | | | | | | |
| Nitrate And Nitrite (NOX) | | | 1 routine (RT) per year | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | | | | |
| | 1/1/20 - 12/31/20 | | Complete | | | | |
| | 1/1/21 - 12/31/21 | | | | | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | | | |
| | 1/1/20 - 12/31/22 | | | | | | |
| | 1/1/23 - 12/31/25 | | | | | | |
| Organic Chemicals (VOCS) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | | | |
| | 1/1/20 - 12/31/22 | | | | | | |
| | 1/1/23 - 12/31/25 | | | | | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

| | | | | | | | |
|--|--|----------------------------|---------------------------|---------------------------|--|--|--|
| Water System Facility: ENTRY POINT (WSFID: 00700) | | | | | | | |
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month | | | | |
| pH | Entry Point pH Monitoring (PHRD) | Minimum: 7.0 PH | Daily | | | | |
| Start Date: 8/1/2008 | | Compliance History: | Operating Limit | Monitoring | | | |
| | | Monitoring Period | Compliance Status: | Compliance Status: | | | |
| | | 10/1/2019 - 10/31/2019 | | | | | |

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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

| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source |
|-----------|---------------------------------|----------------|------------|------------|----------------|
| CT1660011 | LAKE HILLS VILLAGE CONDOMINIUMS | C | 102 | P | GW |

| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
|----------------------------------|---------------------|-------------|------------|------------|----------|--------------|
| 264 LYMAN RD | | 42 | | | | |

Towns Served: WOLCOTT

Water System Facility: ENTRY POINT (WSFID: 00700)

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---------------------------------------|----------------------------|--------------------------------------|
| pH | Entry Point pH Monitoring (PHRD) | Minimum: 7.0 PH | Daily |
| Start Date: 8/1/2008 | | Compliance History: | Operating Limit |
| | | Monitoring Period | Monitoring Compliance Status: |
| | | 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 | |
| SUBMIT CCR TO THE DEPARTMENT | 6/30/2020 | |
| SUBMIT CCR CERTIFICATION FORM | 8/9/2020 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2024 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|------------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 393 | WELL #1 | 2 | WELL #1 | A | | | | |
| 443 | LAKE HILLS VILLAGE PUMPHOUSE | | | | | | | |
| 60970 | ATMOSPHERIC TANK, FIBERGLASS | | | | | | | |

Certified Operator Information

Water System Facility: LAKE HILLS VILLAGE PUMPHOUSE (WSF ID: 443)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|-------------------|-------------------|--|--------------------------|
| WEID, JEREMIAH J. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 6/30/2022 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 12/31/2021 |

Contact Information

| Name | Organization | Job Title | | | | |
|--|------------------|--------------------------|--------------|-----------------|----------------------|----------|
| Mr. Michael Famiglietti | Cm Property Mgmt | Owner | | | | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| P.O. Box 690 | | | | Southbury | CT | 06488 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 203-264-6598 | 207 | 203-264-6216 | | | mikef@cmproperty.com | |
| Contact Role(s): Administrative Contact | | | | | | |

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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

| | | | | | | | | |
|---------------------------------------|--|---------------------|-------------------------------|-----------------|---------------------------|-----------|--------------|----------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | | |
| CT1660011 | LAKE HILLS VILLAGE CONDOMINIUMS | C | 102 | P | GW | | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural | |
| 264 LYMAN RD | | | 42 | | | | | |
| Towns Served: WOLCOTT | | | | | | | | |
| Name | | | Organization | | | Job Title | | |
| Ms. Karen J Murray | | | Lkae Hills Village Condo Ass. | | | President | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 264 Lyman Rd | | | Unit 1-13 | | | Wolcott | CT | 06716 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| | | | 203-598-6301 | | kjannettymurray@gmail.com | | | |
| 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 ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1661423 | WOLCOTT WATER DEPARTMENT | C | 2,550 | L | SWP | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | | | 676 | | |

Towns Served: WATERBURY, WOLCOTT

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| Chlorine Residual (1012) | | 3 routine (RT) per month | | |
|--|--------------------------|--------------------------------------|--------------------------|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| Select from Inventory of Active Sampling Points | 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 | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| Select from Inventory of Active Sampling Points | 1/1/14 - 12/31/22 | | | |
| Total Coliform (3100) | | 3 routine (RT) per month | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| Select from Inventory of Active Sampling Points | 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 | | | |
| Disinfectant Byproducts - TTHM & HAA5 (DBP) | | 2 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| BEACH RD PUMP STA (WWS005) | 7/1/19 - 9/30/19 | 7/1-7/31 | Complete | |
| | 10/1/19 - 12/31/19 | 10/1-10/31 | Complete | |
| | 1/1/20 - 3/31/20 | 1/1-1/31 | Complete | |
| | 4/1/20 - 6/30/20 | 4/1-4/30 | | |
| 52 HEMPLE DRIVE (WWS007) | 7/1/20 - 9/30/20 | 7/1-7/31 | | |
| | 7/1/19 - 9/30/19 | 7/1-7/31 | Complete | |
| | 10/1/19 - 12/31/19 | 10/1-10/31 | Complete | |

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1661423 | WOLCOTT WATER DEPARTMENT | C | 2,550 | L | SWP | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | | | | 676 | |

Towns Served: WATERBURY, WOLCOTT

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Disinfectant Byproducts - TTHM & HAA5 (DBP) **2 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| | 1/1/20 - 3/31/20 | 1/1-1/31 | Complete |
| | 4/1/20 - 6/30/20 | 4/1-4/30 | |
| | 7/1/20 - 9/30/20 | 7/1-7/31 | |

Lead And Copper (PBCU) **10 routine (RT) per year**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/19 | 6/1-9/30 | Complete |
| | 1/1/20 - 12/31/20 | 6/1-9/30 | |
| | 1/1/21 - 12/31/21 | 6/1-9/30 | |

Physical Parameters (PPS) **3 routine (RT) per month**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 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 | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **SUNRISE DR TREATMENT STATION ENTRY POINT (WSFID: 00701)**

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---|---------------------------|---------------------------|
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: 0.2 MG/L | Daily |
| Start Date: 1/1/2004 | Compliance History: | Operating Limit | Monitoring |
| | 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 | | |

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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

| | | | | | | | |
|----------------------------------|---------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1661423 | WOLCOTT WATER DEPARTMENT | C | 2,550 | L | SWP | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | | | | 676 | |

Towns Served: WATERBURY, WOLCOTT

Water System Facility: BEACH ROAD TREATMENT STATION ENTRY POINT (WSFID: 00702)

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---|---------------------------|---------------------------|
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: 0.2 MG/L | Daily |
| Start Date: 7/1/2004 | Compliance History: | Operating Limit | Monitoring |
| | 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 | 3/1/2020 | |
| SUBMIT CCR TO THE DEPARTMENT | 6/30/2020 | |
| SUBMIT CCR CERTIFICATION FORM | 8/9/2020 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|--|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | TCR REPEAT LOCATION | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | WWS001 | 9 TOWN LINE ROAD | A | | N | | |
| | | WWS002 | SUNRISE PUMP STATION | A | Y | | | |
| | | WWS003 | 3 SUNRISE ROAD | A | | N | | |
| | | WWS004 | 690 WOLCOTT ROAD | A | | N | | |
| | | WWS005 | BEACH RD PUMP STA | A | Y | | | Y |
| | | WWS006 | 44 SANDY LANE | A | | 3 | | |
| | | WWS007 | 52 HEMPLE DRIVE | A | | N | | Y |
| | | WWS008 | 49 SILVER POND | A | Y | N | | |
| | | WWS009 | 40 EDGEMONT LA | A | Y | N | | |
| | | WWS010 | 20 RUSTIC ACRES | A | | 3 | | |
| | | WWS011 | 23 VILLAGE DR | A | | 3 | | |
| WWS012 | 27 MEADOWBROOK LA | A | | 3 | | | | |
| WWS013 | 478 WOCOTT RD | A | Y | | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 00701 | SUNRISE DR TREATMENT STATION ENTRY POINT | 3 | SUNRISE DRIVE | A | | | | |
| 00702 | BEACH ROAD TREATMENT STATION ENTRY POINT | 3 | ENTRY POINT | A | | | | |

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

| | | | | | | | |
|----------------------------------|---------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1661423 | WOLCOTT WATER DEPARTMENT | C | 2,550 | L | SWP | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | | | | 676 | |

Towns Served: WATERBURY, WOLCOTT

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Total Coliform Status | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|---|-------------------|----------------------------|-----------------------|---------------------------|----------|------------------|
| 24661 | INTERCONNECTION - CT1510011 - WATERBURY | | | | | | |
| 48216 | BEACH ROAD PUMP STATION | | | | | | |
| 52639 | SUNRISE STANDPIPE | | | | | | |
| 52645 | BARRY AVE STANDPIPE | | | | | | |
| 620 | SUNRISE DRIVE PUMP STATION | | | | | | |

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: CLASS 1 DISTRIBUTION SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|------------------------|-------------------|---|--------------------------|
| OLMSTEAD, PHILIP J. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2021 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 6/30/2020 |
| COVIELLO, JR., EMIL A. | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS IV | 12/31/2022 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS III | 6/30/2020 |

Water System Facility: SUNRISE DRIVE PUMP STATION (WSF ID: 620)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------------|----------------|--|--------------------------|
| OLMSTEAD, PHILIP J. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2021 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 6/30/2020 |

Water System Facility: BEACH ROAD PUMP STATION (WSF ID: 48216)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------------|----------------|--|--------------------------|
| OLMSTEAD, PHILIP J. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2021 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 6/30/2020 |

Contact Information

| | | | | | | | | |
|-------------------------------|-----------|--------------------------------|--------------------------|-----------------|----------------------|---------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Mr. Philip J. Olmstead | | Wolcott Town Hall - Water Dept | | | Water Administrator | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| C/O Wolcott Town Hall | | | 10 Kenea Avenue | | | Wolcott | CT | 06716 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-879-8141 | | 203-879-8143 | | 203-879-1414 | lbosco@wolcottct.org | | | |
| Contact Role(s): | | Legal Contact | | | | | | |

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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

| | | | | | | | | |
|--|---------------------------------|---------------------|--------------------------------|-----------------|----------------------|-----------|--------------|----------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | | |
| CT1661423 | WOLCOTT WATER DEPARTMENT | C | 2,550 | L | SWP | | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural | |
| | | | | | | 676 | | |
| Towns Served: WATERBURY, WOLCOTT | | | | | | | | |
| Name | | | Organization | | | Job Title | | |
| Ms. Laurie Bosco | | | Wolcott Town Hall - Water Dept | | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 10 Kenea Ave | | | | | | Wolcott | CT | 06716 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 203-879-8141 | | | | | lbosco@wolcottct.org | | | |
| 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.

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 ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1662051 | COUNTRYSIDE APARTMENTS | C | 218 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 109 | | | | |

Towns Served: WOLCOTT

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/13 - 12/31/21 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Lead And Copper (PBCU) | | 10 routine (RT) per six months | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 12/31/20 | | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | |
| | 10/1/19 - 12/31/19 | | Complete | | |
| | 1/1/20 - 3/31/20 | | Complete | | |
| | 4/1/20 - 6/30/20 | | | | |
| | 7/1/20 - 9/30/20 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | |
| Net Gross Alpha (4000) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Uranium (4006) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Combined Radium-226/228 (4010) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete | | |
| | 1/1/20 - 12/31/22 | | | | |
| | 1/1/23 - 12/31/25 | | | | |
| Inorganic Chemicals (IOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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

| | | | | | | | |
|----------------------------------|-------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1662051 | COUNTRYSIDE APARTMENTS | C | 218 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 109 | | | | |

Towns Served: WOLCOTT

Monitoring Requirements

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

| Inorganic Chemicals (IOCS) | 1 routine (RT) per three years | | |
|--|---------------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/18 - 12/31/20 | | Complete |
| | 1/1/21 - 12/31/23 | | |
| Nitrate And Nitrite (NOX) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | Complete |
| | 1/1/21 - 12/31/21 | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Organic Chemicals (VOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **ENTRY POINT (WSFID: 00700)**

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|--|---------------------------|---------------------------|
| Orthophosphate | Entry Point Phosphate Monitoring (PHOS) | Minimum: 0.5 MG/L | 2 |
| Start Date: 7/1/2017 | Compliance History: | Operating Limit | Monitoring |
| | 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 |
|---|-----------------|----------------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2010 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 3/30/2020 | |
| SUBMIT CCR TO THE DEPARTMENT | 6/30/2020 | |
| SUBMIT CCR CERTIFICATION FORM | 8/9/2020 | |
| CROSS CONNECTION EXEMPTION | 3/1/2024 | |

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

| | | | | | | | |
|----------------------------------|-------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1662051 | COUNTRYSIDE APARTMENTS | C | 218 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 109 | | | | |

Towns Served: WOLCOTT

Public Notification Requirements

| Violation/Situation | Compliance Period | Notice Tier | Public Notification | | PN Certification | |
|---|-------------------|-------------|---------------------|-----------|------------------|----------|
| | | | Required | Performed | Due to DPH | Received |
| Pesticides, Herbicides and PCBs - Phase M&R Violation | 1/1/14 - 12/31/16 | 3 | 4/27/2018 | | 5/7/2018 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | CSIDEAPT001 | KITCHEN COMM. BLDG | A | Y | 2 | Y | |
| | | CSIDEAPT002 | MENS RM COMM BLDG | A | Y | 2 | Y | |
| | | CSIDEAPT003 | WOMEN RM COMM BLDG | A | Y | 2 | Y | |
| | | CSIDEAPT004 | OUTSIDE TAP COM BLD | I | Y | 2 | Y | |
| | | CSIDEAPT005 | OUT TAP SENIOR CTR | I | Y | 2 | Y | |
| | | CSIDEAPT006 | BUILDING 1 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT007 | BUILDING 1 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT008 | BUILDING 1 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT009 | BUILDING 1 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT010 | BUILDING 1 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT011 | BUILDING 1 UNIT F | A | Y | 2 | Y | |
| | | CSIDEAPT012 | BUILDING 2 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT013 | BUILDING 2 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT014 | BUILDING 2 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT015 | BUILDING 2 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT016 | BUILDING 2 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT017 | BUILDING 2 UNIT F | A | Y | 2 | Y | |
| | | CSIDEAPT018 | BUILDING 2 UNIT G | A | Y | 2 | Y | |
| | | CSIDEAPT019 | BUILDING 3 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT020 | BUILDING 3 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT021 | BUILDING 3 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT022 | BUILDING 3 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT023 | BUILDING 4 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT024 | BUILDING 4 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT025 | BUILDING 4 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT026 | BUILDING 4 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT027 | BUILDING 4 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT028 | BUILDING 4 UNIT F | A | Y | 2 | Y | |
| | | CSIDEAPT029 | BUILDING 5 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT030 | BUILDING 5 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT031 | BUILDING 5 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT032 | BUILDING 5 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT033 | BUILDING 5 UNIT E | A | Y | 2 | Y | |

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1662051 | COUNTRYSIDE APARTMENTS | C | 218 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 109 | | | | |

Towns Served: WOLCOTT

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | CSIDEAPT034 | BUILDING 5 UNIT F | A | Y | 2 | Y | |
| | | CSIDEAPT035 | BUILDING 6 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT036 | BUILDING 6 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT037 | BUILDING 6 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT038 | BUILDING 6 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT039 | BUILDING 6 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT040 | BUILDING 6 UNIT F | A | Y | 2 | Y | |
| | | CSIDEAPT041 | BUILDING 7 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT042 | BUILDING 7 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT043 | BUILDING 7 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT044 | BUILDING 7 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT045 | BUILDING 7 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT046 | BUILDING 7 UNIT F | A | Y | 2 | Y | |
| | | CSIDEAPT047 | BUILDING 7 UNIT G | A | Y | 2 | Y | |
| | | CSIDEAPT048 | BUILDING 8 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT049 | BUILDING 8 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT050 | BUILDING 8 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT051 | BUILDING 8 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT052 | BUILDING 8 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT053 | BUILDING 9 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT054 | BUILDING 9 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT055 | BUILDING 9 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT056 | BUILDING 9 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT057 | BUILDING 9 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT058 | BUILDING 9 UNIT F | A | Y | 2 | Y | |
| | | CSIDEAPT059 | BUILDING 9 UNIT G | A | Y | 2 | Y | |
| | | CSIDEAPT060 | BUILDING 11 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT061 | BUILDING 11 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT062 | BUILDING 11 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT063 | BUILDING 11 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT064 | BUILDING 11 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT065 | BUILDING 11 UNIT F | A | Y | 2 | Y | |
| | | CSIDEAPT066 | BUILDING 11 UNIT G | A | Y | 2 | Y | |
| | | CSIDEAPT067 | BUILDING 12 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT068 | BUILDING 12 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT069 | BUILDING 12 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT070 | BUILDING 12 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT071 | BUILDING 12 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT072 | BUILDING 12 UNIT F | A | Y | 2 | Y | |

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1662051 | COUNTRYSIDE APARTMENTS | C | 218 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 109 | | | | |

Towns Served: WOLCOTT

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | CSIDEAPT073 | BUILDING 12 UNIT G | A | Y | 2 | Y | |
| | | CSIDEAPT074 | BUILDING 12 UNIT H | A | Y | 2 | Y | |
| | | CSIDEAPT075 | BUILDING 12 UNIT I | A | Y | 2 | Y | |
| | | CSIDEAPT076 | BUILDING 13 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT077 | BUILDING 13 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT078 | BUILDING 13 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT079 | BUILDING 13 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT080 | BUILDING 13 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT081 | BUILDING 13 UNIT F | A | Y | 2 | Y | |
| | | CSIDEAPT082 | BUILDING 13 UNIT G | A | Y | 2 | Y | |
| | | CSIDEAPT083 | BUILDING 13 UNIT H | A | Y | 2 | Y | |
| | | CSIDEAPT084 | BUILDING 14 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT085 | BUILDING 14 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT086 | BUILDING 14 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT087 | BUILDING 14 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT088 | BUILDING 14 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT089 | BUILDING 14 UNIT F | A | Y | 2 | Y | |
| | | CSIDEAPT090 | BUILDING 14 UNIT G | A | Y | 2 | Y | |
| | | CSIDEAPT091 | BUILDING 14 UNIT H | A | Y | 2 | Y | |
| | | CSIDEAPT092 | BUILDING 15 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT093 | BUILDING 15 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT094 | BUILDING 15 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT095 | BUILDING 15 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT096 | BUILDING 15 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT097 | BUILDING 15 UNIT F | A | Y | 2 | Y | |
| | | CSIDEAPT098 | BUILDING 16 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT099 | BUILDING 16 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT100 | BUILDING 16 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT101 | BUILDING 16 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT102 | BUILDING 16 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT103 | BUILDING 16 UNIT F | A | Y | 2 | Y | |
| | | CSIDEAPT104 | BUILDING 16 UNIT G | A | Y | 2 | Y | |
| | | CSIDEAPT105 | BUILDING 16 UNIT H | A | Y | 2 | Y | |
| | | CSIDEAPT106 | BUILDING 17 UNIT A | A | Y | 2 | Y | |
| | | CSIDEAPT107 | BUILDING 17 UNIT B | A | Y | 2 | Y | |
| | | CSIDEAPT108 | BUILDING 17 UNIT C | A | Y | 2 | Y | |
| | | CSIDEAPT109 | BUILDING 17 UNIT D | A | Y | 2 | Y | |
| | | CSIDEAPT110 | BUILDING 17 UNIT E | A | Y | 2 | Y | |
| | | CSIDEAPT111 | BUILDING 17 UNIT F | A | Y | 2 | Y | |

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

| | | | | | | | |
|----------------------------------|-------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1662051 | COUNTRYSIDE APARTMENTS | C | 218 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | 109 | | | | | |

Towns Served: WOLCOTT

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | CSIDEAPT112 | BUILDING 17 UNIT G | A | Y | 2 | Y | |
| | | CSIDEAPT113 | BUILDING 17 UNIT H | A | Y | 2 | Y | |
| | | CSIDEAPT114 | BUILDING 6 UNIT G | A | Y | 2 | Y | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 414 | WELL #1 | 2 | WELL #1 | A | | | | |
| 415 | WELL #2 | 2 | WELL #2 | A | | | | |
| 416 | WELL #3 | 2 | WELL #3 | A | | | | |
| 52366 | ATMOSPHERIC STORAGE | | | | | | | |
| 58359 | BOOSTER PUMPS (VFDS) | | | | | | | |
| 60939 | TREATMENT PLANT | | | | | | | |

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------|----------------|--|--------------------------|
| GRANT, SHANE | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS II | 9/30/2020 9/30/2020 |

Contact Information

| | | | | | | | |
|--------------------------|-----------|--------------------------|--------------|-----------------|---------------------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Ms. Kristie Rizzo | | Beacon Communities | | | Sr. Project Manager | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 60 Center Street | | | | | Waterbury | CT | 06702 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-591-9511 | 202 | 203-591-8505 | | | krizzo@beaconcommunitiesllc.com | | |

Contact Role(s): **Administrative Contact**

| | | | | | | | |
|----------------------------|-----------|--------------------------|--------------|-----------------|-----------------------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. John D. Elliott | | Beacon Communities | | | Vice President | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 60 Center Street | | | | | Waterbury | CT | 06702 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-591-9511 | 200 | 203-591-8505 | | | jelliott@beaconcommunitiesllc.com | | |

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

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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

| | | | | | | |
|----------------------------------|-------------------------------|----------------|------------|------------|----------------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | |
| CT1662051 | COUNTRYSIDE APARTMENTS | C | 218 | P | GW | |
| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | 109 | | | | |

Towns Served: WOLCOTT

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 ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1666011 | AQUARION WATER CO OF CT-TLWC WOODRICH | C | 72 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 150 LYMAN ROAD | | | | | | 27 | |
| Towns Served: WOLCOTT | | | | | | | |

Monitoring Requirements

| | | | | | | | |
|--|--------------------------|--------------------------|---------------------------------------|--|--|--|--|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | | | | | |
| Asbestos (1094) | | | 1 routine (RT) per nine years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| Select from Inventory of Active Sampling Points | 1/1/13 - 12/31/21 | | | | | | |
| Total Coliform (3100) | | | 1 routine (RT) per quarter | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 7/31/19 | | Complete | | | | |
| | 10/1/19 - 12/31/19 | | Complete | | | | |
| | 1/1/20 - 3/31/20 | | Complete | | | | |
| | 4/1/20 - 6/30/20 | | | | | | |
| | 7/1/20 - 9/30/20 | | | | | | |
| Lead And Copper (PBCU) | | | 5 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/21 | 6/1-9/30 | | | | | |
| | 1/1/22 - 12/31/24 | 6/1-9/30 | | | | | |
| Physical Parameters (PPS) | | | 1 routine (RT) per quarter | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | | | | |
| | 10/1/19 - 12/31/19 | | Complete | | | | |
| | 1/1/20 - 3/31/20 | | Complete | | | | |
| | 4/1/20 - 6/30/20 | | | | | | |
| | 7/1/20 - 9/30/20 | | | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | | | |
| Net Gross Alpha (4000) | | | 1 routine (RT) per nine years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/25 | | | | | | |
| Uranium (4006) | | | 1 routine (RT) per nine years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/25 | | | | | | |
| Combined Radium-226/228 (4010) | | | 1 routine (RT) per nine years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/17 - 12/31/25 | | | | | | |
| Inorganic Chemicals (IOCS) | | | 1 routine (RT) per three years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/18 - 12/31/20 | | | | | | |
| | 1/1/21 - 12/31/23 | | | | | | |
| Nitrate And Nitrite (NOX) | | | 1 routine (RT) per year | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete | | | | |
| | 1/1/20 - 12/31/20 | | | | | | |
| | 1/1/21 - 12/31/21 | | | | | | |

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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

| | | | | | | | |
|----------------------------------|--|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1666011 | AQUARION WATER CO OF CT-TLWC WOODRICH | C | 72 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 150 LYMAN ROAD | | | | | | 27 | |
| Towns Served: WOLCOTT | | | | | | | |

Monitoring Requirements

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

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

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

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|-------------------------------------|-----------------|----------------------|
| SUBMIT CCR TO THE DEPARTMENT | 6/30/2020 | |
| SUBMIT CCR CERTIFICATION FORM | 8/9/2020 | |
| CROSS CONNECTION EXEMPTION | 3/1/2023 | |

Public Notification Requirements

| <i>Violation/Situation</i> | <i>Compliance Period</i> | <i>Notice Tier</i> | <i>Public Notification</i> | | <i>PN Certification</i> | |
|------------------------------|--------------------------|--------------------|----------------------------|------------------|-------------------------|-----------------|
| | | | <i>Required</i> | <i>Performed</i> | <i>Due to DPH</i> | <i>Received</i> |
| Total Coliform M&R Violation | 11/1/18 - 11/30/18 | 3 | 3/7/2020 | | 3/17/2020 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| | | | | | | | | |
| | | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | PB6959 | 128 LYMAN ROAD UNIT 2 | A | | 3 | | |
| | | PB6960 | 128 LYMAN RD UNIT 2 | A | | 3 | | |
| | | PB6961 | 128 LYMAN ROAD UNIT | A | | 3 | | |
| | | PB6962 | PB6962 - 128 LYMAN R | A | Y | | | |
| | | PB6963 | 128 LYMAN ROAD UNIT | A | | 3 | | |
| | | PB6981 | 128 LYMAN ROAD UNIT | A | | 3 | | |
| | | PB8589 | 128 LYMAN RD UNIT 10 | A | | 3 | | |
| | | PB8590 | 128 LYMAN RD UNIT 21 | A | | 3 | | |
| | | PB8591 | 128 LYMAN RD UNIT 25 | A | | 3 | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | WOODRICH003 | UNIT 10 | A | Y | 2 | | |
| | | WOODRICH004 | UNIT 15 | A | Y | 2 | | |
| | | WOODRICH005 | UNIT 18 | A | Y | 2 | | |

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|--|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1666011 | AQUARION WATER CO OF CT-TLWC WOODRICH | C | 72 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 150 LYMAN ROAD | | | | | | 27 | |
| Towns Served: WOLCOTT | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|----------------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | WOODRICH006 | UNIT 01 | A | Y | 2 | | |
| | | WOODRICH007 | UNIT 03 | A | Y | 2 | | |
| | | WOODRICH008 | UNIT 04 | A | Y | 2 | | |
| | | WOODRICH009 | UNIT 05 | A | Y | 2 | | |
| | | WOODRICH011 | UNIT 07 | A | Y | 2 | | |
| | | WOODRICH012 | UNIT 09 | A | Y | 2 | | |
| | | WOODRICH013 | UNIT 11 | A | Y | 2 | | |
| | | WOODRICH014 | UNIT 12 | A | Y | 2 | | |
| | | WOODRICH015 | UNIT 13 | A | Y | 2 | | |
| | | WOODRICH016 | UNIT 14 | A | Y | 2 | | |
| | | WOODRICH017 | UNIT 16 | A | Y | 2 | | |
| | | WOODRICH018 | UNIT 17 | A | Y | 2 | | |
| | | WOODRICH019 | UNIT 19 | A | Y | 2 | | |
| | | WOODRICH020 | UNIT 20 | A | Y | 2 | | |
| | | WOODRICH021 | UNIT 21 | A | Y | 2 | | |
| | | WOODRICH024 | UNIT 24 | A | Y | 2 | | |
| | | WOODRICH025 | UNIT 25 | A | Y | 2 | | |
| | | WOODRICH026 | UNIT 26 | A | Y | 2 | | |
| | | WOODRICH027 | UNIT 27 | A | Y | 2 | | |
| | | WOODRICH028 | PUMP HOUSE | A | Y | 2 | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 1838 | WELL #3 | 2 | WELL #3 | A | | | | |
| 1901 | WELL #2 | 2 | WELL #2 | A | | | | |
| 36648 | TREATMENT PLANT | | | | | | | |
| 397 | WELL #1 | 2 | WELL #1 | A | | | | |
| 51111 | HYDROPNEUMATIC TANK | | | | | | | |
| 51113 | ATMOSPHERIC STORAGE TANK | | | | | | | |
| 60187 | WOODBIRIDGE BOOSTER PUMP STATION | | | | | | | |

Certified Operator Information

| Water System Facility: TREATMENT PLANT (WSF ID: 36648) | | | |
|---|-------------------|---|--------------------------|
| Facility Classification: CLASS 1 TREATMENT PLANT | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| BLACK, RON W. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 |
| GIORDANO, DAVID S. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2020 |

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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

| | | | | | | | |
|----------------------------------|---------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1666011 | AQUARION WATER CO OF CT-TLWC WOODRICH | C | 72 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 150 LYMAN ROAD | | | | | | 27 | |
| Towns Served: WOLCOTT | | | | | | | |

Contact Information

| | | | | | | | | | |
|---|-----------|--------------|--------------------------|-----------------|--------------------------|----------------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Mr. John P. Walsh | | | Aqurion Water Company | | | Vice President | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| 835 Main Street | | | Mail Stop 700 | | | Bridgeport | | CT | 06604 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | | |
| 203-337-5852 | | 203-337-5938 | | 781-413-6175 | jwalsh@aquarionwater.com | | | | |
| 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.

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 ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1668011 | AQUARION WATER CO OF CT-TLWC CLEARVIEW | C | 215 | P | GWP | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 78 | | | | |

Towns Served: WOLCOTT

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| Select from Inventory of Active Sampling Points | 1/1/13 - 12/31/21 | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | |
| | 10/1/19 - 12/31/19 | | Complete | |
| | 1/1/20 - 3/31/20 | | Complete | |
| | 4/1/20 - 6/30/20 | | | |
| | 7/1/20 - 9/30/20 | | | |
| Lead And Copper (PBCU) | | 10 routine (RT) per six months | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 12/31/19 | | Complete | |
| | 1/1/20 - 6/30/20 | | | |
| | 7/1/20 - 12/31/20 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| Select from Inventory of Active Sampling Points | 7/1/19 - 9/30/19 | | Complete | |
| | 10/1/19 - 12/31/19 | | Complete | |
| | 1/1/20 - 3/31/20 | | Complete | |
| | 4/1/20 - 6/30/20 | | | |
| | 7/1/20 - 9/30/20 | | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|---|-----------------|----------------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2011 | |
| SUBMIT CCR TO THE DEPARTMENT | 6/30/2020 | |
| SUBMIT CCR CERTIFICATION FORM | 8/9/2020 | |
| CROSS CONNECTION EXEMPTION | 3/1/2023 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 00004 | CLEARVIEW HILLS DIST | A | Y | | | |
| | | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | CLVIEW001 | UNIT 1B | A | Y | 2 | | |
| | | CLVIEW002 | UNIT 5G | A | Y | 2 | | |
| | | CLVIEW003 | UNIT 8A | A | Y | 2 | | |
| | | CLVIEW004 | UNIT 8G | A | Y | 2 | | |
| | | CLVIEW005 | UNIT 1A | A | Y | 2 | | |
| | | CLVIEW006 | UNIT 4A | A | Y | 2 | | |

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1668011 | AQUARION WATER CO OF CT-TLWC CLEARVIEW | C | 215 | P | GWP | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 78 | | | | |

Towns Served: WOLCOTT

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | CLVIEW007 | UNIT 4B | A | Y | 2 | | |
| | | CLVIEW008 | UNIT 4C | A | Y | 2 | | |
| | | CLVIEW009 | UNIT 4D | A | Y | 2 | | |
| | | CLVIEW010 | UNIT 4E | A | Y | 2 | | |
| | | CLVIEW011 | UNIT 4F | A | Y | 2 | | |
| | | CLVIEW012 | UNIT 4G | A | Y | 2 | | |
| | | CLVIEW013 | UNIT 4H | A | Y | 2 | | |
| | | CLVIEW014 | UNIT 2A | A | Y | 2 | | |
| | | CLVIEW015 | UNIT 2B | A | Y | 2 | | |
| | | CLVIEW016 | UNIT 2C | A | Y | 2 | | |
| | | CLVIEW017 | UNIT 2D | A | Y | 2 | | |
| | | CLVIEW018 | UNIT 2E | A | Y | 2 | | |
| | | CLVIEW019 | UNIT 2F | A | Y | 2 | | |
| | | CLVIEW020 | UNIT 2G | A | Y | 2 | | |
| | | CLVIEW021 | UNIT 2H | A | Y | 2 | | |
| | | CLVIEW022 | UNIT 1C | A | Y | 2 | | |
| | | CLVIEW023 | UNIT 1D | A | Y | 2 | | |
| | | CLVIEW024 | UNIT 1E | A | Y | 2 | | |
| | | CLVIEW025 | UNIT 1F | A | Y | 2 | | |
| | | CLVIEW026 | UNIT 1G | A | Y | 2 | | |
| | | CLVIEW027 | 1H | A | Y | 2 | | |
| | | CLVIEW028 | 10A | A | Y | 2 | | |
| | | CLVIEW029 | 10B | A | Y | 2 | | |
| | | CLVIEW030 | 10C | A | Y | 2 | | |
| | | CLVIEW031 | 10D | A | Y | 2 | | |
| | | CLVIEW032 | UNIT 10E | A | Y | 2 | | |
| | | CLVIEW033 | UNIT 10F | A | Y | 2 | | |
| | | CLVIEW034 | UNIT 6H | A | Y | 2 | | |
| | | CLVIEW035 | UNIT 6G | A | Y | 2 | | |
| | | CLVIEW036 | UNIT 6F | A | Y | 2 | | |
| | | CLVIEW037 | UNIT 6E | A | Y | 2 | | |
| | | CLVIEW038 | UNIT 6D | A | Y | 2 | | |
| | | CLVIEW039 | UNIT 6C | A | Y | 2 | | |
| | | CLVIEW040 | UNIT 6B | A | Y | 2 | | |
| | | CLVIEW041 | UNIT 6A | A | Y | 2 | | |
| | | CLVIEW042 | UNIT 7A | A | Y | 2 | | |
| | | CLVIEW043 | UNIT 7B | A | Y | 2 | | |
| | | CLVIEW044 | UNIT 7C | A | Y | 2 | | |
| | | CLVIEW045 | UNIT 7D | A | Y | 2 | | |

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1668011 | AQUARION WATER CO OF CT-TLWC CLEARVIEW | C | 215 | P | GWP | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 78 | | | | |

Towns Served: WOLCOTT

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | CLVIEW046 | UNIT 7E | A | Y | 2 | | |
| | | CLVIEW047 | UNIT 7F | A | Y | 2 | | |
| | | CLVIEW048 | UNIT 7G | A | Y | 2 | | |
| | | CLVIEW049 | UNIT 7H | A | Y | 2 | | |
| | | CLVIEW050 | UNIT 8H | A | Y | 2 | | |
| | | CLVIEW051 | UNIT 8F | A | Y | 2 | | |
| | | CLVIEW052 | UNIT 8E | A | Y | 2 | | |
| | | CLVIEW053 | UNIT 8D | A | Y | 2 | | |
| | | CLVIEW054 | UNIT 8C | A | Y | 2 | | |
| | | CLVIEW055 | UNIT 8B | A | Y | 2 | | |
| | | CLVIEW056 | UNIT 9H | A | Y | 2 | | |
| | | CLVIEW057 | UNIT 9G | A | Y | 2 | | |
| | | CLVIEW058 | UNIT 9F | A | Y | 2 | | |
| | | CLVIEW059 | UNIT 9E | A | Y | 2 | | |
| | | CLVIEW060 | UNIT 9D | A | Y | 2 | | |
| | | CLVIEW061 | UNIT 9C | A | Y | 2 | | |
| | | CLVIEW062 | UNIT 9B | A | Y | 2 | | |
| | | CLVIEW063 | UNIT 9A | A | Y | 2 | | |
| | | CLVIEW064 | UNIT 3H | A | | 2 | | |
| | | CLVIEW065 | UNIT 3G | A | Y | 2 | | |
| | | CLVIEW066 | UNIT 3F | A | Y | 2 | | |
| | | CLVIEW067 | UNIT 3E | A | Y | 2 | | |
| | | CLVIEW068 | UNIT 3D | A | Y | 2 | | |
| | | CLVIEW069 | UNIT 3C | A | Y | 2 | | |
| | | CLVIEW070 | UNIT 3B | A | Y | 2 | | |
| | | CLVIEW071 | UNIT 3A | A | Y | | | |
| | | CLVIEW072 | UNIT 5H | A | Y | 2 | | |
| | | CLVIEW073 | UNIT 5F | A | Y | 2 | | |
| | | CLVIEW074 | UNIT 5E | A | Y | 2 | | |
| | | CLVIEW075 | UNIT 5D | A | Y | 2 | | |
| | | CLVIEW076 | UNIT 5C | A | Y | 2 | | |
| | | CLVIEW077 | UNIT 5B | A | Y | 2 | | |
| | | CLVIEW078 | UNIT 5A | A | Y | 2 | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | PB7219 | 20 WOLF HILL # 5A | A | | N | | |
| | | PB7220 | 20 WOLF HILL # 3F | A | | N | | |
| | | PB7221 | 20 WOLF HILL # 7F | A | | N | | |
| | | PB7223 | 20 WOLF HILL # 2H | A | | N | | |
| | | PB7360 | 20 WOLF HILL # 10B | A | | N | | |

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1668011 | AQUARION WATER CO OF CT-TLWC CLEARVIEW | C | 215 | P | GWP | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 78 | | | | |

Towns Served: WOLCOTT

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|--|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | PB7365 | 20 WOLF HILL # 5G | A | | N | | |
| | | PB8174 | 20 WOLF HILL # 8C | A | | N | | |
| | | PB8175 | 20 WOLF HILL # 9D | A | | N | | |
| | | PB8176 | 20 WOLF HILL # 7E | A | | N | | |
| | | PB8177 | 20 WOLF HILL # 9A | A | | N | | |
| | | PB8178 | 20 WOLF HILL # 3B | A | | N | | |
| | | PB8179 | 20 WOLF HILL # 3C | A | | N | | |
| | | PB8180 | 20 WOLF HILL # 5D | A | | N | | |
| | | PB8181 | 20 WOLF HILL # 5E | A | | N | | |
| | | PB8182 | 20 WOLF HILL # 9H | A | | N | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 32816 | INTERCONNECTION - CT1662051 -COUNTRYSIDE | | | | | | | |

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|--------------------|-------------------|---|--------------------------|
| BLACK, RON W. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2020 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 |
| GIORDANO, DAVID S. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2020 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2020 |

Contact Information

| | | | | | | | |
|--------------------------|-----------|--------------------------|--------------|-----------------|--------------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. John P. Walsh | | Aquarion Water Company | | | Vice President | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 835 Main Street | | Mail Stop 700 | | | Bridgeport | CT | 06604 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-337-5852 | | 203-337-5938 | | 781-413-6175 | jwalsh@aquarionwater.com | | |

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.

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

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

End of schedule

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1669011 | ARROWHEAD BY THE LAKE ASSOCIATION, INC. | C | 288 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 12 SPINDLE HILL RD | | | 72 | | | | |
| Towns Served: WOLCOTT | | | | | | | |

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

| | | | | | |
|---|--------------------------|--------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/13 - 12/31/21 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per month | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 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 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/19 - 12/31/19 | 6/1-9/30 | Complete | | |
| | 1/1/20 - 12/31/20 | 6/1-9/30 | | | |
| | 1/1/21 - 12/31/21 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per month | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 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 | | | | |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | | | |
| Antimony (1074) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 7/1/19 - 9/30/19 | | Complete | | |

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

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1669011 | ARROWHEAD BY THE LAKE ASSOCIATION, INC. | C | 288 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 12 SPINDLE HILL RD | | | 72 | | | | |

Towns Served: WOLCOTT

Monitoring Requirements

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

| Antimony (1074) | 1 routine (RT) per quarter | | |
|--|---------------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 10/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 3/31/20 | | Complete |
| | 4/1/20 - 6/30/20 | | |
| | 7/1/20 - 9/30/20 | | |
| Net Gross Alpha (4000) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Uranium (4006) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Combined Radium-226/228 (4010) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Inorganic Chemicals (IOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Nitrate And Nitrite (NOX) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/19 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/20 | | Complete |
| | 1/1/21 - 12/31/21 | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |
| | 1/1/23 - 12/31/25 | | |
| Organic Chemicals (VOCS) | 1 routine (RT) per three years | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/17 - 12/31/19 | | Complete |
| | 1/1/20 - 12/31/22 | | |

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

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1669011 | ARROWHEAD BY THE LAKE ASSOCIATION, INC. | C | 288 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 12 SPINDLE HILL RD | | | 72 | | | | |
| Towns Served: WOLCOTT | | | | | | | |

Monitoring Requirements

| | | | |
|--|--------------------------|--------------------------------|--------------------------|
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | |
| Organic Chemicals (VOCS) | | 1 routine (RT) per three years | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 1/1/23 - 12/31/25 | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

| | | | |
|---|--|----------------------------|---------------------------|
| Water System Facility: ENTRY POINT (WSFID: 00700) | | | |
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
| pH | Entry Point pH Monitoring (PHRD) | Minimum: 7.0 PH | Daily |
| Start Date: 3/1/2016 | | Compliance History: | Operating Limit |
| | | Monitoring Period | 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 | |
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
| pH | Entry Point pH Monitoring (PHRD) | Maximum: 8.6 PH | Daily |
| Start Date: 3/1/2016 | | Compliance History: | Operating Limit |
| | | Monitoring Period | 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 |
|--|-----------|---------------|
| SUBMIT CCR CERTIFICATION FORM | 11/6/2009 | |
| SUBMIT CCR TO THE DEPARTMENT | 11/6/2009 | |
| DISTRIBUTION SYSTEM MATERIALS EVALUATION | 8/31/2019 | |
| SUBMIT CCR TO THE DEPARTMENT | 6/30/2020 | |
| SUBMIT CCR CERTIFICATION FORM | 8/9/2020 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2024 | |

Public Notification Requirements

| Violation/Situation | Compliance Period | Notice Tier | Public Notification | | PN Certification | |
|------------------------|-------------------|-------------|---------------------|-----------|------------------|----------|
| | | | Required | Performed | Due to DPH | Received |
| Antimony M&R Violation | 1/1/11 - 3/31/11 | 3 | 6/13/2012 | | 6/23/2012 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | | | | | | | |

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|--|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1669011 | ARROWHEAD BY THE LAKE ASSOCIATION, INC. | C | 288 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 12 SPINDLE HILL RD | | | 72 | | | | |
| Towns Served: WOLCOTT | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | ARROW003 | GENERATED BY BATCH | A | Y | | | |
| | | ARROW004 | 1 A | I | Y | 1 | | |
| | | ARROW005 | 1 G | I | Y | 1 | | |
| | | ARROW006 | 2 C | I | Y | 1 | | |
| | | ARROW007 | 2 A | I | Y | 1 | | |
| | | ARROW008 | 3 A | I | Y | 1 | | |
| | | ARROW009 | 3 H | I | Y | 1 | | |
| | | ARROW010 | 4 D | I | Y | 1 | | |
| | | ARROW011 | 4 H | I | Y | 1 | | |
| | | ARROW012 | 5 B | I | Y | 1 | | |
| | | ARROW013 | 5 D | I | Y | 1 | | |
| | | ARROW014 | 6 D | I | Y | 1 | | |
| | | ARROW015 | 6 E | I | Y | 1 | | |
| | | ARROW016 | 7 F | I | Y | 1 | | |
| | | ARROW017 | 7 H | I | Y | 1 | | |
| | | ARROW018 | 8 B | I | Y | 1 | | |
| | | ARROW019 | 8 F | I | Y | 1 | | |
| | | ARROW020 | 9 E | I | Y | 1 | | |
| | | ARROW021 | 9 B | I | | 1 | | |
| | | ARROW022 | 10 A | I | Y | 1 | | |
| | | ARROW023 | 10 E | I | | 1 | | |
| | | ARROW10A | BUILDING 10 UNIT A | A | Y | 2 | Y | |
| | | ARROW10E | BUILDING 10 UNIT E | A | Y | 2 | Y | |
| | | ARROW1A | BUILDING 1 UNIT A | A | Y | 2 | Y | |
| | | ARROW1G | BUILDING 1 UNIT G | A | Y | 2 | Y | |
| | | ARROW2A | BUILDING 2 UNIT A | A | Y | 2 | Y | |
| | | ARROW2C | BUILDING 2 UNIT C | A | Y | 2 | Y | |
| | | ARROW3A | BUILDING 3 UNIT A | A | Y | 2 | Y | |
| | | ARROW3H | BUILDING 3 UNIT H | A | Y | 2 | Y | |
| | | ARROW4B | BUILDING 4 UNIT B | A | Y | 2 | Y | |
| | | ARROW4D | BUILDING 4 UNIT D | A | Y | 2 | Y | |
| | | ARROW5B | BUILDING 5 UNIT B | A | Y | 2 | Y | |
| | | ARROW5D | BUILDING 5 UNIT D | A | Y | 2 | Y | |
| | | ARROW6D | BUILDING 6 UNIT D | A | Y | 2 | Y | |
| | | ARROW6E | BUILDING 6 UNIT E | A | Y | 2 | Y | |
| | | ARROW7F | BUILDING 7 UNIT F | A | Y | 2 | Y | |
| | | ARROW7H | BUILDING 7 UNIT H | A | Y | 2 | Y | |
| | | ARROW8B | BUILDING 8 UNIT B | A | Y | 2 | Y | |

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

| | | | | | | | |
|----------------------------------|--|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1669011 | ARROWHEAD BY THE LAKE ASSOCIATION, INC. | C | 288 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 12 SPINDLE HILL RD | | | 72 | | | | |
| Towns Served: WOLCOTT | | | | | | | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|--------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | ARROW8F | BUILDING 8 UNIT F | A | Y | 2 | Y | |
| | | ARROW9B | BUILDING 9 UNIT B | A | Y | 2 | Y | |
| | | ARROW9E | BUILDING 9 UNIT E | A | Y | 2 | Y | |
| | | ARROWH006 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 394 | WELL #2 | 2 | WELL #2 | A | | | | |
| 395 | WELL #1 | 2 | WELL #1 | A | | | | |
| 54968 | HYDROPNEUMATIC TANK | | | | | | | |
| 54971 | ATMOSPHERIC STORAGE TANK | | | | | | | |
| 54973 | TRANSFER PUMPS | | | | | | | |
| 60039 | TREATMENT PLANT | | | | | | | |

Certified Operator Information

| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
|---|----------------|--|--------------------------|
| Facility Classification: SMALL WATER SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| WEID, JEREMIAH J. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 6/30/2022 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 12/31/2021 |

Contact Information

| | | | | | | |
|---------------------------|-----------|--------------------------|--------------|-----------------|---------------------|----------|
| Name | | Organization | | | Job Title | |
| Ms. Kathy Calo | | Arrowhead By The Lake | | | Director | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 1278 Main Street, Suite 8 | | | | Watertown | CT | 06795 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| | | | 203-592-7026 | | KCALO12@COMCAST.NET | |

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.

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

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

End of schedule