		it Department of							ction	
		er Quality Monit	oring a					_		
PWS ID	PWS Name			(ation Po	-	Owr		rimary Source
CT167004		CLUB AT OAK LANE			NC		43		Р	GW
	ress (where applicable)		Service	Residenti	al Com	mercial	Industri	ial	Combined	Agricultura
	EBROOK ROAD		Connectio	ns		2				
Towns Ser	rved: WOODBRIDGE							_		
				quiremen	its					
	•	BUTION SYSTEM (WSF I	D: 00600)							
	liform (3100)									per quarter
	pling Point (Sampling Po			Monitorin		l Colle	ection Pe	riod		iance Status
Selec	ct from Inventory of Activ	ve Sampling Points		7/1/19 - 9						mplete
				10/1/19 - 1		9			Co	mplete
				1/1/20 - 3						
				4/1/20 - 6	-					
				7/1/20 - 9	9/30/20					
•	Parameters (PPS)									per quarter
•	pling Point (Sampling Po	<u> </u>		Monitorin		Colle	ection Pe	riod		iance Status
Selec	ct from Inventory of Activ	ve Sampling Points		7/1/19 - 9						mplete
				10/1/19 - 1		9			Co	mplete
				1/1/20 - 3						
				4/1/20 - 6						
				7/1/20 - 9	9/30/20					
	•	POINT (WSF ID: 00700)								
	And Nitrite (NOX)								=	RT) per year
	pling Point (Sampling Po	oint ID)		Monitorin			ection Pe	riod		iance Status
ENTR	RY POINT (3)			1/1/19 - 1					Cc	mplete
				1/1/20 - 1						
			••	1/1/21 - 1						
		Other C	omplian	ce Schedi	ules					
Complian	ce Schedule Activity			D	ue Date		Achie	eved L	Date	
CROSS CO	NNECTION SURVEY REPO	ORT		3,	/1/2020					
	,	Water System Facili	ity and S	ampling I	Point I	Invent	tory			
Water						Tota	I Lead	and		
System	Water System Facility	Sampling Point	Sampling I	Point		Colifor	rm Cop	per		Stage
Facility ID)	ID	Description	n	Statu	_{is} Rule	e Rule	Tier	Asbestos	WQP 2 DBP
00600	DISTRIBUTION SYSTEM	4	DISTRIBUT	ION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 S	SERVICE CON	Α					
		UPSTREAM	WITHIN 5 S	SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POI	NT	Α					
22646	WELL	2	WELL		Α					
		Con	tact Info	rmation						
Name		0	rganization						Job Title	
Ms. Gina I	Berrafati			Club At Oak	Ln	[Director (Opert		
Mailing Ad	ddress Line One	Mailing Address	s Line Two				City	-	State	Zip Code
	ebrook Road				٧	Voodbric			СТ	06525
Business	s Phone Extension	Fax Mobi	le Phone	Emergency I					1	
203-39		203-397-5110		203-856-7			ne@gma	il.con	n	
				1						

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.

(Connectic	ut Depa	rtment o	of Public	Health	Dri	nking	g Water	Sec	tion	
	Wa	ter Qual	lity Mon	itoring a	nd Con	nplia	ince S	Schedul	e		
PWS ID F	WS Name					Classi	fication	Population	Owne	r Type	Primary Source
CT1670044 T	RADITION GOL	F CLUB AT O	AK LANE			١	1C	43		Р	GW
Local Address (wh	ere applicable)			Service	Residen	tial Co	ommerci	al Industri	al C	ombine	d Agricultural
1027 RACEBROOK	ROAD			Connection	ns		2				
Towns Served: W	OODBRIDGE			1				'			·
Contact Role(s):	Administrative	Contact									
Name				Organization					J	ob Title	•
Mr. Malcolm Wo	od Baldwin			Baldwin Wonr	nell Racebro	ok LLC		Manager			
Mailing Address L	ine One		Mailing Addre	ess Line Two				City		State	Zip Code
1015 Racebrook F	Rd						Woodl	oridge		СТ	06525
Business Phone	Extension	Fax	Мо	bile Phone	Emergency	/ Phone	Email /	Address			
Contact Role(s):	Legal Contact										
Name				Organization					J	ob Title	!
Baldwin Wonnell											
Mailing Address L	ine One		Mailing Addre	ess Line Two				City		State	Zip Code
1027 Racebrook F	td	I					Woodl			CT	06525
Business Phone	Extension	Fax	Mo	bile Phone	Emergency	/ Phone	Email /	Address			
Contact Role(s):	Owner										
Name				Organization					J	ob Title	
Miss Cynthea J. B				Baldwin Wonr	nell Racebro	ok LLC		Owner			
Mailing Address L	ine One		Mailing Addre	ess Line Two				City		State	Zip Code
1015 Racebrook F	Road	T					Woodl			CT	06525
Business Phone	Extension	Fax		bile Phone	Emergency	/ Phone					
203-397-2114		203-389-1	.565 203	3-494-6678			cjemb	@msn.com			
Contact Role(s):	Owner										

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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

End of schedule

С	onnectic	ut Depa	rtment of	f Public	Health D	rin	king V	Water So	ection	
	Wat	ter Qual	lity Monit	oring a	nd Comp	lia	nce Sc	hedule		
PWS ID P\	NS Name			0					ner Type F	Primary Source
CT1670064 W	OODBRIDGE C	LUB				N	2	26	Р	GW
Local Address (whe	ere applicable)			Service	Residentia	I Cor	nmercial	Industrial	Combined	I Agricultural
10 MILHAVEN ROA	νD			Connection	ns		2			
Towns Served: WO	ODBRIDGE									
			Monito	oring Red	quirement	:S				
Water System Fa	cility: DISTR	IBUTION SY	STEM (WSF I	D: 00600)						
Total Coliform (•									per quarter
	nt (Sampling P				Monitoring			ection Period		iance Status
Select from In	ventory of Acti	ive Sampling	Points		7/1/19 - 9/					omplete
					10/1/19 - 12				C	omplete
					1/1/20 - 3/	-				
					4/1/20 - 6/ 7/1/20 - 9/					
Physical Parame	itors (DDS)				7/1/20-3/	30/20	,	1 ro	utine (RT)	per quarter
-	nt (Sampling P	oint ID)			Monitoring	Perio	d Coll	ection Period		iance Status
	ventory of Act		Points		7/1/19 - 9/					omplete
					10/1/19 - 12	2/31/2	19		C	omplete
					1/1/20 - 3/	31/20)			
					4/1/20 - 6/	30/20)			
					7/1/20 - 9/	30/20)			
Water System Fa	cility: ENTR	Y POINT (W	/SF ID: 00700)							
Nitrate And Nitr	• •								=	RT) per year
	nt (Sampling P	oint ID)			Monitoring			ection Period		iance Status
ENTRY (SUMN	ЛER) (3)				1/1/19 - 12,				C	omplete
					1/1/20 - 12/					
					1/1/21 - 12/					
		Water Sy	stem Facili	ity and Sa	ampling P	oint	Inven			
Water	Sucham Facility		Camandina Daint	Camanlina D) a find		Tota		1	6.
System Water S Facility ID	System Facility	•	Sampling Point ID	Description		Charle	Colifo Rule		r Ashestos	Stage WQP 2 DBPR
_	UTION SYSTEM	1	4	•	ON (SUMME	Stat A	.us	Traile Tree	7.55005	17Q1 222111
20000 21011112	011011011011		DOWNSTREAM		•	A				
			UPSTREAM	WITHIN 5 S	ERVICE CON	А				
00700 ENTRY F	POINT		3	ENTRY (SUN	MMER)	Α				
23122 WELL #2	2 SUMMER		2	WELL #2 SU	JMMER	Α				
59488 ATMOS	PHERIC STORAG	GE TANK								
61314 TREATM	1ENT PLANT									
			Con	tact Info	rmation					
Name			Oi	rganization					Job Title	
Mr. Paul Davis			W	oodbridge C	lub			Club Director		
Mailing Address Lir	ne One		Mailing Address	s Line Two				City	State	Zip Code
10 Milhaven Road							Woodbri		СТ	06525
Business Phone	Extension	Fax	Mobi	le Phone	Emergency Ph	none	Email Add	dress		
203-397-2582					203-915-65	29	pdavis@v	woodbridgecl	ub.org	
Contact Bolo(c): A	dministrative	Contact, Leg	al 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.

(Connectic	ut Depa	rtment	of Public	Health	Drir	ıking	g Water	Sec	ction		
	Wa	ter Qua	lity Mon	itoring a	nd Con	nplia	nce S	Schedul	le			
PWS ID	PWS Name					Classifi	cation	Population	Owne	er Type	Primary So	urce
T1670064	WOODBRIDGE C	CLUB				N	С	26		Р	GW	
ocal Address (w	here applicable)			Service	Residen	itial Co	mmerci	al Industri	al C	Combine	d Agricult	ural
LO MILHAVEN RO)AD			Connection	ns		2					
Towns Served: W	OODBRIDGE					,			·		,	
Name				Organization						Job Title	2	
Noodbridge Clu	b, Inc.											
Mailing Address	Line One		Mailing Add	ress Line Two				City		State	Zip Code	9
LO Milhaven Roa	d						Woodb	oridge		СТ	06525	
Business Phone	Extension	Fax	Mo	obile Phone	Emergency	/ Phone	Email A	Address				
203-397-2582												
Contact Role(s):	Owner		,	"								

Contact Role(s): Owner

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

End of schedule

Page 4

Schedule Generation Date: 3/10/2020

	C	onnectic	ut Dena	rtment of	f Public	Health I	rir	nkino	· W:	ater Se	ection	
	Ů.		•	lity Monit				_				
PWS ID	PV	VS Name	ter qua	irey 1.10111t	, or mg a						ner Tyne F	rimary Source
CT167011			TER DAY SAII	NTS, WOODBRI	DGE		N			20	Р	GW
		re applicable)		,	Service	Residentia		mmerci		dustrial	Combined	_
990 RACEE					Connectio			1				7.6
		ODBRIDGE										
				Monit	oring Re	quiremen	ts					
Water Sys	stem Fac	cility: DISTR	RIBUTION SY	STEM (WSF I		-						
Total Col	liform (3	3100)								1 ro	utine (RT)	per quarter
Samp	oling Poin	t (Sampling P	oint ID)			Monitoring	, Perio	od C	ollect	ion Period	Compl	iance Status
Selec	t from Inv	ventory of Act	ive Sampling	Points		7/1/19 - 9	/30/1	9			Co	omplete
						10/1/19 - 1	2/31/	19			Co	omplete
						1/1/20 - 3	/31/2	0			Co	omplete
						4/1/20 - 6	/30/2	0				
						7/1/20 - 9	/30/2	0				
-		ters (PPS) nt (Sampling P	oint (D)			Monitorina	. Douis	ad C	allast	1 rou ion Period		per quarter
				Daints		7/1/19 - 9			onecti	ion Perioa		iance Status
Selec	t from inv	ventory of Act	ive Sampling	Points								omplete
						10/1/19 - 1 1/1/20 - 3						omplete omplete
						4/1/20 - 6					C	mpiete
						7/1/20 - 0	-					
Water Sv	stem Fac	rility: FNTR	Y POINT (M	/SF ID: 00700)		7/1/20 - 9/	/30/2	U				
•		ite (NOX)		13. 12. 00700)						1	routine (RT) per year
		it (Sampling P	oint ID)			Monitoring	n Perio	nd C	ollect	ion Period	_	iance Status
	Y POINT		······································			1/1/19 - 12						omplete
21111		(3)				1/1/20 - 12						omplete
						1/1/21 - 12	-					ompiete .
			Water Sv	stem Facil	ity and S				ntoi	rv		
Water			water 5	Jacon I den	ity ana s		Oiiii		tal	Lead and	<u> </u>	
System	Water S	ystem Facility		Sampling Point	Sampling I	Point			form	Copper	ı	Stage
Facility ID		,		. ID	Description		Sta		ule		Asbestos	WQP 2 DBPR
00600	DISTRIBU	JTION SYSTEM	1	4	DISTRIBUT	ION	Α		Υ			
				DOWNSTREAM	WITHIN 5 S	SERVICE CON	Α	A				
				UPSTREAM	WITHIN 5 S	SERVICE CON	Α	A				
00700	ENTRY P	OINT		3	ENTRY POI	NT	Α	4				
48910	WELL			2	WELL		Α	4				
59489	HYDROP	NEUMATIC TA	ANK									
				Con	tact Info	rmation						
Name				0	rganization						Job Title	
Mr. Roy B	. McDani	el		N	atural Resou	urces-Special P	roj		Ma	nager		
Mailing Ac	dress Lin	e One		Mailing Addres	s Line Two				Ci	ty	State	Zip Code
50 East No	orth Temp	ole St		Mfd 12Th Floor				Salt Lal	ke City	У	UT	84150
Business	Phone	Extension	Fax	Mobi	le Phone	Emergency P	hone	Email A	ddre	SS		
801-240	0-4656		801-240-2	2913				mcdan	ielrb@	churchof	jesuschrist.	org
Contact Ro	ole(s): Le	gal 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.

	Connectic	nt or	Public	пеани	וועו	nking	vvater	seci	1011					
	Wa	ter Qua	lity M	lonit	oring a	nd Con	nplia	ance S	Schedul	le				
PWS ID	PWS Name				Classification Population Owner						Type F	rimary Source		
CT1670114	CHURCH OF LAT	TER DAY SAI	NTS, WO	ODBRII	DGE		1	NC	220	Р		GW		
Local Address (w	here applicable)				Service	Resider	ntial C	ommercia	al Industri	ial Co	mbined	d Agricultural		
990 RACEBROOK	ROAD				Connection	ıs		1						
Towns Served: V	VOODBRIDGE					·				·				
Name				Or	ganization				Job Title					
Ms. Christine Sp	encer			Ch	urch of Jesu	s Christ of	Lds		Hartford A	Hartford Admin Asst				
Mailing Address	Line One		Mailing	Address	s Line Two				City State Zip			Zip Code		
130 South St								Cromw	ell		CT	06516		
Business Phon	e Extension	Fax		Mobil	le Phone	Emergency	y Phon	e Email A	ddress					
860-635-4035 860-835-4036							spence	spencerca@churchofjesuschrist.org						
Contact Role(s)	Administrative	Contact						•						

Connecticut Department of Dublic Health Drinking Water Section

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

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

End of schedule

Towns Served: WOODBRIDGE Monitoring Requirements Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)	gricultura r quarter ce Status elete elete
PWS ID PWS Name CT1670194 TENNIS CENTRAL NC 25 P P	gricultura r quarter ce Status elete elete
TENNIS CENTRAL NC 25 P	gricultura r quarter ce Status elete elete
Towns Served: WOODBRIDGE Monitoring Requirements	r quarter ce Status elete elete
Towns Served: WOODBRIDGE Monitoring Requirements	r quarter ce Status elete elete
Monitoring Requirements Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 10/1/19 - 12/31/19 Comp 11/120 - 3/31/20 Comp 1/1/20 - 6/30/20 7/1/20 - 9/30/20 Physical Parameters (PPS) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Select from Inventory of Active Sampling Points 1 routine (RT) per Collection Period Compliance 2 routine (RT) per Collection Period Compliance 3 routine (RT) per Collection Period Compliance 4 routine (RT) per Collection Period Compliance 5 routine (RT) per Collection Period Compliance 5 routine (RT) per Collection Period Compliance 6 routine (RT) per Collection Period Compliance 6 routine (RT) per Collection Period Compliance 6 routine (RT) per Collection Period Collection P	ce Status elete elete elete
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 10/1/19 - 12/31/19 Comp 10/1/19 - 12/31/19 Comp 10/1/20 - 3/31/20 Comp 4/1/20 - 6/30/20 7/1/20 - 9/30/20 Physical Parameters (PPS) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Select from Inventory of Active Sampling Points 7/1/19 - 12/31/19 Comp 1/1/20 - 3/31/20 Comp 4/1/20 - 6/30/20 7/1/20 - 9/30/20 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Collection Period Compliance Comp 4/1/20 - 9/30/20 Value System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Compl	ce Status elete elete elete
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 10/1/19 - 12/31/19 Comp 10/1/19 - 12/31/19 Comp 10/1/20 - 3/31/20 Comp 4/1/20 - 6/30/20 7/1/20 - 9/30/20 Physical Parameters (PPS) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Comp 10/1/19 - 12/31/19 Comp 10/1/19 - 12/31/19 Comp 4/1/20 - 6/30/20 7/1/20 - 9/30/20 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Compli	ce Status elete elete elete
Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 10/1/19 - 12/31/19 10/1/19 - 12/31/19 10/1/19 - 3/31/20 11/20 - 6/30/20 7/1/20 - 9/30/20 Physical Parameters (PPS) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Comp 10/1/19 - 12/31/19 Comp 1/1/20 - 3/31/20 Comp 4/1/20 - 6/30/20 7/1/20 - 9/30/20 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Collection Period Collection Period Compliance Comp 1/1/20 - 1/2/31/19 Comp 1 routine (RT) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Comp 1/1/19 - 12/31/19 Comp 1/1/19 - 12/31/19 Comp	ce Status elete elete elete
Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Comp	lete lete lete
10/1/19 - 12/31/19 Comp	llete llete r quarter
1/1/20 - 3/31/20 Comp	lete r quarter
4/1/20 - 6/30/20	^r quarter
Physical Parameters (PPS) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 1/1/19 - 9/30/19 Comp 10/1/19 - 12/31/19 Comp 1/1/20 - 3/31/20 Comp 4/1/20 - 6/30/20 7/1/20 - 9/30/20 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/19 - 12/31/19 Comp 1/1/20 - 12/31/19 Comp 1/1/20 - 12/31/19 Comp	-
Physical Parameters (PPS) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 10/1/19 - 12/31/19 Comp 10/1/20 - 3/31/20 Comp 4/1/20 - 6/30/20 7/1/20 - 9/30/20 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1 routine (RT) Monitoring Period Collection Period Compliance Comp 1/1/20 - 12/31/19 Comp	-
Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Comp 10/1/19 - 12/31/19 Comp 1/1/20 - 3/31/20 Comp 4/1/20 - 6/30/20 7/1/20 - 9/30/20 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/19 - 12/31/19 Comp 1/1/20 - 12/31/19 Comp	-
Select from Inventory of Active Sampling Points 7/1/19 - 9/30/19 Comp	e Status
10/1/19 - 12/31/19 Comp 1/1/20 - 3/31/20 Comp 4/1/20 - 6/30/20 T/1/20 - 9/30/20 Comp Comp 2/1/20 - 9/30/20 T/1/20 - 9/30/20 Comp Com	
1/1/20 - 3/31/20 Comp 4/1/20 - 6/30/20 7/1/20 - 9/30/20 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) 1 routine (RT) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance ENTRY POINT (3) 1/1/19 - 12/31/19 Comp	lete
4/1/20 - 6/30/20 7/1/20 - 9/30/20 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1 routine (RT) Monitoring Period Collection Period Compliance 1/1/19 - 12/31/19 Comp 1/1/20 - 12/31/20	lete
7/1/20 - 9/30/20 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1 routine (RT) Monitoring Period Collection Period Compliance 1/1/19 - 12/31/19 Comp 1/1/20 - 12/31/20	lete
Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1 routine (RT) Monitoring Period Collection Period Compliance 1/1/19 - 12/31/19 Comp 1/1/20 - 12/31/20	
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1 routine (RT) Monitoring Period Collection Period Compliance 1/1/19 - 12/31/19 1/1/20 - 12/31/20	
Sampling Point (Sampling Point ID) ENTRY POINT (3) Monitoring Period Collection Period Compliance 1/1/19 - 12/31/19 1/1/20 - 12/31/20	
Sampling Point (Sampling Point ID) ENTRY POINT (3) Monitoring Period Collection Period Compliance 1/1/19 - 12/31/19 1/1/20 - 12/31/20	per year
1/1/20 - 12/31/20	
· · · · · · · · · · · · · · · · · · ·	lete
1/1/21 - 12/31/21	
Water System Facility and Sampling Point Inventory	
Water Total Lead and	
System Water System Facility Sampling Point Sampling Point Coliform Copper	Stage
Facility ID Description Status Rule Rule Tier Asbestos WC	QP 2 DBP
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	
55722 WELL 2 WELL A	
Contact Information	
Name Organization Job Title	
Mr. Isidro Martmez Tennis Central Owner	
Mailing Address Line One Mailing Address Line Two City State Zi	
	p Code
Business Phone Extension Fax Mobile Phone Emergency Phone Email Address	p Code 06525
Dubiness Frione Extension Fax Informe Filling Ellingency Filling Address	
203-389-2455 203-397-0235 tenniscentralmanager@gmail.com	

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

		_			1		,	
PWS ID	PWS Name				Classification	Population	Owner Type	Primary Source
CT1670194	TENNIS CENTRAL				NC	25	Р	GW
Local Address (w	here applicable)		Service	Residen	tial Commerc	ial Industri	al Combine	ed Agricultural
110 BRADLEY RC	DAD		Connections		1			

Towns Served: WOODBRIDGE

Please note the following:

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

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

End of schedule

	Co		•	artment of llity Monit					U			ection	
PWS ID	PW	/S Name					Cla	ssificati	on Pop	oulation	Owi	ner Type P	rimary Source
CT167020		OOKSIDE FAF						NC		29		Р	GW
		re applicable)			Service	Resider	ntial	Comm	ercial	Industri	ial	Combined	Agricultural
		VOODBRIDGE			Connectio	ns						1	
Towns Ser	rved: WO	ODBRIDGE					_				_		
				Monito	oring Re	quireme	ents	5					
Water Sy	stem Fac	cility: DISTE	RIBUTION (WSF ID: 00600)								
	liform (3	-											per quarter
		t (Sampling F				Monitor			Colle	ction Pe	riod	Compl	ance Status
Selec	ct from Inv	entory of Act	ive Sampling	g Points		7/1/19		_					
						10/1/19							mplete
						1/1/20 4/1/20						CC	mplete
						7/1/20		•					
Physical	Paramet	ters (PPS)				7/1/20	<i>J</i> / <i>J</i>	10/20		•	1 roi	ıtine (RT)	per quarter
-		t (Sampling F	Point ID)			Monitor	ina F	Period	Colle	ction Pe			ance Status
_	RIBUTION		· · ,			7/1/19							
						10/1/19						Сс	mplete
						1/1/20	- 3/3	31/20				Co	mplete
						4/1/20	- 6/3	80/20					
						7/1/20	- 9/3	30/20					
Water Sy	stem Fac	cility: ENTR	Y POINT (\	NSF ID: 00700)									
Nitrate A	And Nitri	te (NOX)									1	routine (F	RT) per year
		t (Sampling F	Point ID)			Monitor			Colle	ction Pe	riod		ance Status
ENTF	RY POINT (3)				1/1/19 -							mplete
						1/1/20 -						Cc	mplete
						1/1/21 -							
				Other C	omplian	ce Sche	dule	es					
Complian	ce Schedu	le Activity					Due	Date		Achie	eved	Date	
		ARY SURVEY						/2019			29/2		
CORRECTI	IVE ACTIO	N/CORRECTIV	'E ACTION PI	_AN			2/5/	/2020		10/	/7/20)19	
			Water S	ystem Facili	ity and S	ampling	, Po	oint In	vent	ory			
Water									Total				
System	_	stem Facility	,	Sampling Point ID	Sampling I Description				Colifori	-	•	Ashastas	Stage
Facility ID		ITION		4	DISTRIBUT			Status ^	Rule Y	Kule	Her	Aspestos	WQP 2 DBPR
00600	DISTRIBU	TION		DOWNSTREAM		_	NI	A A	Ϋ́				
				UPSTREAM		SERVICE CO		A	Ϋ́				
00700	ENTRY P	OINT		3	ENTRY POI		.,	A	<u>'</u>				
61547	WELL	<u> </u>		2	WELL			A					
					tact Info	rmation	,						
Norse						ווומנוטו	•					lob Title	
Name	longe				rganization	m Markat			D	roporti	O++/*	Job Title	
Mr. Paul I Mailing A		e One		Mailing Address	ookside Far	iii ivial Ket				roperty City	Own	State	Zip Code
320 Amity		CONC		iviaining Addites	S LINC I WU			\\/c	odbrid			CT	06525
-	s Phone	Extension	Fax	Mohi	le Phone	Emergency	v Phr					Ci	00323
			I dx	141001			, , , , ,		, taul				

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.

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	Water Quality Moni	toring an	d Con	npl	liance S	Schedul	le	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type F	rimary Source
CT1670204	BROOKSIDE FARM MARKET				NC	29	Р	GW
Local Address (v	where applicable)	Service	Residen	ntial	Commerci	al Industri	al Combined	d Agricultural
324 AMITY ROA	AD, WOODBRIDGE	Connections					1	
Towns Served:								
203-410-621	5				priong	o@aol.com		
Contact Role(s)	: Administrative Contact							

Connecticut Department of Public Health Drinking Water Section

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