	C		CD Lite	r lal.	D	.1 *	N - 1 C -		
	Connecticut De	•				0		ection	
		uality Monit	oring an						
	PWS Name								rimary Source
	CAMP CONNRI				N(	_	319	Р	GW
Local Address (wh			Service Connections	Resident	ial Cor	mmercial	Industrial	Combined	Agricultural
27-28 HAPPY HILL			connections					22	
Towns Served: AS	SHFORD								
Water System F	acility: DISTRIBUTION		oring Requ	ıiremeı	nts				
Total Coliform	,	. 51512.01 (4451.1	<b>5. 00000</b> ,				1 ro	utine (RT)	per quarter
	oint (Sampling Point ID)			Monitorin	na Perio	od Colle	ction Period		ance Status
	Inventory of Active Sampl	ing Points		4/1/25 -					mplete
	, ,			7/1/25 -					mplete
				 10/1/25 -					mplete
				1/1/26 -					
				4/1/26 -					
<b>Physical Param</b>	eters (PPS)						1 ro	utine (RT)	per quarter
Sampling Po	oint (Sampling Point ID)			Monitorin	ng Perio	od Colle	ction Period		ance Status
Select from I	Inventory of Active Sampl	ing Points		4/1/25 -	6/30/25	5		Со	mplete
				7/1/25 -	9/30/25	5		Со	mplete
				10/1/25 -	12/31/2	25		Со	mplete
				1/1/26 -	3/31/26	6			
				4/1/26 -	6/30/26	6			
Water System F	acility: CAMP CONNR	I TREATMENT PL	ANT (WSF ID	: 00700)					
Nitrate And Nit	trite (NOX)						1	routine (F	T) per year
Sampling Po	oint (Sampling Point ID)			Monitorir	ng Perio	od Colle	ction Period	Compli	ance Status
CAMP CONN	IRI TREATMENT PLANT (3	)		1/1/24 - 1	12/31/2	24		Co	mplete
				1/1/25 - 1	12/31/2	25		Со	mplete
				1/1/26 - 1	12/31/2	26			
	Monthly Water	r System Facil	ity (WSF) I	Level N	lonito	oring Re	equireme	nts	
Water System F	acility: CAMP CONNR	TREATMENT PLA	ANT (WSFID:	00700)					
Analyte	Monitoring Re	quirement (Summ	ary Type)	Oper	ating Li	imit		Samples R	eq/Month
Chlorine	•	lorine Residual Moi	= :	-		0.2 MG/L		Da	ily
Start Date: 1	/1/2017		-	nce Histo	-	-	ting Limit	Monitor	
				ing Period		Comp	liance Status	: Complia	nce Status:
				5 - 7/31/2					
				5 - 8/31/2					
				5 - 9/30/2					
				25 - 10/31 25 - 11/30	-				
		Othor C			·				
Carran li arrana Calan	distant Analysis	Other C	ompliance				01-1	D-4-	
CDOSS CONNECTION	ON SURVEY REPORT				<i>ue Dat</i> /1/202		Achieved	Date	
CNU33 CUNNECTI		System Facil	ity and Sai				orv		
Water			.,			Total	<del>-</del>		
	System Facility	Sampling Point	Sampling Poi	nt		Colifor			Stage
Facility ID	•	ID	Description		Stat	Dula		Asbestos	WQP 2 DBPR
00600 DISTRI	BUTION SYSTEM	4	DISTRIBUTION	N SYSTEM	А				

							O					
	Water Qua	ality Monit	oring an	d Com	pli	iance	Sch	edul	le			
PWS ID	PWS Name				Clas	sification	Pop	ulation	Own	er Type I	rimary	Source
СТ003009	21 CAMP CONNRI					NC	3	319		Р	G۱	N
Local Add	ress (where applicable)		Service	Resident	tial	Commerc	ial I	ndustri	al	Combined	d Agri	cultural
27-28 HAI	PPY HILL LANE		Connections							22		
Towns Se	rved: ASHFORD				'		,					
	Water 9	System Facili	ity and Sai	mpling	Poi	nt Inv	ento	ry				
Water						7	otal	Lead	and			
System	Water System Facility	Sampling Point	Sampling Poi	nt		Со	liforn	n Cop	per			Stage
Facility IL	)	ID	Description		5	Status	Rule	Rule	Tier	Asbestos	WQP	2 DBPR
		DOWNSTREAM	WITHIN 5 SER	VICE CON	1	Α						
		UPSTREAM	WITHIN 5 SER	VICE CON	I	Α						
00700	CAMP CONNRI TREATMENT	3	CAMP CONN	RI		Α						
	PLANT		TREATMEN									
50927	CONCRETE ATMOSPHERIC TANK											
56286	WELL 3A	2	WELL 3A	·		Α						

Mr. David Champli	n			The Salvation	n Army	M	ajor		
Mailing Address Lin	e One		Mailing	Address Line Two		(	City	State	Zip Code
C/O Camp Connri			P.O. Box	176		Ashford		СТ	06278-0176
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Addr	ess		
Contact Role(s): Le	gal Contact		·						
Name				Organization			J	lob Title	<b>!</b>
Mr. Jorge Marzan				The Salvation	n Army	Di	visional Comm	nander	
Mailing Address Lin	e One		Mailing	Address Line Two		(	City	State	Zip Code
855 Asylum Ave						Hartford		CT	06105
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Addr	ess		
860-702-0010		860-543-8	3412		860-918-3604	jorge.marzan@use.salvationarmy.org			y.org

**Contact Information** 

Organization

Contact Role(s): Administrative Contact

### Please note the following:

Name

- 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

Job Title

				_				
	Connecticut De	partment of	Public Health	Drink	ing Wa	ater Se	ction	
	Water Q	uality Monit	oring and Con	npliand	ce Sche	edule		
PWS ID	PWS Name		<u> </u>	Classificat	ion Popul	ation Own	er Type Pri	mary Source
CT003801	1 HOLE IN THE WALL GANG	G CAMP-MAIN SYST	EM#1	NC	33	35	Р	GW
Local Add	ress (where applicable)		Service Residen	tial Comn	nercial In	dustrial	Combined	Agricultural
565 ASHF	ORD CENTER ROAD (ROUTE 44)		Connections 29					
Towns Se	rved: ASHFORD			,	,	,		
		Monito	oring Requireme	nts				
Water Sy	stem Facility: <b>DISTRIBUTIO</b>	N SYSTEM (WSF II	D: 00600)					
Total Co	liform (3100)					1 rou	tine (RT) p	er quarter
Sam	pling Point (Sampling Point ID)		Monitori	ng Period	Collecti	on Period	Complia	nce Status
Seled	ct from Inventory of Active Samp	ling Points	4/1/25 -	6/30/25			Con	nplete
			7/1/25 -	9/30/25			Con	nplete
			10/1/25 -	12/31/25				
			1/1/26 -	3/31/26				
			4/1/26 -	6/30/26				
Physical	Parameters (PPS)					1 rou	tine (RT) p	er quarter
Sam	pling Point (Sampling Point ID)		Monitori	ng Period	Collecti	on Period		nce Status
Selec	ct from Inventory of Active Samp	ling Points	4/1/25 -	6/30/25			Con	nplete
			7/1/25 -	9/30/25			Con	nplete
			10/1/25 -	12/31/25				
			1/1/26 -	3/31/26				
			4/1/26 -	6/30/26				
Water Sy	stem Facility: ENTRY POINT	(WSF ID: 00700)						
Nitrate A	And Nitrite (NOX)					1	routine (R	Γ) per year
Sam	pling Point (Sampling Point ID)		Monitori	ng Period	Collecti	on Period	<del>-</del>	nce Status
ENTF	RY POINT (3)		1/1/24 -	12/31/24	_		Con	nplete
			1/1/25 -	12/31/25			Con	nplete
			1/1/26 -	12/31/26				
		Other C	ompliance Sched	lules				
Complian	ce Schedule Activity			Due Date		Achieved I	Date	
CROSS CC	NNECTION SURVEY REPORT		3	3/1/2026				
	Water	r System Facili	ity and Sampling	Point I	nventor	У		
Water					Total	Lead and		
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper		Stage
Facility IL	)	ID	Description	Status	Rule	Rule Tier	Asbestos 1	NQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	I A				
		UPSTREAM	WITHIN 5 SERVICE CON	l A				
00700	ENTRY POINT	3	ENTRY POINT	Α				
22894	WELL 1	2	WELL 1	Α				
22895	WELL 2	2	WELL 2	А				
22896	WELL 3	2	WELL 3	А				
22897	WELL 4	2	WELL 4	Α				
54621	ATMOSPHERIC TANKS							

63112 BLADDER TANK

	Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS ID PWS Name					Population	Owner Type	Primary Source				
CT0038011	HOLE IN THE WALL GANG CAMP-MAII		NC		335	Р	GW					
Local Address	(where applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural				
565 ASHFORD	CENTER ROAD (ROUTE 44)	Connections	29									
Towns Served	: ASHFORD	·						·				
Contact Information												

				Contact Inf	ormation						
Name				Organization			Job Title				
Mr. Raymond Lamo	ontagne			Hole In The \	Wall Gang Fund Inc		President				
Mailing Address Lin	e One		Mailing	Address Line Two			City State Zip Co				
112 Fifth Ave						New Yor	k NY 1012				
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress				
Contact Role(s): Le	gal Contact, C	)wner		Organization				Job Title			
Mr. John Suprenan	t			Hole In The \	Wall Gang Camp		Asst Dir. of	Facilit			
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code		
585 Ashford Center	Road					Ashford		СТ	06278		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ac	ail Address				
860-487-0574		860-487-2	1666			john.surprenant@holeinthewallgang.org					
Contact Role(s): Ac	dministrative (	Contact		•							

### Contact Role(s): Administrative Con

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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End of schedule

C	Connecticut Dep	artmer	nt o	Public F	Health 1	Drinl	king	g Wa	ater S	Section	
	Water Qua	ality M	onit	oring an	d Com	plian	ice S	Sche	edule		
PWS ID P	WS Name				(	Classifica	ation	Popu	lation O	wner Type	Primary Source
	SHFORD DARI BAR					NC		2		Р	GW
Local Address (wh	<u> </u>			Service	Residenti	al Com	ımerci	al In	dustrial	Combine	d Agricultural
432 ASHFORD CEN	NTER ROAD			Connections			1				
Towns Served: ASI	HFORD										
		M	onit	oring Requ	uiremen	ts					
Water System Fa	acility: DISTRIBUTION S	SYSTEM (	WSF I	D: 00600)							
<b>Total Coliform</b>	(3100)								1	routine (R	T) per month
	int (Sampling Point ID)				Monitorin		d C	ollecti	on Perio	d Comp	oliance Status
Select from Ir	nventory of Active Samplin	g Points			7/1/25 - 7	//31/25				(	Complete
					8/1/25 - 8	3/31/25				(	Complete
					9/1/25 - 9						
					4/1/26 - 4	1/30/26					
					5/1/26 - 5						
					6/1/26 - 6	5/30/26					
Physical Parame										<del>-</del>	T) per month
	int (Sampling Point ID)				Monitorin			ollecti	on Perio		oliance Status
Select from Ir	nventory of Active Samplin	g Points			7/1/25 - 7						Complete
					8/1/25 - 8					(	Complete
					9/1/25 - 9						
					4/1/26 - 4						
					5/1/26 - 5						
Mater System Fa	acility: ENTRY POINT (	MCE ID: 0	7700\		6/1/26 - 6	0/30/26					
•	•	WSF ID. U	,,,,,							1	(DT) man waan
Nitrate And Nit	int (Sampling Point ID)				Monitorin	a Porio	٠ ,	allacti	on Perio		(RT) per year
ENTRY POINT	<u> </u>				1/1/24 - 1			Onecu	on Ferio		Complete
LIVIKI FOINI	(3)				1/1/25 - 1						Complete
					1/1/26 - 1						ompiete
		Oth	or C	ompliance			,				
Compliance Sched	lule Activity	Oti.	C. C	omphanice		ue Date	,		Achieve	d Date	
RESPOND TO SAN						/30/202			Acilieve	u Dute	
NEST GIVE TO SALVE	TITALL SOLVET	Dublic	Not	ification F							
		1 abiic		ompliance	Notice			otifica	ıtion	PN Ca	rtification
Violation/Situatio	on			Period	Tier		uired		formed	Due to DP	
	DLIFORM RULE (RTCR) TT V	iolation	6/3	0/18 - 4/4/19	2		/2018	7 61	jonnea	8/29/2018	
Physical Paramete			9/1	/23 - 9/30/23	3	2/21/	/2025			3/3/2025	
Total Coliform M8				/23 - 9/30/23	3		/2025			3/3/2025	
	Water 9	System I		ity and Sa	mpling F				'V		
Water	770101	, , , , , , , , , , , , , , , , , , , ,	J.J.1	.,	. ها			otal	Lead ar	nd	
	System Facility	Sampling	Point	Sampling Poi	int			iform	Coppe		Stage
Facility ID		ID		Description		Statu		Rule			s WQP 2 DBPR
00600 DISTRIE	BUTION SYSTEM	4		DISTRIBUTIO	N SYSTEM	Α		Υ			
		DOWNST	REAM	WITHIN 5 SEF	RVICE CON	Α					
		UPSTRE	AM	WITHIN 5 SEF	RVICE CON	Α					
00700 ENTRY	POINT	3		ENTRY POINT	-	Α					

	Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source			
СТ0030024	ASHFORD DARI BAR	NC		NC	25	Р	GW				
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural			
432 ASHFORD	CENTER ROAD	Connections			1						

Towns Served: ASHFORD

	,	Water Sy	stem F	acili	ty and S	Sampling Poi	nt Ir	vento	ry			
Water System Water S Facility ID	ystem Facility		Sampling I		Sampling I Description	n	tatus	Total Coliform Rule		Asbestos	Stage WQP 2 DBPR	
20014 WELL			2		WELL		Α					
				Con	tact Info	ormation						
Name				Or	ganization					Job Title		
Mr. Bruce Maneele	:y			Asl	hford Realt	y LLC						
Mailing Address Lin	e One		Mailing A	ddress	Line Two			C	ity	State	Zip Code	
65 Rye Street							Sou	uth Winds	sor	CT	06074	
Business Phone	Extension	Fax		Mobil	e Phone	Emergency Pho	ne Em	ail Addre	SS			
860-528-6622		860-291-9	362				Brι	Bruce@Maneeleys.com				
Contact Role(s): Le	gal Contact											
Name				Org	ganization					Job Title		
Mr. Darrell Chaloul	t			Asl	hford Dari I	Bar						
Mailing Address Lin	e One		Mailing A	ddress	Line Two			C	ity	State	Zip Code	
32 Nott Highway			PO Box 17	72			Asł	nford		CT	06278	
Business Phone	Extension	Fax		Mobil	e Phone	Emergency Pho	ne Em	ail Addre	SS			
860-836-9023							dc	@imagepl	uscorp.com	1		
Contact Role(s): A	dministrative (	Contact, Leg	al Contact	, Own	er							

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End of schedule

Connecticut Dep Water Qu							ction			
PWS ID PWS Name			Cl	assificati	ion Pop	ulation Owr	ner Type F	Primary Source		
CT0030034 ASHFORD MOTEL				NC		25	Р	GW		
Local Address (where applicable)		Service	Residentia	I Comm	nercial	Industrial	Combined	d Agricultural		
26 SNOW HILL ROAD		Connectio	ns	1	L					
Towns Served: ASHFORD		-		_						
			quirement	:S						
Water System Facility: <b>DISTRIBUTION</b>	SYSTEM (WS	SF ID: 00600)								
Total Coliform (3100)								per quarter		
Sampling Point (Sampling Point ID)			Monitoring		Collec	tion Period		liance Status		
Select from Inventory of Active Samplir	ng Points		4/1/25 - 6/					omplete		
			7/1/25 - 9/				Co	omplete		
			10/1/25 - 12							
			1/1/26 - 3/							
			4/1/26 - 6/	30/26						
Physical Parameters (PPS)						1 rou	itine (RT)	per quarter		
Sampling Point (Sampling Point ID)			Monitoring	Period	Collec	ction Period	Compl	liance Status		
Select from Inventory of Active Samplin	ng Points		4/1/25 - 6/			Co	omplete			
			7/1/25 - 9/	30/25		Complete				
			10/1/25 - 12	2/31/25						
			1/1/26 - 3/	31/26						
			4/1/26 - 6/	30/26						
Water System Facility: ENTRY POINT (	WSF ID: 0070	00)								
Nitrate And Nitrite (NOX)						1	routine (	RT) per year		
Sampling Point (Sampling Point ID)			Monitoring	Period	Collec	tion Period	_	liance Status		
ENTRY POINT (3)			1/1/24 - 12/	/31/24			Co	omplete		
			1/1/25 - 12/					omplete		
			1/1/26 - 12/					<u> </u>		
Water	System Fa	cility and S	Sampling P	•	nventa	nrv				
	Jysteili i a	cility allu 3	amping P	OIIIC II		<u> </u>				
Water System Water System Facility	Sampling Po	int Sampling I	Point		Total Coliforn	Lead and n Copper		Stago		
Facility ID	ID	Description Description		<i>.</i>	D. J.		Ashestos	Stage WQP 2 DBPR		
00600 DISTRIBUTION SYSTEM	4	•	ION SYSTEM	Status A	Y	Hate Her	7,5005105	TO LODIN		
00000 DISTRIBUTION STSTEIN		AM WITHIN 5			ī					
	UPSTREAN		SERVICE CON	A						
00700 ENTRY POINT	3	ENTRY POI		A A						
20015 WELL	2	WELL	INI	A						
20013 WELL										
	C	ontact Info	ormation							
Name		Organization	i				Job Title			
Mr. Chirag Patel		Ashford Mote	21			wner	0			
Mailing Address Line One	Mailing Add	ress Line Two				City	State	Zip Code		
26 Ashford Motel Rd					hford		СТ	06278		
Business Phone Extension Fa	x M	lobile Phone	Emergency Ph							
860-487-3900			860-450-63	81 ash	nfordmo	tel@yahoo.c	om			

Schedule Generation Date: 12/12/2025

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

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

		_							
PWS ID	PWS Name				Class	ification	Population	Owner Type	Primary Source
СТ0030034	ASHFORD MOTEL					NC	25	Р	GW
Local Address (w	vhere applicable)		Service	Residen	ntial (	Commercia	al Industri	al Combine	ed Agricultural
26 SNOW HILL R	OAD		Connections			1			
Towns Served: A	SHFORD								

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End of schedule

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	Connecticut De	•								ection	
	Water Q	uality Mo	onit	oring an	d Con	npl	liance	e Sch	edule		
PWS ID	PWS Name					Cla	ssificatio	n Popu	lation Ow	ner Type P	rimary Source
CT0030054	55-69 NOTT HIGHWAY						NC	3	6	Р	GW
Local Addre	ss (where applicable)			Service	Residen	ntial	Comme	ercial In	dustrial	Combined	Agricultural
55 NOTT HI	GHWAY (ROUTE 74)			Connections			1				
Towns Serv	ed: ASHFORD										
		Mo	onite	oring Requ	iireme	ents					
Water Syst	tem Facility: DISTRIBUTION	N SYSTEM (V	NSF II	D: 00600)							
Total Coli	form (3100)								1 ro	utine (RT)	per quarter
Sampl	ing Point (Sampling Point ID)				Monitor	ing F	Period	Collect	ion Period		iance Status
Select	from Inventory of Active Samp	ling Points			4/1/25	- 6/3	0/25				
					7/1/25 -	- 9/3	0/25			Co	mplete
					10/1/25 -	- 12/	31/25			Co	mplete
					1/1/26	- 3/3	1/26				
					4/1/26	- 6/3	0/26				
-	arameters (PPS)								1 ro		per quarter
Sampl	ing Point (Sampling Point ID)				Monitor	ing F	Period	Collect	ion Period	Compl	iance Status
Select	from Inventory of Active Samp	ling Points			4/1/25	- 6/3	0/25				
					7/1/25 -		-				mplete
					10/1/25 -					Co	omplete
					1/1/26						
					4/1/26	- 6/3	0/26				
•	tem Facility: ENTRY POINT	(WSF ID: 00	700)								
	nd Nitrite (NOX)									<del>-</del>	RT) per year
	ing Point (Sampling Point ID)				Monitor		_	Collect	ion Period		iance Status
ENTRY	POINT (3)				1/1/25 -					Co	mplete
					1/1/26 -						
		Public		ification R		_					
Violation/S	the continue		C	ompliance Period	Notice	2		<u>c Notifica</u>			<u>tification</u>
	rm M&R Violation		1/1	/25 - 6/30/25	Tier 3		<b>Require</b> 10/9/20			Due to DPH .0/19/2026	
	rameters M&R Violation			/25 - 6/30/25	3		10/9/20			.0/19/2026	
riiysicai rai		· Crestono F								.0/19/2020	
	wate	r System F	·aciii	ity and Sai	npiing	PO	int in		•		
Water	Mator Custom Easility	Camplina	Doint	Sampling Poi	n t			Total	Lead and		Charac
System 1 Facility ID	Nater System Facility	Jumping I ID	PUIII	Description	111			Coliform Rule	Copper Rule Tier	Ashestos	Stage WQP 2 DBPR
-	TREATMENT PLANT			222.163.011			Status		u.c rici		
	DISTRIBUTION SYSTEM	4		DISTRIBUTION	l SYSTEM	1	Α	Υ			
00000 1	SISTRIBUTION STSTEIN		RFAM	WITHIN 5 SER			A	'			
		UPSTRE		WITHIN 5 SER			A				
00700 E	ENTRY POINT	3		ENTRY POINT	. 52 001	-	Α				
	WELL			WELL			Α				
			Con	tact Infori	mation	1					
Name				ganization	Hatioi					Job Title	
Mr. Mark H	arnois			ympic Propert	ies Grour	חוור	•			יייי זייי	
-	Iress Line One	Mailing A		S Line Two	ics Group	, LLC	•	Ci	ty	State	Zip Code
57 Nott Hig		iviaiiiig A	aui CS	ZINC I WO			Δsh	ford	<u>- y</u>	CT	06278
J, NOLLING	y						اادیم	.514		Ci	00270

	Connectic	ut Depa	irtment o	of P	ublic	Health	Dri	nking	g Wa	ter S	ection		
	Wa	ter Qua	lity Moni	itor	ring a	nd Con	nplia	ance S	Sche	dule			
PWS ID	PWS Name						Class	fication	Popula	tion O	wner Type	Primary So	ource
СТ0030054	55-69 NOTT HIG	HWAY						NC	36		Р	GW	
Local Address (w	here applicable)			Se	ervice	Residen	tial C	ommerci	al Ind	ustrial	Combine	d Agricu	ltural
55 NOTT HIGHWA	AY (ROUTE 74)			Cc	onnection	ns		1					
Towns Served: AS	SHFORD								'				
Business Phone	e Extension	Fax	Mol	bile P	Phone	Emergency	/ Phon	e Email <i>A</i>	Address				
860-888-4928								mark@	olympi	cbuildir	ng.com		
Contact Role(s):	Owner												
Name			C	Orgar	nization						Job Title		
Mr. Mark Harnoi	is		C	Olym	pic Prope	rties Group	, LLC						
Mailing Address I	Line One		Mailing Addre	ss Lir	ne Two				City	,	State	Zip Cod	de
57 Nott Highway								Ashfor	d		СТ	06278	3
Business Phone	e Extension	Fax	Mol	bile P	Phone	Emergency	/ Phon	e Email A	Address				
860-888-4928								mark@	olympi	cbuildir	ng.com		
Contact Role(s):	Administrative	Contact, Leg	gal 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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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connec	cticut Departmer	nt of Public H	lealth l	Drinki	ng W	ater S	Section	
,	Water Quality M	onitoring an	d Com	pliance	e Sch	edule	<u>)</u>	
PWS ID PWS Name							)wner Type Pi	rimary Source
CT0030134 CHURCH O	F LATTER DAY SAINTS			NC		25	Р	GW
Local Address (where applic	able)	Service	Residentia	al Comme	ercial I	ndustrial	Combined	Agricultural
511 ASHFORD CENTER ROAL	)	Connections		1				
Towns Served: ASHFORD			1					
	М	onitoring Requ	uiremen	ts				
Water System Facility: D	DISTRIBUTION SYSTEM (	WSF ID: 00600)						
Total Coliform (3100)							routine (RT)	
Sampling Point (Sampl			Monitoring		Collect	tion Perio		ance Status
Select from Inventory of	of Active Sampling Points		4/1/25 - 6				Со	mplete
			7/1/25 - 9					mplete
			10/1/25 - 1				Со	mplete
			1/1/26 - 3					
			4/1/26 - 6	/30/26				
Physical Parameters (PP	•					1 ו	routine (RT)	•
Sampling Point (Sampl	<u> </u>		Monitoring		Collect	tion Perio		ance Status
Select from Inventory of	of Active Sampling Points		4/1/25 - 6					mplete
			7/1/25 - 9				Со	mplete
			10/1/25 - 1	2/31/25			Со	mplete
			1/1/26 - 3	/31/26				
			4/1/26 - 6	/30/26				
Water System Facility: <b>E</b>	NTRY POINT (WSF ID: 0	0700)						
Nitrate And Nitrite (NO	K)						1 routine (R	T) per year
Sampling Point (Sampl	ing Point ID)		Monitoring	g Period	Collect	tion Perio	od Compli	ance Status
ENTRY POINT (3)			1/1/24 - 12	2/31/24	_		Co	mplete
			1/1/25 - 12	2/31/25			Co	mplete
			1/1/26 - 12	2/31/26				
	Oth	er Compliance	Schedu	ıles				
Compliance Schedule Activi	ty		Du	ue Date		Achieve	ed Date	
RESPOND TO SANITARY SUR	VEY		6/2	22/2018				
	Public	Notification R	Requirer	nents				
		Compliance	Notice		: Notific	ation	PN Cert	ification
Violation/Situation		Period	Tier	Require		rformed	Due to DPH	Received
Total Coliform M&R Violatio	n	7/1/24 - 9/30/24	3	11/21/20		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	12/1/2025	
Physical Parameters M&R V	olation	7/1/24 - 9/30/24	3	11/21/20			12/1/2025	
	Water System I	Facility and Sai	mpling F	Point In	vento	rv		
Water	Trater bystein i	admity and bar		<b>J</b>	Total	Lead a	nd	
System Water System Fa	cility Sampling	Point Sampling Poi	nt		Coliform			Stage
Facility ID	ID	Description		Status	Rule		ier Asbestos	
00600 DISTRIBUTION SY	STEM 4	DISTRIBUTIO	N SYSTEM	A	Υ			
	DOWNST	REAM WITHIN 5 SEF		Α				
	UPSTRE			Α				
00700 ENTRY POINT	3	ENTRY POINT	•	Α				
<u> </u>								

Α

Page 11

Schedule Generation Date: 12/12/2025

WELL

2

20078 WELL

	Water Quality Mo	nitoring an	d Con	npl	liance S	Schedul	e	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0030134	CHURCH OF LATTER DAY SAINTS				NC	25	Р	GW
Local Address	(where applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
511 ASHFORD	CENTER ROAD	Connections			1			
Towns Served	: ASHFORD						·	·

				Co	ntact Info	ormation				
Name					Organization				Job Title	
Mr. Roy B. McDanie	el				Natural Reso	urces-Special Proj		Manager		
Mailing Address Line	e One		Mailing	Addre	ess Line Two			City	State	Zip Code
50 East North Temp	le St		Mfd 12T	h Flo	or		Salt Lake	City	UT	84150
Business Phone	Extension	Fax		Мо	bile Phone	Emergency Phone	Email Ad	dress		
801-240-4656		801-240-	2913				mcdanie	lrb@churcho	fjesuschrist	.org
Contact Role(s): Le	gal Contact, C	Owner								
Name					Organization				Job Title	
Ms. Christine Spend	er				Church of Jes	us Christ of Lds		Hartford Adr	nin Asst	
Mailing Address Line	e One		Mailing	Addre	ess Line Two			City	State	Zip Code
130 South St							Cromwe	II	СТ	06516
Business Phone	Extension	Fax		Мо	bile Phone	Emergency Phone	Email Ad	dress		
959-230-1116	2	860-835-	4036				spencero	a@churchofj	esuschrist.d	org
Contact Role(s): Ac	lministrative	Contact				<u> </u>		<u> </u>	<u> </u>	

## Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

(	Connectic	•					_			ection	
		ter Qua	lity Monit	oring ai	na Com	_	1			_	
	PWS Name		NAD (#2)								Primary Source
	HOLE IN THE WA	ALL GANG CA	IVIP (#2)	Comitoe	Desident		IC	_	25	P	GW
Local Address (wh		LITE 44\		Service Connection	Resident	tiai Co	mmerci	ai in	ndustrial	Combine	d Agricultural
565 ASHFORD CEI Towns Served: AS		UTE 44)		connection	3		4				
Towns Served. As	III OND			ouise Doo		-4-					
Water System F	acility: <b>DISTR</b>	IBUTION SY		oring Req D: 00600)	Juireme	nts					
<b>Total Coliform</b>	(3100)								1 r	outine (RT	per quarter
Sampling Po	int (Sampling P	oint ID)			Monitori	ng Peri	od C	ollecti	ion Perio	·	liance Status
Select from I	nventory of Act	ive Sampling	Points		4/1/25 -	6/30/2	!5			C	omplete
					7/1/25 -	9/30/2	!5			C	omplete
					10/1/25 -	12/31/	/25				
					4/1/26 -	6/30/2	26				
<b>Physical Param</b>	eters (PPS)								1 r	outine (RT	per quarter
	int (Sampling P				Monitorii	ng Peri	od C	ollecti	ion Perio	d Comp	liance Status
Select from I	nventory of Act	ive Sampling	Points		4/1/25 -					C	omplete
					7/1/25 -					C	omplete
					10/1/25 -						
					4/1/26 -	6/30/2	26				
Water System F	•	Y POINT (W	/SF ID: 00700)								
Nitrate And Nit	• •										RT) per year
	int (Sampling P	oint ID)			Monitorii			ollecti	ion Perio		liance Status
ENTRY POIN	1 (3)				1/1/24 - :						omplete
					1/1/25 - 1					C	omplete
			Other C	omplianc	1/1/26 - 1 ce Sched		20				
Compliance Sched	dule Activity			•		Due Da	te		Achieve	d Date	
CROSS CONNECTI		ORT			3	3/1/202	26				
		Water Sy	ystem Facili	ity and Sa	ampling	Poin	t Inve	ntoı	ry		
Water System Water Facility ID	System Facility		Sampling Point ID	Sampling Po	oint	Sta	Coli	otal form ule		r	Stage s WQP 2 DBPR
00600 DISTRI	BUTION SYSTEM	1	4	DISTRIBUTIO	ON SYSTEM	,	А	Υ			
			DOWNSTREAM	WITHIN 5 SE	ERVICE CON	1 /	Д				
			UPSTREAM	WITHIN 5 SE	ERVICE CON	l /	A				
00700 ENTRY	POINT		3	ENTRY POIN	IT		А				
20084 WELL			2	WELL		/	Α				
			Con	tact Info	rmation						
Name			Oı	rganization						Job Title	
Mr. Raymond Lar	montagne		Н	ole In The Wa	all Gang Fur	d Inc		Pres	sident		
Mailing Address L 112 Fifth Ave	ine One		Mailing Address	s Line Two			New Yo	Ci ork	ity	State NY	Zip Code 10128
Business Phone	Extension	Fax	Mobi	le Phone	Emergency	Phone			SS		
Contact Role(s):											

	Connectic	ut Depa	II UIII	ent or	rubiic	Hearth	שו	1 111K111E	s water	36	CHOII	
	Wa	ter Qua	lity N	Monit	oring a	nd Con	np]	liance S	Schedul	le		
PWS ID	PWS Name						Cla	ssification	Population	Own	er Type	Primary Source
CT0030194	HOLE IN THE WA	LL GANG CA	MP (#2	)				NC	25		Р	GW
Local Address (wl	nere applicable)				Service	Resider	itial	Commerci	al Industri	ial	Combine	d Agricultural
565 ASHFORD CE	NTER ROAD (RO	UTE 44)			Connection	ıs		4				
Towns Served: AS	SHFORD									,		
Name				Or	ganization						Job Title	
Mr. John Supren	ant			Но	le In The Wa	Wall Gang Camp Asst Dir. of Facilit					ilit	
Mailing Address I	ine One		Mailing	Address	Line Two				City		State	Zip Code
585 Ashford Cent	er Road							Ashfor	d		СТ	06278
Business Phone	Extension	Fax	•	Mobil	e Phone	Emergency	/ Pho	one Email A	Address			
860-487-0574		860-487-	2666					john.su	rprenant@	holeir	nthewallg	gang.org
Contact Bolo/c):	Administrativa	Contact			,			'				

Contact Role(s): Administrative Contact

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End of schedule

	Connecticu	•						•	_			ction	
		er Qual	lity Mo	nit	oring a				1			1	
PWS ID	PWS Name								-		Owr	er Type F	Primary Source
CT0030214	JUNE NORCROSS	WEBSTER (	CAFETERIA	WEL			N			25		Р	GW
	where applicable)				Service	Resident	tial Co	mmerci	ial Ir	ndustria	al	Combined	d Agricultura
229 ASHFORD C	ENTER ROAD				Connection	ıs		1					
Towns Served: A	ASHFORD												
					oring Red	quireme	nts						
-	Facility: DISTRI	BUTION SY	STEM (W	/SF II	D: 00600)								
Total Coliforn	• •												per quarter
	Point (Sampling Po					Monitorii			Collect	ion Per	iod		liance Status
Select from	n Inventory of Activ	e Sampling	Points			4/1/25 -							omplete
						7/1/25 -							omplete
						10/1/25 -						C	omplete
						4/1/26 -	6/30/2	6					
Physical Para													per quarter
	Point (Sampling Po					Monitorii			Collect	ion Per	iod		iance Status
Select from	n Inventory of Activ	e Sampling	Points			4/1/25 -							omplete
						7/1/25 -							omplete
						10/1/25 -						C	omplete
						4/1/26 -	6/30/2	6					
Water System	Facility: ENTRY	POINT (W	/SF ID: 007	700)									
Nitrate And N	litrite (NOX)										1	routine (	RT) per year
	Point (Sampling Po	int ID)				Monitorii	ng Peri	od C	Collect	ion Per	iod	Comp	liance Status
ENTRY POI	NT (3)					1/1/24 - 1	12/31/2	24				C	omplete
						1/1/25 - 1	12/31/2	25				C	omplete
						1/1/26 - 1	12/31/2	26					
	,	Water Sy	ystem Fa	acili	ity and S	ampling	Point	t Inve	ento	ry			
Water								T	otal	Lead o	and		
System Water	er System Facility	9	Sampling P	oint	Sampling P			Col	iform	Сорр	er		Stage
Facility ID			ID		Description	1	Sta	tus F	Rule	Rule	Tier	Asbestos	WQP 2 DBPI
00600 DISTI	RIBUTION SYSTEM		4		DISTRIBUTI	ON SYSTEM	A	A	Υ				
			DOWNSTR	EAM	WITHIN 5 S	ERVICE CON	I A	A					
			UPSTREA	М	WITHIN 5 S	ERVICE CON	l A	4					
00700 ENTF	RY POINT		3		ENTRY POIN	NT	F	4					
20086 WELI	L		2		WELL		Þ	4					
				Con	tact Info	rmation							
Name					ganization							Job Title	
Conn. Rivers Co	uncil Bsa												
Mailing Address	Line One		Mailing Ad							ity		State	Zip Code
60 Darlin Street			P O Box 28	0098				East Ha	artfor	d		СТ	06128
Business Phor	ne Extension	Fax	ı	Mobi	le Phone	Emergency	Phone	Email A	Addre	SS			
860-289-666	9												
Contact Role(s):	Owner												

C	Officectic	ut Dept	ii tiiitiit i	of I ablic	ricardi	וועו	3111111	, water	beetion	
	Wat	ter Qua	lity Mon	itoring a	nd Con	nplia	nce S	Schedul	le	
PWS ID P	WS Name					Classif	ication	Population	Owner Type	Primary Source
CT0030214 JU	JNE NORCROSS	WEBSTER (	CAFETERIA W	'ELL)		N	IC	25	Р	GW
Local Address (who	ere applicable)			Service	Resider	ntial Co	mmerci	al Industri	al Combin	ed Agricultural
229 ASHFORD CEN	ITER ROAD			Connection	ns		1			
Towns Served: ASI	HFORD				,					
Name				Organization					Job Titl	e
Mr. Mark D Switze	er			Conn. Rivers C	Council Bsa			Scout Exe	cutive/Ceo	
Mailing Address Li	ne One		Mailing Addr	ess Line Two				City	State	Zip Code
State House Squar	e		50 State Stre	et 5Th Floor			Hartfor	d	СТ	06103
Business Phone	Extension	Fax	Mo	obile Phone	Emergency	/ Phone	Email A	ddress	·	
860-913-2710					425-205	-5151	MarkDo	ouglas.Switz	er@scouting	.org

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

#### Please note the following:

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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 Prin	mary Source
CT0030224 JUNE NORCROSS WEBSTER - WELL #2 NC 25 P	GW
Local Address (where applicable)  Service Residential Commercial Industrial Combined	Agricultural
229 ASHFORD CENTER ROAD Connections 1	_
Towns Served: ASHFORD	
Monitoring Requirements	
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)	
Total Coliform (3100) 1 routine (RT) p	er month
	nce Status
	plete
8/1/25 - 8/31/25 Com	plete
	plete
5/1/26 - 5/31/26	
6/1/26 - 6/30/26	
Total Coliform (3100) 3 repeat (RP) p	er period
· · · · ·	nce Status
Select from Inventory of Active Sampling Points 9/16/25 - 9/21/25	
9/19/25 - 9/24/25	
Physical Parameters (PPS) 1 routine (RT) p	er month
Sampling Point (Sampling Point ID)  Monitoring Period Collection Period Complian	nce Status
Select from Inventory of Active Sampling Points 7/1/25 - 7/31/25	
8/1/25 - 8/31/25 Com	plete
9/1/25 - 9/30/25 Com	plete
5/1/26 - 5/31/26	
6/1/26 - 6/30/26	
Water System Facility: ENTRY POINT (WSF ID: 00700)	
Nitrate And Nitrite (NOX) 1 routine (RT)	) per year
Sampling Point (Sampling Point ID)  Monitoring Period Collection Period Complian	nce Status
ENTRY POINT (3) 1/1/24 - 12/31/24 Com	plete
1/1/25 - 12/31/25 Com	plete
1/1/26 - 12/31/26	
Water System Facility: WELL (WSF ID: 20087)	
E. Coli (3014) 1 triggered (TG) p	er period
Sampling Point (Sampling Point ID)  Monitoring Period Collection Period Complian	nce Status
WELL (2) 9/15/25 - 9/21/25	
9/18/25 - 9/24/25	
Other Compliance Schedules	
Compliance Schedule Activity Due Date Achieved Date	
L2 ASSESSMENT (MULTIPLE TC+, 2ND IN 12M) 10/20/2025	
Water System Facility and Sampling Point Inventory	
Water Total Lead and	
System Water System Facility Sampling Point Sampling Point Coliform Copper	Stage
Facility ID ID Description Status Rule Rule Tier Asbestos W	VQP 2 DBPR
00600 DISTRIBUTION SYSTEM 4 DISTRIBUTION SYSTEM A Y	
DOWNSTREAM WITHIN 5 SERVICE CON A	
UPSTREAM WITHIN 5 SERVICE CON A	

	Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source			
CT0030224	JUNE NORCROSS WEBSTER - WELL #2				NC	25	Р	GW			
Local Address (v	vhere applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural			
229 ASHFORD C	ENTER ROAD	Connections			1						

	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	WQP	Stage 2 DBPR			
00700	ENTRY POINT	3	ENTRY POINT	Α								
20087	WELL	2	WELL	А								
61008	ATMOSPHERIC STORAGE											

				Contact Inf	ormation				
Name				Organization				Job Title	
Conn. Rivers Counc	il Bsa								
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code
60 Darlin Street			Р О Вох	x 280098		East Har	tford	СТ	06128
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress		
860-289-6669									
Contact Role(s): O	wner			1					
Name				Organization				Job Title	
Mr. Mark D Switzer	•			Conn. Rivers	Council Bsa		Scout Execut	tive/Ceo	
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code
State House Square			50 Stat	e Street 5Th Floor		Hartford		СТ	06103
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress		
860-913-2710					425-205-5151	MarkDo	uglas.Switzer	@scouting.c	org
Contact Role(s): Ac	dministrative	Contact, Leg	al Cont	act					

# Please note the following:

Towns Served: ASHFORD

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End of schedule

	Conn	*	partment of								ction		
		Water Qu	iality Monit	oring an	d Con	ıpl:	ianc	e Sch	edul	e			
PWS ID	PWS Nar	ne				Clas	sificatio	on Popu	ulation	Own	er Type P	rimary S	ource
CT0030254	4 CHAAR S	AHIBZAADE REAL	TY LLC				NC		25		Р	GW	
Local Addr	ess (where app	licable)		Service	Residen	tial	Comme	ercial I	ndustria	ıl (	Combined	Agricu	ıltural
174 ASHFC	ORD CENTER RC	OAD		Connections			1						
Towns Ser	ved: ASHFORD												
			Monite	oring Requ	iireme	nts							
Water Sys	stem Facility:	DISTRIBUTION	SYSTEM (WSF II	D: 00600)									
	liform (3100)	anling Daint (D)		•	0.4 it i		- ut - d	Callag			tine (RT)		
		npling Point ID)	na Dainta		Monitori			Collect	tion Per	ioa		ance St	atus
Select	t from inventor	y of Active Sampli	ng Points		4/1/25 -							mplete	
					7/1/25 -						Co	mplete	
					10/1/25 - 1/1/26 -								
					4/1/26 -								
Physical	Parameters (	PPS)							1	rou	tine (RT)	per qua	arter
		npling Point ID)			Monitori	ng P	eriod	Collect	tion Per	iod	Compli	ance St	atus
Select	t from Inventor	y of Active Sampli	ng Points		4/1/25 -							mplete	
					7/1/25 -						Со	mplete	
					10/1/25 -								
					1/1/26 -								
					4/1/26 -	6/30	0/26						
Water Sys	stem Facility:	ENTRY POINT	(WSF ID: 00700)										
	And Nitrite (N	-									routine (F		-
		npling Point ID)		_	Monitori		_	Collect	tion Per	iod		ance St	atus
ENTR	Y POINT (3)				1/1/24 -							mplete	
					1/1/25 -						Со	mplete	
					1/1/26 -					_			
			Other C	ompliance	Sched	lule	S						
Complianc	e Schedule Act	ivity			L	Due l	Date		Achiev	red E	Date		
RESPOND T	TO SANITARY S	URVEY			1	.1/6/	2025						
		Water	<b>System Facili</b>	ty and Sar	mpling	Poi	int In	vento	ry				
Water			-					Total	Lead o	and			
System	Water System	Facility	Sampling Point		nt			Coliform	Сорр	er		9	Stage
Facility ID	1		ID	Description			Status	Rule	Rule 1	Tier	Asbestos	WQP 2	DBPR
00600	DISTRIBUTION	SYSTEM	4	DISTRIBUTION	N SYSTEM		Α	Υ					
			DOWNSTREAM	WITHIN 5 SER	VICE CON	١	Α						
			UPSTREAM	WITHIN 5 SER	VICE CON	١	Α						
	ENTRY POINT		3	ENTRY POINT			Α						
	WELL #2		2	WELL #2			Α						
63347	TREATMENT P	LANT				_				_			
			Con	tact Inform	mation								
Name			Or	ganization							Job Title		
Mr. Rashp	al Singh		Ch	aar Sahibzaad	e Realty L	LC							
Mailing Ad	ldress Line One		Mailing Address	Line Two				C	City		State	Zip Co	de
174 Ashfor	rd Center Road						Ash				СТ	0627	8
Business	s Phone Exte	ension Fa	ax Mobi	le Phone Er	mergency	Pho	ne Ema	ail Addre	ess				

	dofficed department of rabble fleaten brinking water section											
	Wa	ter Quality I	Monit	oring an	d Con	npl	iance :	Schedul	le			
PWS ID	PWS Name					Cla	ssification	Population	Owner Type F	rimary Source		
CT0030254	CHAAR SAHIBZA	ADE REALTY LLC					NC	25	Р	GW		
Local Address	(where applicable)			Service	Resider	ntial	Commerc	ial Industri	al Combined	Agricultural		
174 ASHFORD	CENTER ROAD			Connections			1					
Towns Served:	ASHFORD											
860-429-00	30				860-713	-424 <sup>°</sup>	7 midwa	iyon44@gma	ail.com			
Contact Role(s	): Administrative	Contact, Legal Cont	act, Own	er								

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Departme Water Quality M					_		ection	
PWS ID PWS Name  CT0030294 SAINT PHILIP CHURCH RECTORY				_	ion Pop		vner Type P	rimary Source GW
Local Address (where applicable)	Serv	vice	Residentia	al Comm	nercial I	ndustrial	Combined	Agricultural
64 POMPEY HOLLOW ROAD	Con	nections		1	L			
Towns Served: ASHFORD								
N	lonitorin	g Requi	iremen	ts				
Water System Facility: DISTRIBUTION SYSTEM	(WSF ID: 00	600)						
Total Coliform (3100)						1 rc	utine (RT)	per quarter
Sampling Point (Sampling Point ID)		٨	/lonitoring	g Period	Collec	tion Period		iance Status
Select from Inventory of Active Sampling Points			4/1/25 - 6	/30/25			Co	mplete
		1	0/1/25 - 1	2/31/25				
			1/1/26 - 3	/31/26				
			4/1/26 - 6	/30/26				
Total Coliform (3100)						3	repeat (RP	) per period
Sampling Point (Sampling Point ID)		^	/lonitoring	g Period	Collec	tion Period	d Compl	iance Status
Select from Inventory of Active Sampling Points		6	5/20/25 - 6	6/25/25			Co	mplete
Total Coliform (3100)					3 ter	nporary r	outine (TR	) per month
Sampling Point (Sampling Point ID)		^	/lonitoring	g Period	Collec	tion Period	d Compl	iance Status
Select from Inventory of Active Sampling Points			7/1/25 - 7	//31/25			Co	mplete
Physical Parameters (PPS)						1 rc	utine (RT)	per quarter
Sampling Point (Sampling Point ID)		٨	/lonitoring	g Period	Collec	tion Period	d Compl	iance Status
Select from Inventory of Active Sampling Points			4/1/25 - 6	/30/25			Co	mplete
			7/1/25 - 9	/30/25			Co	mplete
		1	0/1/25 - 1	.2/31/25				
			1/1/26 - 3	/31/26				
			4/1/26 - 6	/30/26				
Water System Facility: ENTRY POINT (WSF ID: 0	00700)							
Nitrate And Nitrite (NOX)						:	L routine (I	RT) per year
Sampling Point (Sampling Point ID)		٨	/lonitoring	g Period	Collec	tion Period	d Compl	iance Status
ENTRY POINT (3)		1	L/1/24 - 12	2/31/24			Co	mplete
		1	/1/25 - 12	2/31/25			Cc	mplete
		1	/1/26 - 12	2/31/26				
Water System Facility: WELL 1 (WSF ID: 20093)								
E. Coli (3014)						1 tri	ggered (TG	) per period
Sampling Point (Sampling Point ID)			/lonitoring		Collec	tion Period	d Compl	iance Status
WELL 1 (2)		$\epsilon$	5/19/25 - 6	6/25/25			Cc	mplete
Water System Facility: WELL 2	(WSF ID:	59750)						
E. Coli (3014)						1 tri		) per period
Sampling Point (Sampling Point ID)			/lonitoring		Collec	tion Period		iance Status
WELL 2 (2)		6	5/19/25 - 6	6/25/25			Co	mplete
Water System	Facility a	ind San	npling F	Point Ir	nvento	ry		
Water					Total	Lead and	d	
	g Point Sam		t		Coliforn			Stage
Facility ID ID		ription		Status		Rule Tie	r Asbestos	WQP 2 DBPR
00600 DISTRIBUTION SYSTEM 4		RIBUTION		Α	Υ			
DOWNS'	TREAM WIT	HIN 5 SER\	ICE CON	Α				

	_	_							_						
	Connectic	ut Depa	rtmen	it of	f Public	Health		Dr	inkin	g W	ater	Se	ction		
	Wa	ter Qua	lity Mo	onit	oring a	nd Con	n	pl	iance	Sch	edul	e			
PWS ID	PWS Name						_			1			ner Type	Prima	ary Source
CT0030294	SAINT PHILIP CH	URCH RECTO	DRY						NC	2	26		Р		GW
Local Address (w	nere applicable)				Service	Residen	ntia	al	Commerc	ial II	ndustria	al	Combine	d A	gricultural
64 POMPEY HOLI	.OW ROAD				Connection	ns			1						
Towns Served: A	SHFORD														
		Water Sy	ystem F	acili	ity and S	ampling	F	Po	int Inve	ento	ry				
Water									7	otal	Lead	and			
*	System Facility			Point	Sampling P					liform					Stage
Facility ID			ID		Description	1			Status I	Rule	Rule	Tier	Asbesto	s WC	QP 2 DBPR
			UPSTRE	AM	WITHIN 5 S	SERVICE CON	N		Α						
00700 ENTRY	POINT		3		ENTRY POI	NT			Α						
20093 WELL	1		2		WELL 1				Α						
59750 WELL	2		2		WELL 2				Α						
				Con	tact Info	rmation	1								
Name				Or	rganization								Job Title	9	
Reverend Grego	y Galvin									Pas	tor				
Mailing Address	ine One		Mailing A	ddress	s Line Two					С	ity		State	Zij	o Code
64 Pompey Hollo	w Rad								Ashfoi	rd			СТ	C	6278
Business Phone	Extension	Fax		Mobi	le Phone	Emergency	y P	Pho	ne Email	Addre	SS				
860-429-2860		860-429-2	2860			860-398-	-0!	541	stphili	pstjud	le@gm	ail.co	om		
Contact Role(s):	Legal Contact														
Name				Or	rganization								Job Title	9	
Ms. Ann Phillips			1	St.	. Philip Chur	ch Corp			ı	Par	ish Sec	reta	ry		
Mailing Address	ine One		Mailing A	ddress	s Line Two					С	ity		State	Zij	o Code
64 Pompey Hollo	w Road				ı				Ashfoi				СТ	C	6278
Business Phone	Extension	Fax		Mobi	le Phone	Emergency	y P	Pho	ne Email	Addre	SS				

Contact Role(s): Administrative Contact

Name				Organization		Job Title			
Father Michael Gia	nnitelli			St Philip The	Apostle Church		Pastor		
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
64 Pompey Hollow	Rd					Ashford		СТ	06278
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	dress		
860-429-2860						stphilips	tjude@gmai	l.com	
			· · · · · · · · · · · · · · · · · · ·		*				

Contact Role(s): Legal Contact, Owner

## Please note the following:

860-429-2860

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

stphilipstjude@gmail.com

	Connectic	*					`				ction	
		ter Quality	y Monit	oring a	ind Con			1				
PWS ID	PWS Name							-		Own		rimary Source
СТ0030374	WESTFORD CON	GREGATIONAL (	CHURCH			-	IC .	1	25		Р	GW
	(where applicable)			Service	Residen	tial Co	ommerc	ial Ir	ndustria	al (	Combined	Agricultura
368 WESTFOR				Connectio	ns		1					
Towns Served	: ASHFORD											
Walan Garla		IDUTION SYST			quireme	nts						
	m Facility: DISTR	IBUTION SYST	EIVI (WSF II	D: 00600)							(DT)	
Total Colifo	• •	oint (D)			0.4 a militari	Daw	:I (	Ca 11 a at				per quarter
	Point (Sampling P	-			Monitori			onect	ion Pei	rioa		iance Status
Select fro	om Inventory of Acti	ive Sampling Pol	nts		4/1/25 -							mplete
					7/1/25 -						Co	mplete
					10/1/25 -							
					1/1/26 - 4/1/26 -							
Dhysical Day	remeters (DDC)				4/1/26 -	6/30/2	26		4		tine (DT)	
-	ameters (PPS) Point (Sampling P	oint ID)			Monitori	ina Pori	ind (	Collect	1 ion Pei			per quarter iance Status
	om Inventory of Acti		ntc		4/1/25 -			Jonect	ion Per	iou		mplete
Select III	on inventory of Acti	ive Sampling For	1113		7/1/25 -							mplete
					10/1/25 -						CC	mpiete
					1/1/26 -							
					4/1/26 -							
Water System	m Facility: ENTRY	POINT (WSF	ID: 00700)		1, 2, 20	0,00,2						
-	Nitrite (NOX)		15. 007 007							1 ,	outine (I	RT) per year
	p Point (Sampling P	oint ID)			Monitori	ina Peri	ind (	Collect	ion Pei		-	iance Status
ENTRY PO					1/1/24 -			onece	1011 1 61	-		mplete
ZIVIIVI I	S.141 (S)				1/1/25 -							mplete
					1/1/26 -							
			Other Co	omnlian	ce Sched							
Compliance S	chedule Activity		Other C	omphan		Due Da	ıte		Achie	ved F	)ate	
	SANITARY SURVEY					5/29/20			Acme	veu z		
INEST OND TO		Motor Cust	om Facili	the and C				· · · · · ·	<b>193</b> <i>4</i>			
		Water Syst	em Facili	ity and S	ampling	Poin			•			
Water System Wa	ater System Facility	San	pling Point	Samplina I	Point			otal liform	Lead Copp			Stage
Facility ID	iter system ruemty	Suii	ID	Description		Cha		Rule			Asbestos	WQP 2 DBPF
	TRIBUTION SYSTEM	1	4		ION SYSTEM		A	Υ				
			WNSTREAM				A					
			PSTREAM		SERVICE CON		A					
00700 EN	TRY POINT		3	ENTRY POI			Α					
20099 WE			2	WELL			A					
			Con	tact Info	rmation	)						
Name				ganization							Job Title	
Mrs. Daryl L.	Basch				gregational	Church	1	Dea	acon			
Mailing Addre		Ma	iling Address						ty		State	Zip Code
368 Westford			<u> </u>				Ashfor		,		CT	06278
Business Ph		Fax	Mobi	le Phone	Emergency	/ Phone			SS		1	
860-490-35					3: -7				3@sbc	globa	l.net	
			l .		I .		1 1		- '			

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

				<b>▲</b>			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0030374	WESTFORD CONGREGATIONAL CHURCH			NC	25	Р	GW
Local Address (v	vhere applicable)	Service	Resider	ntial Commerc	ial Industri	al Combine	ed Agricultural
368 WESTFORD	HILL ROAD	Connections		1			
				· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	

Towns Served: ASHFORD

Contact Role(s): Administrative Contact, Legal Contact

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End of schedule

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	Connecticut Dep	partment of	F Public H	lealth	Drink	ing W	ater	Se	ction		
	-	iality Monit				_					
PWS ID	PWS Name				Classificat				er Type F	rimary	Source
СТ0039023	EVANGELICAL CHRISTIAN	CENTER -REC CENT	ER		NC	:	150		Р	G۱	N
Local Address	(where applicable)		Service	Resident	tial Comr	nercial	ndustria	l (	Combined	l Agri	cultural
574 ASHFORD	CENTER ROAD		Connections	1							
Towns Served	d: ASHFORD										
			oring Requ	iiremei	nts						
Water Syste	m Facility: <b>DISTRIBUTION</b>	SYSTEM (WSF I	D: 00600)								
Total Colifo	•								tine (RT)		
	g Point (Sampling Point ID)			Monitorii		Collec	tion Peri	iod	Compl		
Select fr	om Inventory of Active Sampl	ing Points		4/1/25 -						omplet	
				7/1/25 -					Co	omplet	e
			:		12/31/25						
				1/1/26 -							
Di di In	· · · · · · · · · · · · · (DDC)			4/1/26 -	6/30/26				(DT)		•
-	rameters (PPS) g Point (Sampling Point ID)			Monitorii	na Pariod	Collac	1 tion Peri		tine (RT) <i>Compl</i>		
	om Inventory of Active Sampli	ing Points		4/1/25 -	_	Conec	tion Pen	ou		omplet	
Select II	on inventory of Active Sample	ing i onits		7/1/25 -						omplet	
					12/31/25					mpiet	<u> </u>
				1/1/26 -							
				4/1/26 -							
Water Syste	m Facility: ENTRY POINT	(WSF ID: 00700)		· ·							
•	l Nitrite (NOX)	,,						1 r	outine (	RT) ne	r vear
	g Point (Sampling Point ID)			Monitorii	ng Period	Collec	tion Peri		Compl		-
ENTRY P				1/1/24 - 1				_		mplet	
	•			1/1/25 - 1	12/31/25					mplet	
				1/1/26 - 1	12/31/26						
		Other C	ompliance	Sched	ules						
Compliance S	Schedule Activity			E	Due Date		Achiev	ed D	Date		
CROSS CONN	ECTION SURVEY REPORT			3	3/1/2020						
CROSS CONN	ECTION SURVEY REPORT			3	3/1/2021						
CROSS CONN	ECTION SURVEY REPORT			3	3/1/2022						
CROSS CONN	ECTION SURVEY REPORT			3	3/1/2023						
CROSS CONN	ECTION SURVEY REPORT			3	3/1/2024						
CROSS CONN	ECTION SURVEY REPORT			3	3/1/2026						
	Water	System Facili	ity and Sar	npling	Point I	nvento	ry				
Water						Total	Lead a				
-	ater System Facility	Sampling Point		nt		Coliforn			A a b a a to	14/05	Stage
Facility ID	CTDIDLITION CVCTCA 4	ID A	Description	I CVETER :	Status		Kule 1	ier	Asbestos	WQP	Z DRLK
00600 DI	STRIBUTION SYSTEM	4	DISTRIBUTION		Α	Υ					
		DOWNSTREAM									
00700 5	ITDV DOINT	UPSTREAM	WITHIN 5 SER	VICE CON							
	ITRY POINT	3	ENTRY POINT		Α						
50743 AT	MOSPHERIC TANK										

Α

WELL 3

90

WELL 3

	Water Quality Monit	oring an	d Con	npli	iance S	Schedul	le	
PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
СТ0039023	EVANGELICAL CHRISTIAN CENTER -REC CENT	ER			NC	150	Р	GW
Local Address (	where applicable)	Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural
574 ASHFORD	CENTER ROAD	Connections	1					

Towns Served: ASHFORD

	Contact Information												
Name					Organization			Job Title					
Mr. Wassily Smyrno	ow				Evangelical C	hristian Center		Director					
Mailing Address Lin	e One		Mailing	Addre	ess Line Two			City	State	Zip Code			
574 Ashford Center	Road						Ashford		СТ	06278			
Business Phone	Business Phone Extension Fax					bile Phone Emergency Phone Email Address							
860-429-2743 302 928-437-2743						860-377-1723	director	@eccministri	es.org				

Contact Role(s): Administrative Contact, Legal Contact

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