

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0210012	HOUSATONIC VALLEY REGIONAL HS	NTNC	750	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
246 WARREN TURNPIKE ROAD (ROUTE 26)	Connections	2			

Towns Served: CANAAN

**Monitoring Requirements**

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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	1/1/20 - 12/31/28		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<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	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
<b>Lead And Copper (PBCU)</b>	<b>10 routine (RT) per three years</b>		
<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	1/1/24 - 12/31/26	6/1-9/30	Complete
	1/1/27 - 12/31/29	6/1-9/30	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>		
<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	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/24 - 12/31/25	1/1-12/31	Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

*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
CT0210012	HOUSATONIC VALLEY REGIONAL HS	NTNC	750	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
246 WARREN TURNPIKE ROAD (ROUTE 26)	Connections	2			

Towns Served: CANAAN

**Other Compliance Schedules**

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2026	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2026	

<b>Water System Facility and Sampling Point Inventory</b>						
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier
					Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A		
		HVRHS001	KITCHEN BACK SINK	A	Y	2
		HVRHS002	KITCHEN FRONT SINK	A	Y	2
		HVRHS003	KITCH/OFC STORAGE	A	Y	2
		HVRHS004	FITNESS CTR BR	A	Y	2
		HVRHS005	ATHLETIC DIR OFFICE	A	Y	2
		HVRHS006	NURSE OFFICE	A	Y	2
		HVRHS007	NURSE OFFICE BATH	A	Y	2
		HVRHS008	FACULTY LOUNGE BR	A	Y	2
		HVRHS010	ROOM 110	A	Y	2
		HVRHS011	ROOM 111	A	Y	2
		HVRHS012	ROOM 113	A	Y	2
		HVRHS013	ROOM 114	A	Y	2
		HVRHS014	ROOM 115	A	Y	2
		HVRHS015	LAV NEAR ROOM 116C	A	Y	2
		HVRHS016	GUIDANCE OFFICE	A	Y	2
		HVRHS017	CENTRAL OFFICE	A	Y	2
		HVRHS018	LIBRARY OFFICE	A	Y	1
		HVRHS019	ROOM 131	A	Y	1
		HVRHS020	ROOM 130	A	Y	1
		HVRHS021	ROOM 129	A	Y	1
		HVRHS022	ROOM 128	A	Y	1
		HVRHS023	ROOM 127	A	Y	1
		HVRHS024	ROOM 126	A	Y	1
		HVRHS025	AG-ED OFC ROOM 355	A	Y	1
		HVRHS026	ROOM 361	A	Y	1
		HVRHS027	ROOM 360	A	Y	1
		HVRHS028	ROOM 362	A	Y	1
		HVRHS029	WORK ROOM 1	A	Y	1
		HVRHS030	WORK ROOM 2	A	Y	1
		HVRHS031	TANK/BOOSTER SYS	A		
		UPSTREAM	WITHIN 5 SERVICE CON	A		
00700	ENTRY POINT	3	ENTRY POINT	A		

*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
CT0210012	HOUSATONIC VALLEY REGIONAL HS	NTNC	750	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
246 WARREN TURNPIKE ROAD (ROUTE 26)	Connections	2			

Towns Served: CANAAN

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper	Stage
					Rule	Rule Tier	Asbestos	
10132	WELL 1	2	WELL	A				
53920	WELL 6	2		A				
53926	ATMOSPHERIC STORAGE TANK							

## Certified Operator Information

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

Facility Classification:	Facility ID	Operator Name	Operator Type	Certification(s)	Certification Expiration
SMALL WATER SYSTEM		KILBOURN, ERIC M.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2028
				WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2028
		KILBOURN, JORDAN H	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026
				DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2027

## Contact Information

Name	Organization	Job Title
Regional High School Dist. # 1		
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address

Contact Role(s):	Owner	Name	Organization	Job Title
		Mr. Jeffrey Lloyd	Housatonic Valley Regional Hs	Facilities Manager
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
246 Warren Turnpike Road		Falls Village	CT	06031
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone Email Address

Contact Role(s):	Administrative Contact	Name	Organization	Job Title
		Mrs. Melony M. Brady-Shanley	Region 1 School District	Superintendent
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
246 Warren Turnpike Rd		Falls Village	CT	06031
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone Email Address

860-824-0855 1304 860-248-1231 mbrady-shanley@region1schools.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
CT0210012	HOUSATONIC VALLEY REGIONAL HS	NTNC	750	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
246 WARREN TURNPIKE ROAD (ROUTE 26)	Connections	2			

Towns Served: CANAAN

**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

*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
CT0210013	EDWARD R. HAMILTON BOOKSELLER	NTNC	150	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
147 SOUTH ROUTE 7	Connections	2			

Towns Served: CANAAN

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	4/1/26 - 6/30/26		
<b>Total Coliform (3100)</b>	<b>3 repeat (RP) per period</b>		
<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/23/25 - 10/28/25		Complete
	10/23/25 - 10/28/25		Complete
	12/4/25 - 12/9/25		Complete
<b>Total Coliform (3100)</b>	<b>3 temporary routine (TR) per month</b>		
<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	11/1/25 - 11/30/25		Complete
	1/1/26 - 1/31/26		
<b>Lead And Copper (PBCU)</b>	<b>5 routine (RT) per three years</b>		
<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/28	6/1-9/30	
	1/1/29 - 12/31/31	6/1-9/30	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>		
<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Water System Facility: <b>ENTRY POINT - BUSINESS WELL</b> (WSF ID: 00700)			
<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
EP - BUSINESS WELL (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
EP - BUSINESS WELL (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

**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
CT0210013	EDWARD R. HAMILTON BOOKSELLER	NTNC	150	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
147 SOUTH ROUTE 7	Connections	2			

Towns Served: CANAAN

## Monitoring Requirements

Water System Facility: ENTRY POINT - BUSINESS WELL (WSF ID: 00700)

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
EP - BUSINESS WELL (3)	1/1/23 - 12/31/25			Complete
	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			

Organic Chemicals (VOCS)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
EP - BUSINESS WELL (3)	1/1/24 - 12/31/26			
	1/1/27 - 12/31/29			

Water System Facility: ENTRY POINT - HAMILTON WELL (WSF ID: 00701)

Inorganic Chemicals (IOCS)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
EP - HAMILTON WELL (3)	1/1/23 - 12/31/25			Complete
	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			

Nitrate And Nitrite (NOX)		1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
EP - HAMILTON WELL (3)	1/1/25 - 12/31/25			Complete
	1/1/26 - 12/31/26			
	1/1/27 - 12/31/27			

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
EP - HAMILTON WELL (3)	1/1/23 - 12/31/25			Complete
	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			

Organic Chemicals (VOCS)		1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
EP - HAMILTON WELL (3)	1/1/25 - 12/31/25			Complete
	1/1/26 - 12/31/26			
	1/1/27 - 12/31/27			

Water System Facility: BUSINESS WELL (WSF ID: 10133)

E. Coli (3014)		1 triggered (TG) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL #2 (2)	10/22/25 - 10/28/25			Complete
	10/22/25 - 10/28/25			Complete
	12/3/25 - 12/9/25			Complete

Water System Facility: HAMILTON WELL (WSF ID: 10134)

E. Coli (3014)		1 triggered (TG) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	

*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
CT0210013	EDWARD R. HAMILTON BOOKSELLER	NTNC	150	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
147 SOUTH ROUTE 7		2			

Towns Served: CANAAN

## Monitoring Requirements

Water System Facility: HAMILTON WELL (WSF ID: 10134)

E. Coli (3014)				1 triggered (TG) per period
Sampling Point (Sampling Point ID)		Monitoring Period	Collection Period	Compliance Status
WELL #1 (2)		10/22/25 - 10/28/25		Complete
		10/22/25 - 10/28/25		Complete
		12/3/25 - 12/9/25		Complete

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION EXEMPTION	3/1/2029	

## 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 2 DBPR	Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A					
		EDRH001	UPPER KITCHEN SINK	A	Y	N	Y		
		EDRH002	LOWER KITCHEN SINK	A		2	Y		
		EDRH003	UPPER LADIES ROOM	A	Y	N	Y		
		EDRH004	UPPER MENS ROOM	A	Y	N	Y		
		EDRH005	LOWER BATHROOM	A	Y	2	Y		
		EDRH006	LOWER LADIES ROOM	A	Y	N	Y		
		EDRH007	LOWER MENS ROOM	A	Y	N	Y		
		EDRH008	SHIPPING SINK	A	Y	N	Y		
		EDRH009	WORK SINK LOWER	A	Y	2	Y		
		EDRH010	UPPER UTILITY SINK	A	Y	N	Y		
		UPSTREAM	WITHIN 5 SERVICE CON	A					
00700	ENTRY POINT - BUSINESS WELL	3	EP - BUSINESS WELL	A					
00701	ENTRY POINT - HAMILTON WELL	3	EP - HAMILTON WELL	A					
10133	BUSINESS WELL	2	WELL #2	A					
10134	HAMILTON WELL	2	WELL #1	A					

## Certified Operator Information

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

Facility Classification:	Certification Expiration		
Operator Name	Operator Type	Certification(s)	
KILBOURN, ERIC M.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2028
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2028
KILBOURN, JORDAN H	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2027

*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
<b>CT0210013</b>	<b>EDWARD R. HAMILTON BOOKSELLER</b>	NTNC	150	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
147 SOUTH ROUTE 7		2			

Towns Served: CANAAN

## Contact Information

Name	Organization	Job Title		
<b>Mr. Richard Hamilton</b>	Edward R. Hamilton Bookseller	President		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
PO Box 3358		Falls Village	CT	06031
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-824-0204		860-824-0340		richardh@ehbmail.com

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

**Please note the following:**

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

*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
CT0210014	CAMP ISABELLA FREEDMAN	NTNC	84	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
116 JOHNSON ROAD	Connections	3			19

Towns Served: CANAAN

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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	1/1/20 - 12/31/28		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<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	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
<b>Lead And Copper (PBCU)</b>	<b>5 routine (RT) per year</b>		
<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	1/1/25 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/26	6/1-9/30	
	1/1/27 - 12/31/27	6/1-9/30	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>		
<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	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		

*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
CT0210014	CAMP ISABELLA FREEDMAN	NTNC	84	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
116 JOHNSON ROAD	3				19

Towns Served: CANAAN

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT		3/1/2025

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper	Asbestos	WQP 2	DBPR
					Coliform Rule	Rule Tier				
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y					
		CIF1	MAIN OFF BATH SINK	A	Y	2	Y	Y		
		CIF10	CHESNUT HILL SINK	A	Y	2	Y	Y		
		CIF11	MAY RM 4 SINK	A	Y	2	Y	Y		
		CIF12	HILLSIDE BSM KITC SK	A	Y	2	Y	Y		
		CIF13	MAPLE BATH SINK	A	Y	2	Y	Y		
		CIF14	BLUE HERON BATH SINK	A		2	Y	Y		
		CIF15	POOL HSE BATH SINK	A	Y	2	Y	Y		
		CIF16	SUBURBS B/S	A		2				
		CIF2	MAIN BUILD MR SINK	A	Y	2	Y	Y		
		CIF3	MAIN BUILD WR SINK	A		2	Y	Y		
		CIF4	MAIN BUIL KITCH SINK	A	Y	2	Y	Y		
		CIF5	ARTS/CRAFT BATH SINK	A	Y	2	Y	Y		
		CIF6	SCHEUER RM1 BATH SNK	A	Y	2	Y	Y		
		CIF7	PINE RM3 BATH SINK	A	Y	2	Y	Y		
		CIF8	KAUFMAN LAUN RM SINK	A	Y	2	Y	Y		
		CIF9	ELM RM 1 SINK	A	Y	2	Y	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A						
		MAIN K/S	GENERATED BY BATCH	A	Y					
		MAY B/S	GENERATED BY BATCH	A	Y					
		OFFICE B/S	GENERATED BY BATCH	A	Y					
		SCHEURER B/	GENERATED BY BATCH	A	Y					
		SUBURBS B/S	GENERATED BY BATCH	A	Y					
		UPSTREAM	WITHIN 5 SERVICE CON	A						
00700	ENTRY POINT	3	ENTRY POINT	A						
20451	WELL	2	WELL	A						
62212	BLADDER STORAGE TANKS									

## Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
Facility Classification:	Operator Name	Operator Type	Certification Expiration
SMALL WATER SYSTEM	HELMING, TRAVIS	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III DISTRIBUTION SYSTEM OPERATOR - CLASS III
			9/30/2028 9/30/2028

*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
CT0210014	CAMP ISABELLA FREEDMAN	NTNC	84	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
116 JOHNSON ROAD	3			19	

Towns Served: CANAAN

## Contact Information

Name	Organization				Job Title
Hazon, Inc.					
Mailing Address Line One	Mailing Address Line Two				City
25 Broadway					New York
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
212-644-2332					

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

Name	Organization				Job Title
Ms. Tiffani Irwin	Adamah/Isabella Freedman				Director of Sust Fac
Mailing Address Line One	Mailing Address Line Two				City
116 Johnson Road					Falls Village
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
704-604-8254				704-604-8254	tirwin@pearlstonecenter.org

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

**Please note the following:**

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

*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
CT0210023	TOWN OF CANAAN (DAYCARE)	NTNC	30	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
35 PAGE ROAD, FALLS VILLAGE	Connections	1			

Towns Served: CANAAN

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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	1/1/20 - 12/31/28		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per month</b>		
<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	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		
<b>Lead And Copper (PBCU)</b>	<b>5 routine (RT) per year</b>		
<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	1/1/25 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/26	6/1-9/30	
	1/1/27 - 12/31/27	6/1-9/30	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per month</b>		
<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	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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

<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/24 - 12/31/26		

*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
CT0210023	TOWN OF CANAAN (DAYCARE)	NTNC	30	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
35 PAGE ROAD, FALLS VILLAGE	Connections	1			

Towns Served: CANAAN

## Monitoring Requirements

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

Inorganic Chemicals (IOCS)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
		1/1/27 - 12/31/29		1 routine (RT) per three years
<b>Nitrate And Nitrite (NOX)</b>	<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)		1/1/25 - 12/31/25		Complete
		1/1/26 - 12/31/26		
		1/1/27 - 12/31/27		
<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>	<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)		1/1/23 - 12/31/25		
		1/1/26 - 12/31/28		
		1/1/29 - 12/31/31		
<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>	<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)		1/1/23 - 12/31/25		Complete
		1/1/26 - 12/31/28		
		1/1/29 - 12/31/31		
<b>Organic Chemicals (VOCS)</b>	<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)		1/1/25 - 12/31/25		Complete
		1/1/26 - 12/31/26		
		1/1/27 - 12/31/27		

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION EXEMPTION		3/1/2028

Water System Facility and Sampling Point Inventory						
Water System Facility	Sampling Point ID	Sampling Point Description	Total Status	Coliform Rule	Lead and Copper Rule Tier	Stage Asbestos WQP 2 DBPR
Facility ID						
00600	DISTRIBUTION SYSTEM	00599 CANAAN DAY CARE DIST	I	Y		
		4 DISTRIBUTION SYSTEM	A	Y		
	DOWNSTREAM	WITHIN 5 SERVICE CON	A	Y		
	I/T - BATHR	INFANT/TODDLER BATHR	A	Y	1	
	I/T - KITCH	INFANT/TODDLER KITCH	A	Y	1	
	INFANT/TODD	INFANT/TODDLER ROOM	I	Y		
	PB8959	I/T STAFF BATHROOM	A		1	
	PB8960	35 PAGE RD I T KITCH	I		1	
	PB8961	35 PAGE RD PRESCHOOL	I		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.*

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0210023	TOWN OF CANAAN (DAYCARE)	NTNC	30	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
35 PAGE ROAD, FALLS VILLAGE	Connections	1			

Towns Served: CANAAN

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper	Asbestos	WQP 2	Stage DBPR
					Coliform Rule	Copper Rule Tier				
		PB8962	35 PAGE RD I/T CHILD	I			1			
		PB8963	35 PAGE RD PRESCHL A	I			1			
	PRESCHOOL	PRESCHL ART SINK		I		Y				
	PRESCHOOL -	PRESCHL KITCH SINK		I		Y				
	PRESCHOOL 3	PRESCHOOL 3 BATHROOM		A			1			
	PRESCHOOL B	PRESCHOOL ART SINK		A		Y	1			
	PRESCHOOL S	PRESCHOOL KITCHEN SI		A		Y	1			
	UPSTREAM	WITHIN 5 SERVICE CON		A		Y				
00700	ENTRY POINT	3	ENTRY POINT	A						
11028	WELL	2	WELL	A						

## Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM	Certification Expiration
Operator Name	Operator Type	Certification(s)
GAGNON, MATTHEW B.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III WATER TREATMENT PLANT OPERATOR - CLASS III

## Contact Information

Name	Organization	Job Title
Canaan		
Mailing Address Line One	Mailing Address Line Two	City
		State
		Zip Code

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address

Contact Role(s):	Owner	Name	Organization	Job Title
Ms. Ashley Allyn		Falls Village Daycare		Executive Director
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
35 Page Road		Falls Village	CT	06031
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-824-0882		860-824-8195		Email Address fvdccdirector@gmail.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
CT0210023	TOWN OF CANAAN (DAYCARE)				NTNC	30	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
35 PAGE ROAD, FALLS VILLAGE			1					
Towns Served: CANAAN								
Name			Organization			Job Title		
Mr. David Barger			Town of Canaan			First Selectman		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code	
P.O. Box 47					Canaan	CT	06031	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-824-0707	23			860-671-7007	firstselectman@canaanfallsvillage.org			

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

**Please note the following:**

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

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

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

***End of schedule***