

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0380021	DURHAM CENTER DIVISION	C	1,601	L	SWP
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		35	4		Agricultural

Towns Served: DURHAM

**Monitoring Requirements**

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

<b>Chlorine Residual (1012)</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	1/1/26 - 1/31/26		Complete
<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	1/1/23 - 12/31/31		
<b>Total Haloacetic Acids (2456)</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>
TOWN HALL (4520DDBP1)	1/1/25 - 12/31/25	7/1-7/31	Complete
	1/1/26 - 12/31/26	7/1-7/31	
	1/1/27 - 12/31/27	7/1-7/31	
<b>Total Trihalomethanes (2950)</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>
COZY CORNER (4520DDBP2)	1/1/25 - 12/31/25	7/1-7/31	Complete
	1/1/26 - 12/31/26	7/1-7/31	
	1/1/27 - 12/31/27	7/1-7/31	
<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	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		Complete
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
<b>Total Coliform (3100)</b>	<b>2 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
	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>20 routine (RT) per six months</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 - 12/31/25		Complete
	1/1/26 - 6/30/26		
	7/1/26 - 12/31/26		
<b>Physical Parameters (PPS)</b>	<b>2 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

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# Connecticut Department of Public Health Drinking Water Section

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### Monitoring Requirements

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

Physical Parameters (PPS)		2 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
	9/1/25 - 9/30/25		Complete	
	10/1/25 - 10/31/25		Complete	
	5/1/26 - 5/31/26			
	6/1/26 - 6/30/26			
	7/1/26 - 7/31/26			

  

Physical Parameters (PPS)		1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
Select from Inventory of Active Sampling Points	11/1/25 - 11/30/25		Complete	
	12/1/25 - 12/31/25		Complete	
	1/1/26 - 1/31/26		Complete	
	2/1/26 - 2/28/26			
	3/1/26 - 3/31/26			
	4/1/26 - 4/30/26			

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
MAIL/HAND DELIVER NOTICE TO CONSUMERS	12/31/2025	
CROSS CONNECTION SURVEY REPORT	3/1/2026	
CERTIFY LEAD SL NOTIFICATION	7/1/2026	

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		
		4520	TOWN HALL	A	Y	N	Y
		4520-1	POST OFFICE	A	Y	N	
		4520-10	28 CHERRY LANE	A	Y	3	
		4520-11	39 CHERRY LANE	A	Y	1	
		4520-12	38 CHERRY LANE	A	Y	3	
		4520-129	148 MAPLE AVE	A			
		4520-13	55 CHERRY LANE	A	Y	3	
		4520-14	56 CHERRY LANE	A	Y	3	
		4520-15	29 CHERRY LANE	A	Y	3	
		4520-173	173 MAPLE AVE	A			
		4520-18	18 MAIDEN LN	A			
		4520-2	COZY CORNER	A	Y	N	
		4520-29	29 MAPLE AVE	A			
		4520-3	40 FOWLER LANE	A	Y	3	

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Water Quality Monitoring and Compliance Schedule**

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Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		35	4		Agricultural

Towns Served: DURHAM

**Water System Facility and Sampling Point Inventory**

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
					Y	3	3	3
	4520-30	PRV VAULT		A	Y			
	4520-31	13 CHERRY LN		A	Y	3		
	4520-32	16 CHERRY LN		A	Y	3		
	4520-33	38 CHERRY LN		A		3		
	4520-34	19 FOWLER AVE		A		3		
	4520-35	25 FOWLER AVE		A		3		
	4520-36	21 MAIN ST		A		3		
	4520-37	40 MAIN ST		A	Y	3		
	4520-38	63 MAIN ST		A		3		
	4520-39	79 MAIN ST		A		3		
	4520-4	54 FOWLER LANE		A	Y	3		
	4520-40	85 MAIN ST		A	Y	3		
	4520-41	91 MAIN ST		A	Y	3		
	4520-42	COG FOUNTAIN IT HALL		A		N		
	4520-43	COG HS KITCHEN		A		N		
	4520-44	COG HS NURSES OFFICE		A	Y	N		
	4520-45	COG BOYS HS BATHROOM		A		N		
	4520-46	COG GIRLS HS BATHRM		A		N		
	4520-47	STRONG FOUNTAIN		A		N		
	4520-48	STRONG BOYS BATHROOM		A		N		
	4520-49	STRONG NURSE OFFICE		A	Y	N		
	4520-5	48 FOWLER LANE		A	Y	3		
	4520-50	STRONG KITCHEN		A		N		
	4520-51	COG TEACHER LOUNGE		A		N		
	4520-6	43 FOWLER LANE		A	Y	3		
	4520-7	37 FOWLER LANE		A	Y	N		
	4520-8	23 FOWLER LANE		A	Y	3		
	4520-9	50 CHERRY LANE		A	Y	3		
	4520-95	95 R MAPLE AVE		A				
	4520-97	97R MAPLE AVE		A				
	4520DDBP1	TOWN HALL		A	Y	N		Y
	4520DDBP2	COZY CORNER		A	Y	N		Y
	DOWNSTREAM	WITHIN 5 SERVICE CON		A				
	UPSTREAM	WITHIN 5 SERVICE CON		A				

53775 PRESSURE TANK 1

53777 PRESSURE TANK 2

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CT0380021	DURHAM CENTER DIVISION	C	1,601	L	SWP
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		35	4		Agricultural

Towns Served: DURHAM

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total	Lead and Coliform	Copper Rule	Asbestos Rule Tier	Stage WQP 2	DBPR
				Status	Rule	Tier	Asbestos	WQP 2	DBPR
62546	INTERCONNECTION - MIDDLETON WATER								

## Certified Operator Information

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

**Facility Classification:** CLASS 1 DISTRIBUTION SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
ROSS, ROBERT F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2027
DISTEFANO, RONALD M	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	3/31/2028
KORNATZ, CHRISTOPHER	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III WATER TREATMENT PLANT OPERATOR - CLASS III	6/30/2028 3/31/2027

## Contact Information

Name	Organization	Job Title
Durham		
Mailing Address Line One	Mailing Address Line Two	City
		State

  

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address

Contact Role(s): **Owner**

Name	Organization	Job Title
Mr. Brendan Rea	Town of Durham	First Selectman
Mailing Address Line One	Mailing Address Line Two	City
30 Town House Road		State

  

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-349-3625		860-343-6733			brea@townofdurhamct.org

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

**Please note the following:**

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

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

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

**End of schedule**

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0380041	YESHIVA OF WATERBURY-DURHAM CAMPUS	C	490	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
459R WALLINGFORD ROAD	Connections				19

Towns Served: DURHAM

**Monitoring Requirements**

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

<b>Chlorine Residual (1012)</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
<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 Haloacetic Acids (2456)</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>
CAF KITCHEN DISH 1 (4-1)	1/1/25 - 12/31/25	8/1-8/31	Complete
	1/1/26 - 12/31/26	8/1-8/31	
	1/1/27 - 12/31/27	8/1-8/31	
<b>Total Trihalomethanes (2950)</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>
CARLTON DORM - LOWER BATH (LG-06)	1/1/25 - 12/31/25	8/1-8/31	Complete
	1/1/26 - 12/31/26	8/1-8/31	
	1/1/27 - 12/31/27	8/1-8/31	
<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>Total Coliform (3100)</b>	<b>3 repeat (RP) per period</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	7/23/25 - 7/28/25		Complete
<b>Lead And Copper (PBCU)</b>	<b>10 routine (RT) per six months</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 - 12/31/25		Complete

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Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
459R WALLINGFORD ROAD	Connections				19

Towns Served: DURHAM

**Monitoring Requirements**

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

Lead And Copper (PBCU)	10 routine (RT) per six months		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	1/1/26 - 6/30/26		
	7/1/26 - 12/31/26		
Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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)

Chloride (1017)	1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (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
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Radionuclides - Gross Alpha, Combined Radium & Uranium (RADA)	1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

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Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
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Towns Served: DURHAM

### Monitoring Requirements

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

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)		1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/25 - 12/31/25			
	1/1/26 - 12/31/26			
	1/1/27 - 12/31/27			
Organic Chemicals (VOCS)		1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete	
	1/1/26 - 12/31/26			
	1/1/27 - 12/31/27			

Water System Facility: WELL #1 (WSF ID: 718)

E. Coli (3014)		1 triggered (TG) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL #1 (2)	7/22/25 - 7/28/25		Complete	
E. Coli (3014)			1 routine (RT) per month	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL #1 (2)	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			

### Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit		Samples Req/Month	
		Compliance History:	Operating Limit	Monitoring Period	Compliance Status:
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L			Daily
Start Date: 8/1/2012					
		8/1/2025 - 8/31/2025		Y	
		9/1/2025 - 9/30/2025		Y	
		10/1/2025 - 10/31/2025		Y	
		11/1/2025 - 11/30/2025		Y	
		12/1/2025 - 12/31/2025		Y	

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Towns Served: DURHAM

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

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
Orthophosphate	Entry Point Phosphate Monitoring (PHOS)	Minimum: 1.5 MG/L	2	
<b>Start Date:</b> 4/1/2019		<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
		8/1/2025 - 8/31/2025		
		9/1/2025 - 9/30/2025		
		10/1/2025 - 10/31/2025		
		11/1/2025 - 11/30/2025		
		12/1/2025 - 12/31/2025		
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
Orthophosphate	Entry Point Phosphate Monitoring (PHOS)	Maximum: 3.0 MG/L	2	
<b>Start Date:</b> 4/1/2019		<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
		8/1/2025 - 8/31/2025	Y	
		9/1/2025 - 9/30/2025	Y	N
		10/1/2025 - 10/31/2025	Y	
		11/1/2025 - 11/30/2025	Y	N
		12/1/2025 - 12/31/2025	N	
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.1 PH	4	
<b>Start Date:</b> 4/1/2019		<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
		8/1/2025 - 8/31/2025		
		9/1/2025 - 9/30/2025		
		10/1/2025 - 10/31/2025		
		11/1/2025 - 11/30/2025		
		12/1/2025 - 12/31/2025		
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
pH	Entry Point pH Monitoring (PHRD)	Maximum: 7.6 PH	4	
<b>Start Date:</b> 4/1/2019		<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
		8/1/2025 - 8/31/2025	Y	
		9/1/2025 - 9/30/2025	Y	
		10/1/2025 - 10/31/2025	Y	
		11/1/2025 - 11/30/2025	Y	
		12/1/2025 - 12/31/2025	Y	

**Other Compliance Schedules**

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2026	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2026	

*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
CT0380041	YESHIVA OF WATERBURY-DURHAM CAMPUS	C	490	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
459R WALLINGFORD ROAD	Connections				19

Towns Served: DURHAM

<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	Lead and Copper Rule Tier	Asbestos WQP 2 DBPR
					Stage	Stage	Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		4-1	CAF KITCHEN DISH 1	A	Y		Y
		DOWNSTREAM	WITHIN 5 SERVICE CON	A	Y		
			LG-01 CAFETERIA - INACTIVE	I			
			LG-02 75 BRAYSON DR	A	Y		
			LG03 ESSEX - INACTIVE	I	Y		
			LG-03 ESSEX HOUSE	A			
			LG-05 WATERBURY-LOWER BATH	A	Y	N	
			LG-06 CARLTON DORM - LOWER	A		N	
			LG-09 DUBOIS HALL	A	Y		
			LG-11 MONTICELLO HALL	A	Y		
			LG-12 INDEPENDENCE HALL	A	Y		
			LG-13 GYMNASIUM	A	Y		Y
			LG-14 SALEM COTTAGE	A	Y	3	
			LG-15 STURBRIDGE COTTAGE	A	Y		
			LG-16 WINDSOR COTTAGE	A	Y		
			LG-17 WOODBRIDGE DORM	A	Y	3	
			LG-18 RUSHFORD	I			
			LG-19 MYSTIC	A	Y	N	
			LG-20 DOVER	A	Y		
			LG-21 CAF HAND WASH DINING	A	Y		
			LG-22 SYNAGOGUE	A			
			LG-23 BLUE RIDGE UPPER BAT	A	Y	N	
			LG-24 CAF MENS ROOM	A	Y		
			LG-25 CAF LADIES	A	Y		
			LG-26 CAF KITCHEN HAND	A	Y		
			LG-27 CAF KITCHEN DISH 2	A	Y		
			LG-28 PLYMOUTH	A	Y	N	
			LG-29 WATERBURY UPPER BATH	A	Y	N	
			LG-30 BLUE RIDGE LOWER BAT	A	Y	N	
			LG-31 CARLTON DORM UPPER B	A		N	
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
36271	TREATMENT PLANT						
51622	ATMOSPHERIC STORAGE TANK						
51626	LAKE GROVE PUMPHOUSE						

**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
CT0380041	YESHIVA OF WATERBURY-DURHAM CAMPUS	C	490	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
459R WALLINGFORD ROAD	Connections				19

Towns Served: DURHAM

**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	
718	WELL #1	2	WELL #1	A				

**Certified Operator Information**

Water System Facility: **TREATMENT PLANT (WSF ID: 36271)**

Facility Classification:	CLASS 1 TREATMENT PLANT			Certification Expiration
	Operator Name	Operator Type	Certification(s)	
COSSETTE, EVAN J	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV		6/30/2027
		DISTRIBUTION SYSTEM OPERATOR IN TRAINING		6/30/2027
		DISTRIBUTION SYSTEM OPERATOR - CLASS II		9/30/2027

**Contact Information**

Name	Organization	Job Title		
Mr. Eli Elefant	Yeshiva Ateres Shmuel of Wtby	Owner		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
47 Buckingham Street		Waterbury	CT	06710
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-756-1800				
				Email Address
				eli@yasw.org

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

Name	Organization	Job Title		
Ms. Chana B. Bassman	Stonegate Springs	Executive Assistant		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
47 Buckingham St		Waterbury	CT	06710
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-756-1800	102	203-756-1200		347-432-8607
				Email Address
				bassman@yasw.org

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

**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
CT0380641	DURHAM ELDERLY HOUSING DIVISION	C	50	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
TRINITY HILL DR, DURHAM	Connections	24			

Towns Served: DURHAM

### 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	1/1/23 - 12/31/31		
<b>Total Coliform (3100)</b>	<b>3 repeat (RP) per period</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	8/6/25 - 8/11/25		Complete
<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		Complete
	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 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	
	1/1/27 - 12/31/29	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		Complete
	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)

*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
CT0380641	DURHAM ELDERLY HOUSING DIVISION	C	50	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
TRINITY HILL DR, DURHAM	Connections	24			

Towns Served: DURHAM

### Monitoring Requirements

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

Inorganic Chemicals (IOCS)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (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	
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete	
	1/1/26 - 12/31/26			
	1/1/27 - 12/31/27			
Radionuclides - Gross Alpha, Combined Radium & Uranium (RADA)		1 routine (RT) per six years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/20 - 12/31/25		Complete	
	1/1/26 - 12/31/31			
Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)		1 (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/23 - 12/31/25	1/1-12/31	Waiver	
Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	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	
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete	
	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			

Water System Facility: WELL #2 (WSF ID: 1497)

E. Coli (3014)		1 triggered (TG) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL #2 (2)	8/5/25 - 8/11/25		Complete	

Water System Facility: WELL #1 (WSF ID: 1498)

E. Coli (3014)		1 triggered (TG) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL #1 (2)	8/5/25 - 8/11/25		Complete	

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT FISCAL AND ASSET MANAGEMENT CERT	1/1/2021	
CROSS CONNECTION SURVEY REPORT	3/1/2030	

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0380641	DURHAM ELDERLY HOUSING DIVISION	C	50	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
TRINITY HILL DR, DURHAM	24				

Towns Served: DURHAM

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
					Y	N	Y	Y
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		4536	COMMUNITY CENTER	A	Y	N	Y	Y
		4536-1	BUILDING 5 UNIT A	A	Y	N		
		4536-10	BUILDING 11 UNIT B	A	Y	N		
		4536-11	BUILDING 11 UNIT C	A	Y	N		
		4536-12	BUILDING 11 UNIT D	A	Y	N		
		4536-13	BUILDING 15 UNIT A	A	Y	N		
		4536-14	BUILDING 15 UNIT B	A	Y	N		
		4536-15	BUILDING 15 UNIT C	A	Y	N		
		4536-16	BUILDING 15 UNIT D	A	Y	N		
		4536-17	BUILDING 17 UNIT A	A	Y	N		
		4536-18	BUILDING 17 UNIT B	A	Y	N		
		4536-19	BUILDING 17 UNIT C	A	Y	N		
		4536-2	BUILDING 5 UNIT B	A	Y	N		
		4536-20	BUILDING 17 UNIT D	A	Y	N		
		4536-3	BUILDING 5 UNIT C	A	Y	N		
		4536-4	BUILDING 5 UNIT D	A	Y	N		
		4536-5	BUILDING 7 UNIT A	A	Y	N		
		4536-6	BUILDING 7 UNIT B	A	Y	N		
		4536-7	BUILDING 7 UNIT C	A	Y	N		
		4536-8	BUILDING 7 UNIT D	A	Y	N		
		4536-9	BUILDING 11 UNIT A	A	Y	N		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
1497	WELL #2	2	WELL #2	A				
1498	WELL #1	2	WELL #1	A				
62658	ATMOSPHERIC STORAGE TANK							
62659	ATMOSPHERIC STORAGE TANK 2							
62660	HYDROSTATIC STORAGE TANK							
62661	ATMOSPHERIC STORAGE TANK							

## Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
KORNATZ, CHRISTOPHER	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2028

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0380641	DURHAM ELDERLY HOUSING DIVISION	C	50	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
TRINITY HILL DR, DURHAM	Connections	24			

Towns Served: DURHAM

## Certified Operator Information

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

**Facility Classification:** SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
		WATER TREATMENT PLANT OPERATOR - CLASS III	3/31/2027
HINES, DAVE	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2027

## Contact Information

Name	Organization	Job Title
Durham		
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. Brendan Rea	Town of Durham	First Selectman
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
30 Town House Road		Durham CT 06422
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address
860-349-3625		860-343-6733 brea@townofdurhamct.org

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

**Please note the following:**

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

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

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

**End of schedule**

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0380651	DURHAM LEXINGTON PLACE DIVISION	C	45	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		15			

Towns Served: DURHAM

### 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	1/1/25 - 12/31/33		
<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		Complete
	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 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	
	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		Complete
	4/1/26 - 6/30/26		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
<b>Di(2-Ethylhexyl) - Phthalate (2039)</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>Net Gross Alpha (4000)</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>Uranium (4006)</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>

*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
CT0380651	DURHAM LEXINGTON PLACE DIVISION	C	45	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		15			

Towns Served: DURHAM

## Monitoring Requirements

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

Uranium (4006)				1 routine (RT) per three years
Sampling Point (Sampling Point ID)		Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/23 - 12/31/25		Complete
		1/1/26 - 12/31/28		
		1/1/29 - 12/31/31		
Combined Radium-226/228 (4010)				1 routine (RT) per three years
Sampling Point (Sampling Point ID)		Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/23 - 12/31/25		Complete
		1/1/26 - 12/31/28		
		1/1/29 - 12/31/31		
Inorganic Chemicals (IOCS)				1 routine (RT) per three years
Sampling Point (Sampling Point ID)		Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/24 - 12/31/26		
		1/1/27 - 12/31/29		
Nitrate And Nitrite (NOX)				1 routine (RT) per year
Sampling Point (Sampling Point ID)		Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (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
ENTRY POINT (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
ENTRY POINT (3)		1/1/25 - 12/31/27		

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	3/9/2023	
CROSS CONNECTION SURVEY REPORT	3/1/2030	

Water System Facility and Sampling Point Inventory									
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Status	Lead and Coliform Rule	Copper Rule Tier	Asbestos	WQP 2	DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y				
		4546	PUMP HSE DIST TAP	P	Y		N		
		4546-1	32 LEXINGTON PLACE N	P	Y		N		
		4546-10	41 LEXINGTON PLACE S	P	Y		N		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0380651	DURHAM LEXINGTON PLACE DIVISION	C	45	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		15			

Towns Served: DURHAM

**Water System Facility and Sampling Point Inventory**

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
					Y	Y	N	Y
	4546-11	45 LEXINGTON PLACE S		P	Y			
	4546-12	49 LEXINGTON PLACE S		P	Y			
	4546-13	59 LEXINGTON PLACE S		P	Y			
	4546-14	61 LEXINGTON PLACE S		P	Y			
	4546-14 C	TWC - LEXINGTON		A	Y			
	4546-15	65 LEXINGTON PLACE S		P	Y			
	4546-2	36 LEXINGTON PLACE N		P	Y			
	4546-3	40 LEXINGTON PLACE N		P	Y			
	4546-4	46 LEXINGTON PLACE N		P	Y			
	4546-5	50 LEXINGTON PLACE N		P	Y			
	4546-6	54 LEXINGTON PLACE N		P	Y			
	4546-7	23 LEXINGTON PLACE S		P	Y			
	4546-8	27 LEXINGTON PLACE S		P	Y			
	4546-9	31 LEXINGTON PLACE S		P	Y			
	DOWNSTREAM	WITHIN 5 SERVICE CON		A				
	UPSTREAM	WITHIN 5 SERVICE CON		A				
00700	ENTRY POINT	3	ENTRY POINT	A				
1500	WELL #2	2	WELL #2	A				
1501	WELL #1	2	WELL #1	A				
36272	TREATMENT PLANT							
62662	HYDROPNEUMATIC STORAGE							

**Certified Operator Information**

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

Facility Classification:	DISTRIBUTION SYSTEM			Certification Expiration
Operator Name	Operator Type	Certification(s)		
HINES, DAVE	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II		9/30/2027

Water System Facility: **TREATMENT PLANT (WSF ID: 36272)**

Facility Classification:	CLASS 1 TREATMENT PLANT			Certification Expiration
Operator Name	Operator Type	Certification(s)		
KORNATZ, CHRISTOPHER	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III		6/30/2028
		WATER TREATMENT PLANT OPERATOR - CLASS III		3/31/2027

**Contact Information**

Name	Organization			Job Title		
Durham						
Mailing Address Line One	Mailing Address Line Two		City	State	Zip Code	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	

*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
CT0380651	DURHAM LEXINGTON PLACE DIVISION	C	45	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
	15				Agricultural

Towns Served: DURHAM

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Contact Role(s): **Owner**

Name	Organization	Job Title		
Mr. Brendan Rea	Town of Durham	First Selectman		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
30 Town House Road		Durham	CT	06422
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-349-3625		860-343-6733		brea@townofdurhamct.org

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

**Please note the following:**

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

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

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

**End of schedule**

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0381011	TWIN MAPLES NURSING HOME	C	100	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
809 NEW HAVEN ROAD	Connections	1			

Towns Served: DURHAM

**Monitoring Requirements**

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

<b>Chlorine Residual (1012)</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
<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	1/1/22 - 12/31/30		
<b>Total Haloacetic Acids (2456)</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>
RESIDENT ROOM 14 (RR14)	1/1/25 - 12/31/25	7/1-7/31	Complete
	1/1/26 - 12/31/26	7/1-7/31	
	1/1/27 - 12/31/27	7/1-7/31	
<b>Total Trihalomethanes (2950)</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>
EMPLOYEE BATH NURSE STATION (EMBATH)	1/1/25 - 12/31/25	7/1-7/31	Complete
	1/1/26 - 12/31/26	7/1-7/31	
	1/1/27 - 12/31/27	7/1-7/31	
<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 six months</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 - 12/31/25		Complete
	1/1/26 - 6/30/26		
	7/1/26 - 12/31/26		
<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: <b>ENTRY POINT</b> (WSF ID: 00700)			
<b>Net Gross Alpha (4000)</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		

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0381011	TWIN MAPLES NURSING HOME	C	100	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
809 NEW HAVEN ROAD	Connections	1			

Towns Served: DURHAM

### Monitoring Requirements

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

1 routine (RT) per three years			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
1 routine (RT) per three years			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
1 routine (RT) per three years			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	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		
1 routine (RT) per three years			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	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		

### Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point RDC (EPRD)	Minimum: 0.4 MG/L	Daily
<b>Start Date:</b> 7/1/2018		<b>Compliance History:</b>	<b>Monitoring</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>
		8/1/2025 - 8/31/2025	Y

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0381011	TWIN MAPLES NURSING HOME	C	100	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
809 NEW HAVEN ROAD	Connections	1			

Towns Served: DURHAM

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit		Samples Req/Month	
		Minimum:	0.4 MG/L	Daily	Compliance Status:
Chlorine	Entry Point RDC (EPRD)				
Start Date:	7/1/2018	Compliance History:	Operating Limit	Monitoring	
		Monitoring Period	Compliance Status:	Compliance Status:	
		9/1/2025 - 9/30/2025	Y		
		10/1/2025 - 10/31/2025	Y		
		11/1/2025 - 11/30/2025	Y		
		12/1/2025 - 12/31/2025	Y		

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2026	
CROSS CONNECTION SURVEY REPORT	3/1/2030	

Water System Facility and Sampling Point Inventory								
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Status	Lead and Coliform Rule	Copper Rule Tier	Asbestos WQP 2 DBPR	Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A	Y			
		EMBATH	EMPLOYEE BATH NURSE	A				Y
		KIT1	KITCHEN SINK	A	Y	1		
		NURS1	NURSE STATION SINK	A	Y	1		
		RM13	ROOM 13 SINK	A	Y	1		
		RM14	ROOM 14 SINK	A		1		
		RM21	ROOM 21 SINK	A	Y	1		
		RM22	ROOM 21 SINK	A	Y	1		
		RR14	RESIDENT ROOM 14	A				Y
		UPSTREAM	WITHIN 5 SERVICE CON	A	Y			
00700	ENTRY POINT	3	ENTRY POINT	A				
1853	WELL #2	2	WELL #2	A				
36273	TREATMENT PLANT							
722	WELL #1	2	WELL #1	A				

### Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 36273)				Certification Expiration
Facility Classification:	Operator Name	Operator Type	Certification(s)	
CLASS 1 TREATMENT PLANT	NIGRO, JR., VICTOR N.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2027 6/30/2026
	NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2028 6/30/2026

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0381011	TWIN MAPLES NURSING HOME	C	100	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
809 NEW HAVEN ROAD	Connections	1			

Towns Served: DURHAM

## Contact Information

Name	Organization	Job Title		
Mr. Theodore Jackson	Twin Maples Healthcare	Owner		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
809 New Haven Road	PO Box 423	Durham	CT	06422
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-349-1041		860-349-1043	203-804-2648	

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

Name	Organization	Job Title		
Mr. John Caron	Twin Maples Nursing Facility	Administrator		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
809R New Haven Rd.		Durham	CT	06422
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-349-1041		860-349-1043		860-301-9020
				twinmaplesadmin@comcast.net

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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**End of schedule**

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