

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

|                                  |                           |                     |             |            |                |          |              |
|----------------------------------|---------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID                           | PWS Name                  | Classification      | Population  | Owner Type | Primary Source |          |              |
| CT0240192                        | NICKERSON PARK CAMPGROUND | NC                  | 30          | P          | GW             |          |              |
| Local Address (where applicable) |                           | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
| 1036 PHOENIXVILLE ROAD (RT 198)  |                           |                     | 37          |            |                |          |              |
| Towns Served: EASTFORD           |                           |                     |             |            |                |          |              |

Monitoring Requirements

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

Total Coliform (3100)

1 routine (RT) per quarter

| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period | Compliance Status |
|---|--------------------|-------------------|-------------------|
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                   | Complete          |
|   | 7/1/25 - 9/30/25   |                   |                   |
|   | 10/1/25 - 12/31/25 |                   |                   |
|   | 4/1/26 - 6/30/26   |                   |                   |

Physical Parameters (PPS)

1 routine (RT) per quarter

| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period | Compliance Status |
|---|--------------------|-------------------|-------------------|
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                   | Complete          |
|   | 7/1/25 - 9/30/25   |                   |                   |
|   | 10/1/25 - 12/31/25 |                   |                   |
|   | 4/1/26 - 6/30/26   |                   |                   |

Water System Facility: ENTRY POINT - WELL 2 (WSF ID: 00700)

Nitrate And Nitrite (NOX)

1 routine (RT) per year

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| EP - WELL 2 (3)                    | 1/1/24 - 12/31/24 |                   | Complete          |
|                                    | 1/1/25 - 12/31/25 |                   | Complete          |
|                                    | 1/1/26 - 12/31/26 |                   |                   |

Water System Facility: ENTRY POINT - WELL 1 (WSF ID: 00701)

Nitrate And Nitrite (NOX)

1 routine (RT) per year

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| EP - WELL 1 (3)                    | 1/1/24 - 12/31/24 |                   | Complete          |
|                                    | 1/1/25 - 12/31/25 |                   | Complete          |
|                                    | 1/1/26 - 12/31/26 |                   |                   |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600                    | DISTRIBUTION SYSTEM   | 4                 | DISTRIBUTION SYSTEM        | A      | Y                   |                           |          |                  |
|                          |                       | DOWNSTREAM        | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
|                          |                       | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | ENTRY POINT - WELL 2  | 3                 | EP - WELL 2                | A      |                     |                           |          |                  |
| 00701                    | ENTRY POINT - WELL 1  | 3                 | EP - WELL 1                | A      |                     |                           |          |                  |
| 20060                    | WELL 2                | 2                 | WELL                       | A      |                     |                           |          |                  |
| 58528                    | WELL 1                | 2                 | WELL 1                     | A      |                     |                           |          |                  |

Contact Information

|                          |                          |           |
|--------------------------|--------------------------|-----------|
| Name                     | Organization             | Job Title |
| Mr. Chris Nickerson      |                          |           |
| Mailing Address Line One | Mailing Address Line Two | City      |
|                          |                          | State     |
|                          |                          | Zip Code  |
|                          |                          |           |

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.

Schedule Generation Date: 12/12/2025

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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          |
| <b>CT0240192</b>   | <b>NICKERSON PARK CAMPGROUND</b> | <b>NC</b>           | <b>30</b>    | <b>P</b>        | <b>GW</b>               |
| Local Address (where applicable)                                     |                                  | Service Connections | Residential  | Commercial      | Industrial              |
| 1036 PHOENIXVILLE ROAD (RT 198)                                      |                                  | 37                  |              |                 |                         |
| Towns Served: EASTFORD   |                                  |                     |              |                 |                         |
| 1036 Phoenixville Road-Route 198                                     |                                  |                     | Chaplin      | CT              | 06235                   |
| Business Phone   | Extension                        | Fax                 | Mobile Phone | Emergency Phone | Email Address           |
| 860-455-0007   |                                  |                     |              |                 | chris@nickersonpark.com |
| Contact Role(s): <b>Administrative Contact, Legal Contact, Owner</b> |                                  |                     |              |                 |                         |

**Please note the following:**

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

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

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

***End of schedule***

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

| PWS ID                           | PWS Name                 |  |                     | Classification | Population | Owner Type | Primary Source |              |
|----------------------------------|--------------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT0390064                        | CHARLIE BROWN CAMPGROUND |  |                     | NC             | 75         | P          | GW             |              |
| Local Address (where applicable) |                          |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 98 CHAPLIN ROAD                  |                          |  |                     |                | 1          |            |                |              |
| Towns Served: EASTFORD           |                          |  |                     |                |            |            |                |              |

### Monitoring Requirements

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

| Total Coliform (3100)                           |                    | 1 routine (RT) per quarter |                   |
|---|--------------------|----------------------------|-------------------|
| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period          | Compliance Status |
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                            | Complete          |
|   | 7/1/25 - 9/30/25   |                            | Complete          |
|   | 10/1/25 - 12/31/25 |                            |                   |
|   | 4/1/26 - 6/30/26   |                            |                   |

| Physical Parameters (PPS)                       |                    | 1 routine (RT) per quarter |                   |
|---|--------------------|----------------------------|-------------------|
| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period          | Compliance Status |
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                            | Complete          |
|   | 7/1/25 - 9/30/25   |                            | Complete          |
|   | 10/1/25 - 12/31/25 |                            |                   |
|   | 4/1/26 - 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       | Compliance Status |
| ENTRY POINT (3)                    | 1/1/24 - 12/31/24 | 4/1-9/30                | Complete          |
|                                    | 1/1/25 - 12/31/25 | 4/1-9/30                | Complete          |
|                                    | 1/1/26 - 12/31/26 | 4/1-9/30                |                   |

### Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600                    | DISTRIBUTION SYSTEM   | 4                 | DISTRIBUTION SYSTEM        | A      | Y                   |                           |          |                  |
|                          |                       | DOWNSTREAM        | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
|                          |                       | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | ENTRY POINT           | 3                 | ENTRY POINT                | A      |                     |                           |          |                  |
| 20702                    | WELL                  | 2                 | WELL                       | A      |                     |                           |          |                  |

### Contact Information

|   |  |           |                          |                          |              |                 |                      |       |          |
|---|--|-----------|--------------------------|--------------------------|--------------|-----------------|----------------------|-------|----------|
| Name  |  |           |                          | Organization             |              |                 | Job Title            |       |          |
| Mr. Steven A. St. John  |  |           |                          | Charlie Brown Campground |              |                 | Owner, President     |       |          |
| Mailing Address Line One                                      |  |           | Mailing Address Line Two |                          |              | City            |                      | State | Zip Code |
| 98 Chaplin Road (Route 198)                                   |  |           |                          |                          |              | Eastford        |                      | CT    | 06242    |
| Business Phone  |  | Extension | Fax                      |                          | Mobile Phone | Emergency Phone | Email Address        |       |          |
| 860-974-0142  |  |           | 860-974-0759             |                          |              | 860-974-0142    | ssaint51@hotmail.com |       |          |
| Contact Role(s): Administrative Contact, Legal Contact, Owner |  |           |                          |                          |              |                 |                      |       |          |

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

|                                  |                          |  |             |                |            |            |                |              |
|----------------------------------|--------------------------|--|-------------|----------------|------------|------------|----------------|--------------|
| PWS ID                           | PWS Name                 |  |             | Classification | Population | Owner Type | Primary Source |              |
| CT0390064                        | CHARLIE BROWN CAMPGROUND |  |             | NC             | 75         | P          | GW             |              |
| Local Address (where applicable) |                          |  | Service     | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 98 CHAPLIN ROAD                  |                          |  | Connections |                | 1          |            |                |              |
| Towns Served: EASTFORD           |                          |  |             |                |            |            |                |              |

**Please note the following:**

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

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

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

***End of schedule***

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

| PWS ID                           | PWS Name                |                     |             | Classification | Population | Owner Type | Primary Source |
|----------------------------------|-------------------------|---------------------|-------------|----------------|------------|------------|----------------|
| CT0390084                        | EASTFORD BAPTIST CHURCH |                     |             | NC             | 25         | P          | GW             |
| Local Address (where applicable) |                         | Service Connections | Residential | Commercial     | Industrial | Combined   | Agricultural   |
| 133 UNION ROAD                   |                         |                     |             | 1              |            |            |                |
| Towns Served: EASTFORD           |                         |                     |             |                |            |            |                |

### Monitoring Requirements

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

| Total Coliform (3100)                           |                    | 1 routine (RT) per quarter |                   |
|---|--------------------|----------------------------|-------------------|
| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period          | Compliance Status |
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                            | Complete          |
|   | 7/1/25 - 9/30/25   |                            | Complete          |
|   | 10/1/25 - 12/31/25 |                            |                   |
|   | 1/1/26 - 3/31/26   |                            |                   |
|   | 4/1/26 - 6/30/26   |                            |                   |

| Physical Parameters (PPS)                       |                    | 1 routine (RT) per quarter |                   |
|---|--------------------|----------------------------|-------------------|
| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period          | Compliance Status |
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                            | Complete          |
|   | 7/1/25 - 9/30/25   |                            | Complete          |
|   | 10/1/25 - 12/31/25 |                            |                   |
|   | 1/1/26 - 3/31/26   |                            |                   |
|   | 4/1/26 - 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       | Compliance Status |
| ENTRY POINT (3)                    | 1/1/24 - 12/31/24 |                         | Complete          |
|                                    | 1/1/25 - 12/31/25 |                         | Complete          |
|                                    | 1/1/26 - 12/31/26 |                         |                   |

### Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600                    | DISTRIBUTION SYSTEM   | 4                 | DISTRIBUTION SYSTEM        | A      | Y                   |                           |          |                  |
|                          |                       | DOWNSTREAM        | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
|                          |                       | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | ENTRY POINT           | 3                 | ENTRY POINT                | A      |                     |                           |          |                  |
| 20704                    | WELL                  | 2                 | WELL                       | A      |                     |                           |          |                  |
| 59527                    | TREATMENT PLANT       |                   |                            |        |                     |                           |          |                  |

### Contact Information

|                           |  |               |     |                          |              |  |                 |                               |  |       |          |
|---------------------------|--|---------------|-----|--------------------------|--------------|--|-----------------|-------------------------------|--|-------|----------|
| Name                      |  |               |     | Organization             |              |  |                 | Job Title                     |  |       |          |
| Pastor Timothy Howard Jr. |  |               |     | Eastford Baptist Church  |              |  |                 | Pastor                        |  |       |          |
| Mailing Address Line One  |  |               |     | Mailing Address Line Two |              |  |                 | City                          |  | State | Zip Code |
| 135 Union Road            |  |               |     |                          |              |  |                 | Eastford                      |  | CT    | 06242    |
| Business Phone            |  | Extension     | Fax |                          | Mobile Phone |  | Emergency Phone | Email Address                 |  |       |          |
| 860-974-1414              |  |               |     |                          |              |  |                 | pastortimothyhoward@gmail.com |  |       |          |
| Contact Role(s):          |  | Legal Contact |     |                          |              |  |                 |                               |  |       |          |
|                           |  |               |     |                          |              |  |                 |                               |  |       |          |

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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      |
| <b>CT0390084</b>                               | <b>EASTFORD BAPTIST CHURCH</b> | <b>NC</b>                | <b>25</b>    | <b>P</b>        | <b>GW</b>           |
| Local Address (where applicable)               |                                | Service Connections      | Residential  | Commercial      | Industrial          |
| 133 UNION ROAD                                 |                                |                          |              | <b>1</b>        |                     |
| Towns Served: EASTFORD                         |                                |                          |              |                 |                     |
| Name   |                                | Organization             |              | Job Title       |                     |
| <b>Mr. John H Buell</b>                        |                                | Eastford Baptist Church  |              | Trustee         |                     |
| Mailing Address Line One                       |                                | Mailing Address Line Two |              | City            | State               |
| 107 Crystal Pond Rd                            |                                |                          |              | Eastford        | CT                  |
| Business Phone                                 | Extension                      | Fax                      | Mobile Phone | Emergency Phone | Email Address       |
| 860-974-3291                                   |                                |                          |              |                 | Jhbuell@charter.net |
| Contact Role(s): <b>Administrative Contact</b> |                                |                          |              |                 |                     |

**Please note the following:**

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

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

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

***End of schedule***

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

|                                  |                    |  |                     |                |            |            |                |              |
|----------------------------------|--------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| PWS ID                           | PWS Name           |  |                     | Classification | Population | Owner Type | Primary Source |              |
| CT0390214                        | PEPPERTREE CAMPING |  |                     | NC             | 34         | P          | GW             |              |
| Local Address (where applicable) |                    |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 146 CHAPLIN ROAD                 |                    |  |                     | 1              | 77         |            |                |              |
| Towns Served: EASTFORD           |                    |  |                     |                |            |            |                |              |

### Monitoring Requirements

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

| Total Coliform (3100)                           |                    | 1 routine (RT) per quarter |                   |
|---|--------------------|----------------------------|-------------------|
| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period          | Compliance Status |
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                            | Complete          |
|   | 7/1/25 - 9/30/25   |                            | Complete          |
|   | 10/1/25 - 12/31/25 |                            | Complete          |
|   | 4/1/26 - 6/30/26   |                            |                   |

| Physical Parameters (PPS)                       |                    | 1 routine (RT) per quarter |                   |
|---|--------------------|----------------------------|-------------------|
| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period          | Compliance Status |
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                            | Complete          |
|   | 7/1/25 - 9/30/25   |                            | Complete          |
|   | 10/1/25 - 12/31/25 |                            | Complete          |
|   | 4/1/26 - 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       | Compliance Status |
| ENTRY POINT (3)                    | 1/1/24 - 12/31/24 | 4/1-9/30                | Complete          |
|                                    | 1/1/25 - 12/31/25 | 4/1-9/30                | Complete          |
|                                    | 1/1/26 - 12/31/26 | 4/1-9/30                |                   |

### Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600                    | DISTRIBUTION SYSTEM   | 4                 | DISTRIBUTION SYSTEM        | A      | Y                   |                           |          |                  |
|                          |                       | DOWNSTREAM        | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
|                          |                       | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | ENTRY POINT           | 3                 | ENTRY POINT                | A      |                     |                           |          |                  |
| 20717                    | WELL                  | 2                 | WELL                       | A      |                     |                           |          |                  |

### Contact Information

|   |  |           |                          |                      |                 |                               |           |       |          |
|---|--|-----------|--------------------------|----------------------|-----------------|-------------------------------|-----------|-------|----------|
| Name  |  |           |                          | Organization         |                 |                               | Job Title |       |          |
| Mr. Phil Cotnoir  |  |           |                          | Ctac Properties, LLC |                 |                               | Owner     |       |          |
| Mailing Address Line One                                      |  |           | Mailing Address Line Two |                      |                 | City                          |           | State | Zip Code |
| 146 Chaplin Road  |  |           |                          |                      |                 | Eastford                      |           | CT    | 06042    |
| Business Phone  |  | Extension | Fax                      | Mobile Phone         | Emergency Phone | Email Address                 |           |       |          |
| 860-974-1439  |  |           |                          |                      |                 | peppertreecamping@comcast.net |           |       |          |
| Contact Role(s): Administrative Contact, Legal Contact, Owner |  |           |                          |                      |                 |                               |           |       |          |

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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 |              |
|----------------------------------|--------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT0390214                        | PEPPERTREE CAMPING |  |                     | NC             | 34         | P          | GW             |              |
| Local Address (where applicable) |                    |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 146 CHAPLIN ROAD                 |                    |  |                     | 1              | 77         |            |                |              |
| Towns Served: EASTFORD           |                    |  |                     |                |            |            |                |              |

**Please note the following:**

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

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**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 |
| CT0390254                        | CRYSTAL POND PARK |                     |             | NC             | 25         | P          | GW             |
| Local Address (where applicable) |                   | Service Connections | Residential | Commercial     | Industrial | Combined   | Agricultural   |
| 4 WEEKS ROAD                     |                   |                     |             | 1              |            |            |                |
| Towns Served: EASTFORD           |                   |                     |             |                |            |            |                |

### Monitoring Requirements

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

**Total Coliform (3100)** **1 routine (RT) per quarter**

| <u>Sampling Point (Sampling Point ID)</u>       | <u>Monitoring Period</u> | <u>Collection Period</u> | <u>Compliance Status</u> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25         |                          | Complete                 |
|   | 7/1/25 - 9/30/25         |                          | Complete                 |
|   | 4/1/26 - 6/30/26         |                          |                          |

**Physical Parameters (PPS)** **1 routine (RT) per quarter**

| <u>Sampling Point (Sampling Point ID)</u>       | <u>Monitoring Period</u> | <u>Collection Period</u> | <u>Compliance Status</u> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25         |                          | Complete                 |
|   | 7/1/25 - 9/30/25         |                          | Complete                 |
|   | 4/1/26 - 6/30/26         |                          |                          |

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

**Nitrate And Nitrite (NOX)** **1 routine (RT) per year**

| <u>Sampling Point (Sampling Point ID)</u> | <u>Monitoring Period</u> | <u>Collection Period</u> | <u>Compliance Status</u> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3)                           | 1/1/24 - 12/31/24        | 4/1-9/30                 | Complete                 |
|   | 1/1/25 - 12/31/25        | 4/1-9/30                 | Complete                 |
|   | 1/1/26 - 12/31/26        | 4/1-9/30                 |                          |

### Public Notification Requirements

| <u>Violation/Situation</u>   | <u>Compliance Period</u> | <u>Notice Tier</u> | <u>Public Notification Required</u> | <u>PN Certification Performed</u> | <u>PN Certification Due to DPH</u> | <u>PN Certification Received</u> |
|------------------------------|--------------------------|--------------------|-------------------------------------|-----------------------------------|------------------------------------|----------------------------------|
| Total Coliform M&R Violation | 4/1/24 - 4/30/24         | 3                  | 6/6/2025                            |                                   | 6/16/2025                          |                                  |

### Water System Facility and Sampling Point Inventory

| <u>Water System Facility ID</u> | <u>Water System Facility</u> | <u>Sampling Point ID</u> | <u>Sampling Point Description</u> | <u>Status</u> | <u>Total Coliform Rule</u> | <u>Lead and Copper Rule Tier</u> | <u>Asbestos</u> | <u>Stage WQP 2 DBPR</u> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600                           | DISTRIBUTION SYSTEM          | 4                        | DISTRIBUTION SYSTEM               | A             | Y                          |                                  |                 |                         |
|                                 |                              | DOWNSTREAM               | WITHIN 5 SERVICE CON              | A             |                            |                                  |                 |                         |
|                                 |                              | UPSTREAM                 | WITHIN 5 SERVICE CON              | A             |                            |                                  |                 |                         |
| 00700                           | ENTRY POINT                  | 3                        | ENTRY POINT                       | A             |                            |                                  |                 |                         |
| 23014                           | WELL                         | 2                        | WELL                              | A             |                            |                                  |                 |                         |

### Contact Information

|  |  |           |                          |                              |              |                   |                            |       |          |
|--|--|-----------|--------------------------|------------------------------|--------------|-------------------|----------------------------|-------|----------|
| Name   |  |           |                          | Organization                 |              | Job Title         |                            |       |          |
| Mr. John Cimoichowski                                  |  |           |                          | Crystal Pond Park Commission |              | Commission Member |                            |       |          |
| Mailing Address Line One                               |  |           | Mailing Address Line Two |                              |              | City              |                            | State | Zip Code |
| C/O Woodstock Treasurer                                |  |           | 415 Rte 169              |                              |              | Woodstock         |                            | CT    | 06281    |
| Business Phone   |  | Extension | Fax                      |                              | Mobile Phone | Emergency Phone   | Email Address              |       |          |
|  |  |           |                          |                              | 860-617-3488 |                   | johncimoichowski@gmail.com |       |          |
| Contact Role(s): Administrative Contact, 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 |              |
|----------------------------------|-------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT0390254                        | CRYSTAL POND PARK |  |                     | NC             | 25         | P          | GW             |              |
| Local Address (where applicable) |                   |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 4 WEEKS ROAD                     |                   |  |                     |                | 1          |            |                |              |
| Towns Served: EASTFORD           |                   |  |                     |                |            |            |                |              |

**Please note the following:**

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

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

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

***End of schedule***

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

| PWS ID                           | PWS Name                          |  |                     | Classification | Population | Owner Type | Primary Source |              |
|----------------------------------|-----------------------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT0399034                        | CHARLIE BROWN CAMPGROUND-REC HALL |  |                     | NC             | 75         | P          | GW             |              |
| Local Address (where applicable) |                                   |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 98 CHAPLIN ROAD, RTE 198         |                                   |  |                     |                | 15         |            |                |              |
| Towns Served: EASTFORD           |                                   |  |                     |                |            |            |                |              |

### Monitoring Requirements

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

| Total Coliform (3100)                           |                    | 1 routine (RT) per quarter |                   |
|---|--------------------|----------------------------|-------------------|
| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period          | Compliance Status |
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                            | Complete          |
|   | 7/1/25 - 9/30/25   |                            | Complete          |
|   | 10/1/25 - 12/31/25 |                            |                   |
|   | 4/1/26 - 6/30/26   |                            |                   |

| Physical Parameters (PPS)                       |                    | 1 routine (RT) per quarter |                   |
|---|--------------------|----------------------------|-------------------|
| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period          | Compliance Status |
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                            | Complete          |
|   | 7/1/25 - 9/30/25   |                            | Complete          |
|   | 10/1/25 - 12/31/25 |                            |                   |
|   | 4/1/26 - 6/30/26   |                            |                   |

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

| Nitrate And Nitrite (NOX)          |                   | 1 routine (RT) per year |                   |
|------------------------------------|-------------------|-------------------------|-------------------|
| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period       | Compliance Status |
| ENTRY POINT-REC HALL (3)           | 1/1/24 - 12/31/24 |                         | Complete          |
|                                    | 1/1/25 - 12/31/25 |                         | Complete          |
|                                    | 1/1/26 - 12/31/26 |                         |                   |

### Public Notification Requirements

| Violation/Situation               | Compliance Period  | Notice Tier | Public Notification |           | PN Certification |          |
|-----------------------------------|--------------------|-------------|---------------------|-----------|------------------|----------|
|                                   |                    |             | Required            | Performed | Due to DPH       | Received |
| Total Coliform M&R Violation      | 10/1/21 - 12/31/21 | 3           | 3/29/2023           |           | 4/8/2023         |          |
| Physical Parameters M&R Violation | 10/1/21 - 12/31/21 | 3           | 3/29/2023           |           | 4/8/2023         |          |

### Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility  | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600                    | DISTRIBUTION SYSTEM    | 4                 | DISTRIBUTION               | A      |                     |                           |          |                  |
|                          |                        | DOWNSTREAM        | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
|                          |                        | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | ENTRY POINT - REC HALL | 3                 | ENTRY POINT-REC HALL       | A      |                     |                           |          |                  |
| 52521                    | WELL 2                 | 2                 | WELL 2                     | A      |                     |                           |          |                  |

### Contact Information

|                             |           |                          |              |                 |                      |       |          |
|-----------------------------|-----------|--------------------------|--------------|-----------------|----------------------|-------|----------|
| Name                        |           | Organization             |              |                 | Job Title            |       |          |
| Mr. Steven A. St. John      |           | Charlie Brown Campground |              |                 | Owner, President     |       |          |
| Mailing Address Line One    |           | Mailing Address Line Two |              |                 | City                 | State | Zip Code |
| 98 Chaplin Road (Route 198) |           |                          |              |                 | Eastford             | CT    | 06242    |
| Business Phone              | Extension | Fax                      | Mobile Phone | Emergency Phone | Email Address        |       |          |
| 860-974-0142                |           | 860-974-0759             |              | 860-974-0142    | ssaint51@hotmail.com |       |          |

**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 |              |
|----------------------------------|-----------------------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT0399034                        | CHARLIE BROWN CAMPGROUND-REC HALL |  |                     | NC             | 75         | P          | GW             |              |
| Local Address (where applicable) |                                   |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 98 CHAPLIN ROAD, RTE 198         |                                   |  |                     |                | 15         |            |                |              |
| Towns Served: EASTFORD           |                                   |  |                     |                |            |            |                |              |

Towns Served: EASTFORD

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 schedule.

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

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

***End of schedule***

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

|                                  |  |  |             |                |            |            |                |              |
|----------------------------------|--|--|-------------|----------------|------------|------------|----------------|--------------|
| PWS ID                           | PWS Name                                 |  |             | Classification | Population | Owner Type | Primary Source |              |
| CT0399044                        | EASTFORD BAPTIST CHURCH- ACTIVITY CENTER |  |             | NC             | 25         | P          | GW             |              |
| Local Address (where applicable) |  |  | Service     | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 133 UNION ROAD                   |  |  | Connections |                |            |            | 1              |              |
| Towns Served: EASTFORD           |  |  |             |                |            |            |                |              |

### Monitoring Requirements

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

| Total Coliform (3100)                           |                    | 1 routine (RT) per quarter |                   |
|---|--------------------|----------------------------|-------------------|
| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period          | Compliance Status |
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                            | Complete          |
|   | 7/1/25 - 9/30/25   |                            | Complete          |
|   | 10/1/25 - 12/31/25 |                            |                   |
|   | 1/1/26 - 3/31/26   |                            |                   |
|   | 4/1/26 - 6/30/26   |                            |                   |

| Physical Parameters (PPS)                       |                    | 1 routine (RT) per quarter |                   |
|---|--------------------|----------------------------|-------------------|
| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period          | Compliance Status |
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                            | Complete          |
|   | 7/1/25 - 9/30/25   |                            | Complete          |
|   | 10/1/25 - 12/31/25 |                            |                   |
|   | 1/1/26 - 3/31/26   |                            |                   |
|   | 4/1/26 - 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       | Compliance Status |
| ENTRY POINT (3)                    | 1/1/24 - 12/31/24 |                         | Complete          |
|                                    | 1/1/25 - 12/31/25 |                         | Complete          |
|                                    | 1/1/26 - 12/31/26 |                         |                   |

### Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600                    | DISTRIBUTION SYSTEM   | 4                 | DISTRIBUTION SYSTEM        | A      |                     |                           |          |                  |
|                          |                       | DOWNSTREAM        | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
|                          |                       | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | ENTRY POINT           | 3                 | ENTRY POINT                | A      |                     |                           |          |                  |
| 56636                    | WELL                  | 2                 | WELL                       | A      |                     |                           |          |                  |

### Contact Information

|  |  |           |                          |                         |              |                 |                     |       |          |
|--|--|-----------|--------------------------|-------------------------|--------------|-----------------|---------------------|-------|----------|
| Name   |  |           |                          | Organization            |              |                 | Job Title           |       |          |
| Mr. John H Buell                                       |  |           |                          | Eastford Baptist Church |              |                 | Trustee             |       |          |
| Mailing Address Line One                               |  |           | Mailing Address Line Two |                         |              | City            |                     | State | Zip Code |
| 107 Crystal Pond Rd                                    |  |           |                          |                         |              | Eastford        |                     | CT    | 06242    |
| Business Phone   |  | Extension | Fax                      |                         | Mobile Phone | Emergency Phone | Email Address       |       |          |
| 860-974-3291   |  |           |                          |                         |              |                 | Jhbuell@charter.net |       |          |
| Contact Role(s): Administrative Contact, 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 |              |
|----------------------------------|--|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT0399044                        | EASTFORD BAPTIST CHURCH- ACTIVITY CENTER |  |                     | NC             | 25         | P          | GW             |              |
| Local Address (where applicable) |  |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 133 UNION ROAD                   |  |  |                     |                |            |            | 1              |              |
| Towns Served: EASTFORD           |  |  |                     |                |            |            |                |              |

**Please note the following:**

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

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

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

***End of schedule***

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

| PWS ID                           | PWS Name                  |                     |             | Classification | Population | Owner Type | Primary Source |
|----------------------------------|---------------------------|---------------------|-------------|----------------|------------|------------|----------------|
| CT0399064                        | DOLLAR GENERAL - EASTFORD |                     |             | NC             | 25         | P          | GW             |
| Local Address (where applicable) |                           | Service Connections | Residential | Commercial     | Industrial | Combined   | Agricultural   |
| 230 EASTFORD RD                  |                           |                     |             | 1              |            |            |                |
| Towns Served: EASTFORD           |                           |                     |             |                |            |            |                |

### Monitoring Requirements

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

| Total Coliform (3100)                           |                    | 1 routine (RT) per quarter |                   |
|---|--------------------|----------------------------|-------------------|
| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period          | Compliance Status |
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                            | Complete          |
|   | 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   |                            |                   |

| Physical Parameters (PPS)                       |                    | 1 routine (RT) per quarter |                   |
|---|--------------------|----------------------------|-------------------|
| Sampling Point (Sampling Point ID)              | Monitoring Period  | Collection Period          | Compliance Status |
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25   |                            | Complete          |
|   | 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)**

| Nitrate And Nitrite (NOX)          |                   | 1 routine (RT) per year |                   |
|------------------------------------|-------------------|-------------------------|-------------------|
| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period       | Compliance Status |
| ENTRY POINT (3)                    | 1/1/24 - 12/31/24 |                         | Complete          |
|                                    | 1/1/25 - 12/31/25 |                         | Complete          |
|                                    | 1/1/26 - 12/31/26 |                         |                   |

### Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600                    | DISTRIBUTION SYSTEM   | 4                 | DISTRIBUTION               | A      | Y                   |                           |          |                  |
|                          |                       | DOWNSTREAM        | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
|                          |                       | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | ENTRY POINT           | 3                 | ENTRY POINT                | A      |                     |                           |          |                  |
| 61945                    | WELL 1                | 2                 | WELL 1                     | A      |                     |                           |          |                  |

### Contact Information

|   |           |     |                          |                 |               |          |           |       |          |
|---|-----------|-----|--------------------------|-----------------|---------------|----------|-----------|-------|----------|
| Name  |           |     |                          | Organization    |               |          | Job Title |       |          |
| Mr. Delbert Walmsley  |           |     |                          | Dg York, LLC    |               |          |           |       |          |
| Mailing Address Line One                                      |           |     | Mailing Address Line Two |                 |               | City     |           | State | Zip Code |
| 2103 Fawn Meadow Ln   |           |     |                          |                 |               | Richmond |           | TX    | 77406    |
| Business Phone  | Extension | Fax | Mobile Phone             | Emergency Phone | Email Address |          |           |       |          |
| 832-727-3040  |           |     |                          |                 | del@luinc.com |          |           |       |          |
| Contact Role(s): Administrative Contact, Legal Contact, Owner |           |     |                          |                 |               |          |           |       |          |

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

| PWS ID                           | PWS Name                  |  |             | Classification | Population | Owner Type | Primary Source |              |
|----------------------------------|---------------------------|--|-------------|----------------|------------|------------|----------------|--------------|
| CT0399064                        | DOLLAR GENERAL - EASTFORD |  |             | NC             | 25         | P          | GW             |              |
| Local Address (where applicable) |                           |  | Service     | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 230 EASTFORD RD                  |                           |  | Connections |                | 1          |            |                |              |
| Towns Served: EASTFORD           |                           |  |             |                |            |            |                |              |

**Please note the following:**

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

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

***End of schedule***



# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

|                                  |                   |  |             |                |            |            |                |              |
|----------------------------------|-------------------|--|-------------|----------------|------------|------------|----------------|--------------|
| PWS ID                           | PWS Name          |  |             | Classification | Population | Owner Type | Primary Source |              |
| CT0390274                        | ALWAYS MOORE, LLC |  |             | NC             | 25         | P          | GW             |              |
| Local Address (where applicable) |                   |  | Service     | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 134 UNION ROAD                   |                   |  | Connections |                | 1          |            |                |              |
| Towns Served: EASTFORD           |                   |  |             |                |            |            |                |              |

### Monitoring Requirements

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

**Total Coliform (3100)** **1 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25         |                          | Complete                 |
|   | 7/1/25 - 9/30/25         |                          | Complete                 |
|   | 10/1/25 - 12/31/25       |                          |                          |
|   | 1/1/26 - 3/31/26         |                          |                          |
|   | 4/1/26 - 6/30/26         |                          |                          |

**Physical Parameters (PPS)** **1 routine (RT) per quarter**

| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 4/1/25 - 6/30/25         |                          | Complete                 |
|   | 7/1/25 - 9/30/25         |                          | Complete                 |
|   | 10/1/25 - 12/31/25       |                          |                          |
|   | 1/1/26 - 3/31/26         |                          |                          |
|   | 4/1/26 - 6/30/26         |                          |                          |

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

**Nitrate And Nitrite (NOX)** **1 routine (RT) per year**

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3)                           | 1/1/25 - 12/31/25        |                          | Complete                 |
|   | 1/1/26 - 12/31/26        |                          |                          |

### Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600                           | DISTRIBUTION SYSTEM          | 4                        | DISTRIBUTION SYSTEM               | A             | Y                          |                                  |                 |                         |
|                                 |                              | BSINK                    | BATHROOM                          | A             | Y                          |                                  |                 |                         |
|                                 |                              | DOWNSTREAM               | WITHIN 5 SERVICE CON              | A             |                            |                                  |                 |                         |
|                                 |                              | DSINK                    | DISH SINK                         | A             | Y                          |                                  |                 |                         |
|                                 |                              | FSINK                    | FOOD SINK                         | A             | Y                          |                                  |                 |                         |
|                                 |                              | HSINK                    | HAND SINK                         | A             | Y                          |                                  |                 |                         |
|                                 |                              | UPSTREAM                 | WITHIN 5 SERVICE CON              | A             |                            |                                  |                 |                         |
| 00700                           | ENTRY POINT                  | 3                        | ENTRY POINT                       | A             |                            |                                  |                 |                         |
| 63289                           | WELL 1                       | 2                        | WELL 1                            | A             |                            |                                  |                 |                         |

### Contact Information

|                          |           |                          |              |                 |                          |       |          |
|--------------------------|-----------|--------------------------|--------------|-----------------|--------------------------|-------|----------|
| Name                     |           | Organization             |              |                 | Job Title                |       |          |
| Mr. Ted Moore            |           | Always More, LLC         |              |                 | Owner                    |       |          |
| Mailing Address Line One |           | Mailing Address Line Two |              |                 | City                     | State | Zip Code |
| 134 Union Road           |           |                          |              |                 | Eastford                 | CT    | 06242    |
| Business Phone           | Extension | Fax                      | Mobile Phone | Emergency Phone | Email Address            |       |          |
| 860-315-7570             |           |                          |              | 203-577-9632    | alwaysmoore134@gmail.com |       |          |

**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 |
|---|-------------------|---------------------|-------------|----------------|------------|------------|----------------|
| CT0390274   | ALWAYS MOORE, LLC |                     |             | NC             | 25         | P          | GW             |
| Local Address (where applicable)                              |                   | Service Connections | Residential | Commercial     | Industrial | Combined   | Agricultural   |
| 134 UNION ROAD  |                   |                     |             | 1              |            |            |                |
| Towns Served: EASTFORD  |                   |                     |             |                |            |            |                |
| 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 schedule.

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

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

***End of schedule***