

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0410803	CRADLES TO CRAYONS	NTNC	64	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
41 WILLIAM F. PALMER ROAD	Connections	1			

Towns Served: EAST HADDAM

### 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	1/1/19 - 12/31/27	1/1-12/31	
<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		
	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: **ENTRY POINT** (WSF ID: 00700)

<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/27		
	1/1/28 - 12/31/30		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Organic Chemicals (VOCS)</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		
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0410803	CRADLES TO CRAYONS	NTNC	64	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
41 WILLIAM F. PALMER ROAD	Connections	1			

Towns Served: EAST HADDAM

### 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
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	4
Start Date:	8/12/2024	Compliance History: Monitoring Period	Operating Limit Monitoring Compliance Status: Compliance Status:
		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	

### Other Compliance Schedules

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

### Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification Required	Public Notification Performed	PN Certification Due to DPH	PN Certification Received
Lead and Copper M&R Violation	7/1/25 -	3	12/11/2026		12/21/2026	

### 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	WQP 2	DBPR	Stage
					Rule	Rule Tier				
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Y					
		DOWNSTREAM	WITHIN 5 SERVICE CON	A						
		LNDC001	INFANT ROOM	A	Y	2				
		LNDC0010	KITCHEN SINK 2	A		N				
		LNDC0011	GIRL BATH	A		N				
		LNDC0012	BOYS BATH	A		N				
		LNDC002	INFANT ROOM KITCHEN	A	Y	2				
		LNDC003	TODDLER ROOM	A	Y	2				
		LNDC004	TODDLER ROOM 2	A	Y	2				
		LNDC005	HANDICAP STAFF BATH	A	Y	2				
		LNDC006	PRE-SCHOOL	A	Y	2				
		LNDC007	PRE-SCHOOL 2	A	Y	2				
		LNDC008	STAFF BATH	A		N				
		LNDC009	KITCHEN SINK	A		N				
		SCC001	KITCHEN SINK	I	Y					
		SCC002	SCHOOL AGE SINK	I						
		SCC003	HANDICAP BATH	I						
		SCC004	PRESCHOOL LEFT	I						
		SCC005	PRESCHOOL RIGHT	I						

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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
CT0410803	CRADLES TO CRAYONS	NTNC	64	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
41 WILLIAM F. PALMER ROAD		1			

Towns Served: EAST HADDAM

## 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	Asbestos	Stage WQP 2 DBPR
					Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10191	WELL	2	WELL	A				
63016	TREATMENT PLANT							

## Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 63016)

Facility Classification:	CLASS 1 TREATMENT PLANT	Certification Expiration	
Operator Name	Operator Type	Certification(s)	Certification Expiration
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. Jerry R. Owens	O Family Realty LLC	Owner		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
14 Pinehurst Lane		Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Email Address
860-836-1698				860-727-2091 jerryowens158@att.net

Contact Role(s): Owner

Name	Organization	Job Title		
Ms. Jessica McDowell	Cradles To Crayons Inc	Daycare Operator		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
41 William F Palmer Road		Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Email Address
860-891-8943				cradlestocrayons.moodus@gmail.com

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
CT0419013	EAST HADDAM ELEMENTARY SCHOOL	NTNC	600	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
JOE WILLIAMS ROAD	Connections	1			

Towns Served: EAST HADDAM

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		Complete
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
<b>Lead And Copper (PBCU)</b>	<b>10 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/25 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/26	6/1-9/30	
	1/1/27 - 12/31/27	6/1-9/30	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Water System Facility: **ENTRY POINT** (WSF ID: 00701)

<b>Nitrate (1040)</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>
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		
<b>Nitrite (1041)</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>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete

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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
CT0419013	EAST HADDAM ELEMENTARY SCHOOL	NTNC	600	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
JOE WILLIAMS ROAD	Connections	1			

Towns Served: EAST HADDAM

### Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00701)

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)	1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
Organic Chemicals (VOCS)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2026	

### 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				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A					
		ES-00	JOE WILLIAMS ROAD	A	Y	1	Y	Y	
		ES-01	STAFF BATHROOM SINK	A	Y	1	Y	Y	
		ES-02	NURSES OFFICE SINK	A	Y	1	Y	Y	
		ES-03	GIRLS BR SINK 200	A	Y	1	Y	Y	
		ES-04	BOYS BR SINK 200	A	Y	1	Y	Y	
		ES-05	KITCHEN SINK	A	Y	1	Y	Y	
		ES-06	GIRLS BR SINK100	A	Y	1	Y	Y	
		ES-07	BOYS BR SINK 100	A	Y	1	Y	Y	
		ES-08	ROOM 102 BR SINK	A	Y	1	Y	Y	
		ES-09	ROOM 104 BR SINK	A	Y	1	Y	Y	
		ES-10	GIRLS BR SINK 300	A	Y	2	Y	Y	
		ES-11	BOYS BR SINK 300	A	Y	2	Y	Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A					
00701	ENTRY POINT	3	ENTRY POINT	A					
57619	WELL #2	2	WELL #2	A					
57621	WELL #3	2	WELL # 3	A					
57623	ATMOSPHERIC STORAGE								
57625	BOOSTER PUMP STATION								

### Certified Operator Information

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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
CT0419013	EAST HADDAM ELEMENTARY SCHOOL	NTNC	600	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
JOE WILLIAMS ROAD	Connections	1			

Towns Served: EAST HADDAM

## Certified Operator Information

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

**Facility Classification:** SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
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

## Contact Information

Name	Organization	Job Title		
Mr. Donald J Angersola	Town of East Haddam	Director of Ops		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
1 Plains Road	PO Box 385	Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-682-7107				860-682-7107
				donald.angersola@easthaddam.org

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

Name	Organization	Job Title		
Dr. Teresa Debrito	East Haddam Board of Education	Schl Superintendent		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
PO Box 385		Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-873-5090		860-873-5092		
				teresa.debrito@easthaddamschools.org

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

**Please note the following:**

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

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

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

**End of schedule**

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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
CT0419023	EAST HADDAM MUNICIPAL CENTER	NTNC	154	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
1 PLAIN ROAD			1		

Towns Served: EAST HADDAM

### 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>
DISTRIBUTION (4)	1/1/18 - 12/31/26		
	1/1/27 - 12/31/35		
<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		
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
<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
	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		
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

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

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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
CT0419023	EAST HADDAM MUNICIPAL CENTER	NTNC	154	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
1 PLAIN ROAD			1		

Towns Served: EAST HADDAM

### Monitoring Requirements

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

Organic Chemicals (VOCS)	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		

### 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	

### 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	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	A	Y			
		DOWNSTREAM	DISTRIBUTION DOWNSTR	A	Y			
		EHM1	MEN'S ROOM BOE	A	Y	N	Y	Y
		EHM10	POLICE DEPT SINK	A	Y	N	Y	Y
		EHM2	WOMEN'S ROOM BOE	A	Y	N	Y	Y
		EHM3	BOTTLE FILTER BOE	A	Y	N	Y	Y
		EHM4	KITCHEN SINK	A	Y	N	Y	Y
		EHM5	WOMENS BY BLDG DEPT	A	Y	N	Y	Y
		EHM6	MENS PARK AND REC	A	Y	N	Y	Y
		EHM7	WOMENS PARK AND REC	A	Y	N	Y	Y
		EHM8	BOTTLE FILLER R P&R	A	Y	N	Y	Y
		EHM9	BOTTLE FILLER L P&R	A	Y	N	Y	Y
		UPSTREAM	DISTRIBUTION UPSTREA	A	Y			
00700	ENTRY POINT	3	ENTRY POINT	A				
10193	WELL #1 - HALE WELL	2	WELL	A				
10866	WELL #2 - RAY WELL	2	WELL 2	A				

### Certified Operator Information

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

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

*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
CT0419023	EAST HADDAM MUNICIPAL CENTER	NTNC	154	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
1 PLAIN ROAD			1		

Towns Served: EAST HADDAM

## Contact Information

Name	Organization	Job Title		
Ms. Linda Zemienieski	Town of East Haddam	Executive Assistant		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
1 Plains Road	P.O. Box 385	Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-873-5021		860-873-5025		860-885-8046
admin@easthaddam.org				

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

Name	Organization	Job Title		
Mr. Donald J Angersola	Town of East Haddam	Director of Ops		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
1 Plains Road	PO Box 385	Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-682-7107				860-682-7107
donald.angersola@easthaddam.org				

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

Name	Organization	Job Title		
Ms. Irene M Haines	Town of East Haddam	First Selectman		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
1 Plains Road	P.O. Box 385	Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-873-5021		860-873-5025		860-885-8046
irene.haines@easthaddam.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**

**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
CT0419043	KINDERCARE LEARNING CORP OF MOODUS	NTNC	100	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
99 LEESVILLE ROAD	Connections	1			

Towns Served: EAST HADDAM

**Monitoring Requirements**

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	4/1/26 - 6/30/26		
<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	12/9/25 - 12/14/25		Complete
<b>Total Coliform (3100)</b>	<b>3 temporary routine (TR) 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		
<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: **ENTRY POINT** (WSF ID: 00700)

<b>Chlordane (2959)</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)	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
<b>Chlordane (2959)</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>
ENTRY POINT (3)	7/1/25 - 9/30/25		Complete
<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>

*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
CT0419043	KINDERCARE LEARNING CORP OF MOODUS	NTNC	100	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
99 LEESVILLE ROAD	Connections	1			

Towns Served: EAST HADDAM

**Monitoring Requirements**

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

<b>Nitrate And Nitrite (NOX)</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>			
<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	1/1-12/31	Waiver
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Organic Chemicals (VOCS)</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		

Water System Facility: **WELL 2 (WSF ID: 10196)**

<b>E. Coli (3014)</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL 2 (2)	12/8/25 - 12/14/25		Complete

**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
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7 PH	4
<b>Start Date:</b> 1/1/2002		<b>Compliance History:</b>	
		<b>Monitoring Period</b>	<b>Operating Limit</b>
			<b>Monitoring</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	

**Other Compliance Schedules**

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

**Public Notification Requirements**

Violation/Situation	Compliance Period	Notice Tier	Public Notification Required	PN Certification Performed	Due to DPH	Received

*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
CT0419043	KINDERCARE LEARNING CORP OF MOODUS	NTNC	100	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
99 LEESVILLE ROAD		1			

Towns Served: EAST HADDAM

## Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
Lead and Copper M&R Violation	1/1/25 -	3	2/3/2026		2/13/2026	

## 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 Rule Tier	Asbestos	Stage WQP 2 DBPR
					Coliform Rule	Copper Rule Tier	Asbestos	WQP 2 DBPR	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A					
		MW007-1	STAFF BATHROOM	A	Y	2	Y	Y	
		MW007-2	INFANT	A	Y	2	Y	Y	
		MW008	TODDLER YOUNG	A	Y	2	Y	Y	
		MW011	TODDLER OLD	A	Y	2	Y	Y	
		MW012	PRESCHOOL 3	A	Y	2	Y	Y	
		MW027	PLAY ROOM	A	Y	2	Y	Y	
00700	ENTRY POINT	MW027-PLY	GENERATED BY BATCH	A	Y				
		UPSTREAM	WITHIN 5 SERVICE CON	A					
10196	WELL 2	3	ENTRY POINT	A					
46378	CHILDRENS DISCOVERY TREATMENT STATION	2	WELL 2	A					

## Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM	Certification Expiration
Operator Name	Operator Type	Certification(s)
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I
		WATER TREATMENT PLANT OPERATOR - CLASS II

## Contact Information

Name	Organization	Job Title		
Ms. Tracy Gibb	Kindercare	Director		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
99 Leesville Road		Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Email Address
860-873-9666				moodus@kindercare.com

Contact Role(s): **Administrative 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
CT0419043	KINDERCARE LEARNING CORP OF MOODUS				NTNC	100	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
99 LEESVILLE ROAD			1					
Towns Served: EAST HADDAM								
Name			Organization			Job Title		
Mr. Donald R Donner			Donstar			Owner		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code	
121 Hopyard Road					East Haddam	CT	06423	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-917-0113					dd@donstargroup.com			

Contact Role(s): **Owner**

**Please note the following:**

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

***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
CT0419073	NATHAN HALE-RAY HIGH SCHOOL	NTNC	461	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
15 SCHOOL DRIVE	Connections	1			

Towns Served: EAST HADDAM

**Monitoring Requirements**

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		Complete
<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 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	1/1/23 - 12/31/25	6/1-9/30	Complete
	1/1/24 - 12/31/26	6/1-9/30	Complete
	1/1/26 - 12/31/28	6/1-9/30	
	1/1/29 - 12/31/31	6/1-9/30	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

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

*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
CT0419073	NATHAN HALE-RAY HIGH SCHOOL	NTNC	461	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
15 SCHOOL DRIVE	Connections	1			

Towns Served: EAST HADDAM

**Other Compliance Schedules**

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT		3/1/2026

**Water System Facility and Sampling Point Inventory**

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper	Asbestos	WQP 2	DBPR Stage
					Coliform Rule	Copper Rule Tier				
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y					
		DOWNSTREAM	WITHIN 5 SERVICE CON	A						
		HC-19	ROOM 124	A	Y					
		HS-00	15 SCHOOL DRIVE	A	Y		N			
		HS-01	STAFF BATHROOM SINK	A	Y		N			
		HS-02	NURSES OFFICE SINK	A	Y		N			
		HS-03	BOYS BR SINK	A	Y		N			
		HS-04	GIRLS BR SINK	A	Y		N			
		HS-05	KITCHEN SINK	A	Y		N			
		HS-06	ROOM 114 SINK	A	Y		N			
		HS-07	ROOM 113 SINK	A	Y		N			
		HS-08	ROOM 115 SINK	A	Y		N			
		HS-09	ROOM 117 SINK	A	Y		N			
		HS-10	BOYS BR SINK 2FL	A	Y		N			
		HS-11	GIRLS BR SINK 2FL	A	Y		N			
		HS-12	STAFF BR SINK 2FL	A	Y		N			
		HS-13	MEDIA CNTR OFFICE	A	Y		N			
		HS-14	ROOM 134 SINK	A	Y		N			
		HS-15	ROOM 137 SINK	A	Y		N			
		HS-16	ROOM 142 SINK	A	Y		N			
		HS-17	ROOM 103	A	Y		N			
		HS-18	ROOM 101A	A	Y		N			
		HS-19	ROOM 124	A	Y		N			
		HS-20	ROOM 125	A	Y		N			
		HS-21	ROOM 129C	A	Y		N			
		HS-22	LOCKER ROOM	A	Y		N			
		HS-23	TRAINING ROOM	A	Y		N			
		HS-24	ROOM 118	A	Y		N			
		UPSTREAM	WITHIN 5 SERVICE CON	A						
00700	ENTRY POINT	3	ENTRY POINT	A						
10198	WELL #3	2	WELL #3	A						
10199	WELL #2	2	WELL #2	A						
1211	NATHAN HALE-RAY HIGH SCHOOL TREATMENT									
54274	ATMOSPHERIC STORAGE									

*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
CT0419073	NATHAN HALE-RAY HIGH SCHOOL	NTNC	461	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
15 SCHOOL DRIVE		1			

Towns Served: EAST HADDAM

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule Status	Asbestos Rule Tier	Stage WQP 2 DBPR
59020	PUMP STATION						

## Certified Operator Information

Water System Facility: NATHAN HALE-RAY HIGH SCHOOL TREATMENT (WSF ID: 1211)

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

## Contact Information

Name	Organization	Job Title		
Mr. Donald J Angersola	Town of East Haddam	Director of Ops		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
1 Plains Road	PO Box 385	Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-682-7107				860-682-7107
				donald.angersola@easthaddam.org

Contact Role(s): Administrative Contact

Name	Organization	Job Title		
Dr. Teresa Debrito	East Haddam Board of Education	Schl Superintendent		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
PO Box 385		Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-873-5090		860-873-5092		teresa.debrito@easthaddamschools.org

Contact Role(s): Legal Contact

Please note the following:

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

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

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

End of schedule

**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
CT0410194	LITTLE VILLAGE PRESCHOOL	NTNC	34	P	GW
Local Address (where applicable)	20 PLAINS ROAD, MOODUS, CT	Service Connections	Residential	Commercial	Industrial
			1		Combined Agricultural

Towns Served: EAST HADDAM

### 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>
DISTRIBUTION SYSTEM (4)	1/1/21 - 12/31/29		
<b>Total Alkalinity (1927)</b>	<b>2 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>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>
DISTRIBUTION SYSTEM (4)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

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

*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
CT0410194	LITTLE VILLAGE PRESCHOOL	NTNC	34	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
20 PLAINS ROAD, MOODUS, CT	Connections		1		

Towns Served: EAST HADDAM

### Monitoring Requirements

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

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			
Organic Chemicals (VOCS)			1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/25 - 12/31/25			Complete
	1/1/26 - 12/31/26			
	1/1/27 - 12/31/27			

### 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
pH	Entry Point pH Monitoring (PHRD)	Maximum: 7.8 PH	4
Start Date: 3/1/2024		Compliance History: Monitoring Period	Operating Limit Compliance Status: Monitoring Compliance Status:
		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)	Minimum: 7.2 PH	4
Start Date: 3/1/2024		Compliance History: Monitoring Period	Operating Limit Compliance Status: Monitoring Compliance Status:
		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
RESPOND TO SANITARY SURVEY	4/4/2025	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2026	
CROSS CONNECTION SURVEY REPORT	3/1/2029	

### Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
Total Alkalinity M&R Violation	1/1/24 - 6/30/24	3	9/3/2025		9/13/2025	

**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
CT0410194	LITTLE VILLAGE PRESCHOOL	NTNC	34	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
20 PLAINS ROAD, MOODUS, CT			1		

Towns Served: EAST HADDAM

## 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	2	Y	Y
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	5 SERVICE CONNECTION	A	Y			
		FFKB-1	1ST FLOOR KIDS BATH	A	Y	2		
		FFPS-1	1ST FLOOR PREP SINK	A	Y	2		
		FFPSB-1	1ST FLOOR PREP SINK	A	Y	2		
		FFSB-1	1ST FLOOR STAFF BATH	A	Y	2		
		SFHWL-2	2ND FLOOR HAND WASH	A	Y	2		
		SFHWR-2	2ND FLOOR HAND WASH	A	Y	2		
00700	ENTRY POINT	3	ENTRY POINT	A				
		2	WELL	A				
20743	WELL							
62959	TREATMENT							

## Certified Operator Information

Water System Facility: TREATMENT (WSF ID: 62959)

Facility Classification:	CLASS 1 TREATMENT PLANT	Certification Expiration	
Operator Name	Operator Type	Certification(s)	Certification Expiration
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
Mrs. Natalie Thayer	Rnt Properties LLC	Director
Mailing Address Line One	Mailing Address Line Two	City
116 Hemlock Valley Rd		State
		Zip Code
Business Phone	Extension	Fax
860-891-8450		
Mobile Phone	Emergency Phone	Email Address
	860-847-1100	Natthay@comcast.net

Contact Role(s): Administrative Contact, Legal Contact

Name	Organization	Job Title
Mr. Robert M. Thayer	Rnt Properties LLC	Owner
Mailing Address Line One	Mailing Address Line Two	City
116 Hemlock Valley Road		State
		Zip Code
Business Phone	Extension	Fax
860-847-0692		
Mobile Phone	Emergency Phone	Email Address
		bobthay@comcast.net

Contact Role(s): 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
CT0410194	LITTLE VILLAGE PRESCHOOL	NTNC	34	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
20 PLAINS ROAD, MOODUS, CT	Connections		1		

Towns Served: EAST HADDAM

**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
CT0410334	GOODSPEED OPERA HOUSE	NTNC	150	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
6 MAIN ST (RTE 82)			1		

Towns Served: EAST HADDAM

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
<b>Lead And Copper (PBCU)</b>	<b>10 routine (RT) per 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		
	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: **ENTRY POINT** (WSF ID: 00700)

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

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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
CT0410334	GOODSPEED OPERA HOUSE	NTNC	150	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
6 MAIN ST (RTE 82)			1		

Towns Served: EAST HADDAM

### Monitoring Requirements

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

Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
		1/1/29 - 12/31/31		
Organic Chemicals (VOCS)			1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete	
	1/1/26 - 12/31/26			
	1/1/27 - 12/31/27			

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SWTS 1: PWS TO RECOMMEND SOWT	12/27/2024	
CCTS 1: PWS TO RECOMMEND OCCT	12/31/2024	
CROSS CONNECTION SURVEY REPORT	3/1/2025	
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	6/27/2025	
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	6/30/2025	
CROSS CONNECTION SURVEY REPORT	3/1/2026	
CCTS 5: PWS OCCT INSTALLATION	6/30/2026	

### Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification Required	Performed	PN Certification Due to DPH	Received
Lead and Copper M&R Violation	7/1/25 -	3	10/9/2026		10/19/2026	

### 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	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		GEL BAR	GELSTON MAIN BAR	A	Y	2		
		GEL KITCHEN	GELSTON KITCHEN	A	Y	2		
		GOH BAR	GOH BAR	A	Y	2		
		GOH KITCHEN	GOH KITCHEN SINK	A	Y	2	Y	
		GOH MEN ONE	GOH FLOOR 1 MENS RM	A	Y	2		
		GOHBAR	GENERATED BY BATCH	A	Y			
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10832	WELL	2	WELL	A				
54407	HYDROSTATIC STORAGE							
54410	ATMOSPHERIC STORAGE							
62775	TREATMENT PLANT							

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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
CT0410334	GOODSPEED OPERA HOUSE	NTNC	150	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
6 MAIN ST (RTE 82)			1		

Towns Served: EAST HADDAM

## Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 62775)

Facility Classification: CLASS 2 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
JACKSON IV, SHELBY P	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2027
		WATER TREATMENT PLANT OPERATOR - CLASS IV	12/31/2027

## Contact Information

Name	Organization	Job Title		
Mr. Timothy Garland	Goodspeed Opera House	Dir. of Facilities		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
6 Main Street	PO Box A	East Haddam	CT	06423
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-615-0326				860-539-0145 tgarland@goodspeed.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
CT0419193	NATHAN HALE-RAY MIDDLE SCHOOL	NTNC	620	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
73 CLARK GATES ROAD	Connections		1		

Towns Served: EAST HADDAM

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		Complete
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
<b>Lead And Copper (PBCU)</b>	<b>10 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/25 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/26	6/1-9/30	
	1/1/27 - 12/31/27	6/1-9/30	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

<b>Arsenic (1005)</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	6/1-9/30	Complete
	1/1/26 - 12/31/26	6/1-9/30	
	1/1/27 - 12/31/27	6/1-9/30	
<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		

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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
CT0419193	NATHAN HALE-RAY MIDDLE SCHOOL	NTNC	620	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
73 CLARK GATES ROAD	Connections		1		

Towns Served: EAST HADDAM

### Monitoring Requirements

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

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)		Monitoring Period	Collection Period	Compliance Status
		1/1/29 - 12/31/31		
Organic Chemicals (VOCS)				1 routine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/25 - 12/31/25	6/1-9/30	Complete	
	1/1/26 - 12/31/26	6/1-9/30		
	1/1/27 - 12/31/27	6/1-9/30		

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2026	

### 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	A					
		DOWNSTREAM	WITHIN 5 SERVICE CON	A					
		MS-01	NURSES OFFICE SINK	A	Y	N	Y	Y	
		MS-02	MAIN OFFICE KITCHEN	A	Y	N	Y	Y	
		MS-03	LIBRARY WORK ROOM	A	Y	N	Y		
		MS-04	STAFF BATH RM 223	A	Y	N	Y		
		MS-05	STAFF BATH RM 215	A	Y	N	Y		
		MS-06	GIRLS LOCKER ROOM	A	Y	N	Y		
		MS-07	BOYS LOCKER ROOM	A	Y	N	Y		
		MS-08	ART ROOM 210	A	Y	N	Y		
		MS-09	MUSIC ROOM 218	A	Y	N	Y		
		MS-10	KITCHEN	A	Y	N	Y		
		MS-11	CAFE FOUNTAIN	A	Y	N	Y		
		MS-12	STAFF ROOM 301	A	Y	N	Y		
		MS-13	FCS ROOM 304	A	Y	N	Y		
		MS-14	WORLD LANG RM 306	A	Y	N	Y		
		MS-15	CLASSROOM 607	A	Y	N	Y		
		MS-16	CLASSROOM 603	A	Y	N	Y		
		MS-17	CLASSROOM 801	A	Y	N	Y		
		MS-18	CLASSROOM 809	A	Y	N	Y		
		MS-19	CLASSROOM 704	A	Y	N	Y		
		MS-20	CLASSROOM 502	A	Y	N	Y		
		MS-21	CLASSROOM 505	A	Y	N	Y		
		MS-22	STAFF ROOM 510	A	Y	N	Y		

**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
CT0419193	NATHAN HALE-RAY MIDDLE SCHOOL	NTNC	620	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
73 CLARK GATES ROAD			1		

Towns Served: EAST HADDAM

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 Stage DBPR
		MS-23	CLASSROOM 409	A	Y	N	Y
		MS-24	CLASSROOM 406	A	Y	N	Y
		MS-25	CLASSROOM 404	A	Y	N	Y
		MS-26	222 CUSTODIAN OFFICE	A	Y	N	
		MS-27	POT SINK KITCHEN	A	Y	N	
		MS-28	216 BOYS ROOM	A	Y	N	
		MS-29	124 STAFF ROOM	A	Y	N	
		MS-30	308 STAFF ROOM	A	Y	N	
		MS-31	802 STAFF ROOM	A		N	
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
55598	WELL 2	2	WELL 2	A			
55600	WELL 3	2	WELL 3	A			
55604	TREATMENT PLANT						
55606	ATMOSPHERIC TANK	4	ATMOSPHERIC TANK	A			
55610	PUMP STATION						

## Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 55604)**

Facility Classification:	CLASS 2 TREATMENT PLANT	Certification Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II 6/30/2027
		DISTRIBUTION SYSTEM OPERATOR - CLASS III 6/30/2026
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I 6/30/2028
		WATER TREATMENT PLANT OPERATOR - CLASS II 6/30/2026

## Contact Information

Name	Organization	Job Title		
Mr. Donald J Angersola	Town of East Haddam	Director of Ops		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
1 Plains Road	PO Box 385	Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-682-7107				860-682-7107 donald.angersola@easthaddam.org

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

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

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

PWS ID	PWS Name				Classification	Population	Owner Type	Primary Source
CT0419193	NATHAN HALE-RAY MIDDLE SCHOOL				NTNC	620	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
73 CLARK GATES ROAD				1				
Towns Served: EAST HADDAM								
Name			Organization			Job Title		
Dr. Teresa Debrito			East Haddam Board of Education			Schl Superintendent		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code	
PO Box 385					Moodus	CT	06469	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-873-5090		860-873-5092			teresa.debrito@easthaddamschools.org			

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

**Please note the following:**

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

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

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

***End of schedule***

***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.***