Connecticut Department of					_			ection	
Water Quality Monito	ring an	d Com	ıpli	iance	Sch	nedu	le		
PWS ID PWS Name			Clas	sification	Pop	ulation	Ow	ner Type Pr	imary Source
CT0410803 CRADLES TO CRAYONS			ا	NTNC		64		Р	GW
Local Address (where applicable)	Service	Resident	tial	Commer	cial	Industri	ial	Combined	Agricultural
41 WILLIAM F. PALMER ROAD	Connections	1							
Towns Served: EAST HADDAM									
Monito	ring Requ	ireme	nts						
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)								
Asbestos (1094)						1 rc	outir	ne (RT) per	nine years
Sampling Point (Sampling Point ID)		Monitori	ng Pe	eriod	Colle	ction Pe	riod	Compli	ance Status
Select from Inventory of Active Sampling Points		1/1/19 - :	12/3:	1/27	1/	/1-12/31	1		
Total Coliform (3100)							1 rou	utine (RT) p	er quarter
Sampling Point (Sampling Point ID)		Monitori	ng Pe	eriod	Colle	ction Pe			ance Status
Select from Inventory of Active Sampling Points		4/1/25 -	6/30)/25				Coi	mplete
		7/1/25 -							mplete
		10/1/25 -							
		1/1/26 -							
		4/1/26 -							
Lead And Copper (PBCU)				•		5 ro	utin	e (RT) per	six months
Sampling Point (Sampling Point ID)		Monitori	ng Pe	eriod	Colle	ction Pe			ance Status
Select from Inventory of Active Sampling Points		1/1/25 -						•	
, , ,		7/1/25 - :							
		1/1/26 -							
Physical Parameters (PPS)				•			1 roı	utine (RT) ı	er quarter
Sampling Point (Sampling Point ID)		Monitori	na Pe	eriod	Colle	ction Pe			ance Status
Select from Inventory of Active Sampling Points		4/1/25 -							mplete
, , ,		7/1/25 -							mplete
		10/1/25 -							•
		1/1/26 -							
		4/1/26 -							
Water System Facility: ENTRY POINT (WSF ID: 00700)		, , -		, -					
Inorganic Chemicals (IOCS)						1 ro	utine	e (RT) per 1	three years
Sampling Point (Sampling Point ID)		Monitori	ng Pe	eriod	Colle	ction Pe	riod	Compli	ance Status
ENTRY POINT (3)		1/1/25 - :	12/3:	1/27					
		1/1/28 - :	12/3:	1/30					
Nitrate And Nitrite (NOX)							1	routine (R	T) per year
Sampling Point (Sampling Point ID)		Monitori	ng Pe	eriod	Colle	ction Pe		-	ance Status
ENTRY POINT (3)		1/1/24 - :	12/3:	1/24					mplete
		1/1/25 -	12/3	1/25					mplete
		1/1/26 - :							
Pesticides, Herbicides and Polychlorinated Biphenyls (Po	CBs) (SOCS					1 ro	utin	e (RT) per t	three years
Sampling Point (Sampling Point ID)		Monitori	ng Pe	eriod	Colle	ction Pe	riod	Compli	ance Status
ENTRY POINT (3)		1/1/23 -	12/3	1/25					
		1/1/26 - :	12/3	1/28					
Organic Chemicals (VOCS)							1	routine (R	T) per year
Sampling Point (Sampling Point ID)		Monitori	ng Pe	eriod	Colle	ction Pe		-	ance Status
ENTRY POINT (3)		1/1/24 - :	12/3:	1/24				Coi	mplete
		. / . /							

1/1/25 - 12/31/25

			45.11						
		t Departmen				_		ection	
	Wate	er Quality Mo	nitoring and	d Com	pliance	e Sch	iedule		
PWS ID	PWS Name			(Classificatio	n Pop	ulation O	wner Type Pr	imary Source
CT0410803	CRADLES TO CRAY	ONS			NTNC		64	Р	GW
Local Addr	ess (where applicable)		Service	Residenti	ial Comme	ercial I	Industrial	Combined	Agricultural
41 WILLIAI	M F. PALMER ROAD		Connections	1					
Towns Ser	ved: EAST HADDAM								
		Mo	nitoring Requ	iiremen	its				
Water Sys	stem Facility: ENTRY	POINT (WSF ID: 007	700)						
_	Chemicals (VOCS)							1 routine (R	T) per year
Samp	oling Point (Sampling Poi	nt ID)		Monitorin		Collec	tion Perio	d Complic	ance Status
				1/1/26 - 1	2/31/26				
	Monthly \	Water System F	acility (WSF) I	evel M	onitorii	ng Re	quirem	ents	
Water Sys	stem Facility: ENTRY P	OINT (WSFID: 007	00)						
Analyt	e Monito	ring Requirement (Su	ımmary Type)	Opera	ating Limit			Samples Re	eq/Month
рН	Entry P	oint pH Monitoring(F	PHRD)	Minin	num: 7.0 P	Н		4	
Start D	Pate: 8/12/2024		Complia	nce Histor	ry:	Operat	ing Limit	Monitori	_
			Monitor	ing Period		Compli	ance Statu	ıs: Compliai	nce Status:
			7/1/202	5 - 7/31/20)25				
			8/1/2025	5 - 8/31/20)25				
			9/1/202	5 - 9/30/20)25				
			10/1/202	25 - 10/31,	/2025				
			11/1/202	25 - 11/30,	/2025				
		Othe	er Compliance	Schedu	ules				
Compliand	ce Schedule Activity			D	ue Date		Achieve	d Date	
CROSS COI	NNECTION EXEMPTION			3,	/1/2029				
		Public	Notification R	equire	ments				
			Compliance	Notice	Publi	c Notific	<u>cation</u>	PN Cert	<u>ification</u>
Violation/			Period	Tier	Require		erformed	Due to DPH	Received
Lead and C	Copper M&R Violation		7/1/25 -	3	12/11/20			12/21/2026	
	V	Vater System Fa	acility and Sar	npling I	Point In	vento	ory		
Water						Total	Lead an		
System	Water System Facility		Point Sampling Point	nt		Coliforn			Stage
Facility ID		ID	Description	DIDLITION	Status	Rule	Kule Tie	er Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DIST		A	Υ			
			EAM WITHIN 5 SER		A	V	2		
		LNDC00			A	Υ	2		
		LNDC003		. 2	A		N		
		LNDC003			A		N		
		LNDC003		A VITCUEN	Α	V	N		
		LNDC00				Y	2		
		LNDC00			A	Y	2		
		LNDC00			A	Y	2		
		LNDC00	5 HANDICAP ST	ALL RAIH	Α	Υ	2		

PRE-SCHOOL

STAFF BATH

PRE-SCHOOL 2

KITCHEN SINK

Α

Α

Α

Α

Υ

Υ

2

2

Ν

Ν

LNDC006

LNDC007

LNDC008

LNDC009

	Water Quality M				C			
PWS ID PWS Name				Cla	ssification	Population	Owner Type	Primary Source
CT0410803	CRADLES TO CRAYONS				NTNC	64	Р	GW
Local Address	(where applicable)	Service	Residen	ntial	Commercia	al Industri	al Combin	ed Agricultural
41 WILLIAM F	PALMER ROAD	Connections	1					

Connecticut Department of Public Health Drinking Water Section

	Wa	ter System Facil	ity and Sampling P	oint In	vento	ſy			
Water					Total	Lead and			
System	Water System Facility	Sampling Point	Sampling Point	(Coliform	Copper			Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
		SCC001	KITCHEN SINK	1	Υ				
		SCC002	SCHOOL AGE SINK	1					
		SCC003	HANDICAP BATH	1					
		SCC004	PRESCHOOL LEFT	1					
		SCC005	PRESCHOOL RIGHT	1					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
10191	WELL	2	WELL	Α					
63016	TREATMENT PLANT								

Certified Operator Information

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

Facility Classification: CLASS 1 T	REATMENT PLANT		Certification
Operator Name Operator Type Certification(s)		Certification(s)	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 Info	ormation					
Name			Organization		Job Title				
Mr. Jerry R. Owens			O Family Rea	Ity LLC		Owner			
Mailing Address Line	e One		Mailing Address Line Two	e Two City Star			State	Zip Code	
14 Pinehurst Lane					Moodus		СТ	06469	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-836-1698				860-727-2091	jerryowens158@att.net				
Contact Role(s): Ov	vner								
Name			Organization				Job Title		
Ms. Jessica McDowe	ell		Cradles To Cr	rayons Inc		Daycare Op	perator		
Mailing Address Line	One		Mailing Address Line Two			City	State	Zip Code	
41 William F Palmer	Road				Moodus		СТ	06469	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Ad	ldress			

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

860-891-8943

Towns Served: EAST HADDAM

- 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

Page 3

cradlestocrayons.moodus@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 Departm	ont of Dublic L	Joalth	D	rinkin	σI	Mator	· C	oction	
	↑					_			ection	
DIA (C. I.D.	Water Quality	Monitoring an	u Con	_		_		_	- D	
PWS ID	PWS Name	201		Cla) PC	-	Ov	vner Type Pr	
CT0419013	EAST HADDAM ELEMENTARY SCHO		Desides	41-1	NTNC	-:-1	600	- 1	Complete	GW
	(where applicable)	Service Connections		itiai	Commer	cıaı	Industri	ıaı	Combined	Agricultura
JOE WILLIAMS		Connections	1							
Towns Served	l: EAST HADDAM		•	_		_		-		
		Monitoring Requ	uireme	nts	3					
•	m Facility: DISTRIBUTION SYSTEM	1 (WSF ID: 00600)						- 1		
Asbestos (1	•								ine (RT) per	-
	g Point (Sampling Point ID)		Monitor			Coll	ection Pe	rio		ance Status
Select fro	om Inventory of Active Sampling Points	3	1/1/20 -	12/3	31/28				Соі	mplete
Total Colifo	•						1	1 rc	utine (RT) ր	•
	g Point (Sampling Point ID)		Monitor	ing F	Period	Coll	ection Pe	rio	d Compli	ance Status
Select fro	om Inventory of Active Sampling Points	3	4/1/25 -	- 6/3	0/25				Coi	mplete
			7/1/25 -	- 9/3	0/25				Coi	mplete
			10/1/25 -	- 12/	31/25				Coi	mplete
			1/1/26 -	- 3/3	1/26					
			4/1/26	- 6/3	0/26					
Lead And Co	opper (PBCU)							10	7 routine (R	T) per year
	g Point (Sampling Point ID)		Monitor	ing F	Period	Coll	ection Pe		-	ance Status
Select from Inventory of Active Sampling Points		;	1/1/24 -	12/3	31/24		6/1-9/30		Coi	mplete
			1/1/25 - 12				6/1-9/30			mplete
			1/1/26 -				6/1-9/30			
Physical Par	rameters (PPS)						1	1 rc	utine (RT) լ	oer quarter
Sampling	g Point (Sampling Point ID)		Monitor	ing F	Period	Coll	ection Pe	rio	d Compli	ance Status
Select fro	om Inventory of Active Sampling Points	3	4/1/25 -	- 6/3	0/25				Coi	mplete
			7/1/25 -	- 9/3	0/25				Coi	mplete
			10/1/25 -	- 12/	′31/25				Coi	mplete
			1/1/26 -	- 3/3	1/26					
			4/1/26	- 6/3	0/26					
Water Syste	m Facility: ENTRY POINT (WSF ID	: 00701)		<u>, </u>						
Nitrate (10	40)	·					1	1 rc	utine (RT) ¡	er quarter
Sampling	g Point (Sampling Point ID)		Monitor	ing F	Period	Coll	ection Pe	rio	d Compli	ance Status
ENTRY P	OINT (3)		4/1/25 -	- 6/3	0/25				Coi	mplete
			7/1/25 -	- 9/3	0/25				Coi	mplete
			10/1/25 -							mplete
			1/1/26							•
			4/1/26		-					
Nitrite (104	41)				-				1 routine (R	T) per year
~	g Point (Sampling Point ID)		Monitor	ing F	Period	Coll	ection Pe		=	ance Status
ENTRY P			1/1/24 -							mplete
	. ,		1/1/25 -		-					mplete
			1/1/26 -							1
Inorganic Cl	hemicals (IOCS)		, =, ==	_, ~	, ==		1 ro	utir	ne (RT) per t	hree vears
_	g Point (Sampling Point ID)		Monitor	ina F	Period	Coll	ection Pe			ance Status
Jampini	g. c (camping rome ib)			y /	304	2011			Compile	

1/1/23 - 12/31/25

1/1/26 - 12/31/28

Schedule Generation Date: 12/12/2025

ENTRY POINT (3)

Complete

	Connecticut Department o Water Quality Moni				_	,			
PWS ID PWS Name					Classification Population Owner Ty			e Primary Source	
CT0419013	EAST HADDAM ELEMENTARY SCHOOL				NTNC	600	L	GW	
Local Address (v	vhere applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural	
JOE WILLIAMS ROAD Connections			1						
Towns Served: E	AST HADDAM					,	, ,	·	

Moni	Monitoring Requirements									
Water System Facility: ENTRY POINT (WSF ID: 00702	1)									
Pesticides, Herbicides and Polychlorinated Biphenyls	(PCBs) (SOCS)	1 routine	(RT) per three years							
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status							
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete							
	1/1/26 - 12/31/28									
Organic Chemicals (VOCS)		1 rc	outine (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									
Othor	Compliance Schodules									

	Other Compliance Schedules										
Compliance Schedule Activity	Due Date	Achieved Date									
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2025										
CROSS CONNECTION SURVEY REPORT	3/1/2026										

	Wate	er System Facili	ty and Sampling P	oint Ir	vento	ſy		
Water	Water System Facility	Sampling Point	Campling Point		Total	Lead and		Stano
System Facility ID		ID	Description Description	<i>.</i>	Coliform Rule	Copper Rule Tier	Ashestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Status A	Y	nuic rici	ASSESTEDS	TIQ! ZDDIK
00000	DISTRIBUTION STSTEM		WITHIN 5 SERVICE CON	A	'			
		ES-00	JOE WILLIAMS ROAD	A	Υ	1	Υ	Υ
					· ·	1	•	•
		ES-01	STAFF BATHROOM SINK	Α	Y	1	Y	Υ
		ES-02	NURSES OFFICE SINK	Α	Υ	1	Υ	Υ
		ES-03	GIRLS BR SINK 200	Α	Υ	1	Υ	Υ
		ES-04	BOYS BR SINK 200	Α	Υ	1	Υ	Υ
		ES-05	KITCHEN SINK	Α	Υ	1	Υ	Υ
		ES-06	GIRLS BR SINK100	Α	Υ	1	Υ	Υ
		ES-07	BOYS BR SINK 100	Α	Υ	1	Υ	Υ
		ES-08	ROOM 102 BR SINK	Α	Υ	1	Υ	Υ
		ES-09	ROOM 104 BR SINK	Α	Υ	1	Υ	Υ
		ES-10	GIRLS BR SINK 300	Α	Υ	2	Υ	Υ
		ES-11	BOYS BR SINK 300	Α	Υ	2	Υ	Υ
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00701	ENTRY POINT	3	ENTRY POINT	Α				
57619	WELL #2	2	WELL #2	Α				
57621	WELL #3	2	WELL#3	Α				
57623	ATMOSPHERIC STORAGE							
57625	BOOSTER PUMP STATION							

Page 5

Connecticut Depa	artment o	f Public l	Health	Drir	ıking	Water	Secti	on	
Water Qua	lity Monit	toring ar	nd Com	plia	nce S	chedul	le		
PWS ID PWS Name			(<u>-</u> Classifi	cation F	opulation	Owner T	ype P	rimary Source
CT0419013 EAST HADDAM ELEMENTAR	Y SCHOOL			NT	NC	600	L		GW
Local Address (where applicable)		Service	Residential Com		mmercial Industrial		al Com	bined	Agricultural
JOE WILLIAMS ROAD		Connections	1						
Towns Served: EAST HADDAM									
	Certified	Operator	Informa	ation					
Water System Facility: DISTRIBUTION S	YSTEM (WSF I	D: 00600)							
Facility Classification: SMALL WATER SYSTEM	1								Certification
Operator Name	Operator Typ	pe (Certification	ı(s)					Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATO	OR V	VATER TREA	ATMEN	T PLANT	OPERATOR	R - CLASS	I	6/30/2027
		0	DISTRIBUTIO	N SYS	ГЕМ ОРЕ	RATOR - CL	ASS III		6/30/2026
NIGRO, SCOTT A.	ASSIGNED OPE	RATOR D	DISTRIBUTIO	N SYS	ГЕМ ОРЕ	RATOR - CL	ASS I		6/30/2028
		٧	VATER TREA	ATMEN	T PLANT	OPERATOR	R - CLASS	I	6/30/2026
	Cor	ntact Infor	mation						
Name	0	rganization					Job	Title	
Mr. Donald J Angersola	To	own of East Ha	addam			Director c	of Ops		
Mailing Address Line One	Mailing Addres	s Line Two				City	St	ate	Zip Code
1 Plains Road	PO Box 385				Moodus		(T	06469
Business Phone Extension Fax	Mob	ile Phone	Emergency I	Phone	Email Ad	ddress			
860-682-7107			860-682-7	107	donald.a	angersola@	easthado	lam.o	rg
Contact Role(s): Administrative Contact									
Name	0	rganization					Job	Title	
Dr. Teresa Debrito	E	ast Haddam B	oard of Edu	cation	_	Schl Supe	rintender	t	
Mailing Address Line One	Mailing Addres	s Line Two				City	St	ate	Zip Code
PO Box 385		1			Moodus		(T	06469
Business Phone Extension Fax	Mob	ile Phone	Emergency I	Phone					
860-873-5090 860-873-	5092				teresa.d	ebrito@ea	sthaddan	nschoo	ols.org
Contact Role(s): Legal Contact									

nt of Dublic Hoolth Duinling Motor Cooti

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	t of Public H	Iealth	Di	inkin	g V	Vater	Se	ection		
	Water Quality Mo	nitoring an	d Com	ıpl	iance	Sc	hedul	e			
PWS ID	PWS Name	<u> </u>		_	sification	_			ner Type	Prima	ry Sourc
T0419023	EAST HADDAM MUNICIPAL CENTER				NTNC		154		L		GW
ocal Address	(where applicable)	Service	Resident	tial	Commerc	cial	Industri	al	Combine	ed Ag	gricultura
PLAIN ROAD)	Connections			1						
owns Served	: EAST HADDAM			·						·	
	Мо	nitoring Requ	ıireme	nts							
Vater Syster	m Facility: DISTRIBUTION SYSTEM (W	SF ID: 00600)									
Asbestos (1	.094)						1 ro	uti	ne (RT) p	er nir	ne years
Sampling	g Point (Sampling Point ID)		Monitorii	ng P	eriod (Colle	ction Pe	riod	Com	pliance	e Status
DISTRIBU	JTION (4)		1/1/18 - :	12/3	1/26						
			1/1/27 - :	12/3	1/35						
Total Colifor	rm (3100)						1	lro	utine (R1	Γ) per	quarte
Sampling	g Point (Sampling Point ID)		Monitorii	ng P	eriod (Colle	ction Pe	riod	Com	pliance	Status
Select fro	om Inventory of Active Sampling Points		4/1/25 -	6/30	0/25					Compl	ete
			7/1/25 -	9/30	0/25				(Compl	ete
			10/1/25 -	12/3	31/25						
			1/1/26 -	3/3	1/26						
			4/1/26 -	6/30	0/26						
Lead And Co	opper (PBCU)						10 ro	utin	ie (RT) p	er six	months
Sampling	g Point (Sampling Point ID)		Monitorii	ng P	eriod (Colle	ection Per	riod	Com	pliance	e Status
Select fro	om Inventory of Active Sampling Points		1/1/25 -	6/30	0/25					Compl	ete
			7/1/25 - 3	12/3	1/25					Compl	ete
			1/1/26 -	6/30	0/26						
•	rameters (PPS)								utine (R1	•	•
	g Point (Sampling Point ID)		Monitorii	_		Colle	ection Per	riod			e Status
Select fro	om Inventory of Active Sampling Points		4/1/25 -							Compl	
			7/1/25 -		-					Compl	ete
			10/1/25 -								
			1/1/26 -								
			4/1/26 -	6/30	0/26						
	m Facility: ENTRY POINT (WSF ID: 007	700)									
_	nemicals (IOCS)								e (RT) pe		-
	g Point (Sampling Point ID)		Monitorii			Colle	ection Per	riod	Com	pliance	e Status
ENTRY PO	OINT (3)		1/1/24 - :								
			1/1/27 - :	12/3	1/29						
	Nitrite (NOX)								routine		-
	g Point (Sampling Point ID)		Monitori			Colle	ection Per	riod			e Status
ENTRY PO	UINT (3)		1/1/24 - :							Compl	
			1/1/25 - 1						-	Compl	ete
			1/1/26 - :	12/3	1/26					- •	
	Herbicides and Polychlorinated Biphen		=		anta t	C. !!	-4: -		L (RT) pe		-
	g Point (Sampling Point ID)		Monitori				ection Per		Com		e Status
ENTRY P(OINT (3)		1/1/23 - 3	12/3	1/25	1	/1-12/31			Waiv	er

Monitoring Period

1/1/26 - 12/31/28

Collection Period

Schedule Generation Date: 12/12/2025

ENTRY POINT (3)

Sampling Point (Sampling Point ID)

Compliance Status

	C		'D ll: 1	T 1.1	D : 1	• т	17 . (
	Connecticut De	•				_					
	Water Qi	uality Monit	oring an		<u> </u>						
PWS ID	PWS Name			(Classifica	tion Po	pulation C	wner Type F	rimary Sour		
CT041902	EAST HADDAM MUNICIP	AL CENTER			NTNO		154	L	GW		
Local Add	lress (where applicable)		Service	Resident	ial Com	mercial	Industrial	Combined	d Agricultu		
1 PLAIN R	ROAD		Connections			1					
Towns Se	rved: EAST HADDAM										
		Monito	oring Req	uiremer	nts						
	ystem Facility: ENTRY POINT	(WSF ID: 00700)									
_	Chemicals (VOCS)							1 routine (
	pling Point (Sampling Point ID)			<i>Monitorin</i> 1/1/24 - 1		Colle	ction Perio		liance Statu		
ENT	RY POINT (3)				omplete						
			1/1/25 - 12/31/25								
				1/1/26 - 1	.2/31/26						
		Other C	ompliance	e Schedi	ules						
Complian	ce Schedule Activity			D	ue Date		Achieve	ed Date			
CROSS CC	ONNECTION SURVEY REPORT			3,	/1/2026						
SUBMIT L	EAD CONSUMER NOTICE CERTIFI	ICATE		3/	/31/2026						
	Water	r System Facili	ity and Sa	mpling	Point I	Invent	ory				
Water						Tota	Lead a	nd			
System	Water System Facility	Sampling Point		int		Colifor			Stag		
Facility IL	D	ID	Description		Statu	s Rule	Rule T	ier Asbestos	WQP 2 DB		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTIO	N	Α	Υ					
		DOWNSTREAM	DISTRIBUTIO	N DOWNST	ΓR A	Υ					
		EHM1	MEN'S ROOM	и вое	Α	Υ	N	Υ	Υ		
		EHM10	POLICE DEPT	SINK	Α	Υ	N	Υ	Υ		
		EHM2	WOMEN'S R	OOM BOE	Α	Υ	N	Υ	Υ		
		EHM3	BOTTLE FILTI	ER BOE	Α	Υ	N	Υ	Υ		
		EHM4	KITCHEN SIN	K	Α	Υ	N	Υ	Υ		
		EHM5	WOMENS BY	BLDG DEP	Т А	Υ	N	Υ	Υ		
		EHM6	MENS PARK	AND REC	Α	Υ	N	Υ	Υ		
		EHM7	WOMENS PA	ARK AND RE	C A	Υ	N	Υ	Υ		
		EHM8	BOTTLE FILLE	R R P&R	Α	Υ	N	Υ	Υ		
		EHM9	BOTTLE FILLE	ER L P&R	Α	Υ	N	Υ	Υ		
		UPSTREAM	DISTRIBUTIO	N UPSTREA	A	Υ					
00700	ENTRY POINT	3	ENTRY POIN	Γ	Α						
10193	WELL #1 - HALE WELL	2	WELL		Α						
10866	WELL #2 - RAY WELL	2	WELL 2		Α						
		Certified	Operator	Informa	ation						
Water Sy	ystem Facility: DISTRIBUTION	N SYSTEM (WSF II	D: 00600)								
Facility Cl	lassification: SMALL WATER SYST	TEM							Certification		
Operator		Operator Typ	е (Certification	n(s)				Expiratio		
NIGRO, JF	R., VICTOR N.	CHIEF OPERATO	DR V	VATER TREA	ATMENT	PLANT O	PERATOR -	CLASS II	6/30/202		
				ICTRIBLITIO					, , (/20/202		

ASSIGNED OPERATOR

NIGRO, SCOTT A.

DISTRIBUTION SYSTEM OPERATOR - CLASS III

DISTRIBUTION SYSTEM OPERATOR - CLASS I

WATER TREATMENT PLANT OPERATOR - CLASS II

6/30/2026

6/30/2028

6/30/2026

Schedule Generation Date: 12/12/2025 Page 8

	Wa	ter Qual	lity Mo	nitoı	ring a	nd Con	npl	liance :	Schedul	le		
PWS ID P	WS Name	-					Cla	ssification	Population	Owne	er Type	Primary Source
CT0419023 EA	AST HADDAM I	MUNICIPAL C	ENTER					NTNC	154		L	GW
Local Address (who	ere applicable)			Se	ervice	Resider	ntial	Commerc	ial Industri	al C	Combine	d Agricultural
1 PLAIN ROAD				Co	onnection	ns		1				
Towns Served: EAS	T HADDAM			,					,	·		
			C	Conta	ct Info	rmation	1					
Name				Orgai	nization						Job Title	2
Ms. Linda Zemieni	eski			Town	n of East H	Haddam			Executive	Assist	ant	
Mailing Address Li	ne One		Mailing Add	dress Li	ne Two				City		State	Zip Code
1 Plains Road			P.O. Box 38	35				Mood	ıs		СТ	06469
Business Phone	Extension	Fax	N	√obile F	Phone	Emergency	y Pho	one Email <i>i</i>	Address			
860-873-5021		860-873-5	5025			860-885	-804	6 admin	@easthadda	ım.org		
Contact Role(s):	egal Contact											
Name				Orgai	nization						Job Title	9
Mr. Donald J Ange	rsola			Town	n of East H	Haddam			Director o	of Ops		
Mailing Address Li	ne One		Mailing Add	dress Lii	ne Two				City		State	Zip Code
1 Plains Road			PO Box 385	5				Mood	ıs		CT	06469
Business Phone	Extension	Fax	N	√obile F	Phone	Emergency	y Pho	one Email /	Address			
860-682-7107						860-682	-710	7 donald	l.angersola@	easth	addam.	org
Contact Role(s):	Administrative	Contact										
Name				Orgai	nization						Job Title	<u>.</u>
Ms. Irene M Haine	es			Town	n of East H	Haddam			First Selec	ctman		
Mailing Address Li	ne One		Mailing Add	dress Lii	ne Two				City		State	Zip Code
1 Plains Road			P.O. Box 38	35				Mood	ıs		CT	06469
Business Phone	Extension	Fax	N	Mobile F	Phone	Emergency	y Pho	one Email <i>i</i>	Address			
860-873-5021		860-873-5	5025			860-885	-804	6 irene.h	naines@east	hadda	ım.org	
Contact Role(s):	Owner											
Please note the fo	llowing:											

Connecticut Department of Public Health Drinking Water Section

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

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.

The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.

If a Collection Period is specified, all water quality samples must be collected during the specified period.

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

End of schedule

	Connecticut Department	of Public H	lealth	Dr	inkir	ng V	Vater	Se	ction				
	Water Quality Mon					_							
PWS ID	PWS Name	<u> </u>		_					ner Type Pı	rimary Source			
CT0419043	KINDERCARE LEARNING CORP OF MOODU	IS .			NTNC		100		Р	GW			
Local Address	(where applicable)	Service	Residen	tial	Comme	rcial	Industria	al	Combined	Agricultural			
99 LEESVILLE F		Connections	1										
Towns Served:	EAST HADDAM			_		_							
		toring Requ	ireme	nts									
-	n Facility: DISTRIBUTION SYSTEM (WSF	· ID: 00600)					1 40	4 :	o (DT) no	r mino voors			
Asbestos (1	094) Point (Sampling Point ID)		Monitori	na D	eriod	Colle	ro ection Per			r nine years ance Status			
	m Inventory of Active Sampling Points		1/1/20 -			Cone	ction rei	iou	Соттри	unce Status			
Total Colifor	· · · · · · · · · · · · · · · · · · ·		1,1,20 12,31,20						1 routine (RT) per quarter				
	Point (Sampling Point ID)		Monitori	ng P	eriod	Colle	ction Per		• •	ance Status			
Select fro	m Inventory of Active Sampling Points		4/1/25 -							mplete			
			7/1/25 -	9/30	0/25				Со	mplete			
			10/1/25 -	12/3	31/25								
			1/1/26 -										
			4/1/26 -	6/30	0/26								
	pper (PBCU)		0.0	0	!!	C-11-				six months			
	Point (Sampling Point ID)		Monitori			Colle	ection Per	rioa		ance Status			
Select Iro	m Inventory of Active Sampling Points		1/1/25 - 7/1/25 -						Co	mplete			
			1/1/26 -										
Physical Par	ameters (PPS)			5,50	-, = 0		1	rou	ıtine (RT)	per quarter			
_	Point (Sampling Point ID)		Monitori	ng P	eriod	Colle	ction Per			ance Status			
Select fro	m Inventory of Active Sampling Points		4/1/25 -	6/30)/25				Co	mplete			
			7/1/25 -						Со	mplete			
			10/1/25 -										
			1/1/26 -										
		-1	4/1/26 -	6/30	0/26								
-	n Facility: ENTRY POINT (WSF ID: 00700	0)							/-				
Chlordane (2959) Point (Sampling Point ID)		Monitori	na D	oriod	Colla	ction Per		•	RT) per year ance Status			
ENTRY PC			1/1/26 -			Cone	ction Per	100	Compil	unce Status			
Chlordane (. ,		1, 1, 20	/-			1	rou	ıtine (RT)	per quarter			
-	Point (Sampling Point ID)		Monitori	ng P	eriod	Colle	ction Per			ance Status			
ENTRY PO	DINT (3)		4/1/25 -	6/30)/25				Со	mplete			
			7/1/25 -	9/30	0/25				Со	mplete			
_	emicals (IOCS)						1 rou	ıtine		three years			
	Point (Sampling Point ID)		Monitori			Colle	ection Per	riod		ance Status			
ENTRY PO	DINT (3)		1/1/23 -						Со	mplete			
Altri	N (NOV)		1/1/26 -	12/3	1/28)=\			
	Nitrite (NOX)		Monitori	ne C	oriod	Calla	ction De		-	RT) per year			
Sumpling	Point (Sampling Point ID)		Monitori	ny P	erioa	Cone	ction Per	100	Compil	ance Status			

1/1/24 - 12/31/24

1/1/25 - 12/31/25

1/1/26 - 12/31/26

ENTRY POINT (3)

Complete

Complete

	Connecticut De	•						ection		
	Water Q	uality Monit	coring and	d Com	plianc	e Sch	edule			
PWS ID	PWS Name			(Classificat	ion Popu	lation O	wner Type P	rimary Source	
CT0419043	KINDERCARE LEARNING	CORP OF MOODUS			NTNC	1	.00	Р	GW	
Local Address (v	vhere applicable)		Service	Residenti	al Comm	nercial Ir	ndustrial	Combined	Agricultural	
99 LEESVILLE RC	DAD		Connections	1						
Towns Served: E	AST HADDAM									
		Monito	oring Requ	iremen	its					
Water System	Facility: ENTRY POINT	(WSF ID: 00700)								
Pesticides, He	erbicides and Polychlori	nated Biphenyls (PCBs) (SOCS)					1 (RT) per	three years	
Sampling F	Point (Sampling Point ID)			Monitorin	g Period	Collect	ion Perio	d Compl	iance Status	
ENTRY POII	NT (3)			1/1/23 - 1	2/31/25	1/1	-12/31	\	Vaiver	
Pesticides, He	erbicides and Polychlori	nated Biphenyls (PCBs) (SOCS))			1 routi	ne (RT) per	three years	
Sampling F	Point (Sampling Point ID)		Monitoring Period Collection					d Compl	iance Status	
ENTRY POII	NT (3)			1/1/26 - 1	2/31/28					
Organic Chem	nicals (VOCS)						1 routi	ne (RT) per	three years	
Sampling F	Point (Sampling Point ID)			Monitorin	g Period	Collect	ion Perio	d Compl	iance Status	
ENTRY POII	NT (3)			1/1/23 - 1	2/31/25			Co	mplete	
				1/1/26 - 1	2/31/28					
Monthly Water System Facility (WSF) Level Monitoring Requirements										
Water System	Facility: ENTRY POINT	(WSFID: 00700)					-			
Analyte	Monitoring Re	equirement (Summa	ary Type)	Opera	ating Limit	t		Samples R	eq/Month	
рН	Entry Point pH	Monitoring (PHRD))	Minim	num: 7 PH	1		4	1	
Start Date:				nce Histor	y:	Operati	ng Limit	Monito	ring	
			Monitor	ing Period			ince Stati		nce Status:	
			7/1/2025	5 - 7/31/20)25	•				
			8/1/2025	5 - 8/31/20)25					
			9/1/2025	5 - 9/30/20)25					
			10/1/202	25 - 10/31/	/2025					
			11/1/202	25 - 11/30/	/2025					
		Other C	ompliance	Schedu	ıles					
Compliance Sch	edule Activity			D	ue Date		Achieve	d Date		
CROSS CONNEC	TION EXEMPTION			3/	/1/2026					
		Public Not	ification R	equirer	ments					
		C	ompliance	Notice		ic Notific			<u>tification</u>	
Violation/Situat			Period	Tier	Requi		rformed	Due to DPH	Received	
Lead and Coppe	r M&R Violation		1/1/25 -	3	2/3/20			2/13/2026		
	Water	r System Facili	ity and Sar	npling I	Point Ir	rvento	ry			
Water						Total	Lead an		_	
*	er System Facility	Sampling Point		nt		Coliform			Stage	
Facility ID	DIBUTION SYSTEM:	ID	Description		Status	Rule	ките Ті	er Asbestos	WQP 2 DBPR	
00600 DISTE	RIBUTION SYSTEM	4	DISTRIBUTION		A	Υ				
		DOWNSTREAM			A	v	_		v	
		MW007-1	STAFF BATHRO	JUM	A	Y	2	Y	Y	
		MW007-2	INFANT		A	Y	2	Y	Y	
		MW008	TODDLER YOU		A	Y	2	Y	Y	
		MW011	TODDLER OLD)	Α	Υ	2	Y	Υ	
		MW012	PRESCHOOL 3		Α	Υ	2	Υ	Υ	

					11	<u> </u>					
	Connectic	•					_		ection		
	Wa	ter Qual	lity Monit	oring a	nd Com	iplia	nce Scl	nedule			
PWS ID	PWS Name					Classifi	cation Pop	oulation Ow	ner Type P	rimary Source	
CT0419043	KINDERCARE LE	ARNING COR	P OF MOODUS			ITN	NC	100	Р	GW	
Local Address (where applicable)			Service	Resident	ial Co	mmercial	Industrial	Combined	Agricultural	
99 LEESVILLE R	OAD			Connection	ns 1						
Towns Served:	EAST HADDAM										
		Water Sy	stem Facili	ity and S	ampling	Point	Invent	ory			
Water							Total	Lead and	1		
-	ter System Facility		Sampling Point				Colifori			Stage	
Facility ID			ID	Description		Sta				WQP 2 DBPR	
			MW027	PLAY ROOM		Δ		2	Y	Υ	
			MW027-PLY	_	D BY BATCH	Α					
			UPSTREAM		SERVICE CON						
	RY POINT		3	ENTRY POI	NT	Δ					
10196 WEI			2	WELL 2		Α	L				
46378 CHILDRENS DISCOVERY TREATMENT STATION											
Certified Operator Information											
Water System	n Facility: DISTR	IBUTION SY	STEM (WSF II	D: 00600)							
Facility Classifi	ication: SMALL W	ATER SYSTEM								Certification	
Operator Nam	e		Operator Typ	e	Certification	n(s)				Expiration	
LAFRAMBOISE,	PAUL F.		CHIEF OPERATO)R	DISTRIBUTIO	N SYST	EM OPERA	TOR - CLASS	1	9/30/2027	
					WATER TREA	ATMEN	T PLANT O	PERATOR - C	LASS II	9/30/2027	
			Con	tact Info	rmation						
Name			Oı	rganization					Job Title		
Ms. Tracy Gibb)		Ki	ndercare			D	irector			
Mailing Addres	ss Line One		Mailing Address	s Line Two				City	State	Zip Code	
99 Leesville Ro	ad						Moodus		СТ	06469	
Business Pho	one Extension	Fax	Mobi	le Phone	Emergency	Phone	Email Addı	ess			
860-873-966	66						moodus@	kindercare.c	om		
Contact Role(s)	: Administrative	Contact									
Name			Oı	rganization					Job Title		
Mr. Donald R	Donner		Do	onstar			О	wner			
Mailing Addres	ss Line One		Mailing Address	s Line Two				City	State	Zip Code	
121 Hopyard R	oad						East Hadda	am	СТ	06423	
Business Pho	one Extension	Fax	Mobi	le Phone	Emergency	Phone	Email Addı	ess			
860-917-013	13						dd@donst	argroup.com	1		

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 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 Departmen	t of Public H	lealth I	Orinki	ing Wat	er S	ection	
	Water Quality Mo	nitoring an	d Comj	olianc	e Sched	lule		
PWS ID	PWS Name		С	lassificati	on Populat	ion Ow	ner Type P	rimary Source
СТ0419073	NATHAN HALE-RAY HIGH SCHOOL			NTNC	461		L	GW
	(where applicable)	Service	Residentia	al Comm	ercial Indu	ıstrial	Combined	Agricultural
15 SCHOOL DE		Connections	1					
Towns Served	: EAST HADDAM		•					
Matau Cuatau		nitoring Requ	ııremen	ts				
Asbestos (1	m Facility: DISTRIBUTION SYSTEM (W	7SF ID: 00600)				1 routi	no (PT) no	r nine veers
_	g Point (Sampling Point ID)		Monitoring	n Derind	Collection			r nine years ance Status
	om Inventory of Active Sampling Points		1/1/20 - 12		Conection	renou		mplete
Total Colifor	· · · · · · · · · · · · · · · · · · ·		1/1/20 12	-/31/20		1 ro		per quarter
	g Point (Sampling Point ID)		Monitoring	n Period	Collection			ance Status
	om Inventory of Active Sampling Points		4/1/25 - 6					mplete
			7/1/25 - 9					mplete
			10/1/25 - 1	2/31/25			Со	mplete
			1/1/26 - 3	/31/26				
			4/1/26 - 6	/30/26				
	opper (PBCU)				5	routin	e (RT) per	three years
	Sampling Point (Sampling Point ID)		Monitoring	•	Collection			ance Status
Select fro	om Inventory of Active Sampling Points		1/1/23 - 12/31/25			/30		mplete
			1/1/24 - 12	-	6/1-9	-	Со	mplete
	()		1/1/26 - 12	2/31/28	6/1-9	-	()	
•	rameters (PPS)		Monitorina	. Doulod	Callaction			per quarter
	pm Inventory of Active Sampling Points	<u> </u>	Monitoring 4/1/25 - 6	-	Collection	i Period		mplete
Select II C	on inventory of Active Sampling Points		7/1/25 - 9					mplete
			7/1/25 - 9 10/1/25 - 1					mplete
			1/1/26 - 3					Приссе
			4/1/26 - 6					
Water Syster	m Facility: ENTRY POINT (WSF ID: 00)	700)	, ,	, ,				
•	nemicals (IOCS)	•			1	routin	e (RT) per	three years
_	g Point (Sampling Point ID)		Monitoring	Period	Collection		• • •	ance Status
ENTRY PO	OINT (3)		1/1/25 - 12	2/31/27			Со	mplete
Nitrate And	Nitrite (NOX)					1	routine (F	RT) per year
Sampling	g Point (Sampling Point ID)		Monitoring	g Period	Collection	n Period	l Compli	ance Status
ENTRY PO	OINT (3)		1/1/24 - 12	2/31/24			Со	mplete
			1/1/25 - 12	2/31/25			Со	mplete
			1/1/26 - 12	2/31/26				
	Herbicides and Polychlorinated Biphen	• • •	='					three years
	g Point (Sampling Point ID)		Monitoring		Collection	Perioa		ance Status
ENTRY PO	OINT (3)		1/1/23 - 12				Со	mplete
0			1/1/26 - 12	2/31/28		_) — \
Organic Che	emicals (VOCS)					1	routine (F	RT) per year

Monitoring Period

1/1/24 - 12/31/24

1/1/25 - 12/31/25

1/1/26 - 12/31/26

Collection Period

ENTRY POINT (3)

Sampling Point (Sampling Point ID)

Compliance Status

Complete

Complete

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0419073	NATHAN HALE-RAY HIGH SCHOOL				NTNC	461	L	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combin	ed Agricultural
15 SCHOOL DI	RIVE	Connections	1					

Towns Served: EAST HADDAM

Other Com	pliance Schedules		
Compliance Schedule Activity	Due Date	Achieved Date	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2025		
CROSS CONNECTION SURVEY REPORT	3/1/2026		

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

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.

Co	onnectic	ut Depa	irtment	t of Public	Healtr	ı Dri	inking	water	Sec	ction	
	Wa	ter Qua	lity Mo	nitoring a	and Cor	nplia	ance S	chedu	le		
PWS ID PW	/S Name					Class	ification	Population	Owne	er Type I	Primary Source
CT0419073 NA	THAN HALE-R	AY HIGH SCI	HOOL			N	TNC	461		L	GW
Local Address (when	re applicable)			Service	Reside	ntial C	Commercia	Industr	ial C	Combined	d Agricultural
15 SCHOOL DRIVE				Connectio	ns 1						
Towns Served: EAST	THADDAM										
		Water Sy	ystem Fa	acility and S	Sampling	g Poir	nt Invei	ntory			
	stem Facility			oint Sampling			Colif	-	per	0-64	Stage
Facility ID			ID	Descriptio	n	St	tatus Ri	ile Rule	lier i	Aspestos	WQP 2 DBPR
	HERIC STORA	JE.									
59020 PUMP ST	ATION										
			Certifi	ied Operato	or Inforn	natio	n				
Water System Fac	cility: NATH	AN HALE-RA	AY HIGH S	CHOOL TREAT	MENT (W	SF ID:	1211)				
Facility Classification	n: CLASS 1 TF	REATMENT P	LANT								Certification
Operator Name			Operator	Туре	Certificati	on(s)					Expiration
NIGRO, JR., VICTOR	N.		CHIEF OPER	RATOR	WATER TR	EATME	NT PLANT	OPERATO	R - CLA	SS II	6/30/2027
					DISTRIBUT	ION SY	STEM OPE	RATOR - CI	LASS III	1	6/30/2026
NIGRO, SCOTT A.			ASSIGNED (OPERATOR	DISTRIBUT	ION SY	STEM OPE	RATOR - CI	LASS I		6/30/2028
					WATER TREATMENT PLANT OPERATOR - CLASS II 6/30/						6/30/2026
				Contact Info	ormatio	n					
Name				Organization					,	Job Title	
Mr. Donald J Anger	sola			Town of East	Haddam			Director o	of Ops		
Mailing Address Lin	e One		Mailing Add	dress Line Two				City		State	Zip Code
1 Plains Road			PO Box 385	5			Moodus	5		CT	06469
Business Phone	Extension	Fax	N	Mobile Phone	Emergenc	y Phon	e Email A	ddress			
860-682-7107					860-682	-7107	donald.	angersola@	စ္ easth	addam.d	org
Contact Role(s): Ac	dministrative	Contact									
Name				Organization						Job Title	
Dr. Teresa Debrito				East Haddam	Board of Ed	ducatio	n	Schl Supe	rinten	dent	
Mailing Address Lin	e One		Mailing Add	dress Line Two				City		State	Zip Code
PO Box 385	1				1		Moodus			СТ	06469
Business Phone	Extension	Fax	N	Mobile Phone	Emergenc	y Phon	e Email A	ddress			
860-873-5090 860-873-5092 teresa.debrito@easthaddamschools.org							ols.org				

Connecticut Department of Public Health Drinking Water Section

Please note the following:

Contact Role(s): Legal Contact

- 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 Departme	nt of Pul	blic H	ealth	Dr	rinking	g Wa	ter S	ection	
	Water Quality M	lonitorir	ng and	d Con	npl	iance	Sche	dule		
PWS ID	PWS Name				Clas	ssification	Popula	ation O	wner Type	Primary Source
CT0410194	LITTLE VILLAGE PRESCHOOL					NTNC	34		Р	GW
Local Address	(where applicable)	Servi	ce	Residen	tial	Commerc	ial Inc	lustrial	Combine	ed Agricultural
20 PLAINS ROA	AD, MOODUS, CT	Conn	nections			1				
Towns Served:	EAST HADDAM									
	N	1onitoring	g Requ	ireme	nts					
Water Syster	n Facility: DISTRIBUTION SYSTEM ((WSF ID: 006	600)							
Asbestos (1	094)							1 rout	ine (RT) p	er nine years
Sampling	Point (Sampling Point ID)			Monitori	ing P	eriod (Collectio	n Perio	d Com	oliance Status
DISTRIBU	TION SYSTEM (4)			1/1/21 -	12/3	31/29				
Total Alkalin	nity (1927)							2 routi	ne (RT) pe	er six months
Sampling	Point (Sampling Point ID)			Monitori	ing P	eriod (Collectio	n Perio	d Com	oliance Status
Select fro	m Inventory of Active Sampling Points			1/1/25 -	6/30	0/25			(Complete
				7/1/25 -	12/3	31/25				
				1/1/26 -	6/30	0/26				
Total Colifor	m (3100)							1 rc	outine (RT) per quarter
	Point (Sampling Point ID)			Monitori			Collectio	n Perio	d Com	oliance Status
Select fro	m Inventory of Active Sampling Points			4/1/25 -						Complete
				7/1/25 -	9/30	0/25			(Complete
				10/1/25 -						
				1/1/26 -	3/32	1/26				
				4/1/26 -	6/30	0/26				
	pper (PBCU)									er six months
	Point (Sampling Point ID)			Monitori			Collectio	n Perio		oliance Status
Select fro	m Inventory of Active Sampling Points			1/1/25 -					(Complete
				7/1/25 -						
				1/1/26 -	6/30	0/26				
•	ameters (PPS)								=) per quarter
	Point (Sampling Point ID)			Monitori			Collectio	n Perio		oliance Status
DISTRIBU	TION SYSTEM (4)			4/1/25 -						Complete
				7/1/25 -		-			(Complete
				10/1/25 -						
				1/1/26 -		·				
				4/1/26 -	6/30	0/26				
•	n Facility: ENTRY POINT (WSF ID: 0	00700)								
•	emicals (IOCS)									r three years
	Point (Sampling Point ID)			Monitori			Collectio	n Perio	•	oliance Status
ENTRY PO	DINT (3)			1/1/23 -					(Complete
				1/1/26 -	12/3	31/28				
	Nitrite (NOX)									(RT) per year
	Point (Sampling Point ID)			Monitoring Period 1/1/24 - 12/31/24					oliance Status	
ENTRY PC	OINT (3)									Complete
				1/1/25 -					(Complete

1/1/26 - 12/31/26

Monitoring Period

1/1/23 - 12/31/25

ENTRY POINT (3)

Sampling Point (Sampling Point ID)

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)

1 (RT) per three years

Compliance Status

Waiver

Collection Period

1/1-12/31

C	onnecticut Departme						
	Water Quality M	onitoring	and Con				
PWS ID PV	VS Name			Classificat	ion Population C	wner Type P	rimary Source
	TLE VILLAGE PRESCHOOL			NTNC	34	Р	GW
Local Address (whe	* * * * * * * * * * * * * * * * * * * *	Service		tial Comn	nercial Industrial	Combined	Agricultural
20 PLAINS ROAD, M		Connect	tions		1		
Towns Served: EAS	THADDAM						
		lonitoring R	Requireme	nts			
•	cility: ENTRY POINT (WSF ID: 0	•					
	cides and Polychlorinated Biphe	enyls (PCBs) (S	-			ine (RT) per	-
	nt (Sampling Point ID)			ng Period	Collection Perio	od Compli	ance Status
ENTRY POINT	• •		1/1/26 -	12/31/28			
Organic Chemica	•					=	RT) per year
	nt (Sampling Point ID)			ng Period	Collection Perio		ance Status
ENTRY POINT	(3)			12/31/24			mplete
				12/31/25		Co	mplete
	Monthly Water System	Eacility (\A/6		12/31/26	ing Poguirom	onts	
Water System Fac	cility: ENTRY POINT (WSFID: 00		or, Level iv	ioiiitoi	ilig Kequireii	ients	
-	Monitoring Requirement (Once	rating Limi	+	Samples R	og/Month
Analyte pH	Entry Point pH Monitoring		_	imum: 7.8		Samples K	_
Start Date: 3/1	• • • • • •	-	mpliance Histo				•
Start Date. 3/1	1/2024		nitoring Perio	-	Operating Limit	Monitor	ing ince Status:
			1/2025 - 7/31/2		Compliance Stat	us: compile	ince Status.
			./2025 - 8/31/2				
			./2025 - 9/30/2				
			/1/2025 - 10/31				
			/1/2025 - 11/30	-			
Analyte	Monitoring Requirement (rating Limi	t	Samples R	ea/Month
рН	Entry Point pH Monitoring		•	mum: 7.2		2	_
Start Date: 3/1	• • • • • •	-	mpliance Histo		Operating Limit	Monito	ring
·		Mo	nitoring Perio	d	Compliance Stat		nce Status:
		7/1	/2025 - 7/31/2	.025	Y		
		8/1	./2025 - 8/31/2	.025	Υ		
		9/1	/2025 - 9/30/2	.025	Υ		
		10/	/1/2025 - 10/31	1/2025	Υ		
		11/	/1/2025 - 11/30	0/2025	Υ		
	Oth	ner Complia	nce Sched	ules			
Compliance Schedu	ıle Activity		L	Due Date	Achieve	ed Date	
RESPOND TO SANIT	ARY SURVEY		4	4/4/2025			
CROSS CONNECTIO	N SURVEY REPORT		3	3/1/2029			
	Publi	c Notification	on Require	ments			
		Compliand			lic Notification		tification
Violation/Situation		Period 0.42	Tier	Requi		Due to DPH	Received
Total Alkalinity M&		1/1/24 - 6/30		9/3/2		9/13/2025	
	Water System	Facility and	Sampling	Point li			
Water System Water S	ystem Facility Sampling	Point Samplin	g Point		Total Lead an Coliform Coppe		Stage

C	Connecticut Depa					_			ection	
DIAKCID	Water Qua	iity Moiiit	.01 IIIg a	na Con	_				un ou Trun o D	wi
	WS Name TTLE VILLAGE PRESCHOOL					TNC	34	on Ov	P P	rimary Source GW
Local Address (who			Service	Posidon		ommercia		ctrial	Combined	
20 PLAINS ROAD, I			Connection		Itiai CC	1	ai iliuu:	Striai	Combined	Agricultural
Towns Served: EAS										
Facility ID	TINDUNIVI	ID	Description	<u> </u>	CA	RI RI	ule Ri	ule Tie	r Asbestos	WQP 2 DBPR
	BUTION SYSTEM	4	-	ON SYSTEM		itus	Υ		7 1000000	
		DOWNSTREAM					Υ			
		FFKB-1	1ST FLOOR				Υ	2		
		FFPS-1	1ST FLOOR	PREP SINK		Α ,	Υ	2		
		FFPSB-1	1ST FLOOR	PREP SINK		Α ,	Υ	2		
		FFSB-1	1ST FLOOR	STAFF BATI	Η .	Α ,	Υ	2		
		SFHWL-2	2ND FLOOF	R HAND WA	SH	Α .	Υ	2		
		SFHWR-2	2ND FLOOF	R HAND WA	SH	A	Υ	2		
		SFPS-2	2ND FLOOP	R PREP SINK		A	Υ	2	Υ	Υ
		UPSTREAM	5 SERVICE (CONNECTIO	N .	Α	Υ			
00700 ENTRY	POINT	3	ENTRY POI	NT		A				
20743 WELL		2	WELL			A				
62959 TREATN	ΛΕΝΤ									
		Certified	Operato	r Inform	natio	า				
Mator Systom Es	acility: TREATMENT (W		Оролино			-				
•	ion: CLASS 1 TREATMENT P									
Operator Name	IOII: CLASS I TREATIVIENT P	Operator Type	0	Certification	on/cl					Certification
COSSETTE, EVAN J		CHIEF OPERATO		WATER TRE		IT DI ANT		TOP (CI ACC IV	Expiration
COSSETTE, EVAN J		CHIEF OPERATO		DISTRIBUTI			_			6/30/2027 6/30/2027
				DISTRIBUTI						9/30/2027
						TEIVI OPE	KATUK -	- CLASS) II	9/30/2027
		Con	tact Info	rmation	1					
Name			rganization						Job Title	
Mrs. Natalie Thay			nt Properties	S LLC			Directo	or		
Mailing Address Li		Mailing Address	s Line Two				City		State	Zip Code
116 Hemlock Valle						East Ha			СТ	06423
Business Phone	Extension Fax	Mobi	le Phone	Emergency						
860-891-8450				860-847-	-1100	Natthay	/@comc	ast.net	t .	
	Administrative Contact, Leg									
Name			rganization						Job Title	
Mr. Robert M. Tha	•		nt Properties	LLC			Owner	•		
Mailing Address Li		Mailing Address	s Line Two				City		State	Zip Code
116 Hemlock Valle	·			_	51	East Ha			СТ	06423
Business Phone	Extension Fax	Mobi	le Phone	Emergency	/ Phone					
860-847-0692	2					bobtha	y@comc	ast.ne	t	
Contact Role(s):	Jwner									

Schedule Generation Date: 12/12/2025 Page 18

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

	11 01001 Quinting 1 10 1110	9 9	•• • • • • •			011001		
PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
CT0410194	LITTLE VILLAGE PRESCHOOL				NTNC	34	Р	GW
Local Address (w	here applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
20 PLAINS ROAD	, MOODUS, CT	Connections			1			
Towns Served: E	AST 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 schedule.

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

End of schedule

	Connecticut Departme	nt of Public H	lealth	Dr	rinkin	g Wa	ater S	ection	
	Water Quality M	Ionitoring an	d Con	npl	iance	Sche	edule		
PWS ID	PWS Name	<u> </u>		-		1		wner Type Pr	rimary Source
CT0410334	GOODSPEED OPERA HOUSE				NTNC	15		Р	GW
Local Address (where applicable)	Service	Residen	itial	Commerc	ial In	dustrial	Combined	Agricultural
6 MAIN ST (RTE	E 82)	Connections			1				
Towns Served:	EAST HADDAM			·		·			
	N	Ionitoring Requ	uireme	nts					
Water System	Facility: DISTRIBUTION SYSTEM	(WSF ID: 00600)							
Asbestos (10	094)						1 rout	ine (RT) per	nine years
Sampling	Point (Sampling Point ID)		Monitor	ing P	eriod (Collecti	on Perio	d Compli	ance Status
Select from	m Inventory of Active Sampling Points		1/1/20 -	12/3	31/28				
Total Colifor	•							outine (RT)	•
	Point (Sampling Point ID)		Monitor			Collecti	on Perio	-	ance Status
Select from	m Inventory of Active Sampling Points		4/1/25 -		-				mplete
			7/1/25 -						mplete
			10/1/25 -					Со	mplete
			1/1/26 -						
	(DDCII)		4/1/26 -	- 6/30	0/26		10	· · · /DT\ · · · ·	.•
Lead And Cop	• • • •		Manitan	ina D	lariad (ine (RT) per	
	Point (Sampling Point ID)		Monitori			Jonecu	on Perio	a Compile	ance Status
Select Iroi	m Inventory of Active Sampling Points		1/1/25 - 7/1/25 -						
			1/1/26 -						
Physical Para	ameters (PPS)		1/1/20	0/30	0/20		1 r	outine (RT)	ner quarter
_	Point (Sampling Point ID)		Monitori	ina P	eriod (Collecti	on Perio		ance Status
	m Inventory of Active Sampling Points		4/1/25 -						mplete
			7/1/25 -						mplete
			10/1/25 -						mplete
			1/1/26 -						
			4/1/26 -	- 6/30	0/26				
Water System	Facility: ENTRY POINT (WSF ID: 0	00700)							
Inorganic Ch	emicals (IOCS)						1 routi	ne (RT) per	three years
_	Point (Sampling Point ID)		Monitor	ing P	eriod (Collecti	on Perio		ance Status
ENTRY PO	INT (3)		1/1/23 -	12/3	31/25			Со	mplete
			1/1/26 -	12/3	1/28				
Nitrate And I	Nitrite (NOX)							1 routine (R	T) per year
Sampling	Point (Sampling Point ID)		Monitor	ing P	eriod (Collecti	on Perio	d Compli	ance Status
ENTRY PO	INT (3)		1/1/24 -						mplete
			1/1/25 -		-			Со	mplete
			1/1/26 -	12/3	1/26				
-	erbicides and PCBs-Phase II (SOC2)							ne (RT) per	-
	Point (Sampling Point ID)		Monitor			Collecti	on Perio	-	ance Status
ENTRY PO	INT (3)		1/1/23 -					Со	mplete
			1/1/26 -	12/3	31/28				

Monitoring Period

1/1/23 - 12/31/25

1/1/26 - 12/31/28

ENTRY POINT (3)

Pesticides, Herbicides and PCBs-Phase V (SOC5)

Sampling Point (Sampling Point ID)

1 routine (RT) per three years

Compliance Status

Complete

Collection Period

	C 1: 1 D		CD III II	r 1.1	D : 1:	T.A.	N7 . (
	Connecticut Dep					_			
	Water Qua	ality Monit	oring an	d Com	plianc	e Sch	nedule		
PWS ID	PWS Name			(Classificati	on Pop	oulation C	wner Type P	rimary Source
CT0410334	GOODSPEED OPERA HOUS				NTNC		150	Р	GW
Local Addre	ess (where applicable)		Service	Residenti	ial Comm	ercial	Industrial	Combined	Agricultural
6 MAIN ST	(RTE 82)		Connections		1				
Towns Serv	ved: EAST HADDAM								
		Monito	oring Requ	iiremen	nts				
Water Sys	tem Facility: ENTRY POINT (WSF ID: 00700)							
Organic C	Chemicals (VOCS)							1 routine (F	RT) per year
Sampl	ling Point (Sampling Point ID)			Monitorin	g Period	Colle	ction Perio	od Compli	ance Status
ENTRY	POINT (3)			1/1/24 - 1	.2/31/24			Со	mplete
				1/1/25 - 1	.2/31/25			Со	mplete
				1/1/26 - 1	.2/31/26				
		Other C	ompliance	Sched	ules				
Compliance	e Schedule Activity			D	ue Date		Achieve	ed Date	
SWTS 1: PV	VS TO RECOMMEND SOWT			12,	/27/2024				
CCTS 1: PW	S TO RECOMMEND OCCT			12,	/31/2024				
CROSS CON	NECTION SURVEY REPORT			3,	/1/2025				
SWTS 2: DV	WS REVIEW & APPROVAL OF SOW	Т		6/	/27/2025				
CCTS 2: DW	S REVIEW & APPROVAL OF OCCT			6/	/30/2025				
CROSS CON	NECTION SURVEY REPORT			3,	/1/2026				
CCTS 5: PW	S OCCT INSTALLATION			6/	/30/2026				
		Public Not	ification R	equire	ments				
		С	ompliance	Notice	Publ	ic Notif	<u>ication</u>	PN Cert	<u>tification</u>
Violation/S	Situation		Period	Tier	Requi	red P	erformed	Due to DPH	Received
Lead and C	opper M&R Violation		7/1/25 -	3	10/9/2	026		10/19/2026	
	Water 9	System Facili	ity and Sar	npling I	Point Ir	vent	ory		
Water						Total			
	Water System Facility	Sampling Point		nt		Colifori			Stage
Facility ID		ID	Description		Status	Rule	Rule Ti	er Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION		Α	Υ			
		DOWNSTREAM			Α				
		GEL BAR	GELSTON MA		Α	Υ	2		
		GEL KITCHEN	GELSTON KITO	CHEN	Α	Y	2		
		GOH BAR	GOH BAR	CIN	A	Y	2		
		GOH KITCHEN			Α .	Y	2	Y	
		GOH MEN ONE				Y	2		
		GOHBAR	GENERATED E		A	Υ			
		UPSTREAM	WITHIN 5 SER	VICE CON	A				
	ENTRY POINT	3	ENTRY POINT		A				
	WELL	2	WELL		Α				
54407	HYDROPNEUMATIC STORAGE								
	ATMOSPHERIC STORAGE								
62775	TREATMENT PLANT								

Page 21

Certified Operator Information

	Water Quality Monitoring and Compliance Schedule									
PWS ID PWS Name					Classification Population Owner Typ			Primary Source		
CT0410334 GOODSPEED OPERA HOUSE					NTNC	150	Р	GW		
Local Address (where applicable) Serv			Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural		
6 MAIN ST (RTE	82)	Connections			1					

Connecticut Department of Public Health Drinking Water Section

Towns Served: EAST HADDAM

Certified Operator Information

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

Facility Classification: CLASS 2 TR	EATMENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
JACKSON IV, SHELBY P	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2027
		WATER TREATMENT PLANT OPERATOR - CLASS IV	12/31/2027

			Co	ontact Inf	ormation				
Name				Organization				Job Title	
Mr. Timothy Garlar	nd			Goodspeed (Opera House		Dir. of Facil	lities	
Mailing Address Line One Mailing Add			Mailing Addr	ress Line Two			City	State	Zip Code
6 Main Street			PO Box A			East Had	ldam	СТ	06423
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ldress		
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 schedule.

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

End of schedule

Schedule Generation Date: 12/12/2025

Page 22

	of Public Health Drinki	_	
Water Quality Mor	nitoring and Complianc	e Schedule	
PWS ID PWS Name	Classificati	on Population Ow	ner Type Primary Source
CT0419193 NATHAN HALE-RAY MIDDLE SCHOOL	NTNC	620	L GW
Local Address (where applicable)	Service Residential Comm	ercial Industrial	Combined Agricultura
73 CLARK GATES ROAD	Connections 1		
Towns Served: EAST HADDAM			
Mor	nitoring Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WS	SF ID: 00600)		
Asbestos (1094)			ne (RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	•
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		Complete
Total Coliform (3100)			utine (RT) per quarte
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	•
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		
Landa de Carra (DDCII)	4/1/26 - 6/30/26	40	(DT)
Lead And Copper (PBCU)	Manitoring Pariod		routine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	•
Select from Inventory of Active Sampling Points	1/1/24 - 12/31/24 1/1/25 - 12/31/25	6/1-9/30 6/1-9/30	Complete
	1/1/26 - 12/31/26	6/1-9/30	Complete
Physical Parameters (PPS)	1/1/20 - 12/31/20		utine (RT) per quarte
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	4/1/25 - 6/30/25	Conection remod	Complete
Scient from inventory of Active Sumpling Forms	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		Complete
	4/1/26 - 6/30/26		
Water System Facility: ENTRY POINT (WSF ID: 0070			
Arsenic (1005)	,	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	6/1-9/30	Complete
	1/1/25 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/26	6/1-9/30	
Inorganic Chemicals (IOCS)		1 routin	e (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
Nitrate And Nitrite (NOX)			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		

Monitoring Period

1/1/23 - 12/31/25

Collection Period

Schedule Generation Date: 12/12/2025

ENTRY POINT (3)

Sampling Point (Sampling Point ID)

Compliance Status

Complete

	Connecticut D	epartment of	Public H	lealth	Drink	ing V	Vater S	ection		
		Quality Monit				_				
PWS ID	PWS Name	C	0					vner Type P	rimary S	Source
CT041919	3 NATHAN HALE-RAY MI	IDDLE SCHOOL			NTNC	-	620	L	GW	
Local Add	ress (where applicable)		Service	Residen	tial Comr	nercial	Industrial	Combined	Agric	ultura
73 CLARK	GATES ROAD		Connections			1				
Towns Ser	rved: EAST HADDAM									
		Monito	oring Requ	ireme	nts					
Water Sy	stem Facility: ENTRY POIN	NT (WSF ID: 00700)								
Pesticide	es, Herbicides and Polychlo	orinated Biphenyls (PCBs) (SOCS)				1 routii	ne (RT) per	three	years
Samp	oling Point (Sampling Point ID))		Monitori	ng Period	Colle	ction Perio	d Compl	iance St	atus
				1/1/26 -	12/31/28					
Organic	Chemicals (VOCS)						;	1 routine (RT) per	year
Samı	oling Point (Sampling Point ID)		Monitori	ng Period	Colle	ction Perio	d Compl	iance St	atus
ENTR	RY POINT (3)			1/1/24 -	12/31/24	6	/1-9/30	Co	mplete	
				1/1/25 -	12/31/25	6	/1-9/30	Co	mplete	
				1/1/26 -	12/31/26	6	/1-9/30			
		Other C	ompliance	Sched	lules					
Complian	ce Schedule Activity			ı	Due Date		Achieve	d Date		
SUBMIT LI	EAD CONSUMER NOTICE CERT	TFICATE		12	2/29/2025					
CROSS CO	NNECTION SURVEY REPORT			3	3/1/2026					
	Wat	er System Facil	ity and Sar	npling	Point I	nvent	ory			
Water						Total	Lead an	d		
System	Water System Facility	Sampling Point		nt		Colifori				Stage
Facility ID)	ID	Description		Status	Rule	Rule Tie	r Asbestos	WQP 2	? DBP
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	l	Α					
		DOWNSTREAM	WITHIN 5 SER	VICE CON	I A					
		MS-01	NURSES OFFIC	E SINK	Α	Υ	N	Υ	Υ	
		MS-02	MAIN OFFICE	KITCHEN	Α	Υ	N	Υ	Υ	
		MS-03	LIBRARY WOR	K ROOM	Α	Υ	N	Υ		
		MS-04	STAFF BATH R	M 223	Α	Υ	N	Υ		
		MS-05	STAFF BATH R	M 215	Α	Υ	N	Υ		

GIRLS LOCKER ROOM

BOYS LOCKER ROOM

ART ROOM 210

KITCHEN

MUSIC ROOM 218

CAFE FOUNTAIN

STAFF ROOM 301

CLASSROOM 607

CLASSROOM 603

CLASSROOM 801

CLASSROOM 809

CLASSROOM 704

CLASSROOM 502

CLASSROOM 505

STAFF ROOM 510

WORLD LANG RM 306

FCS ROOM 304

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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.

MS-06

MS-07

MS-08

MS-09

MS-10

MS-11

MS-12

MS-13

MS-14

MS-15

MS-16

MS-17

MS-18

MS-19

MS-20

MS-21

MS-22

	Connecticut I	Departmen	t of Public	c Healtl	h Di	rinkin	g W	ater S	ection	
	Water	Quality Mo	nitoring a	and Coi	mpl	liance	Sch	edule		
PWS ID	PWS Name	<u> </u>	<u> </u>							Primary Sourc
CT0419193	NATHAN HALE-RAY M	IIDDLE SCHOOL				NTNC		520	L	GW
Local Address (v	vhere applicable)		Service	Reside	ntial	tial Commercia		ndustrial	Combine	d Agricultura
73 CLARK GATES			Connection			1				
Towns Served: I										
		ter System F	acility and	Samplin	g Po	int Inv	ento	rv		
Water		, , , , , , , , , , , , , , , , , , , ,			9 -		otal	Lead ar	nd	
	er System Facility	Sampling I	Point Sampling	Point			liforn			Stage
Facility ID	, , , , , , , , , , , , , , , , , , , ,	ID	Description				Rule			s WQP 2 DBP
		MS-23				A	Υ	N	Υ	
		MS-24				A	Y	N	Y	
		MS-25				A	Y	N	Y	
		MS-26		ODIAN OFFI	CE	A	Y	N	ı	
		MS-27			CL	_	Υ	N		
		_		-		A	-			
		MS-28				A	Y	N		
		MS-29	_			A	Y	N		
		MS-30				Α	Υ	N		
		MS-31				Α		N		
		UPSTREA	AM WITHIN 5	SERVICE CC	N	Α				
00700 ENT	RY POINT	3	ENTRY PC	INT		Α				
55598 WEL	L 2	2	WELL 2			Α				
55600 WEL	L 3	2	WELL 3			Α				
55604 TREA	TMENT PLANT									
55606 ATM	OSPHERIC TANK	4	ATMOSPH	IERIC TANK		Α				
55610 PUM	P STATION									
		Certif	ied Operat	or Inforr	mati	on				
Water System	Facility: TREATMEN		•							
	ration: CLASS 2 TREATN	•	•							Certification
Operator Name	•	Operato	r Туре	Certificat	ion(s)					Expiration
NIGRO, JR., VIC	ΓOR N.	CHIEF OPE	RATOR	WATER TR	REATM	IENT PLAN	NT OP	ERATOR -	CLASS II	6/30/2027
				DISTRIBUT	ION S	SYSTEM O	PERAT	OR - CLAS	S III	6/30/2026
NIGRO, SCOTT A	1	ASSIGNED	OPERATOR	DISTRIBUT						6/30/2028
Make, seem,		7.55101125	OI ENVIOR	WATER TR						6/30/2026
			Contact Inf			TEIVI I EA	11 01	LINATOR	CLA33 II	0/30/2020
Name			Organization						Job Title	
Mr. Donald J Ar	ngercola		Town of East				Di	rector of (•
Mailing Address		Mailing As	ddress Line Two	i iauualii				City	State	Zip Code
1 Plains Road	LINE ONE					N4004		Lity		
	20 Eytonoio	PO Box 38		Emorass	n, DF -	Mood		266	СТ	06469
Business Phor		Fax	Mobile Phone	_	-	one Email			and a second	
860-682-710		_		860-682	2-/10	, donal	u.ang	ersola@ea	sthaddam.	org
	Administrative Conta	CT								

Page 25

Connecticut Department of Public Health Drinking Water Section														
Water Quality Monitoring and Compliance Schedule														
PWS ID P\	PWS Name						С	lassi	ification	Population	Owner Type Primary Sour		mary Source	
CT0419193 N	NATHAN HALE-RAY MIDDLE SCHOOL							NTNC		620	L	GW		
Local Address (where applicable)					Service	Reside	Residential		ommercia	al Industri	al Combine	ed	d Agricultural	
73 CLARK GATES ROAD					Connection	ns			1					
Towns Served: EAS	T HADDAM										,			
Name					Organization					Job Title				
Dr. Teresa Debrito					East Haddam Board of Education					Schl Superintendent				
Mailing Address Line One Mailing Add				dress	ress Line Two					City State			Zip Code	
PO Box 385									Moodus		СТ		06469	
Business Phone	Extension	Fax	N	∕lobil	le Phone	Emergency Phone Email Ac				ddress				
860-873-5090	860-873-5092							teresa.debrito@easthaddamschools.org					s.org	
Contact Role(s): L	egal 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 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