	Connecticut De	•					_			ction		
	Water Qu	iality Monit	oring an	d Con	ıpl	iance	Sch	edul	e			
PWS ID	PWS Name				Clas	sification	Popu	ılation	Own	er Type	Primai	ry Source
CT0540024	EASTBURY POND					NC	2	25		Р	C	SW
Local Address ((where applicable)		Service	Residen	tial	Commer	cial Ir	ndustri	al	Combine	d Ag	ricultural
39 FISHER HILL	. ROAD		Connections			1						
Towns Served:	GLASTONBURY											
		Monit	oring Requ	ireme	nts							
Water System	n Facility: DISTRIBUTION											
Total Colifor	•									utine (R		
	Point (Sampling Point ID)			Monitori			Collect	ion Pe	riod			Status
Select from	m Inventory of Active Samp	ing Points		7/1/25 -							Comple	
				8/1/25 -							Comple	
				9/1/25 -						(Comple	ete
				4/1/26 -								
				5/1/26 -								
				6/1/26 -	6/30	0/26					_	
Total Colifor	•				_		- "			peat (R	- •	-
	Point (Sampling Point ID)			Monitori			Collect	tion Per	riod			Status
	m Inventory of Active Samp	ing Points		7/22/25	- 7/2	7/25			_		Comple	
-	ameters (PPS)						o			utine (R	•	
	Point (Sampling Point ID)			Monitori			Collect	ion Pei	riod			Status
Select from	m Inventory of Active Samp	ing Points		7/1/25 -							Comple	
				8/1/25 -							Comple	
				9/1/25 -						(Comple	ete
				4/1/26 -								
				5/1/26 -								
	5 111	/11/07 ID 00700\		6/1/26 -	6/30)/26						
-	n Facility: ENTRY POINT	(WSF ID: 00700)								- •	, \	
	Nitrite (NOX)									routine		
	Point (Sampling Point ID)			Monitori			Collect		rıoa			Status
ENTRY PO	JIN1 (3)			1/1/24 -				1-9/30			Comple	
				1/1/25 -				1-9/30			Comple	ete
M/11 6 1	. E The Care of the Control of th	20044		1/1/26 -	12/3	1/26	4/.	1-9/30				
-	n Facility: WELL (WSF ID): 20914)									- \	
E. Coli (3014	•						o			ered (T		-
	Point (Sampling Point ID)			Monitori			Collect	ion Pei	rioa			Status
WELL (2)		Other C	ompliance	7/21/25 · Sched		-					Comple	ete
Compliance Sc	hedule Activity	Julie C	o.iipiiaiice			.s Date		Achie	wod I	Date		
-	ANITARY SURVEY											
	CTION/CORRECTIVE ACTION	ΡΙ ΔΝ				/2025 ′2026		11/1	L7/20	23		
	CTION/CORRECTIVE ACTION	I LAIN				2020						
CNOSS CONNEC		System Facil	ity and Sar				ento	ry				
Water		•					Total	Lead	and			
	ter System Facility	Sampling Point ID	Sampling Poil Description	nt		C	oliform Rule	Сор	per	Ashesto	s WO	Stage P 2 DBPR
	TRIBUTION SYSTEM	4	DISTRIBUTION	I SYSTEM		<u>Status</u> A	Y			- 12.2000		

	Connecticut	t Departme	nt of	Public l	Health	Dri	nkin	g W	ater	Se	ction	
		er Quality M					•	_				
PWS ID	PWS Name	<u> </u>				Classi	fication	Pop	ulation	Own	er Type P	rimary Sourc
CT0540024	EASTBURY POND					1	NC		25		Р	GW
ocal Address	(where applicable)			Service	Residen	itial Co	ommerc	ial I	ndustria	al	Combined	Agricultura
39 FISHER HILI	LROAD			Connections	5		1					
Towns Served:	GLASTONBURY		"		-			'		'		
	W	/ater System	Facilit	y and Sa	mpling	Poin	it Inve	ento	ry			
Water System Wa Facility ID	ter System Facility	Samplin IL	-	Sampling Po Description	int	C4	Co	otal liform		oer	Asbestos	Stage WQP 2 DBP
ruemey 15		DOWNS		WITHIN 5 SE	RVICE COI		atus ' A	iuic	naic	1101	71520000	
		EP		OFFICE SINK		•	A	Υ				
		EP		MEN'S ROOM			A	Y				
		EP		ADIES ROOI			A	Υ				
		EP	6 (OUTSIDE SPI	GOT		Α	Υ				
		UPSTF	REAM \	WITHIN 5 SE	RVICE COI	N	Α					
00700 EN	TRY POINT	3	Е	ENTRY POIN	Т		A					
20914 WE	LL	2	. \	WELL			A					
		Cer	tified C	Operator	Inform	natio	n					
Water Syster	m Facility: DISTRIB			•								
Facility Classif	ication: DISTRIBUTIO	N SYSTEM										Certification
Operator Nam	пе	Opera	tor Type	(Certificatio	on(s)						Expiration
SACCHITELLA,	DAVID	ASSIGNI	D OPERA	ATOR S	MALL WA	TER SYS	STEM OF	PERA	ΓOR			3/31/2026
			Cont	act Infor	mation	1						
Name			Org	anization							Job Title	
Mr. Jonathan	Luiz		Tow	vn of Glasto	nbury			То	wn Mar	nager	-	
Mailing Addre	ss Line One	Mailing	Address I	Line Two				(City		State	Zip Code
2155 Main Str	eet						Glasto	nbur	У		СТ	06033
Business Pho	one Extension	Fax	Mobile	Phone E	Emergency	Phone	e Email .	Addre	ess			
860-652-75	00						jonath	an.lu	iz@glas	tonb	ury-ct.gov	
Contact Role(s	s): Legal Contact											
Name			Org	anization							Job Title	

Mr. Jason Albert Town of Glastonbury Park Main Supervisor Mailing Address Line One Mailing Address Line Two City State Zip Code 2143 Main St Glastonbury CT 06033 **Business Phone** Extension Mobile Phone Emergency Phone Email Address Fax 860-652-7684 jason.albert@glastonbury-ct.gov

Contact Role(s): Administrative Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

				- 11. ×	- 11	_					
	Connecticut Dep	artmer	nt of	Public F	lealth	ı Dr	rinki	ng W	ater S	ection	
	Water Qua	ality Mo	onit	oring an	d Con	npl	ianc	e Sch	edule		
PWS ID	PWS Name	<u>J</u>				-				wner Type	Primary Source
CT0540034	GLASTONBURY ELKS CLUB						NC		25	Р	GW
Local Address (where applicable)			Service	Residen	ntial	Commo	ercial Ir	ndustrial	Combine	ed Agricultural
88 WOODLAND				Connections			1				
Towns Served:	GLASTONBURY										
		M	onito	oring Requ	ıireme	nts					
Water System	Facility: DISTRIBUTION					.1165					
Total Coliforn	m (3100)	•		•					1 rc	outine (R1	Γ) per quarter
	Point (Sampling Point ID)				Monitori	ing P	eriod	Collect	ion Period	-	pliance Status
	m Inventory of Active Samplir	ng Points			4/1/25 -						Complete
	, ,				7/1/25 -						 Complete
					10/1/25 -						
					1/1/26 -						
					4/1/26 -	-	-				
Physical Para	meters (PPS)								1 rc	outine (R1	Γ) per quarter
Sampling	Point (Sampling Point ID)				Monitor	ing P	eriod	Collect	ion Period	d Com	pliance Status
Select fror	m Inventory of Active Samplir	ng Points			4/1/25 -	- 6/30	0/25				Complete
					7/1/25 -	- 9/30	0/25			(Complete
					10/1/25 -	- 12/3	31/25				
					1/1/26 -	- 3/31	1/26				
					4/1/26 -	- 6/30	0/26				
Water System	Facility: ENTRY POINT (WSF ID: 00	0700)								
Nitrate And N	Nitrite (NOX)								:	1 routine	(RT) per year
Sampling	Point (Sampling Point ID)				Monitor	ing P	eriod	Collect	ion Period	d Com	pliance Status
ENTRY PO	INT (3)				1/1/24 -	12/3	1/24			(Complete
					1/1/25 -	12/3	1/25				Complete
					1/1/26 -	12/3	1/26				
		Public	Not	ification F	Require	eme	ents				
			Co	ompliance	Notice	?	<u>Publi</u>	<u>c Notific</u>	<u>ation</u>	PN C	<u>ertification</u>
Violation/Situa				Period	Tier		Requir		•	Due to DF	
Total Coliform I				24 - 12/31/24		_	.0/10/2			10/20/202	
Physical Parame	eters M&R Violation		10/1/	24 - 12/31/24	3	1	.0/10/2	026		10/20/202	26
	Water 9	System F	Facili	ty and Sa	mpling	Poi	int In	vento	ry		
Water								Total	Lead and	d	
- /	er System Facility			Sampling Pol	int			Coliform			Stage
Facility ID		ID		Description			Status	Rule	Rule Tie	er Asbesto	os WQP 2 DBPR
00600 DIST	RIBUTION SYSTEM	4		DISTRIBUTIO			Α	Υ			
				WITHIN 5 SE			Α				
		UPSTRE		WITHIN 5 SE		N	Α				
	RY POINT	3		ENTRY POINT	-		Α				
20915 WEL	L	2		WELL			Α				
			Con	tact Infor	mation	1					
Name			Or	ganization						Job Title	e
Roaring Brook	Park Inc										
Mailing Address	s Line One	Mailing A	ddress	Line Two				С	ity	State	Zip Code
98 Woodland S	t						Sou	th Glasto	onbury	СТ	06073

(Connectic	ut Depa	rtment of	Public	Health	Dri	nking	Water	Sec	tion	
	Wa	ter Qua	lity Monito	oring a	nd Con	nplia	nce S	Schedul	e		
PWS ID	PWS Name					Classif	ication	Population	Owne	r Type F	Primary Source
CT0540034	GLASTONBURY I	ELKS CLUB				N	С	25	F)	GW
Local Address (w	here applicable)			Service	Residen	tial Co	mmerci	al Industria	al Co	ombined	d Agricultural
88 WOODLAND	STREET			Connectio	ns		1				
Towns Served: G											
Business Phone	Extension	Fax	Mobile	e Phone	Emergency	Phone	Email A	Address			
Contact Role(s):	Owner										
Name			Org	ganization					J	ob Title	
Mr. Dennis G Cla	ffey		Roa	aring Brook	k Park Inc			President			
Mailing Address I	ine One		Mailing Address	Line Two				City		State	Zip Code
125 Sherman Rd							Glastor	nbury		CT	06033
Business Phone	Extension	Fax	Mobile	e Phone	Emergency	Phone	Email A	Address			
Contact Role(s):	Legal Contact										
Name			Org	ganization					J	ob Title	
Mr. Michael Don	di		Gla	stonbury E	rks Club						
Mailing Address I	ine One		Mailing Address	Line Two				City		State	Zip Code
98 Woodland St S	South						Glastor	nbury		СТ	06073
Business Phone	Extension	Fax	Mobile	e Phone	Emergency	Phone	Email A	Address			
860-918-4056							chuckh	ouse271@g	mail.co	m	
Contact Role(s):	Administrative	Contact, Ow	ner		·			·			_

Please note the following:

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

End of schedule

Connecticut D	lonartment of	f Dublic L	loalth D	rinle	ing M	Intor So	ction	
Connecticut D	•				_		CUOII	
	Quality Monit	coring and						
PWS ID PWS Name			Cla		ion Pop			rimary Source
CT0540054 GLASTONBURY HILLS (COUNTRY CLUB			NC		25	Р	GW
Local Address (where applicable)		Service	Residential			Industrial	Combined	Agricultural
239 COUNTRY CLUB ROAD		Connections		1	L			
Towns Served: GLASTONBURY								
	Monit	oring Requ	irement	S				
Water System Facility: DISTRIBUTI	ON SYSTEM (WSF I	D: 00600)						
Total Coliform (3100)						1 rou	itine (RT)	per quarter
Sampling Point (Sampling Point IE	<i>)</i>	ı	Monitoring	Period	Collec	ction Period	Compli	ance Status
Select from Inventory of Active Sar	mpling Points		4/1/25 - 6/3	30/25			Co	mplete
			7/1/25 - 9/3	30/25			Co	mplete
			10/1/25 - 12	/31/25				
			1/1/26 - 3/3	31/26				
			4/1/26 - 6/3	30/26				
Physical Parameters (PPS)								per quarter
Sampling Point (Sampling Point IL	-	I	Monitoring		Collec	ction Period		ance Status
Select from Inventory of Active Sar	mpling Points		4/1/25 - 6/3	-				mplete
			7/1/25 - 9/3				Со	mplete
			10/1/25 - 12					
			1/1/26 - 3/3					
	(4/1/26 - 6/3	30/26				
Water System Facility: ENTRY POIL	NT (WSF ID: 00700)							
Nitrate And Nitrite (NOX)							-	RT) per year
Sampling Point (Sampling Point II	9)		Monitoring		Collec	ction Period		ance Status
ENTRY POINT (3)			1/1/24 - 12/					mplete
			1/1/25 - 12/				Co	mplete
			1/1/26 - 12/	•				
	Other C	ompliance	Schedul	es				
Compliance Schedule Activity			Due	Date		Achieved	Date	
RESPOND TO SANITARY SURVEY			3/5	/2023				
CROSS CONNECTION SURVEY REPORT			2/4	1				
CROSS CONNECTION SURVEY REPORT			3/1	/2026				
	er System Facil	ity and Sar			nvento	ory		
Water Water			npling Po		Total	Lead and		
Water System Water System Facility	Sampling Point	Sampling Poir	npling Po		Total Coliforn	Lead and n Copper		Stage
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point	mpling Po	oint Ir	Total Coliforn Rule	Lead and n Copper	Asbestos	Stage WQP 2 DBPR
Water System Water System Facility	Sampling Point ID 4	Sampling Poir Description DISTRIBUTION	npling Pont	Status A	Total Coliforn	Lead and n Copper	Asbestos	
Water System Water System Facility Facility ID	Sampling Point ID 4 DOWNSTREAM	Sampling Poin Description DISTRIBUTION WITHIN 5 SER	npling Pont I SYSTEM VICE CON	Status A A	Total Coliforn Rule	Lead and n Copper	Asbestos	
Water System Water System Facility Facility ID 00600 DISTRIBUTION SYSTEM	Sampling Point ID 4 DOWNSTREAM UPSTREAM	Sampling Poin Description DISTRIBUTION WITHIN 5 SER WITHIN 5 SER	npling Pont I SYSTEM VICE CON	Status A A A	Total Coliforn Rule	Lead and n Copper	Asbestos	
Water System Water System Facility Facility ID 00600 DISTRIBUTION SYSTEM 00700 ENTRY POINT	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3	Sampling Poin Description DISTRIBUTION WITHIN 5 SER WITHIN 5 SER ENTRY POINT	npling Pont I SYSTEM VICE CON	Status A A A A	Total Coliforn Rule	Lead and n Copper	Asbestos	
Water System Water System Facility Facility ID 00600 DISTRIBUTION SYSTEM 00700 ENTRY POINT 20917 WELL 1	Sampling Point ID 4 DOWNSTREAM UPSTREAM	Sampling Poin Description DISTRIBUTION WITHIN 5 SER WITHIN 5 SER	npling Pont I SYSTEM VICE CON	Status A A A	Total Coliforn Rule	Lead and n Copper	Asbestos	
Water System Water System Facility Facility ID 00600 DISTRIBUTION SYSTEM 00700 ENTRY POINT 20917 WELL 1 62651 WATER SOFTENER	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2	Sampling Poin Description DISTRIBUTION WITHIN 5 SER WITHIN 5 SER ENTRY POINT WELL	npling Pont I SYSTEM VICE CON	Status A A A A	Total Coliforn Rule	Lead and n Copper	Asbestos	
Water System Water System Facility Facility ID 00600 DISTRIBUTION SYSTEM 00700 ENTRY POINT 20917 WELL 1	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2	Sampling Poin Description DISTRIBUTION WITHIN 5 SER WITHIN 5 SER ENTRY POINT WELL	npling Pont I SYSTEM VICE CON VICE CON	Status A A A A	Total Coliforn Rule	Lead and n Copper	Asbestos	
Water System Water System Facility Facility ID 00600 DISTRIBUTION SYSTEM 00700 ENTRY POINT 20917 WELL 1 62651 WATER SOFTENER	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2	Sampling Poin Description DISTRIBUTION WITHIN 5 SER WITHIN 5 SER ENTRY POINT WELL	npling Pont I SYSTEM VICE CON VICE CON	Status A A A A	Total Coliforn Rule	Lead and n Copper	Asbestos	
Water System Water System Facility Facility ID 00600 DISTRIBUTION SYSTEM 00700 ENTRY POINT 20917 WELL 1 62651 WATER SOFTENER	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2 Cor	Sampling Poin Description DISTRIBUTION WITHIN 5 SER WITHIN 5 SER ENTRY POINT WELL	npling Pont I SYSTEM VICE CON VICE CON	Status A A A A	Total Coliforn Rule	Lead and n Copper	Asbestos Job Title	
Water System Water System Facility Facility ID 00600 DISTRIBUTION SYSTEM 00700 ENTRY POINT 20917 WELL 1 62651 WATER SOFTENER 62652 WELL 2	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2 Cor	Sampling Poin Description DISTRIBUTION WITHIN 5 SER WITHIN 5 SER ENTRY POINT WELL WELL 2 Itact Inforr Inganization Illustration	npling Pont I SYSTEM VICE CON VICE CON	Status A A A A A	Total Coliforn Rule Y	Lead and n Copper		

	Connectic	ut Depa	rtment	of Publi	с Н	ealth l	Drin	iking	Water	· Se	ection	
	Wa	ter Qua	lity Mor	nitoring	and	d Com	plia	nce S	chedul	le		
PWS ID P	WS Name					(Classifi	cation	Population	Ow	ner Type	Primary Sourc
CT0540054 G	LASTONBURY	HILLS COUNT	TRY CLUB				N	С	25		Р	GW
Local Address (wh	ere applicable)			Service		Residenti	al Co	mmercia	al Industri	al	Combine	d Agricultura
239 COUNTRY CLU	B ROAD			Connecti	ons			1				
Towns Served: GL/	ASTONBURY								,			
239 Country Club	Road							South G	lastonbury		СТ	06073-3604
Business Phone	Extension	Fax	M	lobile Phone	Em	nergency F	Phone	Email A	ddress			
860-633-5253			86	50-462-3826				membe	rship@glas	tonk	ouryhills.co	m
Contact Role(s):	egal Contact											
Name				Organization	1						Job Title	
Mr. John Ruzsbatz	ky			Glastonbury	Hills	Country C	lub		Superinte	nde	nt	
Mailing Address Li	ne One		Mailing Add	ress Line Two					City		State	Zip Code
239 Country Club	Rd							South G	lastonbury		СТ	06073
Business Phone	Extension	Fax	M	lobile Phone	Em	nergency F	Phone	Email A	ddress			
860-633-5253			86	50-305-6982				super@	glastonbur	yhill	s.com	
Contact Role(s):	Administrative	Contact										

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End of schedule

		Certified	Operator	Inforr	mat	ion				
20919	WELL	2	WELL			Α				
00700	ENTRY POINT	3	ENTRY POINT			Α				
		UPSTREAM	WITHIN 5 SER	VICE CC	N	Α				
		JBW7	OUTSIDE SPIG			Α	Υ			
		JBW6	LADIES ROOM		Т	A	Ϋ́			
		JBW4 JBW5	SLOP SINK CLO KITCHEN SINK			A A	Y Y			
		JBW3	HAND WASH		ICH	Α	Y			
		DOWNSTREAM				A	v			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION			Α	Υ			
System Facility ID		Sampling Point ID	Sampling Poil Description	nt		Status	Coliform Rule	Copper		Stage WQP 2 DBPF
Water	vvate	er System Facili	ity allu sal	ווווקוו	870	יווול וו	Total	Lead and	<u> </u>	
CKO22 CO	NNECTION EXEMPTION	er System Facili	ity and Sar	malia		/2025 aint Ir	wente	Y\/		
	NNECTION EXEMPTION					/2017				
-	ce Schedule Activity					Date		Achieved	Date	
		Other C	ompliance	Sche	dul	es				
		_		1/1/26	_	-				
				1/1/25	- 12/	31/25			Co	mplete
ENTR	RY POINT (3)			1/1/24			-		Co	mplete
	oling Point (Sampling Point ID)			Monito	ring	Period	Collect	ion Period	-	ance Status
	And Nitrite (NOX)							1	routine (R	T) per year
Water Sv	stem Facility: ENTRY POIN	T (WSF ID: 00700)		., _, _0	5,5	. 3, =0				
				4/1/26			10/1	10/31		inpiete
				7/1/25 10/1/25			10/1	L-10/31		mplete mplete
Selec	ct from Inventory of Active Sam	pling Points		4/1/25						mplete
	oling Point (Sampling Point ID)			Monito			Collect	ion Period		ance Status
-	Parameters (PPS)									oer quarter
				4/1/26	5 - 6/3	30/26				
				10/1/25						mplete
	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	. 5		7/1/25		-				mplete
	ct from Inventory of Active Sam			4/1/25			Concer	ion i crioa		mplete
	liform (3100) pling Point (Sampling Point ID)	1		Monito	rina	Derind	Collect	1 ro ion Period		per quarter ance Status
	stem Facility: DISTRIBUTIO	ON SYSTEM (WSF II	D: 00600)						(5=)	
			oring Requ	uirem	ents	S				
Towns Ser	rved: GLASTONBURY									
705 NEIPS			Connections			1				
Local Add	ress (where applicable)		Service	Reside	ential	Comm	nercial In	ndustrial	Combined	Agricultural
CT054007	4 J.B. WILLIAMS PARK					NC	2	25	L	GW
PWS ID	PWS Name				Cla	ssificati	ion Popu	lation Ow	ner Type Pr	imary Source
	Water (Quality Monit	oring an	d Co	mp	lianc	e Sch	edule		
	Connecticut D Water (•					_			

	Water Quality	Monitoring an	d Con	npliance	Schedu	le	
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0540074	J.B. WILLIAMS PARK			NC	25	L	GW
Local Address	(where applicable)	Service	Resider	ntial Commerc	ial Industri	ial Combin	ed Agricultural
705 NEIPSIC R	OAD		1				

Connecticut Department of Public Health Drinking Water Section

Towns Served: GLASTONBURY

Certified Operator Information

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

Facility Classification:DISTRIBUTION SYSTEMCertificationOperator NameOperator TypeCertification(s)ExpirationSACCHITELLA, DAVIDASSIGNED OPERATORSMALL WATER SYSTEM OPERATOR3/31/2026

STREETHTELET, BTTVI		7100101120 01	LIVITOIL	SIVIALE VVALLER STST	LIVI OI L	10 11 011		3/31/2020	
			Co	ontact Inf	formation				
Name				Organization	า			Job Title	
Mr. Jason Albert				Town of Glas	stonbury		Park Main S	Supervisor	
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
2143 Main St						Glastonb	ury	СТ	06033
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	dress		
860-652-7684						jason.alk	ert@glasto	nbury-ct.gov	
Carata at Dala(a).	-l		al Cambaat		•	•			

Contact Role(s): Administrative Contact, Legal Contact

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End of schedule

	Connecticut Departn					_				
	Water Quality	Moni	itoring an	d Com	ıpli	ance S	Sche	edule	9	
PWS ID	PWS Name				Class	sification	Popul	ation	Owner Type I	Primary Source
CT0540094	SHAH PROPERTIES LLC.					NC	2	7	Р	GW
Local Address (where applicable)		Service	Resident	tial (Commerci	al Ind	dustrial	Combined	d Agricultural
2088 HEBRON	AVENUE		Connections			1				
Towns Served:	GLASTONBURY			I						
		Moni	toring Requ	ıireme	nts					
Water System	n Facility: DISTRIBUTION SYSTE									
Total Colifor	m (3100)	-						1	routine (RT)	per quarter
	Point (Sampling Point ID)			Monitorii	ng Pe	eriod C	ollecti	on Peri		liance Status
	m Inventory of Active Sampling Point	:S		4/1/25 -						
	, c			7/1/25 -						
				10/1/25 -						
				1/1/26 -						
				4/1/26 -		•				
Dhysical Dars	meters (PPS)			4/1/20-	0/30/	/20		1	routing (DT)	nor quarter
•	Point (Sampling Point ID)			Monitorii	na Da	eriod C	ollecti	on Peri		per quarter
	m Inventory of Active Sampling Point	·c		4/1/25 -			onecti	UII FEIT	ou comp	nunce Status
Select II of	II IIIVentory of Active Sampling Foun	.3		7/1/25 -						
				10/1/25 -						
				1/1/26 -						
			•	4/1/26 -	6/30	/26				
-	Facility: ENTRY POINT (WSF II): 00/00	<u>')</u>							
	Nitrite (NOX)								-	RT) per year
	Point (Sampling Point ID)			Monitorii			ollecti	on Peri		liance Status
ENTRY PO	INT (3)			1/1/24 - :					С	omplete
				1/1/25 - :						
				1/1/26 - :	12/31	1/26				
		Other	Compliance	Sched	lule	S				
Compliance Sc	hedule Activity			L	Due D	Date		Achiev	ed Date	
RESPOND TO S	ANITARY SURVEY			S	9/4/2	025				
	Pu	blic No	tification R	equire	me	nts				
			Compliance	Notice		Public No	otifica	tion_	PN Ce	rtification
Violation/Situ	ation		Period	Tier		Required	-	ormed		-
Physical Param	eters M&R Violation	10/	1/23 - 12/31/23	3		/14/2025			3/24/2025	
Total Coliform	M&R Violation	10/	1/23 - 12/31/23	3	3,	/14/2025			3/24/2025	
Physical Param	eters M&R Violation	1/	1/25 - 3/31/25	3	10	0/10/2026			10/20/2026	5
Total Coliform	M&R Violation	1/	1/25 - 3/31/25	3	10	0/10/2026			10/20/2026	5
	Water Syste	m Faci	ility and Sar	npling	Poi	nt Inve	ntor	V		
Water			-,	-18				Lead a	nd	
	ter System Facility Samp	ling Poin	t Sampling Poi	nt			form	Coppe		Stage
Facility ID	,	ID	Description		ç		ule			WQP 2 DBPR
_	RIBUTION SYSTEM	4	DISTRIBUTION	N SYSTEM		tutus	Υ			
			M WITHIN 5 SER			Α				
		STREAM	WITHIN 5 SER			Α				
00700 ENT	RY POINT	3	ENTRY POINT			A				
		-								

WELL

1

Schedule Generation Date: 12/12/2025

22765 WELL

2

	Water Quality Monit	oring an	d Con	npl	iance S	Schedul	le	
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT0540094	SHAH PROPERTIES LLC.				NC	27	Р	GW
Local Address	(where applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	d Agricultural
2088 HEBRON	I AVENUE	Connections			1			

Connecticut Department of Public Health Drinking Water Section

Towns Served: GLASTONBURY

			C	ontact Inf	ormation				
Name				Organization				Job Title	
Mr. Henry Shah				Andover Plaz	a, LLC		Owner		
Mailing Address Line	e One		Mailing Add	ress Line Two			City	State	Zip Code
191 East Opal Dr.						Glastonb	ury	СТ	06033
Business Phone	Extension	Fax	N	lobile Phone	Emergency Phone	Email Ad	dress		
860-633-4155		860-256-4	790		860-559-2861	shah.her	ry@gmail.com		

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

Please note the following:

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

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

End of schedule

Со		•				: Health I					ction		
PWS ID PW	S Name					C	lassifi	cation P	opul	ation Own	er Type P	rimary Source	
CT0549044 DOI	NDERO ORCH	IARDS LLC					N	С	29	9	Р	GW	
Local Address (where	e applicable)				Service	Residentia	l Cor	mmercial	In	dustrial	Combined	Agricultural	
529 WOODLAND STR	REET				Connectio	ns		3					
Towns Served: GLAS	TONBURY									,			
Matau Coataua Fasi	lia DICTD	IDUTION C				quirement	ts						
Water System Faci	•	IRO LION 21	SIEWI (WSF I	D: 00600)					4	(DT)		
Total Coliform (3	-	oint ID)				Monitorina	. Dovic	ad Cal	llock:			per quarter	
Sampling Point			Doints			Monitoring			песи	on Period		iance Status	
Select from Inve	entory of Act	ive sampling	Points			4/1/25 - 6/			Complete				
						7/1/25 - 9/			Complete				
						10/1/25 - 12							
						1/1/26 - 3/							
	(222)					4/1/26 - 6/	/30/26	o			/\		
Physical Paramete							. .					per quarter	
Sampling Point			D · ·			Monitoring			llecti	on Period		iance Status	
Select from Inve	entory of Act	ive Sampling	Points			4/1/25 - 6/					Complete		
						7/1/25 - 9/					Co	mplete	
						10/1/25 - 12							
						1/1/26 - 3/	-						
						4/1/26 - 6/	/30/26	5					
Water System Faci	lity: ENTR	Y POINT (W	/SF ID: 00	0700)									
Nitrate And Nitrit	e (NOX)									1 ו	routine (RT) per year	
Sampling Point		oint ID)				Monitoring	Perio	od Col	llecti	on Period	Compl	iance Status	
ENTRY POINT (3	3)					1/1/24 - 12	/31/2	4			Co	mplete	
						1/1/25 - 12	/31/2	5			Co	mplete	
						1/1/26 - 12	/31/2	.6					
		Water Sy	stem I	Facil	ity and S	Sampling P	oint	Inven	itor	у			
Water					-			Tot	al	Lead and			
System Water Sys	stem Facility		Sampling	Point	Sampling I	Point		Colife		Copper		Stage	
Facility ID			ID		Description	n	Stat	tus Ru	le	Rule Tier	Asbestos	WQP 2 DBPR	
00600 DISTRIBU	TION SYSTEM		4		DISTRIBUT	ION SYSTEM	Α						
			DOWNST	REAM	WITHIN 5	SERVICE CON	Α						
			UPSTRE	AM	WITHIN 5	SERVICE CON	Α						
00700 ENTRY PC	INT		3		ENTRY POI	NT	А						
56982 WELL			2		WELL		А						
				Cor	ntact Info	ormation							
Name					rganization						Job Title		
Mrs. Sandra N. Done	dero				ondero Orch	nards II C			CO-1	Vner	JOD TILLE		
Mailing Address Line			Mailing A		s Line Two	IGI GO ELC			Cit		State	Zip Code	
500 Country Club Ro			.viuiiiig A	.aai es	S LINE I WO			South Gl		•	CT	06073	
Business Phone	Extension	Fax		Moh	ile Phone	Emergency P				<u> </u>	CI	00073	
860-659-0294	LACCIOUII	860-659-0	1204	IVIOD	ne i none	Emergency P				s iards@cox.	net		
000-033-0234		000-059-0	1474					טוועפוט	OIL	iai us@COX.	iici		

Schedule Generation Date: 12/12/2025

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

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

		_			_ I		·	
PWS ID	PWS Name				Classification	Population	Owner Type	Primary Source
СТ0549044	DONDERO ORCHARDS	S LLC			NC	29	Р	GW
Local Address (v	vhere applicable)		Service	Residen	tial Commerci	al Industri	al Combine	ed Agricultural
529 WOODLANI) STREET		Connections		3			
Towns Served: (GLASTONBURY		·				·	

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

End of schedule

Schedule Generation Date: 12/12/2025 Page 12

	Connecticut De	partment of uality Monit					_			ction	
DIAKS ID		uanty Monit	oring and		_					T D-	·
PWS ID	PWS Name				Clas				Own		imary Source
CT0549054	ROBBS FARM LLC		Comico	Dasidana	امنا	NC		.7	-1	P	GW
91 WASSUC RO	(where applicable)		Service Connections	Resident	lai	Commer	ciai ir	dustria	al	Combined	Agricultural
	GLASTONBURY		comiconons							1	
TOWITS SELVEU.	CLASTONDON	D.A.s.sit.	onina Danu	.:							
Water Syster	m Facility: DISTRIBUTIO		oring Requ D: 00600)	ııremei	nts						
Total Colifor	•							1	rou	tine (RT) ı	per quarter
	Point (Sampling Point ID)			Monitorii	ng Pe	eriod	Collect				ance Status
	m Inventory of Active Samp	ling Points		4/1/25 -							mplete
	•			7/1/25 -	9/30)/25				Coi	mplete
				10/1/25 -	12/3	31/25					
				1/1/26 -	3/31	/26					
				4/1/26 -	6/30)/26					
Physical Par	ameters (PPS)							1	rou	tine (RT) լ	er quarter
Sampling	Point (Sampling Point ID)			Monitorii	ng Pe	eriod	Collect	ion Per	riod	Compli	ance Status
Select fro	m Inventory of Active Samp	ling Points		4/1/25 -	6/30)/25				Coi	mplete
				7/1/25 -	9/30)/25				Coi	mplete
				10/1/25 -							
				1/1/26 -							
				4/1/26 -	6/30)/26					
Water Syster	m Facility: ENTRY POINT	(WSF ID: 00700)									
Nitrate (104	•							1	rou		er quarter
	Point (Sampling Point ID)			Monitorii			Collect	ion Per	riod		ance Status
ENTRY PO	DINT (3)			4/1/25 -							mplete
				7/1/25 -						Coi	mplete
				10/1/25 -							
				1/1/26 -							
	4)			4/1/26 -	6/30	0/26				/-	_\
Nitrite (104	•			0.00	D	aut a al	Callage	ion Do		· -	T) per year
ENTRY PO	Point (Sampling Point ID)			Monitorii			Collect	ion Pei	10a		ance Status
ENTRYPO	ואות (3)			1/1/24 - 1							mplete mplete
				1/1/25 - 1 1/1/26 - 1						COI	iipiete
		Other C	ompliance								
Compliance Sc	chedule Activity		paoc		Due L			Achie	ved I	Date	
-	SANITARY SURVEY					2021		c.ne	J C G L	- 3.0	
INEST OND TO		r System Facili	ity and Sar				ento	ry			
Water							Total	Lead	and		
*	ter System Facility	Sampling Point		nt			oliform	Сорр			Stage
Facility ID		ID	Description		5	Status	Rule	Rule	Tier	Asbestos	WQP 2 DBPR
00600 DIS	TRIBUTION SYSTEM	4	DISTRIBUTION			Α					
		DOWNSTREAM				Α					
		UPSTREAM	WITHIN 5 SER	VICE CON		Α					
	TRY POINT	3	ENTRY POINT			Α					
59798 WE	LL 2 (HOUSE WELL)	2	WELL 2 (HOUS	SE WELL)		Α					

Schedule Generation Date: 12/12/2025 Page 13

	Water Quality N	Monitoring an	d Con	npliance	Schedu	le	
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0549054	ROBBS FARM LLC			NC	27	Р	GW
Local Address	(where applicable)	Service	Resider	ntial Commerc	ial Industri	al Combin	ed Agricultural
91 WASSUC R	OAD	Connections				1	

Connecticut Department of Public Health Drinking Water Section

Towns Served: GLASTONBURY

Contact Information											
Name		Organization	1		Job Title						
Mr. Robert Armand	lo, Jr.	Robbs Farm LLC									
Mailing Address Line One Mailing Addr				ess Line Two			City	State	Zip Code		
91 Wassuc Road						South Glastonbury CT 06073					
Business Phone Extension Fax Mo				bile Phone	Emergency Phone	Email Address					
860-657-8235					860-657-2852	robbsfarı	m@hotmail.co	om			

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

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End of schedule

Mr. Darrell Dragh Mailing Address L 80 Main Street Business Phone 860-633-2197		Fax Mob	ile Phone	Emergency F	hone Em		ess		
860-633-2197	Extension F	ax Mob	ile Phone	Emergency F	hone Em	nail Addr	ess		
Mr. Darrell Dragh Mailing Address L 80 Main Street Business Phone		ax Mob	ile Phone	Emergency F	hone Em	nail Addr	ess		
Mr. Darrell Dragh Mailing Address L 80 Main Street		- NA-1-	ilo Dhana	Emorgon			<u> </u>		
Mr. Darrell Dragh Mailing Address L	ine one				50	uth Glas	tonburv	CT	06073
Mr. Darrell Dragh	ina Ona	Mailing Addres	s Line Two		_		City	State	Zip Code
		0	rganization					Job Title	
			tact Info	rmation					
59775 WELL		2	WELL		A				
00700 ENTRY	POINT	3	ENTRY POIN	H	Α .				
00700	DOINT	UPSTREAM	WITHIN 5 SI		Α .				
		DOWNSTREAM			A				
00600 DISTRII	BUTION SYSTEM	4	DISTRIBUTION		Α				
System Water Facility ID		Sampling Point ID	Description		Status	Dula	n Copper Rule Tier	Asbestos	Stage WQP 2 DBPF
Water						Total			
	Water	System Facil	ity and Sa	ampling I	Point I	nvent	ory		
				1/1/26 - 1	2/31/26				
				1/1/25 - 1	2/31/25			С	omplete
ENTRY POINT	Γ (3)			1/1/24 - 1	2/31/24			C	omplete
	int (Sampling Point ID)			Monitorin	g Period	Colle	ction Period	-	liance Status
Nitrate And Nit	,						1	routine (RT) per year
Water System Fa	acility: ENTRY POINT	(WSF ID: 00700)		, =, ==	,,				
				4/1/26 - 6		10	1 + +4/47		
				10/1/25 - 1		10	/1-12/24		ompiete
Select Irolli i	inventory of Active Sampi	ilig Politis		7/1/25 - 9					omplete
	int (Sampling Point ID) nventory of Active Sampl	ing Doints		Monitorin 4/1/25 - 6		Colle	ction Period		liance Status omplete
Physical Param						6.11		-	per quarter
				4/1/26 - 6	5/30/26				
i				10/1/25 - 1					
				7/1/25 - 9	<u> </u>			С	omplete
Select from I	nventory of Active Sampl	ing Points		4/1/25 - 6	5/30/25			C	omplete
Sampling Po	int (Sampling Point ID)			Monitorin	g Period	Colle	ction Period	Comp	liance Status
Total Coliform	•		•				1 rou	ıtine (RT)	per quarter
Water System Fa	acility: DISTRIBUTION			•					
		Monit	oring Rec	uiremen	ts				
Towns Served: GL	ASTONBURY								
80 MAIN STREET	уста арриозите,		Connection					1	. 8
Local Address (wh			Service	Residenti		nercial	Industrial	Combine	
	. DRAGHI & SONS, LLC				NC	1011 1 06	25	P	GW
PWS ID P	PWS Name	dancy Monn	iornig ai		•			ner Tyne	Primary Source
	Water ()ı	Iaiii v ivionii							
	Connecticut De	•		nd Com					

L	onnectic	ut Depa	rtme	nt of I	Public	Health	Drii	nking	g water	Section	
	Wa	ter Qua	lity M	lonito	ring a	nd Con	nplia	nce S	Schedul	le	
PWS ID P\	PWS Name Classification Population Owner Type Primary So										Primary Source
CT0549064 E.	DRAGHI & SOI	NS, LLC					N	IC	25	Р	GW
Local Address (whe	ere applicable)			9	Service	Residen	tial Co	mmerci	al Industri	al Combin	ed Agricultural
80 MAIN STREET				(Connection	S				1	
Towns Served: GLA	STONBURY			1						'	1
Name				Orga	anization					Job Titl	e
Ms. Cheryl Martin				E.Dr	aghi And S	ons LLC			Manager		
Mailing Address Lir	ne One		Mailing /	Address L	ine Two				City	State	Zip Code
80 Main Street								South (Glastonbury	СТ	06073
Business Phone	Extension	Fax		Mobile	Phone	Emergency	/ Phone	Email A	Address	,	
860-633-2197		860-633-	5223			860-558-	-6258	draghis	@att.net		
Contact Role(s): A	dministrative	Contact						•			

Connecticut Department of Dublic Health Drinking Water Costion

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