

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0560132	GRANBY CONGREGATIONAL CHURCH	NTNC	65	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
219 NORTH GRANBY ROAD	Connections		1		

Towns Served: GRANBY

Monitoring Requirements

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

Asbestos (1094)	1 routine (RT) per nine years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Lead And Copper (PBCU)	5 routine (RT) per six months		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 12/31/25		
	1/1/26 - 6/30/26		
	7/1/26 - 12/31/26		
Physical Parameters (PPS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Water System Facility: **ENTRY POINT - WELL 2** (WSF ID: 00701)

Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT - WELL 2 (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT - WELL 2 (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT - WELL 2 (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
Organic Chemicals (VOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT - WELL 2 (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0560132	GRANBY CONGREGATIONAL CHURCH	NTNC	65	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
219 NORTH GRANBY ROAD	Connections		1		

Towns Served: GRANBY

Monitoring Requirements

Water System Facility: ENTRY POINT - WELL 2 (WSF ID: 00701)

Organic Chemicals (VOCS)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
		1/1/29 - 12/31/31		1 routine (RT) per three years

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2027	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
					Rule			
00600	DISTRIBUTION SYSTEM	1	UTILITY ROOM	I	Y	2		
		2	BOYS ROOM	I	Y	2		
		3	GIRLS ROOM	I	Y	2		
		4	DISTRIBUTION SYSTEM	A				
		5	LADIES ROOM	I		2		Y
		6	MEN'S ROOM	I	Y	2		
		7	SOUTHEAST OUTSIDE TA	I		2		
		8	NORTHWEST OUTSIDE TA	I		2		
			DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		GC1	BOYS ROOM	A	Y	2	Y	Y
		GC2	GIRLS ROOM	A	Y	2	Y	Y
		GC3	KITCHEN - 3 BAY LEFT	A	Y	2	Y	Y
		GC4	KTCHN - DISH PREP SN	A	Y	2	Y	Y
		GC5	KTCHN - HAND WASH	A	Y	2	Y	Y
			UPSTREAM	WITHIN 5 SERVICE CON	A			
00701	ENTRY POINT - WELL 2	3	ENTRY POINT - WELL 2	A				
58343	WELL 2	2	WELL 2	A				

Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM	Certification Expiration
Operator Name	Operator Type	Certification(s)
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II
		DISTRIBUTION SYSTEM OPERATOR - CLASS III
NIGRO, DAVID	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I
		3/31/2028

Contact Information

Name	Organization	Job Title		
Mrs. Susan L. Miltenberger	Granby Congregational Church	Office Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
219 North Granby Rd		Granby	CT	06035

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0560132	GRANBY CONGREGATIONAL CHURCH	NTNC	65	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
219 NORTH GRANBY ROAD			1		

Towns Served: GRANBY

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-653-4537				860-930-1931	office@granbycongregationalchurch.org

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

Name	Organization	Job Title		
Mr. Stanley Hayes	Granby Congregational Church	Bldg & Grnds Chair		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
219 North Granby Rd		Granby	CT	06035
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-614-0633				hohdairy@cox.net

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

Please note the following:

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

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

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

End of schedule

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0560282	KELLY LANE PRIMARY SCHOOL	NTNC	357	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
60 KELLY LANE			1		

Towns Served: GRANBY

Monitoring Requirements

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

Asbestos (1094)	1 routine (RT) per nine years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Lead And Copper (PBCU)	5 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/24 - 12/31/26	6/1-9/30	
	1/1/27 - 12/31/29	6/1-9/30	
Physical Parameters (PPS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

Nitrate (1040)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Nitrite (1041)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		
Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0560282	KELLY LANE PRIMARY SCHOOL	NTNC	357	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
60 KELLY LANE			1		

Towns Served: GRANBY

Monitoring Requirements

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

Organic Chemicals (VOCS)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
		1/1/26 - 12/31/28		
		1/1/29 - 12/31/31		

Other Compliance Schedules

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

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule Tier	Asbestos	WQP 2	DBPR	Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y				
		BR1	BOYS ROOM 1	A		N			
		DF1	DRINKING FAUCET 1	A		N			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A					
		GR1	GIRLS ROOM 1	A		N			
		K1	KITCHEN FAUCET 1	A	Y	N	Y	Y	
		K2	KITCHEN FAUCET 2	A		N			
		UPSTREAM	WITHIN 5 SERVICE CON	A					
00700	ENTRY POINT	3	ENTRY POINT	A					
52565	WEST WELL #1	2	WEST WELL #1	A					
52567	EAST WELL #2	2	EAST WELL #2	A					
52569	ATMOSPHERIC TANK								
52571	PRESSURE TANK								

Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM	Certification Expiration
Operator Name	Operator Type	Certification(s)
CHOUINARD, THOMAS	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I

Contact Information

Name	Organization	Job Title
Ms. Cheri Burke	Granby Public Schools	Superintendent O
Mailing Address Line One	Mailing Address Line Two	City
15-B North Granby Road		State
		Zip Code
Business Phone	Extension	Fax
860-844-5259		
Mobile Phone	Emergency Phone	Email Address
		burkec@granbyschools.org

Contact Role(s): Administrative Contact

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

PWS ID	PWS Name				Classification	Population	Owner Type	Primary Source
CT0560282	KELLY LANE PRIMARY SCHOOL				NTNC	357	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
60 KELLY LANE				1				
Towns Served: GRANBY								
Name			Organization			Job Title		
Mr. Mike Walsh			Town of Granby			Town Manager		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code	
15 North Granby Road					Granby	CT	06035	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-844-5300					mwalsh@granby-ct.gov			

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

Please note the following:

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

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

End of schedule

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0560372	WELLS ROAD INTERMEDIATE SCHOOL	NTNC	405	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
134 WELLS ROAD	Connections	1			

Towns Served: GRANBY

Monitoring Requirements

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

Asbestos (1094)	1 routine (RT) per nine years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Lead And Copper (PBCU)	5 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/25 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/26	6/1-9/30	
	1/1/27 - 12/31/27	6/1-9/30	
Physical Parameters (PPS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		
Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
Pesticides, Herbicides and PCBs-Phase II (SOC2)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
Pesticides, Herbicides and PCBs-Phase V (SOC5)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0560372	WELLS ROAD INTERMEDIATE SCHOOL	NTNC	405	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
134 WELLS ROAD		1			

Towns Served: GRANBY

Monitoring Requirements

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

Organic Chemicals (VOCS)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSFID: 00600)**

Analyte	Monitoring Requirement (Summary Type)	Operating Limit		Samples Req/Month	
		Minimum:	7.0 PH	4	Monitoring
pH	<spaces> ()				Compliance Status:
Start Date:	4/1/2018	Monitoring Period	Operating Limit	Monitoring	Compliance Status:
		8/1/2025 - 8/31/2025			
		9/1/2025 - 9/30/2025			
		10/1/2025 - 10/31/2025			
		11/1/2025 - 11/30/2025			
		12/1/2025 - 12/31/2025			

Other Compliance Schedules

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

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total		Lead and Coliform Rule		Stage
				Status	Coliform Rule	Copper Rule Tier	Asbestos WQP 2 DBPR	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		BR2	BOYS ROOM 2	A			N	
		BRM	BOYS ROOM	A			N	
		DF1	DRINKING FOUNTAIN 1	A			N	
		DF2	DRINKING FOUNTAIN 2	A			N	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		GR2	GIRLS ROOM 2	A			N	
		GRM	GIRLS ROOM	A			N	
		K1	KITCHEN FAUCET 1	A	Y	N		Y
		K2	KITCHEN FAUCET 2	A			N	
		LAV 1	LAV FAUCET 1	A			N	
		LAV 2	LAV FAUCET 2	A			N	
		OF1	OUTSIDE FAUCET 1	A				
		OF2	OUTSIDE FAUCET 2	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				

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

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CT0560372	WELLS ROAD INTERMEDIATE SCHOOL	NTNC	405	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
134 WELLS ROAD		1			

Towns Served: GRANBY

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper Rule	Asbestos Rule Tier	Stage WQP 2	DBPR
1250	WELLS ROAD ELEMENTARY TREATMENT SYSTEM									
51152	WELL 2	2	WELL 2							
51154	ATMOSPHERIC TANK									
51156	PRESSURE TANK									
51158	PUMP STATION									
55351	WELL #1A	2	WELL #1A							

Certified Operator Information

Water System Facility: WELLS ROAD ELEMENTARY TREATMENT SYSTEM (WSF ID: 1250)

Facility Classification:	CLASS 1 TREATMENT PLANT	Certification Expiration
Operator Name	Operator Type	Certification(s)

CHOUINARD, THOMAS	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	12/31/2026
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Contact Information

Name	Organization	Job Title
Ms. Cheri Burke	Granby Public Schools	Superintendent O
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
15-B North Granby Road		Granby CT 06035
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address
860-844-5259		

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

Name	Organization	Job Title
Mr. Mike Walsh	Town of Granby	Town Manager
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
15 North Granby Road		Granby CT 06035
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address
860-844-5300		

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

Please note the following:

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

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End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0565063	4 WEST GRANBY ROAD	NTNC	97	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: GRANBY

Monitoring Requirements

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

Asbestos (1094)	1 routine (RT) per nine years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Lead And Copper (PBCU)	5 routine (RT) per six months		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 12/31/25		
	1/1/26 - 6/30/26		
	7/1/26 - 12/31/26		
Physical Parameters (PPS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

Chloride (1017)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Nitrate (1040)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Nitrite (1041)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0565063	4 WEST GRANBY ROAD	NTNC	97	P	GW
Local Address (where applicable)	Service Connections	Residential 1	Commercial	Industrial	Combined Agricultural

Towns Served: GRANBY

Monitoring Requirements

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

Inorganic Chemicals (IOCS)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/24 - 12/31/26			
	1/1/27 - 12/31/29			
Pesticides, Herbicides and PCBs-Phase II (SOC2)			1 routine (RT) per three years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/23 - 12/31/25			Complete
	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			
Pesticides, Herbicides and PCBs-Phase V (SOC5)			1 routine (RT) per three years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/23 - 12/31/25			Complete
	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			
Organic Chemicals (VOCS)			1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/25 - 12/31/25			Complete
	1/1/26 - 12/31/26			
	1/1/27 - 12/31/27			

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION EXEMPTION	3/1/2015	
RESPOND TO SANITARY SURVEY	3/6/2021	
CROSS CONNECTION EXEMPTION	3/1/2025	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
					Rule			
00600	DISTRIBUTION SYSTEM	34R3	ROOM 3 & 4	A	Y		N	
		4	GENERIC DISTRIBUTION	A	Y			
		BASS5	B & A SCHOOL	A	Y		N	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		IR1	INFANT ROOM	A	Y		N	
		KR4	KITCHEN	A	Y		N	
		TR2	TODDLER ROOM	A	Y		N	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10747	WELL 1	2	WELL 1	A				

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0565063	4 WEST GRANBY ROAD	NTNC	97	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		1			Agricultural

Towns Served: GRANBY

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Certification

Expiration

Operator Name	Operator Type	Certification(s)	
GUARCO, ALAN	CHIEF OPERATOR	SMALL WATER SYSTEM OPERATOR	6/30/2028

Contact Information

Name	Organization	Job Title		
Mr. Michael Guarco	State Line Oil Company	Owner		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
7 Bayberry Drive		East Granby	CT	06026
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-653-7241				Email Address

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

Name	Organization	Job Title		
Ms. Mary Anne Guarco	Dmm Associates	Partner		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
P.O. Box 26		Granby	CT	06035
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-250-3257				860-653-7241
				Email Address
				MAGuarco@statelineoil.net

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

Please note the following:

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

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

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

End of schedule

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0565073	1 SALMON BROOK STREET	NTNC	80	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: GRANBY

Monitoring Requirements

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

Asbestos (1094)	1 routine (RT) per nine years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Lead And Copper (PBCU)	5 routine (RT) per six months		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 12/31/25		Complete
	1/1/26 - 6/30/26		
	7/1/26 - 12/31/26		
Physical Parameters (PPS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		
Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
Pesticides, Herbicides and PCBs-Phase II (SOC2)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
Pesticides, Herbicides and PCBs-Phase V (SOC5)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0565073	1 SALMON BROOK STREET	NTNC	80	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: GRANBY

Monitoring Requirements

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

Organic Chemicals (VOCS)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
		1/1/26 - 12/31/26		
		1/1/27 - 12/31/27		

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
			Compliance History:	Monitoring
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH		4
Start Date:	Monitoring Period	Compliance Status:	Monitoring	Compliance Status:
4/1/2003	8/1/2025 - 8/31/2025			
	9/1/2025 - 9/30/2025			
	10/1/2025 - 10/31/2025			
	11/1/2025 - 11/30/2025			
	12/1/2025 - 12/31/2025			

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION EXEMPTION	3/1/2020	
CROSS CONNECTION EXEMPTION	3/1/2025	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2025	
CROSS CONNECTION EXEMPTION	3/1/2026	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2026	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper	Stage
					Coliform Rule	Rule Tier	Asbestos	
00600	DISTRIBUTION SYSTEM	1SB001	PRE-K 4	A				
		1SB002	PRE-K 3	A				
		1SB003	KINDERGARTEN	A	Y	2		
		1SB004	INFANTS A	A				
		1SB005	INFANTS B	A		2		
		1SB006	STAFF	A				
		1SB007	TODDLERS	A		2		
		1SB008	TWO'S	A		2		
		1SB009	SCHOOL AGE	A		2		
		1SB010	STAFF BATH	A				
		4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0565073	1 SALMON BROOK STREET	NTNC	80	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined Agricultural

Towns Served: GRANBY

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper Rule	Asbestos Rule Tier	Stage WQP 2	DBPR
	UPSTREAM	WITHIN 5 SERVICE CON		A						
00700	ENTRY POINT	3	ENTRY POINT	A						
10879	WELL	2	WELL	A						
47530	TREATMENT PLANT									

Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM	Certification Expiration
Operator Name	Operator Type	Certification(s)

SPENCE, JEFFREY A. CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS I 6/30/2026

Contact Information

Name		Organization			Job Title		
Mr. Brian Pierce		Halmar, Inc.			Vice President		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
522 Salmon Brook Street					Granby	CT	06035
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-653-7283					brian@1pierce.com		

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

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