

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0590203	GROTON BOARD OF EDUCATION	NTNC	50	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
1300 FLANDERS ROAD	Connections	1			

Towns Served: GROTON

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	1/1/23 - 12/31/31		
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	1/1/23 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/28	6/1-9/30	
	1/1/29 - 12/31/31	6/1-9/30	
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)	1/1/25 - 12/31/27		
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		

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

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CT0590203	GROTON BOARD OF EDUCATION	NTNC	50	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
1300 FLANDERS ROAD	Connections	1			

Towns Served: GROTON

Monitoring Requirements

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

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

Other Compliance Schedules

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

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP 2 DBPR	Stage
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Y				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A					
		GBE1	SINK ROOM 3	I	Y	2			
		GBE10	MEN'S ROOM - 15	A	Y	N			
		GBE11	LADIES ROOM - 15	A		N			
		GBE2	SINK ROOM 3	I	Y	2			
		GBE3	SINK - KITCHEN	A	Y	N			
		GBE4	FOUNTAIN HALL WEST	I	Y	2			
		GBE5	SINK ROOM 13	I	Y	2			
		GBE6	MEN'S ROOM - 16	A	Y	N			
		GBE7	LADIES ROOM - 2	A	Y	N			
		GBE8	ROOM 11	A	Y	N			
		GBE9	MEN'S ROOM - 2	A	Y	N			
		UPSTREAM	WITHIN 5 SERVICE CON	A					
00700	ENTRY POINT	3	ENTRY POINT	A					
10276	WELL	2	WELL	A					

Certified Operator Information

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

Facility Classification:	Certification Expiration		
Operator Name	Operator Type	Certification(s)	
MCGARRY, THOMAS	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	3/31/2027
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	3/31/2027
BELAIR, BRANDON W.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2027
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2027

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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
CT0590203	GROTON BOARD OF EDUCATION	NTNC	50	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
1300 FLANDERS ROAD		1			

Towns Served: GROTON

Contact Information

Name	Organization	Job Title		
Ms. Susan L. Austin	Groton Public School	Superintendent		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
1300Flanders Road		Mystic	CT	06355
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-572-2125		860-572-5822		saustin@groton.k12.ct.us

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
CT0590253	COMCAST CABLEVISION	NTNC	35	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
401 GOLDSTAR HWY.	Connections	1			

Towns Served: GROTON

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)	1/1/25 - 12/31/27		
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
CT0590253	COMCAST CABLEVISION	NTNC	35	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
401 GOLDSTAR HWY.	Connections	1			

Towns Served: GROTON

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)	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		

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7 PH	4
Start Date: 1/1/2002		Compliance History: Monitoring Period	Operating Limit Compliance Status: Monitoring Compliance Status:
		8/1/2025 - 8/31/2025	
		9/1/2025 - 9/30/2025	
		10/1/2025 - 10/31/2025	
		11/1/2025 - 11/30/2025	
		12/1/2025 - 12/31/2025	
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Maximum: 7.5 PH	4
Start Date: 2/5/2021		Compliance History: Monitoring Period	Operating Limit Compliance Status: Monitoring Compliance Status:
		8/1/2025 - 8/31/2025	
		9/1/2025 - 9/30/2025	
		10/1/2025 - 10/31/2025	
		11/1/2025 - 11/30/2025	
		12/1/2025 - 12/31/2025	

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	Status	Total Coliform	Lead and Copper Rule	Asbestos	Stage WQP 2 DBPR
					Rule Tier	Asbestos	Stage WQP 2 DBPR	
00600	DISTRIBUTION SYSTEM	3	C-1	A	Y			
		4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MW001-1	MENS ROOM #1	P	Y	N		
		MW001-2	MENS ROOM #2	I	Y	N		
		MW002	LADIES ROOM	P	Y	N		

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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
CT0590253	COMCAST CABLEVISION	NTNC	35	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
401 GOLDSTAR HWY.		1			

Towns Served: GROTON

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper	Asbestos	WQP 2	DBPR Stage
					Rule	Rule Tier				
		MW003-1	KITCHEN # 1	P	Y		N			
		MW003-2	KITCHEN #2	I	Y		N			
		MW005	BREAK ROOM	P	Y					
		OSC001-1	OUTSIDE SILLCOCK #1	A	Y		N			
		OSC001-2	OUTSIDE SILLCOCK #2	A	Y		N			
		UPSTREAM	WITHIN 5 SERVICE CON	A						
00700	ENTRY POINT	3	ENTRY POINT	A						
10277	WELL	2	WELL	A						
46386	COMCAST TREATMENT STATION									

Certified Operator Information

Water System Facility: COMCAST TREATMENT STATION (WSF ID: 46386)

Facility Classification: CLASS 1 TREATMENT PLANT			Certification Expiration
Operator Name	Operator Type	Certification(s)	
GRANT, SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2026 9/30/2026
PETITTI, ANDY	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2028 12/31/2028

Contact Information

Name	Organization	Job Title
Mr. Dan Tomaro	Comcast Cable Communications	Regional Ehs Special
Mailing Address Line One	Mailing Address Line Two	City
222 New Park Drive		State
		Zip Code
Business Phone	Extension	Fax
860-839-7430		
		Mobile Phone
		Emergency Phone
		Email Address
		Daniel_Tomaro@comcast.com

Contact Role(s): Administrative Contact

Name	Organization	Job Title
Ms. Marna Salimena	Comcast Cable	DEP. General Counsel
Mailing Address Line One	Mailing Address Line Two	City
1701 John F. Kennedy Blvd.		State
		Zip Code
Business Phone	Extension	Fax
215-286-7026		
		Mobile Phone
		Emergency Phone
		Email Address

Contact Role(s): Legal Contact

Name	Organization	Job Title

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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
CT0590253	COMCAST CABLEVISION	NTNC		35	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
401 GOLDSTAR HWY.		1				

Towns Served: GROTON

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
CT0590154	MEDTRONIC XOMED (MEROCEL FACILITY)	NTNC	50	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
950 FLANDERS ROAD	Connections		1		

Towns Served: GROTON

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: **WELL 1 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>
WELL 1 ENTRY POINT (3)	1/1/25 - 12/31/27		
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>
WELL 1 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>
WELL 1 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>
WELL 1 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
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Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
950 FLANDERS ROAD	Connections		1		

Towns Served: GROTON

Monitoring Requirements

Water System Facility: WELL 1 ENTRY POINT (WSF ID: 00700)

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

Water System Facility: WELLS 2 AND 3 ENTRY POINT (WSF ID: 00701)

Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELLS 2 AND 3 ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELLS 2 AND 3 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 Polychlorinated Biphenyls (PCBs) (SOCS)	1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELLS 2 AND 3 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
WELLS 2 AND 3 ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Water System Facility: WELL #2 (WSF ID: 49214)

E. Coli (3014)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL #2 (2)	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: WELL #3 (WSF ID: 49216)

E. Coli (3014)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL #3 (2)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		
	1/1/26 - 3/31/26		

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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
CT0590154	MEDTRONIC XOMED (MEROCEL FACILITY)	NTNC	50	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
950 FLANDERS ROAD	Connections		1		

Towns Served: GROTON

Monitoring Requirements

Water System Facility: WELL #3 (WSF ID: 49216)

E. Coli (3014)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
		4/1/26 - 6/30/26		1 routine (RT) per quarter

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	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		DSP 004	BACK LADIES BATHROOM	P		1	
		DSP001	LUNCH ROOM	P	Y	1	
		DSP002	FRT. LADIES BATHROOM	P		1	
		DSP003	FRONT MEN BATHROOM	P		1	
		DSP005	BACK MEN BATHROOM	P		1	
		EPS001	HOLDING TANKS	P			
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	WELL 1 ENTRY POINT	3	WELL 1 ENTRY POINT	A			
00701	WELLS 2 AND 3 ENTRY POINT	3	WELLS 2 AND 3 ENTRY	A			
10802	WELL #1 (MANUFACTURING ONLY)	2	WELL	A			
49214	WELL #2	2	WELL #2	A			
49216	WELL #3	2	WELL #3	A			

Certified Operator Information

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

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

Contact Information

Name	Organization	Job Title
Mr. Vinicio Romero	Medtronic	
Mailing Address Line One	Mailing Address Line Two	City
950 Flanders Road		State
		Zip Code
Business Phone	Extension	Fax
Mobile Phone	Emergency Phone	Email Address

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
CT0590154	MEDTRONIC XOMED (MEROCEL FACILITY)	NTNC	50	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
950 FLANDERS ROAD			1		

Towns Served: GROTON

Business Name	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-572-5144				860-861-6469	vinicio.a.romero@medtronic.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

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

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

End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0598033	PRECIOUS MEMORIES DAYCARE CENTER	NTNC	169	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
195 SANDY HOLLOW ROAD	Connections	2			

Towns Served: GROTON

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
Total Coliform (3100)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		
Total Coliform (3100)	3 repeat (RP) per period		
<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	9/23/25 - 9/28/25		Complete
	12/9/25 - 12/14/25		Complete
Total Coliform (3100)	3 temporary routine (TR) per month		
<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	10/1/25 - 10/31/25		Complete
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	1/1/23 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/28	6/1-9/30	
	1/1/29 - 12/31/31	6/1-9/30	
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
Physical Parameters (PPS)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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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
CT0598033	PRECIOUS MEMORIES DAYCARE CENTER	NTNC	169	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
195 SANDY HOLLOW ROAD	Connections	2			

Towns Served: GROTON

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

Water System Facility: WELL 1 (WSF ID: 10749)

E. Coli (3014)		1 triggered (TG) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL 1 (2)	9/22/25 - 9/28/25			Complete
	12/8/25 - 12/14/25			Complete

Water System Facility: WELL 2 (WSF ID: 50176)

E. Coli (3014)		1 triggered (TG) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL 2 (2)	9/22/25 - 9/28/25			Complete
	12/8/25 - 12/14/25			Complete

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
L1 ASSESSMENT (MULTIPLE TC+)	1/9/2026	
CROSS CONNECTION EXEMPTION	3/1/2030	

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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
CT0598033	PRECIOUS MEMORIES DAYCARE CENTER	NTNC	169	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
195 SANDY HOLLOW ROAD	Connections	2			

Towns Served: GROTON

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper	Asbestos	WQP 2	DBPR	Stage
					Rule	Rule Tier					
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Y						
		B1B2	BUILDING 2	A	Y	2					
		BLDG1BATH1	BUILDING 1	A	Y	2					
		DOWNSTREAM	WITHIN 5 SERVICE CON	A							
		K1B1	BUILDING 1	A	Y	2					
		K1B2	BUILDING 2	A	Y	2					
		K2B1	BUILDING 1	A	Y	2					
		R1B1	BUILDING 1	A	Y	2					
00700	ENTRY POINT	2	WELL 1	A							
		3	WELL 2	A							
10749	WELL 1										
50176	WELL 2										

Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM	
Operator Name	Operator Type	Certification(s)
FILANDA, MICHAEL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV

Certification

Expiration

6/30/2028

Contact Information

Name	Organization	Job Title
Ms. Barbara Bohonowicz	Precious Memories Daycare	
Mailing Address Line One	Mailing Address Line Two	City
195 Sandy Hollow Rd		State
Business Phone	Extension	Zip Code
860-572-9958	860-572-8750	Mystic
Emergency Phone	Email Address	CT
	860-912-3233	06355
	barbboho@yahoo.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

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

End of schedule

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0598063	MYSTIC BUSINESS PARK, LLC	NTNC	225	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: GROTON

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)

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)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
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

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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
CT0598063	MYSTIC BUSINESS PARK, LLC	NTNC	225	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: GROTON

Monitoring Requirements

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

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
		1/1/26 - 12/31/28		
		1/1/29 - 12/31/31		
Organic Chemicals (VOCS)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION EXEMPTION	3/1/2030	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule	Asbestos Rule Tier	WQP 2	DBPR	Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A						
		DOWNSTREAM	WITHIN 5 SERVICE CON	A						
		MBP004	WS2650-23	A		Y				
		MBP005	WS2650-24	A		Y				
		MBP006	WS2650-25	A		Y				
		MBP007	WS2650-26	A		Y				
		MBP008	WS2650-27	A		Y				
		MBP011	DISTRIBUTION SYSTEM	A		Y				
		UPSTREAM	WITHIN 5 SERVICE CON	A						
00700	ENTRY POINT	3	ENTRY POINT	A						
56969	WELL 1	2	WELL 1	A						
56971	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)	Certification Expiration
SEHL, ROBERT	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS II	3/31/2026 3/31/2028

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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
CT0598063	MYSTIC BUSINESS PARK, LLC	NTNC	225	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		130			Agricultural

Towns Served: GROTON

Contact Information

Name	Organization	Job Title		
Mr. Timothy Tylaska	Mystic Business Park	Owner		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
800 Flanders Road		Mystic	CT	06355
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-572-8440		860-572-0534		tim@tylaska.com
Email Address				

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

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End of schedule

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