Connecticut Department of Pul	olic H	lealth	Dr	inking	, Water	r S	ection	
Water Quality Monitorin	ig an	d Com	pli	ance S	Schedu	le		
PWS ID PWS Name	0		_			_	vner Type Pr	imary Source
CT0614021 HIGH MEADOW				С	38		Р	GW
Local Address (where applicable) Service	ce	Residenti	ial (Commerci	al Industr	ial	Combined	Agricultura
HIGH MEADOW PLACE Conn	ections	22						_
Towns Served: HADDAM		I			 			
Monitoring	Regu	ıiremen	nts					
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006								
Asbestos (1094)					1 r	out	ine (RT) per	nine years
Sampling Point (Sampling Point ID)		Monitorin	g Pe	riod C	ollection Pe	erio	d Compli	ance Status
Select from Inventory of Active Sampling Points		1/1/23 - 1	2/31	/31				
Total Coliform (3100)						1 r	outine (RT)	per month
Sampling Point (Sampling Point ID)		Monitorin	g Pe	riod C	ollection Pe	erio	d Compli	ance Status
Select from Inventory of Active Sampling Points		7/1/25 - 7	7/31,	/25			Со	mplete
		8/1/25 - 8	3/31,	/25			Со	mplete
		9/1/25 - 9	9/30,	/25			Со	mplete
		10/1/25 - 1	10/3	1/25			Со	mplete
		11/1/25 - 1	11/30	0/25			Со	mplete
	:	12/1/25 - 12/31/25						
		1/1/26 - 1	1/31,	/26				
		2/1/26 - 2	2/28,	/26				
		3/1/26 - 3	3/31,	/26				
		4/1/26 - 4	1/30,	/26				
		5/1/26 - 5	5/31,	/26				
		6/1/26 - 6	5/30,	/26				
Lead And Copper (PBCU)					5 ro	utir	ne (RT) per 1	three years
Sampling Point (Sampling Point ID)		Monitorin	g Pe	riod C	ollection Pe	erio	d Compli	ance Status
Select from Inventory of Active Sampling Points		1/1/23 - 1	2/31	./25	6/1-9/30)	Со	mplete
		1/1/26 - 1	2/31	./28	6/1-9/30)		
Physical Parameters (PPS)						1 r	outine (RT)	per month
Sampling Point (Sampling Point ID)		Monitorin	g Pe	riod C	ollection Pe	erio	d Compli	ance Status
Select from Inventory of Active Sampling Points		7/1/25 - 7	7/31,	/25			Со	mplete
		8/1/25 - 8	3/31,	/25			Со	mplete
		9/1/25 - 9	9/30,	/25			Со	mplete
		10/1/25 - 1	10/3:	1/25			Со	mplete
		11/1/25 - 1	11/30	0/25			Со	mplete
		12/1/25 - 1	12/3:	1/25				
		1/1/26 - 1	1/31,	/26				
		2/1/26 - 2						
		3/1/26 - 3/31/26						
		4/1/26 - 4	1/30,	/26				
		5/1/26 - 5						
		6/1/26 - 6	5/30,	/26				
Water System Facility: ENTRY POINT (WSF ID: 00700)								
Gross Beta Particle Activity (4100)					1 ro	utir	ne (RT) per 1	three years
Sampling Point (Sampling Point ID)		Monitorin	g Pe	riod C	ollection Pe			ance Status
ENTRY POINT (3)		1/1/23 - 1	2/31	./25				

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.

1/1/26 - 12/31/28

water Quality Monito	oring and Compliance Schedule
WS ID PWS Name	Classification Population Owner Type Primary Sou
T0614021 HIGH MEADOW	C 38 P GW
ocal Address (where applicable)	Service Residential Commercial Industrial Combined Agricultu
IGH MEADOW PLACE	Connections 22
owns Served: HADDAM	
Monito	ring Requirements
/ater System Facility: ENTRY POINT (WSF ID: 00700)	
Man-Made Beta Particle & Photon Emitters (4101)	1 routine (RT) per three yea
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
ENTRY POINT (3)	1/1/23 - 12/31/25
	1/1/26 - 12/31/28
ritium (4102)	1 routine (RT) per three yea
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
ENTRY POINT (3)	1/1/23 - 12/31/25
	1/1/26 - 12/31/28
trontium-90 (4174)	1 routine (RT) per three yea
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
ENTRY POINT (3)	1/1/23 - 12/31/25
	1/1/26 - 12/31/28
norganic Chemicals (IOCS)	1 routine (RT) per three yea
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
ENTRY POINT (3)	1/1/24 - 12/31/26
	1/1/27 - 12/31/29
litrate And Nitrite (NOX)	1 routine (RT) per ye
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
ENTRY POINT (3)	1/1/24 - 12/31/24 Complete
	1/1/25 - 12/31/25 Complete
	1/1/26 - 12/31/26
adionuclides - Gross Alpha, Combined Radium & Uran	
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
ENTRY POINT (3)	1/1/20 - 12/31/25
	1/1/26 - 12/31/31
esticides, Herbicides and Polychlorinated Biphenyls (P	
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
ENTRY POINT (3)	1/1/23 - 12/31/25
	1/1/26 - 12/31/28
Organic Chemicals (VOCS)	1 routine (RT) per three yea
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
ENTRY POINT (3)	1/1/23 - 12/31/25
	1/1/26 - 12/31/28
Monthly Water System Facility	ty (WSF) Level Monitoring Requirements
, , , , , , , , , , , , , , , , , , , ,	, , ,

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Connecticut Department of Public Health	Drinking	g Water	Section	
Water Quality Monitoring and Con	npliance S	Schedul	e	
PWS Name	Classification	Population	Owner Type	Primary S

PWS ID PWS Name C					sification	Population	Owner Type	Primary Sou	urce
CT0614021	HIGH MEADOW				С	38	Р	GW	
Local Address (where applicable)		Service	Resider		Commerci	al Industri	al Combin	ed Agricult	ural
HIGH MEADOW PLACE		Connections	22						

Towns Served: HADDAM

Water System Facility:	ENTRY POINT (WSFID: 00700)				
Analyte	Monitoring Requirement (Summary Ty	ype)	Operating Limit		Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)		Minimum: 7.0	PH	4
Start Date: 5/1/2008		Compliance	History:	Operating Limit	Monitoring
		Monitoring Period		Compliance Status	: Compliance Status:
		7/1/2025 - 7	/31/2025		
		8/1/2025 - 8	/31/2025		
		9/1/2025 - 9	/30/2025		
		10/1/2025 -	10/31/2025		
	·	11/1/2025 -	11/30/2025	·	·

Other Compliance Schedules

Compliance Schedule Activity

Due Date
Achieved Date
CROSS CONNECTION SURVEY REPORT
3/1/2026

Wat	er System Facili	ity and Sampling P	oint Ir	ventor	У			
Water				Total	Lead and			
System Water System Facility		Sampling Point		Coliform	Copper			Stage
Facility ID	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2	2 DBP
00600 DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
	DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
	HAD01	15A HIGH MEADOW	Α	Υ	1			
	HAD02	15B HIGH MEADOW	Α	Υ	1			
	HAD03	15C HIGH MEADOW	Α	Υ	1			
	HAD04	15D HIGH MEADOW	Α	Υ	1			
	HAD05	15E HIGH MEADOW	Α	Υ	1			
	HAD06	21F HIGH MEADOW	Α	Υ	1			
	HAD07	21G HIGH MEADOW	Α	Υ	1			
	HAD08	21H HIGH MEADOW	Α	Υ	1			
	HAD09	21I HIGH MEADOW	Α	Υ	1			
	HAD10	21J HIGH MEADOW	Α	Υ	1			
	HAD11	21K HIGH MEADOW	Α	Υ	1			
	HAD12	25L HIGH MEADOW	Α	Υ	2			
	HAD13	25M HIGH MEADOW	Α	Υ	1			
	HAD14	25N HIGH MEADOW	Α	Υ	1			
	HAD15	250 HIGH MEADOW	Α	Υ	1			
	HAD16	25P HIGH MEADOW	Α	Υ	1			
	HAD17	25Q HIGH MEADOW	Α	Υ	1			
	HAD18	33R HIGH MEADOW	Α	Υ	1			
	HAD19	33S HIGH MEADOW	Α	Υ	1			
	HAD20	33T HIGH MEADOW	Α	Υ	1			
	HAD21	33U HIGH MEADOW	Α	Υ	1			
	HAD22	33V HIGH MEADOW	Α	Υ	1			
	HAD23	COMMUNITY BLDG	Α	Υ	1	Υ		Υ

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.

	Connectic	ut Depa	rtment (of Public	c Health D	rink	ing W	ater S	ection	
	Wa	ter Qual	lity Mon	itoring a	and Comp	lian	ce Sch	edule		
PWS ID	PWS Name								ner Type F	Primary Source
CT0614021	HIGH MEADOW					С	-	38	Р	GW
Local Address (w	nere applicable)			Service	Residential	Comr	mercial Ir	ndustrial	Combined	Agricultura
HIGH MEADOW I				Connection	ons 22					
Towns Served: H	ADDAM									
		Water Sy	stem Fac	ility and	Sampling Po	oint I	nvento	ry		
Water							Total	Lead and	1	
*	System Facility		Sampling Poi				Coliform			Stage
Facility ID			ID	Description	on	Status	s Rule	Rule Tie	r Asbestos	WQP 2 DBPF
			UPSTREAM	WITHIN 5	SERVICE CON	Α				
00700 ENTRY	POINT		3	ENTRY PO	INT	Α				
1465 WELL	#2		2	WELL #2		Α				
1567 WELL	#1		2	WELL #1		Α				
36340 TREAT	MENT PLANT									
51075 HYDR	DPNEUMATIC ST	ORAGE								
			Certifie	d Operat	or Informat	ion				
Water System F	acility: TREAT	TMENT PLAI	NT (WSF ID:	36340)						
Facility Classifica	tion: CLASS 2 TF	REATMENT PL	_ANT							Certification
Operator Name			Operator T	уре	Certification(s	5)		Expiration		
HARKINS, STUAR	Γ А.		CHIEF OPERA	TOR	WATER TREATI	MENT F	PLANT OPE	6/30/2028		
WITTENZELLNER	ROBERT	ASSIGNED OP	ERATOR	DISTRIBUTION	SYSTEN	M OPERAT	OR - CLASS	S III	6/30/2028	
				WATER TREATMENT PLANT OPERATOR - CLASS III						9/30/2027
			Co	ntact Inf	ormation					
Name				Organization					Job Title	
Mr. Mark Lundgi	en				erly Housing Cor	p	Pre	sident		
Mailing Address			Mailing Addre		, ,			ity	State	Zip Code
C/O Wildwood P			162 West St,			Cr	omwell	06416		
Business Phone		Fax		bile Phone	Emergency Ph					
Contact Role(s):	Legal Contact									
Name				Organization					Job Title	
Wildwood Prope	rty Managemer	nt II C		01841112411011					300 1100	
Mailing Address			Mailing Addr	ess Line Two				ity	State	Zip Code
162 West Street,			Manning Maar	COS EINIC TWO		Cr	omwell	icy .	CT	06416
Business Phone		Fax	Mo	bile Phone	Emergency Ph			SS	CI	00410
Contact Role(s):	Owner									
Name				Organization					Job Title	
Ms. Paula Tracy				Wildwood Pr	operty Manager	ment	Pre	sident		
Mailing Address	ine One		Mailing Addre	ess Line Two			С	ity	State	Zip Code
384Q Merrow Ro	ad					To	olland		СТ	06084
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Ph	one Er	mail Addre	SS		
	511					na	aulat@wild	lwoodmgt	com	
860-398-5425	311		- 1			PC	adiate will			

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.

(Connectic	ut Depa	rtment	of Public	Health	Dri	nking	Water	Section	l		
	Wa	ter Qua	lity Mon	itoring a	nd Con	nplia	ince S	Schedul	le			
PWS ID F	PWS Name				Classif	fication	Population	on Owner Type Prir		nary Source		
CT0614021	HIGH MEADOW							38	Р		GW	
Local Address (wh	nere applicable)			Service	Resider	ntial Co	ommercia	al Industri	al Combin	ed	Agricultural	
HIGH MEADOW P	LACE			Connection	ns 22							
Towns Served: HA	ADDAM								·			
Name				Organization					Job Titl	Job Title		
Mr. Bob Vess				Wildwood Pro	perty Man	agemen	it	Property I	Manager			
Mailing Address L	ine One		Mailing Addr	ess Line Two				City	State	- 4	Zip Code	
384Q Merrow Ro	ad						Tolland		СТ		06084	
Business Phone	Extension	Fax	Mo	bile Phone	Emergenc	y Phone	Email A	ddress				
860-398-5425	507						bvess@	ovess@wildwoodmgt.com				
Contact Role(s):	Administrative	Contact										

Please note the following:

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

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

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

End of schedule

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