

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0660104	FOUNDERS CONGREGATIONAL CHURCH	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
41 BIRGE PARK ROAD	Connections		1		

Towns Served: HARWINTON

## Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		

  

Physical Parameters (PPS)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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 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		

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule Status	Asbestos Rule Tier	WQP 2 DBPR Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
21099	WELL	2	WELL	A			

## Contact Information

Name	Organization	Job Title
Reverend Kevin Smail		Pastor
Mailing Address Line One	Mailing Address Line Two	City
41 Birge Park Road		State
Business Phone	Extension	Zip Code
860-485-3584		
Contact Role(s):	Administrative Contact, Legal Contact	Email Address
		revkev5555@yahoo.com

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0660104	FOUNDERS CONGREGATIONAL CHURCH	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
41 BIRGE PARK ROAD	Connections		1		

Towns Served: HARWINTON

**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
CT0660204	HARWINTON ROD & GUN	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
123 CAMPVILLE ROAD			1		

Towns Served: HARWINTON

## Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		

  

Physical Parameters (PPS)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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 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		

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule	Asbestos Rule Tier	WQP 2 DBPR Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
21109	WELL	2	WELL	A			

## Contact Information

Name	Organization			Job Title		
Mr. James W. Stowe	Harwinton Rod & Gun Club			President		
Mailing Address Line One	Mailing Address Line Two			City	State	Zip Code
P.O. Box 181				Harwinton	CT	06791
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-518-0800					cbjsjrjim@yahoo.com	

Contact Role(s): Administrative Contact, Legal 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
CT0660204	HARWINTON ROD & GUN	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
123 CAMPVILLE ROAD	Connections		1		

Towns Served: HARWINTON

**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
CT060294	IMMACULATE HEART OF MARY	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
78 LITCHFIELD ROAD			1		

Towns Served: HARWINTON

## Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		

  

Physical Parameters (PPS)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		
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		

Nitrite (1041)	1 routine (RT) per quarter		
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		

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule Status	Asbestos Rule Tier	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
21117	WELL	2	WELL	A			

## Contact Information

Name	Organization	Job Title
Ms. Roxanne Helt	Our Lady of Hope Parish	Office Manager
Mailing Address Line One	Mailing Address Line Two	City
78 Litchfield Road		State
		Zip Code
Business Phone	Extension	Fax
Mobile Phone	Emergency Phone	Email Address

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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
CT0660294	IMMACULATE HEART OF MARY	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
78 LITCHFIELD ROAD		1			

Towns Served: HARWINTON

BUSINESS PHONE	EXTENSION	FAX	HOME PHONE	EMERGENCY PHONE	EMAIL ADDRESS
860-379-5215					secretary@ourladyofhopeparish.com

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**

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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
CT0660424	FAIRVIEW FARMS GOLF COURSE & RESTAURANT	NC	80	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
300 HILL ROAD					1

Towns Served: HARWINTON

### Monitoring Requirements

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

Total Coliform (3100) <span style="float: right;">1 routine (RT) per quarter</span>			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		

  

Physical Parameters (PPS) <span style="float: right;">1 routine (RT) per quarter</span>			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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 And Nitrite (NOX) <span style="float: right;">1 routine (RT) per year</span>			
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		

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule	Asbestos Rule Tier	WQP 2	DBPR	Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A					
		UPSTREAM	WITHIN 5 SERVICE CON	A					
00700	ENTRY POINT	3	ENTRY POINT	A					
22977	WELL #1	2	WELL #1	A					
58179	ATMOSPHERIC TANKS								
58181	BOOSTER PUMP								
62791	WELL #2	2	WELL #2	A					

### Contact Information

Name	Organization	Job Title
Mr. Robert Ferrarotti	Fairview Farm Golf Course LLC	Manager
Mailing Address Line One	Mailing Address Line Two	City
300 Hill Road		State
		Zip Code
Business Phone	Extension	Fax
860-689-1000		860-689-1004
		Mobile Phone
		Emergency Phone
		Email Address
		860-485-8434
		BFERRAROTTI@FAIRVIEWFARMGOLFCOURSE.C
Contact Role(s):	Legal Contact, Owner	

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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
CT0660424	FAIRVIEW FARMS GOLF COURSE & RESTAURANT	NC	80	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
300 HILL ROAD					1

Towns Served: HARWINTON

Name	Organization	Job Title		
Ajt LLC				
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
300 Hill Rd		Harwinton	CT	06791
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
				Email Address

Contact Role(s): **Owner**

Name	Organization	Job Title		
Mr. Ryan Williams	Fairview Farm Golf Course	Co-Owner		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
300 Hill Road		Harwinton	CT	06791
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-689-1000	12			Email Address rw@fairviewfarmgc.com

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

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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
CT0667014	207 BIRGE PARK ROAD - HARWINTON	NC	29	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
207 BIRGE PARK ROAD			2		

Towns Served: HARWINTON

## Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		
Physical Parameters (PPS)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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 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		

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2012	
CROSS CONNECTION SURVEY REPORT	3/1/2013	
CROSS CONNECTION SURVEY REPORT	3/1/2014	
CROSS CONNECTION SURVEY REPORT	3/1/2015	
CROSS CONNECTION SURVEY REPORT	3/1/2016	
CROSS CONNECTION SURVEY REPORT	3/1/2017	
CROSS CONNECTION SURVEY REPORT	3/1/2018	
CROSS CONNECTION SURVEY REPORT	3/1/2019	
CROSS CONNECTION SURVEY REPORT	3/1/2020	
CROSS CONNECTION SURVEY REPORT	3/1/2021	
CROSS CONNECTION SURVEY REPORT	3/1/2022	
CROSS CONNECTION SURVEY REPORT	3/1/2024	
CROSS CONNECTION SURVEY REPORT	3/1/2025	
CROSS CONNECTION SURVEY REPORT	3/1/2026	

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule	Lead and Copper Rule Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	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
CT0667014	207 BIRGE PARK ROAD - HARWINTON	NC	29	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
207 BIRGE PARK ROAD			2		

Towns Served: HARWINTON

<b>Water System Facility and Sampling Point Inventory</b>							
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Lead and Copper Rule Tier Asbestos WQP 2 DBPR Stage
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
56913	WELL	2	WELL	A			

## Contact Information

Name	Organization	Job Title
Ms. Alicia Metz	Grjh, Inc.	President
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
25 Mitchell Town Road	P.O. Box 728	Sharon CT 06069
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address
860-364-0654		

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

Name	Organization	Job Title
Ms. Lauren Simons	Grjh, Inc.	Vice President
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
67 Main Street	P.O. Box 522	Millerton NY 12546
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address
518-789-0051		518-789-0122 860-309-4482 lauren66simons@gmail.com

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

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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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