Connecticut Department of Public			_		ion	
Water Quality Monitoring a						
PWS ID PWS Name			Population		Type Pr	
CT0720174 B.O.Q. INVESTMENT INC		NC	25	Р		GW
Local Address (where applicable) Service	Resident		cial Industri	al Cor	mbined	Agricultural
1649 ROUTE 12 Connectio	ıs	1				
Towns Served: LEDYARD						
Monitoring Re Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)	quireme	nts				
Total Coliform (3100)				1 routi	no (PT)	per month
Sampling Point (Sampling Point ID)	Monitorii	na Period	Collection Pe			ance Status
Select from Inventory of Active Sampling Points	7/1/25 -	_	Concetion i c	1100		mplete
Science from inventory of Active Sumpling Forms	8/1/25 -					mplete
	9/1/25 -					mplete
	10/1/25 -					mplete
	11/1/25 -					mplete
	12/1/25 -					
	1/1/26 -					
	2/1/26 -					
	3/1/26 -	3/31/26				
	4/1/26 -	4/30/26				
	5/1/26 -	5/31/26				
	6/1/26 -	6/30/26				
Physical Parameters (PPS)				1 routii	ne (RT)	per month
Sampling Point (Sampling Point ID)	Monitorii	ng Period	Collection Pe	riod	Compli	ance Status
Select from Inventory of Active Sampling Points	7/1/25 -	7/31/25			Co	mplete
	8/1/25 -	8/31/25			Co	mplete
	9/1/25 -	9/30/25			Co	mplete
	10/1/25 -	10/31/25			Co	mplete
	11/1/25 -	11/30/25			Co	mplete
	12/1/25 -	12/31/25				
	1/1/26 -	1/31/26				
	2/1/26 -					
	3/1/26 -					
	4/1/26 -					
	5/1/26 -					
	6/1/26 -	6/30/26				
Water System Facility: ENTRY POINT (WSF ID: 00700)						
Nitrate And Nitrite (NOX)						T) per year
Sampling Point (Sampling Point ID)	Monitorii		Collection Pe	riod		ance Status
ENTRY POINT (3)	1/1/24 - 1					mplete
	1/1/25 - 1				Co	mplete
Other Co. P	1/1/26 - 1					
Other Complian	ce Sched	ules				
Compliance Schedule Activity	E	Due Date	Achie	ved Dat	e	

3/1/2029

Schedule Generation Date: 12/12/2025

CROSS CONNECTION EXEMPTION

	Water Quality Monit	oring an	d Con	npl	liance S	schedul	le	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0720174	B.O.Q. INVESTMENT INC				NC	25	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combin	ed Agricultural
1649 ROUTE 1	12	Connections			1			

Connecticut Department of Public Health Drinking Water Section

Towns Served: LEDYARD

	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	Stage 2 DBPR				
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ								
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α									
		UPSTREAM	WITHIN 5 SERVICE CON	Α									
00700	ENTRY POINT	3	ENTRY POINT	Α									
21241	WELL	2	WELL	Α									
58221	PRESSURE STORAGE												

				Conta	ct into	ormation				
Name				Orgar	nization				Job Title	
Boq Investments, Ir	nc.									
Mailing Address Lin	e One		Mailing	Address Lir	ne Two			City	State	Zip Code
1649 Route 12							Gales Fe	rry	СТ	06335
Business Phone	Extension	Fax		Mobile P	hone	Emergency Phone	Email Ad	dress		
860-464-2030										
Contact Role(s): O	wner		·				·			
Name				Organ	nization				Job Title	
Mr. Spiros A. Vitou	laditis			B.O.Q	(. Invest	ments				
Mailing Address Lin	e One		Mailing	Address Lir	ne Two			City	State	Zip Code
151 Ocean Avenue							New Lon	don	СТ	06320
Business Phone	Extension	Fax		Mobile P	hone	Emergency Phone	Email Ad	dress		
860-464-2030		860-464-	7223			860-303-0650				
	1					-1				

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 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

				CD 11:	TT 1.1 D		1 .	TAT	. 0			
	Conne	ecticut Depa								ction		
		Water Qua	lity Monit	oring a	nd Comp	lia	nce S	che	edule			
PWS ID	PWS Name									ner Type F	rimary Sou	rce
CT072019	4 ANCHOR	BAPTIST CHURCH				NO	2	2	5	Р	GW	
Local Add	ress (where appli	cable)		Service	Residential	Cor	nmercia	l In	dustrial	Combined	Agricultu	ıral
52 FANNII	NG RD.	•		Connection	ns		1				_	
Towns Ser	rved: LEDYARD				1						l	
			Monite	oring Re	quirement	S						
Water Sy	rstem Facility:	DISTRIBUTION S			44							
Total Co	liform (3100)								1 rou	tine (RT)	per quart	er
Samp	pling Point (Samp	oling Point ID)			Monitoring	Perio	d Co	llecti	on Period	Compl	iance Statu	ıs
Selec	t from Inventory	of Active Sampling	Points		4/1/25 - 6/3	30/25	5			Co	mplete	
					7/1/25 - 9/3	30/25	5			Co	mplete	
					10/1/25 - 12	/31/2	25					
					1/1/26 - 3/3	31/26	5					
					4/1/26 - 6/3	30/26	5					
Physical	Parameters (P	PS)							1 rou	tine (RT)	per quart	er
Samp	pling Point (Samp	oling Point ID)			Monitoring	Perio	d Co	llecti	on Period	Compl	iance Statu	IS
Selec	ct from Inventory	of Active Sampling	Points		4/1/25 - 6/3	30/25	5			Co	omplete	
					7/1/25 - 9/3	30/25	5			Co	mplete	
					10/1/25 - 12	/31/2	25					
					1/1/26 - 3/3	31/26	5					
					4/1/26 - 6/3	30/26	5					
Water Sy	stem Facility:	ENTRY POINT (V	VSF ID: 00700)									
Nitrate A	And Nitrite (NC	OX)							1	routine (RT) per ye	ar
Samı	pling Point (Samp	oling Point ID)			Monitoring	Perio	d Co	llecti	on Period	Compl	iance Statu	IS_
ENTR	RY POINT (3)				1/1/24 - 12/	/31/2	4			Co	mplete	
					1/1/25 - 12/	/31/2	5			C		
											omplete	
					1/1/26 - 12/	/31/2	6				omplete	
		Water S	ystem Facil	ity and S				ntor	у		omplete	
Water					ampling Po		Inver	tal	Lead and			
System	Water System F		Sampling Point	Sampling F	ampling Po	oint	Total Colif	tal orm	Lead and Copper		Sta	_
System Facility ID		acility	Sampling Point ID	Sampling F Description	campling Point	oint Stat	Inver	tal form ile	Lead and Copper			_
System	=	acility	Sampling Point ID 4	Sampling F Description	Coint ON SYSTEM	oint Stat	Tot Colif	tal form ile	Lead and Copper		Sta	_
System Facility ID		acility	Sampling Point ID 4 4-1	Sampling F Description DISTRIBUTI Men s Bath	Point ON SYSTEM Proom Upsta	Stat A A	Total Colif	tal form ile (Lead and Copper		Sta	_
System Facility ID		acility	Sampling Point ID 4 4-1 4-2	Sampling F Description DISTRIBUTI Men s Bath Men s Bath	Point ON SYSTEM Proom Upsta	Stat A A A	Total Colif	tal Form ule (Lead and Copper		Sta	_
System Facility ID		acility	Sampling Point ID 4 4-1 4-2 4-3	Sampling F Description DISTRIBUTI Men s Bath Men s Bath Women s E	Point ON SYSTEM OR OD DOWNS Bathroom Ups	Stat A A A	Total Colif	tal form ile (Lead and Copper		Sta	_
System Facility ID		acility	Sampling Point ID 4 4-1 4-2 4-3 4-4	Sampling F Description DISTRIBUTI Men s Bath Men s Bath Women s E Women s E	Point ON SYSTEM Proom Upsta Proom Downs Bathroom Ups	Stat A A A A	Total Colif	tal form ile (Lead and Copper		Sta	_
System Facility ID		acility	Sampling Point ID 4 4-1 4-2 4-3 4-4 DOWNSTREAM	Sampling F Description DISTRIBUTI Men s Bath Men s Bath Women s E Women s E	Point ION SYSTEM Proom Upsta Proom Downs Bathroom Ups Bathroom Down BERVICE CON	Stat A A A A A	Total Colif	tal form ile (Lead and Copper		Sta	_
System Facility ID 00600	DISTRIBUTION S	acility	Sampling Point ID 4 4-1 4-2 4-3 4-4 DOWNSTREAM UPSTREAM	Sampling F Description DISTRIBUTI Men s Bath Men s Bath Women s E Women s E WITHIN 5 S	Point ION SYSTEM Irroom Upsta Irroom Downs Bathroom Ups Bathroom Dow SERVICE CON	Stat A A A A A A	Total Coliferation	tal form ile (Lead and Copper		Sta	_
System Facility IE 00600	DISTRIBUTION S ENTRY POINT	acility	Sampling Point ID 4 4-1 4-2 4-3 4-4 DOWNSTREAM UPSTREAM 3	Sampling F Description DISTRIBUTI Men s Bath Men s Bath Women s E Women s E WITHIN 5 S WITHIN 5 S ENTRY POI	Point ION SYSTEM Irroom Upsta Irroom Downs Bathroom Ups Bathroom Dow SERVICE CON	Stat A A A A A A	Total Colif	tal form ile (Lead and Copper		Sta	_
System Facility ID 00600	DISTRIBUTION S	acility	Sampling Point ID 4 4-1 4-2 4-3 4-4 DOWNSTREAM UPSTREAM 3 2	Sampling F Description DISTRIBUTI Men s Bath Men s Bath Women s E Women s E WITHIN 5 S ENTRY POIL WELL	Point ION SYSTEM Irroom Upsta Irroom Downs Bathroom Ups Bathroom Dow SERVICE CON	Stat A A A A A A	Total Colif	tal form ile (Lead and Copper		Sta	_
System Facility IE 00600	DISTRIBUTION S ENTRY POINT	acility	Sampling Point ID 4 4-1 4-2 4-3 4-4 DOWNSTREAM UPSTREAM 3 2	Sampling F Description DISTRIBUTI Men s Bath Men s Bath Women s E Women s E WITHIN 5 S WITHIN 5 S ENTRY POIL WELL	Point ION SYSTEM Proom Upsta Proom Downs Bathroom Dow BERVICE CON SERVICE CON	Stat A A A A A A	Total Colif	tal form ile (Lead and Copper		Sta	_
System Facility ID 00600 00700 21243	DISTRIBUTION S ENTRY POINT	acility	Sampling Point ID 4 4-1 4-2 4-3 4-4 DOWNSTREAM UPSTREAM 3 2 Con	Sampling F Description DISTRIBUTI Men s Bath Men s Bath Women s E Women s E WITHIN 5 S ENTRY POIL WELL	Point ION SYSTEM Proom Upsta Proom Downs Bathroom Dow SERVICE CON SERVICE CON NT	Stat A A A A A A	Total Colif	tal form ile (Lead and Copper Rule Tier	Asbestos	Sta	_
System Facility IE 00600 00700 21243 Name Mr. Lawre	DISTRIBUTION S ENTRY POINT WELL ence Richmond	acility	Sampling Point ID 4 4-1 4-2 4-3 4-4 DOWNSTREAM UPSTREAM 3 2 Con	Sampling F Description DISTRIBUTI Men s Bath Men s Bath Women s E WITHIN 5 S WITHIN 5 S ENTRY POIL WELL Itact Info	Point ION SYSTEM Proom Upsta Proom Downs Bathroom Dow SERVICE CON SERVICE CON NT	Stat A A A A A A	Total Colif	tal form ile f	Lead and Copper Rule Tier	Asbestos	Sta	BPR
O0700 21243 Name Mr. Lawre	ENTRY POINT WELL ence Richmond ddress Line One	acility	Sampling Point ID 4 4-1 4-2 4-3 4-4 DOWNSTREAM UPSTREAM 3 2 Con	Sampling F Description DISTRIBUTI Men s Bath Men s Bath Women s E WITHIN 5 S WITHIN 5 S ENTRY POIL WELL Itact Info	Point ION SYSTEM Proom Upsta Proom Downs Bathroom Dow SERVICE CON SERVICE CON NT	State A A A A A A A A A A A A A A A A A A A	Total Coliferation	tal form form form form form form form form	Lead and Copper Rule Tier	Asbestos Job Title	Sta	BPR
O0700 21243 Name Mr. Lawre Mailing Ac	ENTRY POINT WELL ence Richmond ddress Line One	YSTEM	Sampling Point ID 4 4-1 4-2 4-3 4-4 DOWNSTREAM UPSTREAM 3 2 Con An	Sampling F Description DISTRIBUTI Men s Bath Men s Bath Women s E WITHIN 5 S WITHIN 5 S ENTRY POIL WELL Itact Info	Point ION SYSTEM Proom Upsta Proom Downs Bathroom Dow SERVICE CON SERVICE CON NT	State AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	Total Coliferation (Coliferation Coliferation Coliferatio	ratal form form form form form form form form	Lead and Copper Rule Tier	Asbestos Job Title State	Stag WQP 2 DE	BPR

860-886-9892

860-464-2646

Anchorhc82@gmail.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.

	Water Quality M	onitoring and	d Con	npl	liance S	Schedul	le	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Sour
СТ0720194	ANCHOR BAPTIST CHURCH				NC	25	Р	GW
Local Address	(where applicable)	Service	Residen	tial	Commercia	al Industri	al Combine	ed Agricultur
52 FANNING R	RD.	Connections			1			
Towns Served:	: LEDYARD							
000 000 00	132		000 101	207	unchor	DCO2@5111d1	1.00111	

Connecticut Department of Public Health Drinking Water Section

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

Please note the following:

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

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

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

End of schedule

C			rtment o							ction	
	Wat	ter Qual	ity Monit	toring a	nd Com	plia	nce Sc	hedul	e		
PWS ID PV	VS Name					Classifi	cation Po	pulation	Owr	ner Type Pi	rimary Source
CT0720244 NE	W LIFE CHURO	СН				N	С	25		Р	GW
Local Address (whe	re applicable)			Service	Resident	ial Cor	mmercial	Industria	al	Combined	Agricultural
1729 CENTER GROT	ON ROAD			Connection	ns		1				
Towns Served: LED	YARD					,					
			Monit	oring Red	quiremer	nts					
Water System Fac	cility: DISTR	IBUTION SY	STEM (WSF I	D: 00600)							
Total Coliform (3	3100)							1	rou	tine (RT)	per quarter
Sampling Poin	t (Sampling P	oint ID)			Monitorin	g Perio	od Coll	ection Per	riod	Compli	ance Status
Select from Inv	ventory of Acti	ve Sampling	Points		4/1/25 -	6/30/25	5			Со	mplete
					7/1/25 - 9	9/30/25	5			Co	mplete
					10/1/25 -	12/31/2	25				
					1/1/26 - :	3/31/26	5				
					4/1/26 -	6/30/26	5				
Physical Parame	ters (PPS)							1	rou	tine (RT)	per quarter
Sampling Poin	t (Sampling P	oint ID)			Monitorin	g Perio	od Coll	ection Per	riod	Compli	ance Status
Select from Inv	ventory of Acti	ve Sampling	Points		4/1/25 -	6/30/25	5			Co	mplete
					7/1/25 - 9	9/30/25	5			Со	mplete
					10/1/25 -	12/31/2	25				
					1/1/26 - 3	3/31/26	5				
					4/1/26 -						
Water System Fac	cility: ENTRY	POINT (W	SF ID: 00700)								
Nitrate And Nitri	ite (NOX)								1	routine (R	T) per year
Sampling Poin	t (Sampling Po	oint ID)			Monitorin	g Perio	od Coll	ection Per	riod	Compli	ance Status
ENTRY POINT	(3)				1/1/24 - 1	.2/31/2	4			Co	mplete
					1/1/25 - 1	.2/31/2	.5			Co	mplete
					1/1/26 - 1	.2/31/2	6				
		Water Sy	stem Facil	ity and S	ampling	Point	Invent	tory			
Water							Tota	ıl Lead	and		
	ystem Facility	S	Sampling Point				Colifo				Stage
Facility ID			ID	Description)	Stat	tus Rule	e Rule	Tier	Asbestos	WQP 2 DBPR
00600 DISTRIBU	JTION SYSTEM		4	DISTRIBUTI	ON SYSTEM	Α	. Y				
		[DOWNSTREAM	I WITHIN 5 S	ERVICE CON	А	L				
			UPSTREAM	WITHIN 5 S	ERVICE CON	Α	<u>I</u>				
00700 ENTRY P	OINT		3	ENTRY POI	NT	Α	L				
21248 WELL			2	WELL		Α	<u>I</u>				
			Cor	ntact Info	rmation						
Name			0	rganization						Job Title	
Mr. Johnny Burns				ew Life Chur	ch			Pastor			
Mailing Address Lin	e One		Mailing Addres	s Line Two				City		State	Zip Code
1729 Center Grotor							Ledyard	•		СТ	06339
Business Phone	Extension	Fax	Mob	ile Phone	Emergency		-	dress			
860-464-9098		860-464-2						@snet.net			
							1				

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.

Page 5

Schedule Generation Date: 12/12/2025

Contact Role(s): Administrative Contact, Legal Contact

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

		_	 					
PWS ID	PWS Name				Classification	Population	Owner Type	Primary Source
СТ0720244	NEW LIFE CHURCH				NC	25	Р	GW
Local Address (where applicable)		Service	Residen	itial Commer	cial Industr	ial Combin	ed Agricultural
1729 CENTER G	ROTON ROAD		Connections		1			
_								

Towns Served: LEDYARD Please note the following:

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

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

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

End of schedule

Page 6

O.		•	rtment of				_			ection		
		er Qua	lity Monit	oring ar		_						
PWS ID PV	VS Name					Classifi	cation P	opula	tion O	wner Type	Primary	/ Source
CT0727104 M	AUGLE SIERRA	VINEYARDS	LLC	1		N	С	32		P	G\	W
Local Address (whe	re applicable)			Service	Resident	ial Co	mmercial	Ind	ustrial	Combine	ed Agri	cultural
825 COLONEL LEDY	ARD HIGHWAY			Connection	S					2		
Towns Served: LED	YARD											
			Monito	oring Req	uiremer	nts						
Water System Fac	cility: DISTRI	BUTION SY	STEM (WSF I	D: 00600)								
Total Coliform (3	3100)								1 rc	outine (R ⁻	T) per q	uarter
Sampling Poin	t (Sampling Po	int ID)			Monitorin	ng Perio	od Co	llectio	n Perio	d Com	pliance S	Status
Select from Inv	ventory of Activ	e Sampling	Points		4/1/25 - (6/30/2	5				Complet	e
					7/1/25 - 9	9/30/2	5				Complet	e
					10/1/25 - 3	12/31/	25					
					1/1/26 - 3	3/31/2	6					
					4/1/26 - (6/30/2	6					
Physical Parame	ters (PPS)								1 rc	outine (R	「) per q	uarter
Sampling Poin	t (Sampling Po	int ID)			Monitorin	ng Perio	od Co	llectio	n Perio	d Com	pliance S	Status
Select from Inv	ventory of Activ	e Sampling	Points		4/1/25 - (6/30/2	5				Complet	e
					7/1/25 - 9	9/30/2	5				Complet	e
					10/1/25 - 3	12/31/	25					
					1/1/26 - 3	3/31/2	6					
					4/1/26 - (6/30/2	6					
Water System Fac	cility: ENTRY	POINT (W	/SF ID: 00700)									
Nitrate And Nitri	te (NOX)									1 routine	(RT) pe	r year
Sampling Poin	t (Sampling Po	int ID)			Monitorin	ng Perio	od Co	llectio	n Perio	d Com	pliance s	Status
ENTRY POINT	(3)				1/1/24 - 1	2/31/2	24				Complet	e
					1/1/25 - 1	.2/31/2	25				Complet	e
					1/1/26 - 1	2/31/2	26					
			Other C	omplianc	e Sched	ules						
Compliance Schedu	le Activity				D	ue Dat	te	A	chieve	d Date		
RESPOND TO SANIT	ARY SURVEY				3	/1/202	23					
	1	Water Sy	stem Facili	ity and Sa	ampling	Poin	t Inven	itory	•			
									ead an			
Water							Tot	al L	euu un	d		Charac
System Water S	ystem Facility		Sampling Point		oint		Colife	orm	Copper	•		Stage
System Water Sy Facility ID			ID	Description		Sta	Colife	orm	Copper		os WQP	_
System Water Sy Facility ID	JTION SYSTEM		<i>ID</i> 4	Description DISTRIBUTION	ON SYSTEM	A	Colife tus Ru	orm	Copper	•	os WQP	_
System Water Sy Facility ID			4 DOWNSTREAM	DISTRIBUTION WITHIN 5 SE	ON SYSTEM ERVICE CON	A A	Colife tus Ru A	orm	Copper	•	os WQP	_
System Water Sy Facility ID 00600 DISTRIBU	JTION SYSTEM		4 DOWNSTREAM UPSTREAM	DISTRIBUTION WITHIN 5 SE	ON SYSTEM ERVICE CON ERVICE CON	A A	Colife tus Ru A	orm	Copper	•	os WQP	_
System Water Sy Facility ID	JTION SYSTEM		4 DOWNSTREAM	DISTRIBUTION WITHIN 5 SE	ON SYSTEM ERVICE CON ERVICE CON	A A	Colife tus Ru A	orm	Copper	•	os WQP	_
System Water Sy Facility ID 00600 DISTRIBU	JTION SYSTEM		4 DOWNSTREAM UPSTREAM	DISTRIBUTION WITHIN 5 SE	ON SYSTEM ERVICE CON ERVICE CON	F F	Colife tus Ru A A	orm	Copper	•	os WQP	_
System Water Sy Facility ID 00600 DISTRIBU 00700 ENTRY P	JTION SYSTEM		4 DOWNSTREAM UPSTREAM 3 2	Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE ENTRY POIN	ON SYSTEM ERVICE CON ERVICE CON T	<i>F</i> <i>F</i>	Colife tus Ru A A	orm	Copper	•	os WQP	_
System Water Sy Facility ID 00600 DISTRIBU 00700 ENTRY P	JTION SYSTEM		4 DOWNSTREAM UPSTREAM 3 2 Con	Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE ENTRY POIN WELL 1	ON SYSTEM ERVICE CON ERVICE CON T	<i>F</i> <i>F</i>	Colife tus Ru A A	orm	Copper	•		_
System Water SyFacility ID 00600 DISTRIBUTION 00700 ENTRY P 60693 WELL 1	JTION SYSTEM		4 DOWNSTREAM UPSTREAM 3 2 Con	Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE ENTRY POIN WELL 1 tact Info	ON SYSTEM ERVICE CON ERVICE CON T	<i>F F F</i>	Colife tus Ru A A	orm le	Copper	Job Titl		_
System Water SyFacility ID 00600 DISTRIBU 00700 ENTRY P 60693 WELL 1	OINT		4 DOWNSTREAM UPSTREAM 3 2 Con	Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE ENTRY POIN WELL 1 tact Information augle Sierra	ON SYSTEM ERVICE CON ERVICE CON T	<i>F F F</i>	Colife tus Ru A A	orm le	Copper Rule Tie	Job Titl		2 DBPR
System Water SyFacility ID 00600 DISTRIBUTION 00700 ENTRY P 60693 WELL 1 Name Mr. Paul Maugle	OINT e One		DOWNSTREAM UPSTREAM 3 2 Con	Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE ENTRY POIN WELL 1 tact Information augle Sierra	ON SYSTEM ERVICE CON ERVICE CON T	<i>F F F</i>	Colife tus Ru A A	Owne	Copper Rule Tie	Job Titlemaker	2	2 DBPR
System Water SyFacility ID 00600 DISTRIBUTION 00700 ENTRY P 60693 WELL 1 Name Mr. Paul Maugle Mailing Address Line	OINT e One		4 DOWNSTREAM UPSTREAM 3 2 Con Mailing Address	Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE ENTRY POIN WELL 1 tact Information augle Sierra V s Line Two	ON SYSTEM ERVICE CON ERVICE CON T	, , , , , , , , , , , , , , , , , , ,	Colife tus Ru A A A A Ledyard	Owne City	Copper Rule Tie	Job Titlemaker State	e Zip (2 DBPR

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
CT0727104	MAUGLE SIERRA VINEYARDS LLC			NC	32	Р	GW
Local Address (w	here applicable)	Service	Residen	tial Commerc	ial Industri	al Combine	ed Agricultural
825 COLONEL LE	DYARD HIGHWAY	Connections				2	

Towns Served: LEDYARD

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

Please note the following:

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

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

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

End of schedule

Schedule Generation Date: 12/12/2025 Page 8

Connecticut Department of Public I Water Quality Monitoring ar			
PWS ID PWS Name CT0727114 VITALE AQUATIC & TENNIS			Owner Type Primary Source P GW
Local Address (where applicable) Service	Residential Commo	ercial Industr	ial Combined Agricultural
14 IRON ST Connections	S		1
Towns Served: LEDYARD			
Monitoring Req	uirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
Total Coliform (3100)			1 routine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Pe	
Select from Inventory of Active Sampling Points	4/1/25 - 6/30/25		
	7/1/25 - 9/30/25		Complete
	1/1/26 - 3/31/26		·
	4/1/26 - 6/30/26		
Total Coliform (3100)			3 repeat (RP) per period
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Pe	eriod Compliance Status
Select from Inventory of Active Sampling Points	9/16/25 - 9/21/25		Complete
Total Coliform (3100)		3 tempora	ry routine (TR) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Pe	eriod Compliance Status
Select from Inventory of Active Sampling Points	10/1/25 - 10/31/25		Complete
Physical Parameters (PPS)			1 routine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Pe	eriod Compliance Status
Select from Inventory of Active Sampling Points	4/1/25 - 6/30/25		
	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 (WSF ID: 00700)			
Nitrate And Nitrite (NOX)			1 routine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Pe	eriod Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		
	1/1/26 - 12/31/26		
Water System Facility: WELL (WSF ID: 61705)			
E. Coli (3014)		1	triggered (TG) per period
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Pe	eriod Compliance Status
WELL (2)	9/15/25 - 9/21/25		Complete
Other Complianc	e Schedules		
Compliance Schedule Activity	Due Date	Achie	eved Date
CROSS CONNECTION SURVEY REPORT	3/1/2026		
Water System Facility and Sa	mpling Point In	ventory	
Water		<u> </u>	l and
System Water System Facility Sampling Point Sampling Po	oint		oper Stage
Facility ID ID Description	Status		e Tier Asbestos WQP 2 DBPR
00600 DISTRIBUTION SYSTEM 4 DISTRIBUTION		Υ	
DOWNSTREAM WITHIN 5 SE		Υ	
OI STREAM WITHIN S SE	RVICE CON A	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.

Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name		Classificatio	Populat	on O	wner Type	Primary Source		
CT0727114	VITALE AQUATIC & TENNIS		NC	40		Р	GW		
Local Address	(where applicable)	Service	Residen	itial Comme	cial Indu	strial	Combine	ed Agricultural	
14 IRON ST		Connections					1		

Connecticut Department of Public Health Drinking Water Section

Towns Served: LEDYARD

Water System Facility and Sampling Point Inventory									
Water System	Water System Facility	Sampling Point	Sampling Point			Lead and Copper			Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP .	2 DBPR
61705	WELL	2	WELL	Α					
63139	STORAGE TANK								

			Co	ontact Inf	ormation				
Name			Organization			Job Title			
Ms. Anne Vitale									
Mailing Address Line One Mailing Addr			ess Line Two		City		State	Zip Code	
405 Pine Hill Rd						Moosup		СТ	06354
Business Phone	Extension	Fax	Мо	obile Phone	Emergency Phone Email Address				
860-230-1473		·				avitale@	thevat.org		

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

Please note the following:

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

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

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

End of schedule