

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0810034	MIDDLEBURY FUEL	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
492 MIDDLEBURY ROAD			1		

Towns Served: MIDDLEBURY

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			
		MF01	BATHROOM SINK	A	Y		
		MF02	RESTAURANT HANDWASH	A	Y		
		MF03	RESTAURANT 3-BAY	A	Y		
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
21418	WELL	2	WELL	A			

Contact Information

Name	Organization			Job Title		
Mr. Alamgir Hossain	Asset Management Inc.			President		
Mailing Address Line One	Mailing Address Line Two			City	State	Zip Code
492 Middlebury Road				Middlebury	CT	06762
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
917-929-0935					assetmgtinc4@gmail.com	

Contact Role(s): Administrative Contact, Legal Contact

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
CT0810034	MIDDLEBURY FUEL	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
492 MIDDLEBURY ROAD			1		

Towns Served: MIDDLEBURY

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
CT0810114	HIGHFIELD, INC.	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
256 WHITE DEER ROCK ROAD	Connections		1		

Towns Served: MIDDLEBURY

Monitoring Requirements

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

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		

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)

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		

Other Compliance Schedules

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

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification Required	Public Notification Performed	PN Certification Due to DPH	PN Certification Received
Nitrate And Nitrite M&R Violation	7/1/04 - 9/30/04	2	2/18/2005		2/28/2005	

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	Stage
					Rule Tier	Asbestos WQP 2 DBPR	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		HIFIELD001	KITCHEN HAND WASH	A	Y		
		HIFIELD002	FIRST FLOOR BATH	A	Y		
		HIFIELD003	BEVERAGE SINK	A	Y		
		HIFIELD004	SECOND FLOOR BATH	A	Y		
		HIFIELD005	SECOND FLOOR LOCKER	A	Y		
		HIFIELD006	KITCHEN SINK 2	A	Y		
		HIFIELD007	KITCHEN SINK 3	A	Y		

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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
CT0810114	HIGHFIELD, INC.	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
256 WHITE DEER ROCK ROAD			1		

Towns Served: MIDDLEBURY

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper Rule	Asbestos Rule Tier	Stage WQP 2	DBPR
	UPSTREAM	WITHIN 5 SERVICE CON		A						
00700	ENTRY POINT	3	ENTRY POINT	A						
21425	WELL	2	WELL	A						
55784	ATMOSPHERIC STORAGE									
62853	TREATMENT									

Contact Information

Name	Organization	Job Title
The White Deer Rock Land Corporation		
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
33 Porter Hill Rd		Bethlehem CT 06751-2307
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address
203-598-3312		office@highfieldclub.com

Contact Role(s): **Owner**

Name	Organization	Job Title
Mr. Gregory Jacobi	The White Deer Rock Land Corp.	President
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
70 Tuttle Road		Woodbury CT 06798
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address
203-598-3312		

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

Name	Organization	Job Title
Mr. Bruce Vass	Highfield Inc	General Manager
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
256 White Deer Rock Road		Woodbury CT 06762
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address
203-798-9101		702-759-3815 office@highfieldclub.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.
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
CT0810124	HOP BROOK LAKE REC AREA (FIRST CS)	NC	25	F	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
ROUTE 63	2				

Towns Served: MIDDLEBURY

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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 Tier	Asbestos WQP 2	Stage DBPR
00600	DISTRIBUTION SYSTEM	4	FOUNTAIN ON CS WALL	A	Y		
		4MSE	MENS ROOM SINK EAST	A	Y		
		4MSW	MENS ROOM WEST	A	Y		
		4WSE	WOMENS SINK EAST	A	Y		
		4WSW	WOMENS SINK WEST	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
22821	WELL1	2	WELL1	A			
57031	PRESSURE STORAGE						

Contact Information

Name	Organization	Job Title		
Ms. Diana Errico-Topolski	Us Army Corps of Engineers	Project Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
4 Straits Turnpike		Middlebury	CT	06762

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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
CT0810124	HOP BROOK LAKE REC AREA (FIRST CS)	NC	25	F	GW
Local Address (where applicable)	ROUTE 63	Service Connections	Residential 2	Commercial	Industrial
				Combined	Agricultural

Towns Served: MIDDLEBURY

BUSINESS PHONE	EXTENSION	FAX	HOME PHONE	EMERGENCY PHONE	EMAIL ADDRESS
978-318-8370			203-509-9708		diana.j.errico-topolski@usace.army.mil

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.
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End of schedule

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0810144	LAKE QUASSAPAUG OUTING CLUB	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
2328 MIDDLEBURY ROAD			1		

Towns Served: MIDDLEBURY

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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	5/1-9/30	Complete
	1/1/26 - 12/31/26	5/1-9/30	
	1/1/27 - 12/31/27	5/1-9/30	

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 Stage	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				
21427	WELL	2	WELL	A				

Contact Information

Name	Organization				Job Title		
Mr. John McDonald	Margaret K. McDonald Estate				Administrator		
Mailing Address Line One	Mailing Address Line Two			City		State	Zip Code
325 Central Road	P O Box 75			Middlebury		CT	06762
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-758-8907				203-758-1153			
Contact Role(s):	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
CT0810144	LAKE QUASSAPAUG OUTING CLUB				NC	25	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
2328 MIDDLEBURY ROAD				1				
Towns Served: MIDDLEBURY								
Name			Organization			Job Title		
Mr. Tom A. McDonald						Manager		
Mailing Address Line One		Mailing Address Line Two			City		State	Zip Code
P O Box 75					Middlebury		CT	06762
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-758-8907				203-723-4431	TOMM@NSISERV.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.
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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0810204	MIDDLEBURY RECREATION PARK	NC	27	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
ROUTE 64			1		

Towns Served: MIDDLEBURY

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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	5/1-9/30	Complete
	1/1/26 - 12/31/26	5/1-9/30	
	1/1/27 - 12/31/27	5/1-9/30	

Water System Facility: WELL (WSF ID: 21432)

E. Coli (3014)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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	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				

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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
CT0810204	MIDDLEBURY RECREATION PARK	NC	27	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
ROUTE 64			1		

Towns Served: MIDDLEBURY

Water System Facility and Sampling Point Inventory							
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Stage WQP 2 DBPR
21432	WELL	2	WELL	A			

Contact Information

Name	Organization	Job Title		
Mr. Edward B. St. John	Town of Middlebury	First Selectman		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
1212 Whittemore Road	P O Box 392	Middlebury	CT	06762
Business Phone	Extension	Fax	Mobile Phone	Email Address
203-758-2439				203-577-4028 RECREATION@MIDDLEBURY-CT.ORG

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

Name	Organization	Job Title		
Mr. Peter C. Vaccarelli	Dept. of Public Works	Assistant Director		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
1 Service Rd.		Middlebury	CT	06762
Business Phone	Extension	Fax	Mobile Phone	Email Address
203-577-4170		203-577-4168		pvaccarelli@middlebury-ct.org

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.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this

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End of schedule

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0810214	QUASSAPAUG SAILING CENTER, INC.	NC	25	P	GW
Local Address (where applicable)	WEST LAKE ROAD	Service Connections	Residential	Commercial	Industrial
			1	Combined	Agricultural

Towns Served: MIDDLEBURY

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
	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
	4/1/26 - 6/30/26	6/1-6/30	

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 Stage	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				
21433	WELL	2	WELL	A				

Contact Information

Name	Organization				Job Title		
Mr. Robert Gagan	Quassapaug Sailing Center, Inc				Secretary		
Mailing Address Line One	Mailing Address Line Two		City		State	Zip Code	
P.O. Box 231			Middlebury		CT	06762	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-758-2214				203-206-2981	manager.qsc@gmail.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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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0810224	QUASSY AMUSEMENT PARK	NC	431	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
2132 MIDDLEBURY ROAD (ROUTE 64)	Connections		1		

Towns Served: MIDDLEBURY

Monitoring Requirements

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

Total Coliform (3100)	2 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
	4/1/26 - 6/30/26		

Physical Parameters (PPS)	2 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	10/1-11/1	Complete
	4/1/26 - 6/30/26		

Water System Facility: ENTRY POINT - WELL #1 (MAIN) (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 - WELL #1 (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Water System Facility: ENTRY POINT - WELL #2 (BOCCE) (WSF ID: 00702)

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT - WELL #2 (3-2)	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
COMPLETE INITIAL LSL INVENTORY	10/16/2024	
CROSS CONNECTION SURVEY REPORT	3/1/2027	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule	Asbestos Rule Tier	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		4-1	DISTRIBUTION SYSTEM	A	Y			
		4-2	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT - WELL #1 (MAIN)	3	ENTRY POINT - WELL #	A				
00702	ENTRY POINT - WELL #2 (BOCCE)	3-2	ENTRY POINT - WELL #	A				
21434	WELL #1 (MAIN)	2-1	WELL #1	A				
58422	WELL #2 (BOCCE COURT)	2-2	WELL #2	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
CT0810224	QUASSY AMUSEMENT PARK	NC	431	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
2132 MIDDLEBURY ROAD (ROUTE 64)	Connections		1		

Towns Served: MIDDLEBURY

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
WEID, JEREMIAH J.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2028 12/31/2027
MCCORMACK, ROBERT T.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	9/30/2028

Contact Information

Name	Organization	Job Title		
Mr. Eric Anderson		Owner		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
531 Upper Grassy Hill Road		Woodbury	CT	06798
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-758-2913	100	203-758-1436	203-410-4582	eanderson@quassy.com

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

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<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
CT0810244	SANDY BEACH SWIM CLUB	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
3 SANDY BEACH ROAD			1		

Towns Served: MIDDLEBURY

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Out of Service
	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		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/19/25 - 8/24/25		Complete
	8/19/25 - 8/24/25		Complete

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Out of Service
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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: WELL (WSF ID: 21436)

E. Coli (3014)	1 triggered (TG) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	8/18/25 - 8/24/25		Complete
	8/18/25 - 8/24/25		Complete

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
L1 ASSESSMENT (MULTIPLE TC+)	8/12/2025	
L2 ASSESSMENT (MULTIPLE TC+, 2ND IN 12M)	9/19/2025	
RESPOND TO SANITARY SURVEY	11/29/2025	

Water System Facility and Sampling Point Inventory

Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Rule	Lead and Copper Rule	Asbestos Rule	WDR 2 DPPD	Stage

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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
CT0810244	SANDY BEACH SWIM CLUB	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
3 SANDY BEACH ROAD			1		

Towns Served: MIDDLEBURY

Facility ID	ID	Description	Status	Rule	Rule Ref	Asbestos	WQI	2 DDDTT
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				
21436	WELL	2	WELL	A				
63368	CALCITE FILTER							

Contact Information

Name	Organization	Job Title		
Mr. Paul Anderson	Sandy Beach Club LLC	Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
3 Sandy Beach Road		Middlebury	CT	06762
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-758-8480			203-217-2601	
				sbcquassy@outlook.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.

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End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0810284	MAPLES RESTAURANT	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
725 STRAITS TURNPIKE	Connections		1		

Towns Served: MIDDLEBURY

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	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		

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	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		

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		

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification	PN Certification	
			Required	Performed	Due to DPH
Total Coliform M&R Violation	9/1/24 - 9/30/24	3	10/25/2025		11/4/2025
Physical Parameters M&R Violation	9/1/24 - 9/30/24	3	10/25/2025		11/4/2025

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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
CT0810284	MAPLES RESTAURANT	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
725 STRAITS TURNPIKE			1		

Towns Served: MIDDLEBURY

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
Physical Parameters M&R Violation	11/1/24 - 11/30/24	3	1/9/2026		1/19/2026	
Total Coliform M&R Violation	11/1/24 - 11/30/24	3	1/9/2026		1/19/2026	

Water System Facility and Sampling Point Inventory

Water System Facility	Sampling Point ID	Sampling Point Description	Total	Lead and	Stage
			Coliform Status	Copper Rule	
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		
21440 WELL	2	WELL	A		
62370 WATER SOFTENER TREATMENT					

Contact Information

Name	Organization	Job Title
Mr. Fernando Marcone	Marcone Enterprises	President
Mailing Address Line One	Mailing Address Line Two	City
725 Straights Turnpike		State
Business Phone	Extension	Zip Code
203-758-2502	203-758-8661	maplesrestaurantct@gmail.com

Contact Role(s): Legal Contact, Owner

Name	Organization	Job Title
Mr. Kosta Kolitsas	Maples Restaurant	Restaurant Owner
Mailing Address Line One	Mailing Address Line Two	City
725 Straights Turnpike		State
Business Phone	Extension	Zip Code
203-758-2502	203-525-1891	maplesrestaurantct@gmail.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.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this

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End of schedule

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0810304	HOP BROOK LAKE REC AREA (WEST LAWN CS)	NC	25	F	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
ROUTE 63	Connections		1		

Towns Served: MIDDLEBURY

Monitoring Requirements

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

1 routine (RT) per month			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

1 routine (RT) per month			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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

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
00600	DISTRIBUTION SYSTEM	4	FOUNTAIN ON CS WALL	A	Y			
		4MSN	MENS RM SINK	A	Y			
		4MSS	MENS RM SINK SOUTH	A	Y			
		4WSC	WOMENS RM SINK CENTE	A	Y			
		4WSN	WOMENS SINK NORTH	A	Y			
		4WSS	WOMENS RM SINK SOUTH	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
		WMSS	MENS RM SINK SOUTH	A	Y			
00700	ENTRY POINT	3	ENTRY POINT	A				
22831	WELL 1	2	WELL 1	A				
56919	WELL 2	2	WELL 2	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
CT0810304	HOP BROOK LAKE REC AREA (WEST LAWN CS)	NC	25	F	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
ROUTE 63			1		

Towns Served: MIDDLEBURY

Contact Information

Name	Organization	Job Title		
Ms. Diana Errico-Topolski	Us Army Corps of Engineers	Project Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
4 Straits Turnpike		Middlebury	CT	06762
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
978-318-8370			203-509-9708	diana.j.errico-topolski@usace.army.mil

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

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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
CT0810314	TRANQUILITY VINEYARD AND WINERY	NC	257	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
29 TRANQUILITY RD		2	1		

Towns Served: MIDDLEBURY

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			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		SINK 1	TASTING ROOM SINK	A	Y		
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
63141	WELL 1	2	WELL 1	A			

Contact Information

Name	Organization			Job Title		
Mr. Dean Yimoyines	Tranquility Vineyard & Winery			Owner		
Mailing Address Line One	Mailing Address Line Two			City	State	Zip Code
1892 Middlebury Rd				Middlebury	CT	06762
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-518-4444					dean@laddllc.com	

Contact Role(s): Administrative Contact, 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
CT0810314	TRANQUILITY VINEYARD AND WINERY	NC	257	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
29 TRANQUILITY RD	Connections	2	1		Agricultural

Towns Served: MIDDLEBURY

Please note the following:

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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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End of schedule