	Water Quality Mon	itoring an	d Con	npl	iance	Sc	hedul		ection	
PWS ID	PWS Name			_					ner Type	Primary Sourc
СТ0850102	OUR LADY OF THE ROSARY CHAPEL				NC		39		Р	GW
Local Address	(where applicable)	Service	Residen	tial	Commerc	cial	Industri	al	Combine	d Agricultura
15 PEPPER STR	REET	Connections	2							
Towns Served:	MONROE									
	Mon	itoring Requ	uireme	nts						
Water Systen	m Facility: DISTRIBUTION SYSTEM (WSF	F ID: 00600)								
Total Colifor	rm (3100)							1 rc	utine (R	Γ) per month
Sampling	Point (Sampling Point ID)		Monitori	ng P	Period (Colle	ection Pe	riod	Comp	liance Status
Select fro	m Inventory of Active Sampling Points		7/1/25 -	7/3:	1/25				C	Complete
			8/1/25 -							omplete
			9/1/25 -		-					omplete
			10/1/25 -							Complete
			11/1/25 -						C	Complete
			12/1/25 -							
			1/1/26 -							
			2/1/26 -							
			3/1/26 -							
			4/1/26 - 5/1/26 -							
			6/1/26 -							
Physical Par	ameters (PPS)		0/1/20	0/ 5	0/20			1 rc	uutine (R	Γ) per month
-	Point (Sampling Point ID)		Monitori	na P	Period (Colle	ection Pe		-	liance Status
	om Inventory of Active Sampling Points		7/1/25 -							Complete
			8/1/25 -							Complete
			9/1/25 -							Complete
			10/1/25 -	10/	31/25				C	omplete
			11/1/25 -	11/	30/25				C	Complete
			12/1/25 -	12/3	31/25					
			1/1/26 -	1/3:	1/26					
			2/1/26 -	2/2	8/26					
			3/1/26 -	3/3	1/26					
			4/1/26 -	4/30	0/26					
			5/1/26 -							
			6/1/26 -	6/30	0/26					
•	m Facility: ENTRY POINT (WSF ID: 0070	0)								
	Nitrite (NOX)			_						(RT) per year
	Point (Sampling Point ID)		Monitori			Colle	ection Pe	rıod		liance Status
ENTRY PC	(3) ואוע		1/1/24 -							Complete
			1/1/25 -							Complete
			1/1/26 -							
	Monthly Water System Fac	cility (WSF)	Level N	/lor	nitoring	g Re	equire	me	nts	

Schedule Generation Date: 12/12/2025 Page 1

	Conne	cticut Department of	Public H	lealth	Dr	inking	g Water	Sect	tion	
		Water Quality Monit	oring an	d Con	npl	iance S	Schedul	le		
PWS ID	PWS Nam	e			Clas	sification	Population	Owner	Туре	Primary Source
СТ0850102	OUR LADY	OF THE ROSARY CHAPEL				NC	39	Р	•	GW
Local Address (where applicable) Service F						Commercial Industrial		al Co	mbine	d Agricultural
15 PEPPER STRE	Connections	2								
Towns Served:	MONROE						,			
Water System	Facility: I	ENTRY POINT (WSFID: 00700)								
Analyte		Monitoring Requirement (Summa	ary Type)	Ope	ratin	g Limit		Sa	mples	Req/Month
рН)	Min	imun	n: 7 PH				4		
Start Date:	Compliance History:			Operating Limit			Monitoring			
			Monitor	ing Perio	d	-	mpliance St		Compl	iance Status:

Other comphanic serieuries	Other	Comp	liance	Schedules	
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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

 Compliance Schedule Activity
 Due Date
 Achieved Date

 CROSS CONNECTION EXEMPTION
 3/1/2030

		Water System Facility and Sampling Point Inventory									
Nater ystem cility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos		Stage DBPI		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ						
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
		OLOTRC 1000	CHURCH 3RD FLR LVG	Α	Υ	1					
		OLOTRC 1001	CHURCH 3RD LFR SINK	Α	Υ	1					
		OLOTRC 1002	CHURCH 3RD FLR LIVIN	Α	Υ	1					
		OLOTRC 101	BASEMENT SAMPLE TAP	Α	Υ	1					
		OLOTRC 200	KITCHEN SINK RECTORY	Α	Υ	1					
		OLOTRC 300	RECTORY BTH CHAPEL	Α		1					
		OLOTRC 301	RECTORY SH CHAPL RM	Α		1					
		OLOTRC 400	RECTORY LIV AREA TUB	Α	Υ	1					
		OLOTRC 401	RECOTRY LIV SINK 1	Α	Υ	1					
		OLOTRC 402	RECOTRY LIV SINK 2	Α	Υ	1					
		OLOTRC 500	RECOTRY 2ND FL BDRM	Α	Υ	1					
		OLOTRC 600	RECOTRY ATTIC BDRM	Α	Υ	1					
		OLOTRC 601	RECTORY ATTIC BDRM	Α	Υ	1	Υ				
		OLOTRC 700	CHURCH BSMT GRLS RM	Α	Υ	1					
		OLOTRC 701	CURCH BSMT BOYS RM	Α	Υ	1					
		OLOTRC 800	CHURCH BSMT STAF KT	Α	Υ	1					
		OLOTRC 900	CHURCH 2ND FLR RM1	Α	Υ	1					
		OLOTRC 901	CHURCH 2ND FLR RM2	Α	Υ	1					
		OLOTRC 902	CHURCH 2ND FLR RM3	Α	Υ	1					
		OLOTRC 903	CHURCH 2ND FLR LAUN	Α	Υ	N					
		OTRC 401	GENERATED BY BATCH	Α	Υ						
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							

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	irtment	of Public	: Health	ı Drir	ıking	g Water	Se	ction	
	Wa	ter Qua	lity Mor	nitoring a	and Con	nplia	nce S	Schedul	le		
PWS ID	PWS Name					Classif	ication	Population	Own	er Type	Primary Source
CT0850102	OUR LADY OF TH	HE ROSARY C	CHAPEL			N	С	39		Р	GW
Local Address (w	here applicable)			Service	Resider	ntial Co	mmerci	al Industri	al (Combine	d Agricultural
15 PEPPER STREE	T			Connectio	ons 2						
Towns Served: N	1ONROE										
		Water S	ystem Fa	cility and S	Sampling	Poin	t Inve	ntory			
Facility ID 10405 WELL	r System Facility		Sampling Po ID 2	int Sampling Descriptio WELL			Coli	otal Lead form Cop ule Rule	per	Asbestos	Stage s WQP 2 DBPR
			Certific	ed Operato	or Inforn	nation	1				
Water System I	Facility: TREAT	MENT PLA		<u> </u>							
Facility Classifica	ntion: CLASS 1 TF	REATMENT P	LANT								Certification
Operator Name			Operator	Туре	e Certification(s)				Expiration		
GRANT, SHANE			CHIEF OPER	ATOR	WATER TRI	EATMEN	IT PLAN	Γ OPERATOR	R - CLA	ASS II	9/30/2026
					DISTRIBUT	ION SYS	ГЕМ ОРІ	ERATOR - CL	ASS II	1	9/30/2026
PETITTI, ANDY			ASSIGNED O	PERATOR	DISTRIBUT	ION SYS	ГЕМ ОРІ	ERATOR - CL	ASS I		6/30/2028
					WATER TRI	EATMEN	IT PLAN	Γ OPERATOR	R - CLA	ASS I	12/31/2025
			С	ontact Info	ormation	1					
Name				Organization						Job Title	
Mr. Joseph Rotu	nda			Orthodox Roi	man Cath M	ovemen	t	President			
Mailing Address			Mailing Add	ress Line Two				City		State	Zip Code
Our Lady of The	Our Lady of The Rosary Chapel 15 Pepper St			treet			Monro	e		СТ	06468
			obile Phone	Emergence	y Phone	Email A	ddress		-		
203-261-6531											
Contact Role(s):	Legal Contact										
Name				Organization		Job Title					
Mr. William Routon				Our Lady of The Posary Chanel Administra				trative			

	_								
Name				Organization			J	lob Title	е
Mr. William Boutor	n			Our Lady of T	The Rosary Chapel	F	Administrative		
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
15 Pepper Street						Monroe		CT	06468
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Add	ress		
203-673-9855					203-874-2782	wdboutor	n@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 schedule.

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

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

	Comment and Demonstration and all	CDlelte I	I a a l a la	D.:]:	- TA7 -4	- 0-4 C	a ati a sa	
	Connecticut Department of				•			ection	
	Water Quality Monit	oring an	d Com						
PWS ID	PWS Name			Classi	ification	Populat	ion Ov	vner Type Pi	rimary Source
СТ0850024	BEACON HILL EVANGELICAL FREE CHURCH			1	NC	33		Р	GW
	(where applicable)	Service	Residen	tial C	ommerci	ial Indu	ustrial	Combined	Agricultural
371 OLD ZOAR		Connections			2				
Towns Served:									
		oring Requ	iireme	nts					
•	n Facility: DISTRIBUTION SYSTEM (WSF I	D: 00600)							
Total Colifori	•						1 r		per month
	Point (Sampling Point ID)		Monitori			Collection	n Perio		ance Status
Select from	m Inventory of Active Sampling Points		7/1/25 -						mplete
			8/1/25 -						mplete
			9/1/25 -						mplete
			10/1/25 -						mplete
			11/1/25 -		•			Со	mplete
			12/1/25 -						
			1/1/26 -						
			2/1/26 -						
			3/1/26 -						
			4/1/26 -						
			5/1/26 -						
Dhysical Days	ameters (DDC)		6/1/26 -	6/30/	26		1	outing (DT)	, , , , , , , , , , , , , , , , , , ,
-	ameters (PPS) Point (Sampling Point ID)		Monitori	na Dar	riod C	ollection			per month
	m Inventory of Active Sampling Points		7/1/25 -			Onection	i renot	-	mplete
Select II OI	in inventory of Active Sampling Forits		8/1/25 -						mplete
			9/1/25 -						mplete
			10/1/25 -						mplete
			11/1/25 -						mplete
			12/1/25 -		-				mpiete
			1/1/26 -		-				
			2/1/26 -						
			3/1/26 -						
			4/1/26 -						
			5/1/26 -						
			6/1/26 -						
Water System	n Facility: ENTRY POINT (WSF ID: 00700)								
Nitrate And I	Nitrite (NOX)							1 routine (F	T) per year
Sampling	Point (Sampling Point ID)		Monitori	ng Per	riod C	ollection	n Perio	d Compli	ance Status
ENTRY PO	DINT (3)		1/1/24 -	12/31/	/24			Со	mplete
			1/1/25 -	12/31/	/25			Со	mplete
			1/1/26 -	12/31/	/26				
Water System	n Facility: WELL #1 (WSF ID: 21478)								
E. Coli (3014	1)						1 r	outine (RT)	per month
Sampling	Point (Sampling Point ID)		Monitori	ng Per	riod C	ollection	n Perio	d Compli	ance Status
l			- 1 - 1	- 1 1					

7/1/25 - 7/31/25 8/1/25 - 8/31/25

Schedule Generation Date: 12/12/2025

WELL 1 (2)

Connecticut Dep	artment of	f Public Health	Drinki	ing Wa	ater Se	ction	
Water Qu	ality Monit	coring and Con	nplianc	e Sche	edule		
PWS ID PWS Name						ner Type Pr	imary Source
CT0850024 BEACON HILL EVANGELICA	L FREE CHURCH		NC	3	3	Р	GW
Local Address (where applicable)		Service Resider	ntial Comm	ercial In	dustrial	Combined	Agricultural
371 OLD ZOAR ROAD		Connections	2				
Towns Served: MONROE							
	Monit	oring Requireme	nts				
Water System Facility: WELL #1 (WSF	ID: 21478)						
E. Coli (3014)					1 ro		per month
Sampling Point (Sampling Point ID)			ing Period	Collecti	on Period	Complic	ance Status
			- 9/30/25				
			- 10/31/25				mplete
			- 11/30/25			Cor	mplete
			- 12/31/25				
			- 1/31/26				
			- 2/28/26				
			- 3/31/26				
			- 4/30/26				
			- 5/31/26				
		6/1/26	- 6/30/26				
Water System Facility: WELL 2 (WSF II	D: 61020)						
E. Coli (3014)							per month
Sampling Point (Sampling Point ID)			ing Period	Collecti	on Period		ince Status
WELL 2 (2)			- 7/31/25				nplete
			- 8/31/25				nplete
		9/1/25	- 9/30/25			Cor	mplete
			40/24/25			_	
		10/1/25	10/31/25				mplete
		10/1/25 11/1/25	- 11/30/25				mplete mplete
		10/1/25 11/1/25 12/1/25	- 11/30/25 - 12/31/25				-
		10/1/25 11/1/25 12/1/25 1/1/26	- 11/30/25 - 12/31/25 - 1/31/26				-
		10/1/25 11/1/25 12/1/25 1/1/26 2/1/26	- 11/30/25 - 12/31/25 - 1/31/26 - 2/28/26				-
		10/1/25 11/1/25 12/1/25 1/1/26 2/1/26 3/1/26	- 11/30/25 - 12/31/25 - 1/31/26 - 2/28/26 - 3/31/26				-
		10/1/25 11/1/25 12/1/25 1/1/26 2/1/26 3/1/26 4/1/26	- 11/30/25 - 12/31/25 - 1/31/26 - 2/28/26 - 3/31/26 - 4/30/26				-
		10/1/25 11/1/25 12/1/25 1/1/26 2/1/26 3/1/26 4/1/26 5/1/26	- 11/30/25 - 12/31/25 - 1/31/26 - 2/28/26 - 3/31/26 - 4/30/26 - 5/31/26				-
Water	System Facil	10/1/25 11/1/25 12/1/25 1/1/26 2/1/26 3/1/26 4/1/26 5/1/26 6/1/26	- 11/30/25 - 12/31/25 - 1/31/26 - 2/28/26 - 3/31/26 - 4/30/26 - 5/31/26 - 6/30/26	nventor	' V		-
Water	System Facil	10/1/25 11/1/25 12/1/25 1/1/26 2/1/26 3/1/26 4/1/26 5/1/26	- 11/30/25 - 12/31/25 - 1/31/26 - 2/28/26 - 3/31/26 - 4/30/26 - 5/31/26 - 6/30/26	nventor Total	' Y Lead and		
Water System Water System Facility	•	10/1/25 11/1/25 12/1/25 1/1/26 2/1/26 3/1/26 4/1/26 5/1/26 6/1/26 ity and Sampling	- 11/30/25 - 12/31/25 - 1/31/26 - 2/28/26 - 3/31/26 - 4/30/26 - 5/31/26 - 6/30/26	Total Coliform	<u>-</u>		-
Water	•	10/1/25 11/1/25 12/1/25 1/1/26 2/1/26 3/1/26 4/1/26 5/1/26 6/1/26 ity and Sampling	- 11/30/25 - 12/31/25 - 1/31/26 - 2/28/26 - 3/31/26 - 4/30/26 - 5/31/26 - 6/30/26	Total	Lead and Copper	Cor	nplete
Water System Water System Facility	Sampling Point	10/1/25 11/1/25 12/1/25 1/1/26 2/1/26 3/1/26 4/1/26 5/1/26 6/1/26 ity and Sampling	- 11/30/25 - 12/31/25 - 1/31/26 - 2/28/26 - 3/31/26 - 4/30/26 - 5/31/26 - 6/30/26 Foint Ir	Total Coliform	Lead and Copper	Cor	nplete Stage
Water System Water System Facility Facility ID	Sampling Point ID	10/1/25 11/1/25 12/1/25 1/1/26 2/1/26 3/1/26 4/1/26 5/1/26 6/1/26 ity and Sampling Sampling Point Description DISTRIBUTION SYSTEM KIT SNK TRP LWR LEV	- 11/30/25 - 12/31/25 - 1/31/26 - 2/28/26 - 3/31/26 - 4/30/26 - 5/31/26 - 6/30/26 Foint Ir	Total Coliform Rule	Lead and Copper	Cor	Stage
Water System Water System Facility Facility ID	Sampling Point ID 4	10/1/25 11/1/25 12/1/25 1/1/26 2/1/26 3/1/26 4/1/26 5/1/26 6/1/26 ity and Sampling Sampling Point Description DISTRIBUTION SYSTEM	- 11/30/25 - 12/31/25 - 1/31/26 - 2/28/26 - 3/31/26 - 4/30/26 - 5/31/26 - 6/30/26 Foint Ir	Total Coliform Rule Y	Lead and Copper	Asbestos (Stage
Water System Water System Facility Facility ID	Sampling Point ID 4 BH001	10/1/25 11/1/25 12/1/25 1/1/26 2/1/26 3/1/26 4/1/26 5/1/26 6/1/26 ity and Sampling Sampling Point Description DISTRIBUTION SYSTEM KIT SNK TRP LWR LEV	- 11/30/25 - 12/31/25 - 1/31/26 - 2/28/26 - 3/31/26 - 4/30/26 - 5/31/26 - 6/30/26 Foint Ir Status A A A A	Total Coliform Rule Y Y	Lead and Copper	Asbestos Y	nplete Stage

DOWNSTREAM WITHIN 5 SERVICE CON

RR LADY RM MAIN FLR

RR MENS RM MAIN FLR

WITHIN 5 SERVICE CON

Α

Α

Α

Υ

BH005

BH006

UPSTREAM

	Connecticut Department of Public Health Drinking Water Section											
	Water Quality Monit	oring an	d Con	npl	liance S	Schedul	e					
PWS ID	PWS Name	ssification	Population	Owner Type	Primary Source							
СТ0850024	BEACON HILL EVANGELICAL FREE CHURCH				NC	33	Р	GW				
Local Address	(where applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural				
371 OLD ZOAF	RROAD			2								

Towns Served: MONROE

	Water Sys	stem Facili	ity and Sampli	ing Point I	nvento	ry			
Water System Water Sy Facility ID	stem Facility So	ampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00700 ENTRY PO	DINT	3	ENTRY POINT	А					
21478 WELL #1		2	WELL 1	А					
61020 WELL 2		2	WELL 2	А					
63186 UV TREAT	ΓMENT								

				Co	ntact Inf	ormation					
Name				Organization				Job Title			
Mr. James Duncan					Beacon Hill E	vangelical Church		Snr Property Manager			
Mailing Address Lin	e One		Mailing	Addre	ess Line Two			City	State	Zip Code	
Beacon Hill Church			371 Old	Zoar	Road Monroe			Monroe CT		06468	
Business Phone	Extension	Fax		Мо	bile Phone	Emergency Phone	Email Ac	ldress			
203-268-8521		203-452-9	9126	203	-627-8006		deacons	@beaconhil	lchurch.org		
Contact Role(s): Le	gal Contact										
Name					Organization				Job Title		
Mr. Richard Dennis					Beacon Hill E		Deacon				
Mailing Address Lin	e One		Mailing	Addre	ess Line Two			City	State	Zip Code	
Beacon Hill Evangel	ical Free Chur	ch	371 Old	Zoar	Road		Monroe		СТ	06468	
Business Phone	Extension	Fax		Мо	bile Phone	Emergency Phone	Email Ac	ldress			
203-885-5318							richdenr	nis74@gmail	l.com		

Please note the following:

Contact Role(s): Administrative Contact

- 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

	Connecticut Dep	artment of	Public F	lealth	Drinki	ng W	ater Se	ection	
	Water Qu	ality Monit	oring an	d Com	plianc	e Sch	edule		
PWS ID	PWS Name			(ner Type Pr	imary Source
CT0850054	DUCHESS OF MONROE				NC		25	Р	GW
	where applicable)		Service Connections	Resident			ndustrial	Combined	Agricultural
134 MAIN STRE			Connections		1				
Towns Served:	IVIONROE		ovina Door	.:					
Water System	Facility: DISTRIBUTION		oring Requ D: 00600)	ııremer	its				
Total Coliforn	,		,				1 ro	utine (RT) p	er quarter
Sampling	Point (Sampling Point ID)			Monitorin	g Period	Collect	ion Period	Complic	nce Status
Select fron	n Inventory of Active Sampli	ng Points		4/1/25 - 6	6/30/25			Cor	mplete
				7/1/25 - 9	9/30/25			Cor	nplete
				10/1/25 - 3					
				1/1/26 - 3					
				4/1/26 - 6	6/30/26				
_	meters (PPS)			0.4 a mile a min	a Daviad	Callage			er quarter
	Point (Sampling Point ID) n Inventory of Active Sampli	ng Points		<i>Monitorin</i> 4/1/25 - 6		Collect	ion Period	-	nnce Status nplete
Select II of	ir inventory of Active Samplin	ig Folits		7/1/25 - 9					nplete
				10/1/25 - 1				Col	пріссе
				1/1/26 - 3					
				4/1/26 - 6					
Water System	Facility: ENTRY POINT ((WSF ID: 00700)			. ,				
Nitrate And N	Nitrite (NOX)						1	routine (R	T) per year
	Point (Sampling Point ID)			Monitorin	g Period	Collect	ion Period	=	ince Status
ENTRY POI	INT (3)		_	1/1/24 - 1	.2/31/24			Cor	nplete
				1/1/25 - 1	.2/31/25			Cor	mplete
				1/1/26 - 1	.2/31/26				
Water System	Facility: WELL (WSF ID:	21481)							
E. Coli (3014))						1 ro	utine (RT) բ	er quarter
	Point (Sampling Point ID)			Monitorin		Collect	ion Period		ince Status
WELL (2)				4/1/25 - 6					nplete
				7/1/25 - 9				Cor	mplete
				10/1/25 - 1					
				1/1/26 - 3					
	Water	System Facili	itv and Saı	4/1/26 - 6 mpling		vento	rv		
Water		,	,	1		Total	Lead and		
	er System Facility	Sampling Point		nt		Coliform	Copper		Stage
Facility ID		ID	Description		Status	Rule	Rule Tier	Asbestos	WQP 2 DBPR
00600 DIST	RIBUTION SYSTEM	4	DISTRIBUTION		Α	Υ			
		DOM001	KIT HAND SNI		Α	Y		Y	
		DOM002	KIT HAND SNI		A	Y		Y	
		DOM003	KIT HAND SNI	\ IVI	A	Y		Y	
		DOM004	RR MENS RR	N/I	Α	Y		Y	
		DOM005 DOM006	RR LADY ROO KIT SNK SINGI		A A	Y Y		Y Y	
		DOIVIOU	MIT SINK SING		Α	'		ı	

Schedule Generation Date: 12/12/2025 Page 7

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0850054	DUCHESS OF MONROE				NC	25	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
134 MAIN STR	EET	Connections			1			

Towns Served: MONROE

Wa	ter System Facili	ity and Sampling P	oint Ir	iventoi	ry			
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
	DOM007	KIT SNK TRPL SNK	Α	Υ		Υ		
	DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
	UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700 ENTRY POINT	3	ENTRY POINT	Α					
21481 WELL	2	WELL	Α					
56747 TREATMENT PLANT								

				Contact Info	ormation				
Name				Organization				Job Title	
Mr. Louis Berkowit	Z			Duchess of M	onroe				
Mailing Address Lin	e One		Mailing	g Address Line Two			City	State	Zip Code
134 Main Street						Monroe		СТ	06468
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	dress		
203-452-0197									

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

	Connecticut Departmen Water Quality M				_	_			ection		
PWS ID	PWS Name	0		_					ner Type P	rimary Source	
CT0850064	179 MAIN STREET - MONROE				NC		25		P	GW	
Local Address (where applicable)	Service	Resident	ial	Commerci	al	Industria	al	Combined	Agricultural	
		Connections			1						
Towns Served:	MONROE			·		'				'	
	M	onitoring Requ	iremer	nts							
Water System	Facility: DISTRIBUTION SYSTEM (
Total Coliforn	,	,					1	roı	utine (RT)	per quarter	
	Point (Sampling Point ID)		Monitorin	ng P	Period C	olle	ction Per			ance Status	
Select fror	m Inventory of Active Sampling Points		4/1/25 -	6/30	0/25				Co	mplete	
			7/1/25 -	9/30	0/25				Сс	mplete	
			10/1/25 -	12/3	31/25						
			1/1/26 -	3/3:	1/26						
			4/1/26 -	6/30	0/26						
Physical Para	nmeters (PPS)						1	roı	utine (RT)	per quarter	
	Point (Sampling Point ID)		Monitorin			olle	ction Per	riod		ance Status	
Select fror	m Inventory of Active Sampling Points		4/1/25 -							mplete	
7/1/25 - 9/30/25 Complete								mplete			
			10/1/25 -								
			1/1/26 - 3								
		2700	4/1/26 -	6/30	0/26						
-	Facility: ENTRY POINT (WSF ID: 0	0700)									
	Nitrite (NOX)								-	RT) per year	
	Point (Sampling Point ID)	_	Monitoring Period Collection Period 1/1/24 - 12/31/24						Compliance Status Complete		
ENTRY PO	11(1)								CO	mpiete	
			1/1/25 - 12/31/25 1/1/26 - 12/31/26								
Water System	Facility: WELL (WSEID: 21482)		1/1/20-1	12/3	51/20						
E. Coli (3014	Facility: WELL (WSF ID: 21482)						1	roi	ıtina (PT)	per quarter	
•	T Point (Sampling Point ID)		Monitorin	na P	Period C	olle	ction Per			ance Status	
WELL (2)	Tome (Sumpring Formers)		4/1/25 -	_		Onc	etion i ei	10u		mplete	
***************************************			7/1/25 - 9							mplete	
			10/1/25 -		-						
			1/1/26 - :								
			4/1/26 -								
	Oth	er Compliance	Sched	ule	25						
Compliance Sch	Compliance Schedule Activity Due Date Achieved Date										
_	ANITARY SURVEY				2011						
	ANITARY SURVEY				/2016						
	ANITARY SURVEY				/2021						
	Public	Notification R	eguire	me	ents						
		Compliance	Notice		Public N	otif	ication		PN Ceri	tification_	
Violation/Situa	ation	Period	Tier		Required		<u>leution</u> Performed	d [Due to DPH	Received	
Total Coliform	M&R Violation	4/1/13 - 6/30/13	2		10/17/2013				.0/27/2013		
Total Coliform	M&R Violation	7/1/13 - 9/30/13	2		2/16/2014				2/26/2014		
Physical Param	eters M&R Violation	4/1/13 - 6/30/13	3	(9/17/2014				9/27/2014		

	Сс	nnectic	ut Depa	rtme	nt o	f Public	Health	Drir	nking	Water S	Section	
		Wa	ter Oual	litv N	Ioni	toring a	nd Com	plia	nce So	chedule	<u>,</u>	
PWS ID	PW	S Name				0 -					wner Type Pi	imary Source
CT0850064		MAIN STREE	T - MONROE					N		25	P	GW
Local Addre	ess (wher	e applicable)				Service	Resident	ial Co	mmercial	Industrial	Combined	Agricultural
						Connection	ns		1			
Towns Serv	ed: MON	IROE				- 1	-	'		1	<u> </u>	
				Publi	c No	tification	Require	men	ts			
					(Compliance	Notice	<u>F</u>	Public Not	ification	PN Cert	<u>ification</u>
Violation/S	Situation					Period	Tier	Re	quired	Performed	Due to DPH	Received
Physical Pa	rameters	M&R Violatio	n		7/1	/13 - 9/30/1	3 3	1/1	7/2015		1/27/2015	
Total Colifo	rm M&R	Violation			1/1	/15 - 3/31/1	5 2	8/5	5/2015		8/15/2015	
Total Colifo	rm M&R	Violation			4/1	/15 - 6/30/1	5 2	10/2	24/2015		11/3/2015	
Physical Pa	rameters	M&R Violatio	n		4/1	/15 - 6/30/1	5 3	9/2	3/2016		10/3/2016	
Physical Pa	rameters	M&R Violatio	n		10/1	/23 - 12/31/	23 3	5/3	L/2025		5/11/2025	
Total Colifo	rm M&R	Violation			10/1	/23 - 12/31/	23 3	5/3	L/2025		5/11/2025	
Total Colifo	rm M&R	Violation			_	/23 - 9/30/2		5/2	L/2025		5/11/2025	
Physical Pa	rameters	M&R Violatio	n		7/1	/23 - 9/30/2	3 3	5/2	L/2025		5/11/2025	
			Water Sy	/stem	Facil	ity and S	ampling	Poin	t Inven	tory		
Water									Tota	al Lead ai	nd	
-	Water Sy	stem Facility	2	_		Sampling P			Colifo			Stage
Facility ID				IL)	Description	1	Sta	tus Rui	le Rule Ti	ier Asbestos	WQP 2 DBPR
00600	DISTRIBU	TION SYSTEM		4			ON SYSTEM	A	Y Y			
				BPC		KIT HAND S		A			Υ	
				BPC			NK MIDDLE	A	A Y		Υ	
				BPC		KIT HAND S		A			Y	
				BPC		KIT SNK SIN	_	<i>A</i>			Y	
				BPC		KIT SNK TRI		. A			Y	
				BPC		RR MENS R					Y Y	
				BPC		RR LADY RO WITHIN 5 S		. A			Y	
				KSI		KIT HAND S					Υ	
				RI		RR GENERIO		,			Y	
				UPSTF			ERVICE CON				'	
00700	ENTRY PC	DINT		3		ENTRY POI						
	WELL	, , , , , , , , , , , , , , , , , , ,		2		WELL						
21402	WELL						rmation	,	`			
News						ntact Info	mation				1-1-701	
Name	- T D:				0	rganization					Job Title	
Mr. Charles		000		N 4 a : 1 : :	۸ ما ما ··· -	o Line Torre				City	Chata	7in Cad-
Mailing Add		one		ivialling	Auares	ss Line Two			Mannas	City	State	Zip Code
179 Main S Business		Extension	Fax		Mah	ile Phone	Emergency	Dhono	Monroe Email Ad	dross	CI	06468
202 261		Extension	202 260 2		IVIUD	ne FIIONE	Lineigency	rnone	LIIIali AU	ui ESS		

203-268-2114

203-261-8499

Contact Role(s): Administrative Contact

Schedule Generation Date: 12/12/2025 Page 10

	Connecticut Department of Public Health Drinking Water Section										
	Wa	ter Qua	lity Monito	oring ar	nd Con	nplia	ince S	chedul	e		
PWS ID	PWS Name					Classif	fication	Population	Owner	r Type	Primary Source
CT0850064	179 MAIN STREE	T - MONRO	Ī			NC		25	P)	GW
Local Address (wl	nere applicable)			Service	Residen	tial Co	ommercia	al Industria	al Co	ombine	d Agricultural
				Connections	S		1				
Towns Served: M	ONROE				1	'		1	'		'
Name			Org	ganization					Jo	ob Title	
Ms. Rega L. Sage	Dba	a Out Front	Farm								
Mailing Address Line One Mailing Address				Line Two		City State :			Zip Code		
D/B/A Out Front	Farm		179 Main Street				Monroe	<u>;</u>		CT	06468
Business Phone	Extension	Fax	Mobile	e Phone	Emergency Phone Email A			ddress		·	
203-261-8499											
Contact Role(s):	Legal Contact, C)wner									
Name			Org	ganization					Jo	ob Title	
Ms. Gena R. New	man							Co-Owner	•		
Mailing Address I	ine One		Mailing Address	Line Two				City		State	Zip Code
D/B/A Out Front Farm 179 Main Street							Monroe	<u>;</u>		CT	06468
Business Phone	Extension	Mobile	e Phone	Emergency	Phone	one Email Address					
Contact Role(s):	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.

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

	Connecticut Dep	artment of	Public H	lealth	Dr	rinki	ng V	Vate	r Se	ection	
	Water Oua	ality Monit	oring an	d Con	nnl	iance	e Sc	hedu	le		
PWS ID	PWS Name		011110	0. 0011	_				_	ner Type	Primary Source
CT0850084	LAKE ZOAR DRIVE IN					NC		25		Р	GW
Local Address (v	where applicable)		Service	Residen	ntial	Comme	ercial	Industr	ial	Combine	d Agricultural
215 ROOSEVELT			Connections			1					8
Towns Served: I											
		Monito	oring Requ	ıireme	nts						
Water System	Facility: DISTRIBUTION S										
Total Coliforn	n (3100)								1 roı	utine (RT) per quarter
Sampling I	Point (Sampling Point ID)			Monitor	ing P	eriod	Colle	ection Pe	eriod	Comp	oliance Status
Select from	n Inventory of Active Samplin	g Points		4/1/25 -	- 6/30	0/25				C	Complete
				7/1/25 -	- 9/30	0/25				C	Complete
				10/1/25 -	- 12/3	31/25				C	Complete
				1/1/26 -	- 3/31	1/26					
				4/1/26 -							
Physical Para	meters (PPS)								1 roı	utine (RT) per quarter
-	Point (Sampling Point ID)			Monitor	ing P	eriod	Colle	ection Pe	eriod	Comp	oliance Status
Select from	n Inventory of Active Samplin	g Points		4/1/25 -	- 6/30	0/25				C	Complete
				7/1/25 -	- 9/30	0/25				C	Complete
				10/1/25 -	- 12/3	31/25				C	Complete
				1/1/26 -	- 3/31	1/26					
				4/1/26 -	- 6/30	0/26					
Water System	Facility: ENTRY POINT (WSF ID: 00700)									
Nitrate And N	•								1	routine	(RT) per year
	Point (Sampling Point ID)			Monitor	ing P	eriod	Colle	ection Pe			oliance Status
ENTRY POI				1/1/24 -							Complete
				1/1/25 -							Complete
				1/1/26 -							·
Water System	Facility: WELL (WSF ID:	21484)			<u>, </u>	<u>, </u>					
E. Coli (3014)	,	,							1 roi	ıtine (RT) per quarter
	Point (Sampling Point ID)			Monitori	ina P	eriod	Colle	ection Pe		-	liance Status
WELL (2)	ome (oumping rome is)			4/1/25 -			00				Complete
***************************************				7/1/25 -							Complete
				10/1/25 -							Complete
				1/1/26 -		-					on piece
				4/1/26 -							
	Water S	System Facili	itv and Sar				vent	orv			
Water		,	· • · · · ·	1 0			Tota	•	l and	'	
	er System Facility	Sampling Point	Sampling Poi	nt		(Colifor		per		Stage
Facility ID		ID	Description			Status	Rule		-	Asbesto	s WQP 2 DBPR
00600 DISTI	RIBUTION SYSTEM	4	DISTRIBUTION	N SYSTEM		Α	Υ				
		DOWNSTREAM	WITHIN 5 SER	VICE CO	N	Α					
		LZD001	TRIPLE SINK			Α	Υ			Υ	
		LZD002	HAND SINK BA	ACK		Α	Υ			Υ	
		LZD003	HAND SINK FE	RONT		Α	Υ			Υ	
		LZD004	RR GENERIC P	RR		Α	Υ			Υ	
		UPSTREAM	WITHIN 5 SER	VICE CO	N	Α					

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0850084	LAKE ZOAR DRIVE IN				NC	25	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
215 ROOSEVE	LT DR	Connections			1			

Towns Served: MONROE

	Wa	ater System Facili	ity and Samplin	g Point Ir	nventoi	γ			
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
00700	ENTRY POINT	3	ENTRY POINT	Α					
21484	WELL	2	WELL	Α					
61122	TREATMENT PLANT								

01122	IREATIVIENT PLANT

		Co	ontact Info	ormation				
			Organization				Job Title	
			Lake Zoar Dri	ve-In		Manager		
One		Mailing Addr	ess Line Two			City	State	Zip Code
					Stevenso	n	СТ	06491
Extension	Fax	M	obile Phone	Emergency Phone	Email Ad	dress		
		20	3-535-6418		Zoarbead	ch@gmail.com		
	Extension	Extension Fax	One Mailing Addr Extension Fax Mo	Organization Lake Zoar Dri One Mailing Address Line Two Extension Fax Mobile Phone 203-535-6418	Organization Lake Zoar Drive-In One Mailing Address Line Two Extension Fax Mobile Phone Emergency Phone 203-535-6418	Organization Lake Zoar Drive-In One Mailing Address Line Two Stevenso Extension Fax Mobile Phone 203-535-6418 Zoarbead	Organization Lake Zoar Drive-In Manager One Mailing Address Line Two City Stevenson Extension Fax Mobile Phone Emergency Phone Email Address Zoarbeach@gmail.com	Organization Job Title Lake Zoar Drive-In Manager One Mailing Address Line Two City State Stevenson CT Extension Fax Mobile Phone Emergency Phone Email Address 203-535-6418 Zoarbeach@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 schedule.

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

	Connecticut Department	of Public H	lealth	Dr	inkin	g Wa	ater S	Secti	ion	
	Water Quality Mor	nitoring an	d Con	npli	ance	Sche	edule	9		
PWS ID	PWS Name	<u> </u>		_					Type Pr	imary Source
CT0850094	MONROE AMOCO (G & M AUTO)				NC		5	Р	,,	GW
Local Address	(where applicable)	Service	Residen	ntial (Commerc	ial In	dustrial	Con	nbined	Agricultural
172, 176, 178	MAIN STREET	Connections			1					
Towns Served:	MONROE			'						
	Mor	nitoring Requ	iireme	nts						
Water Systen	n Facility: DISTRIBUTION SYSTEM (WS	F ID: 00600)								
Total Colifor	m (3100)						1	routir	ne (RT)	per month
	Point (Sampling Point ID)		Monitor			Collect	ion Perio	od	Compli	ance Status
Select fro	m Inventory of Active Sampling Points		7/1/25 -	- 7/31,	/25				Coi	mplete
			8/1/25 -							mplete
			9/1/25 -							mplete
			10/1/25 -	- 10/3	1/25				Coi	mplete
			11/1/25 -	- 11/3	0/25				Coi	mplete
			12/1/25 -	- 12/3	1/25					
			1/1/26 -	- 1/31,	/26					
			2/1/26 -	- 2/28,	/26					
			3/1/26 -	- 3/31,	/26					
			4/1/26 -							
			5/1/26 -	- 5/31,	/26					
			6/1/26 -	- 6/30,	/26					
Total Colifor	•						3	-		per period
	Point (Sampling Point ID)		Monitor			Collect	ion Perio	od		ance Status
	m Inventory of Active Sampling Points		8/23/25	- 8/28	3/25					mplete
-	ameters (PPS)								• •	per month
	Point (Sampling Point ID)		Monitor			Collect	ion Perio	od		ance Status
Select fro	m Inventory of Active Sampling Points		7/1/25 -							mplete
			8/1/25 -							mplete
			9/1/25 -							mplete
			10/1/25 -							mplete
			11/1/25 -						Coi	mplete
			12/1/25 -							
			1/1/26 -							
			2/1/26 -							
			3/1/26 -							
			4/1/26 -							
			5/1/26 -							
14/11/200		20)	6/1/26 -	- 6/30,	/26					
	n Facility: ENTRY POINT (WSF ID: 0070	00)								
	Nitrite (NOX)								-	T) per year
	Point (Sampling Point ID)		Monitor			Collect	ion Perio	od	Compli	ance Status
ENTRY PC	DINT (3)		1/1/24 -	12/31	./24					

1/1/25 - 12/31/25

1/1/26 - 12/31/26

Water System Facility: WELL (WSF ID: 21485)

Complete

_								
	Connecticut Dep	oartment of	Public Healt	h Drink	ing Wa	ater Se	ction	
	Water Qu	ality Monit	oring and Co	mpliand	e Sche	edule		
PWS ID	PWS Name			Classificat	ion Popul	ation Own	er Type Prin	nary Source
CT0850094	MONROE AMOCO (G & M	AUTO)		NC	2	5	Р	GW
Local Address (v	vhere applicable)		Service Reside	ential Comm	nercial In	dustrial	Combined	Agricultural
172, 176, 178 M	AIN STREET		Connections	1	L			
Towns Served: N	MONROE							
		Monit	oring Requirem	ents				
Water System	Facility: WELL (WSF ID:	21485)						
E. Coli (3014)						1 trigg	ered (TG) p	er period
	Point (Sampling Point ID)			oring Period	Collecti	on Period	Complian	ice Status
WELL (2)			8/22/2	5 - 8/28/25				plete
E. Coli (3014)							utine (RT) p	
	Point (Sampling Point ID)			oring Period	Collecti	on Period		ice Status
WELL (2)				5 - 7/31/25				plete
				5 - 8/31/25				plete
				5 - 9/30/25				plete
				5 - 10/31/25				plete
				5 - 11/30/25			Com	plete
				5 - 12/31/25				
				5 - 1/31/26				
				5 - 2/28/26				
				5 - 3/31/26				
				5 - 4/30/26				
				5 - 5/31/26				
			6/1/26	5 - 6/30/26				
		Other C	ompliance Sche	edules				
Compliance Sch	edule Activity			Due Date		Achieved L	Date	
CROSS CONNEC	TION SURVEY REPORT			3/1/2020				
CROSS CONNEC	TION SURVEY REPORT			3/1/2024				
CROSS CONNEC	TION SURVEY REPORT			3/1/2025				
CROSS CONNEC	TION SURVEY REPORT			3/1/2026				
	Water	System Facili	ity and Samplin	g Point Ir	nventor	У		
Water					Total	Lead and		
•	er System Facility		Sampling Point		Coliform	Copper	_	Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos W	/QP 2 DBPR
00600 DISTE	RIBUTION SYSTEM	4	DISTRIBUTION SYSTE		Υ			
			WITHIN 5 SERVICE CO					
		MA001	HAND SINK #1	A	Y		Y	
		MA002	TRIPLE SINK	A	Y		Y	
		MA003	SLOP SINK	A	Y		Y	
		MA004	RR GENERIC RR	A	Y		Y	
		MA005	HAND SINK #2	Α			Υ	

ENTRY POINT

WELL

UPSTREAM

3

2

00700 ENTRY POINT

21485 WELL

Schedule Generation Date: 12/12/2025 Page 15

WITHIN 5 SERVICE CON

Α

Α

Α

CT0850094	MONROE AMOCO (G & M AUTO)	NC	25	Р	GW
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
	Water Quality Monitoring and Con	npliance S	Schedul	e	
	Connecticut Department of Fublic ficalti	שוואוווועוו	5 Water	occuon	

Residential

Commercial

1

Industrial

Combined

Agricultural

Service

Connections

Connecticut Department of Public Health Drinking Water Section

172, 176, 178 MAIN STREET Towns Served: MONROE

Local Address (where applicable)

	Contact Information										
Name				(Organization				Job Title		
Mr. Soubhi Toma				ſ	Monroe High	mart LLC		Owner			
Mailing Address Lin	e One		Mailing	Addre	ss Line Two		City State Zip Co				
172 Main St							Monroe		СТ	06468	
Business Phone	Extension	Fax		Mol	oile Phone	Emergency Phone	Email Ad	dress			
203-115-2916		203-445-2	2916			203-500-9299	mobilhighmart172@outlook.com				

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

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

	Connecticut De	A								
	Water Qı	uality M	onitorin	g and		<u> </u>				
PWS ID	PWS Name				(ion P	-	Owner Type Pr	
CT0850104	CRESCENT VILLAGE					NC		25	Р	GW
	where applicable)		Servic		Residenti			Industria	Combined	Agricultural
115 MAIN STRE			Conne	ections		1	L			
Towns Served:	MONROE									
		M	onitoring	Requ	iremen	its				
Water System	Facility: DISTRIBUTION	SYSTEM (WSF ID: 006	00)						
Total Colifor	m (3100)							1	routine (RT)	oer quarter
Sampling	Point (Sampling Point ID)			ı	Monitorin	g Period	Col	lection Peri	od Compli	ance Status
Select from	m Inventory of Active Samp	ling Points			4/1/25 - 6	5/30/25			Со	mplete
					7/1/25 - 9	9/30/25			Со	mplete
				1	.0/1/25 - 1	12/31/25				
					1/1/26 - 3	3/31/26				
					4/1/26 - 6	5/30/26				
-	meters (PPS)							1	routine (RT)	-
	Point (Sampling Point ID)				Monitorin		Col	lection Peri		ance Status
Select from	m Inventory of Active Samp	ling Points			4/1/25 - 6					mplete
					7/1/25 - 9				Со	mplete
				1	.0/1/25 - 1					
					1/1/26 - 3					
					4/1/26 - 6	5/30/26				
Water System	Facility: ENTRY POINT	(WSF ID: 0	0700)							
	Nitrite (NOX)								1 routine (R	
	Point (Sampling Point ID)				Monitorin		Col	lection Peri		ance Status
ENTRY PO	INT (3)				1/1/24 - 1					mplete
					1/1/25 - 1				Со	mplete
					1/1/26 - 1	· ·	_			
		Public	Notificat	ion R	equire	ments				
			Complia	nce	Notice	Pub	lic Not	<u>ification</u>	PN Cert	i <u>fication</u>
Violation/Situa	ation		Period	d	Tier	Requi	red	Performed	Due to DPH	Received
Total Coliform	MCL Violation		10/1/15 - 12	/31/15	2	1/10/2	016		1/20/2016	
Total Coliform	MCL Violation		12/1/15 - 12	/31/15	2	1/14/2	016		1/24/2016	
	Water	System I	Facility an	d San	npling I	Point Ir	nven	tory		
Water							Tota	al Lead a	nd	
*	ter System Facility		Point Sampl	_	t		Colifo			Stage
Facility ID		ID	Descri	ption		Status			ier Asbestos	WQP 2 DBPR
00600 DIST	RIBUTION SYSTEM	4			SYSTEM	Α	Υ			
		CV00			FLOOR	Α	Υ		Υ	
		CV00			FLOOR	Α	Υ		Υ	
		CV00		2 FIRST F		A	Y		Y	
		CV00		FIRST F		A	Y		Y	
		CV00			FLOOR	A	Y		Y	
		CV00		3 FITST F		A	Y		Y	
		CV00		FIRST F		A	Y		Y	
		CV00			D FLOOR	Α	Y		Y	
		CV00	9 UNIT 4	ia seco	ND FLOOF	R A	Υ		Υ	

				_	
WS ID	PWS Name	Classification	Population	Owner Type	Primary S
	Water Quality Monitoring and Con	npliance S	Schedul	e	
	Connecticut Department of Fublic Health	שוואוווען.	g water	Section	

PVV3 ID	PWS Name			Classification	Population	Owner	Type	Tilliary Source
CT0850104	CRESCENT VILLAGE			NC	25	Р		GW
Local Address (v	where applicable)	Service	Residen	ntial Commer	cial Indust	rial Cor	nbined	l Agricultural
115 MAIN STRE	FT	Connections		1				

Connecticut Department of Dublic Health Drinking Water Section

Towns Served: MONROE

Wa	ter System Facili	ity and Sampling P	oint Ir	nventoi	ry
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description		Total Coliform Rule	Lead and Copper Stage Rule Tier Asbestos WQP 2 DBPR
ruenty 10	CV010	UNIT 4 SECOND FLOOR	<u>Status</u> A	Y	Y
	CV011	UNIT 6 SECOND FLOOR	Α	Y	Y
	CV012	UNIT 7B SECOND FLOOR	Α	Υ	Υ
	CV013	UNIT 10 SECOND FLOOR	Α	Υ	Υ
	CV014	UNIT 11 SECOND FLOOR	Α	Υ	Υ
	CV015	UNIT 12 SECOND FLOOR	Α	Υ	Υ
	DOWNSTREAM	WITHIN 5 SERVICE CON	Α		
	UPSTREAM	WITHIN 5 SERVICE CON	Α		
00700 ENTRY POINT	3	ENTRY POINT	Α		
21486 WELL	2	WELL	Α		
61987 TREATMENT PLANT					

	Contact Information									
Name				Organization				Job Title		
Mr. John Kalas				Tide Water G	roup		Property O	wner		
Mailing Address Lin	e One		Mailing	g Address Line Two			City	State	Zip Code	
115 Main Street						Monroe		СТ	06468	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ac	ldress			
203-459-2500		203-459-9	9778		203-459-2500					

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

Water Quality Monitoring and Compliance Schedule PWS ID PWS Name Crosso154 AMERICAN PIE NC 25 P GW Local Address (where applicable) Service Connections Towns Served: Monitoring Requirements Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Monitoring Period Collection Period Compliance Status Select from Inventory of Active Sampling Points 4/1/25 - 6/30/25 Complete 10/1/25 - 12/31/25 Physical Parameters (PPS) Affaire Point (10/1/25 - 12/31/25 Towns Service Sampling Point (10/1/25 - 12/31/25 Towns Select from Inventory of Active Sampling Points Monitoring Period Collection Period Compliance Status Select from Inventory of Active Sampling Points Africa - 6/30/25 Complete 10/1/25 - 12/31/25 Towns Select from Inventory of Active Sampling Points Africa - 6/30/25 Complete 10/1/25 - 12/31/25 Towns Select from Inventory of Active Sampling Points Africa - 6/30/25 Complete 10/1/25 - 12/31/25 Towns Select from Inventory of Active Sampling Point (10/1/25 - 12/31/25 Towns Select from Inventory of Active Sampling Point (10/1/25 - 12/31/25 Towns Select from Inventory of Active Sampling Point (10/1/25 - 12/31/25 Towns Select from Inventory of Active Sampling Point (10/1/25 - 12/31/25 Towns Select from Inventory of Active Sampling Point (10/1/25 - 12/31/25 Towns Select from Inventory of Active Sampling Point (10/1/25 - 12/31/25 Towns Select from Inventory of Active Sampling Point (10/1/25 - 12/31/25 Towns Select from Inventory of Active Sampling Point (10/1/25 - 12/31/25 Towns Select from Inventory of Active Sampling Point (10/1/25 - 12/31/25 Towns Select from Period Towns Sampling Point (10/1/25 - 12/31/25 Towns Select from Period Towns Sampling Point (10/1/25 - 12/31/25 Towns Select from Period Towns Sampling Point (10/1/25 - 12/31/25 Towns Select fr	Connecticut Dep	partment of	f Public H	lealth	Drin	king	Water S	Section	
PWS ID PWS Name CT0850154 AMERICAN PIE NC CT0850154 AMERICAN PIE OCCURATION OF TYPE Primary Source CT0850154 AMERICAN PIE OCCURATION OF TYPE Primary Source CT0850154 AMERICAN PIE OCCURATION OF THE PROPERTY	Water Ou	ality Monit	oring and	d Com	pliar	nce S	chedule	<u>.</u>	
No. 25 P GW			<u> </u>						Primary Source
150 MAIN STREET Connections 1	CT0850154 AMERICAN PIE						-		
150 MAIN STREET Connections 1	Local Address (where applicable)		Service	Resident	tial Con	nmercial	Industrial	Combine	d Agricultural
Monitoring Requirements Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Select from Inventory of Active Sampling Point ID) Select from Inventory of Active Sampling Points 4/1/25 - 6/30/25 10/1/25 - 12/31/25 11/1/26 - 3/31/26 4/1/26 - 6/30/25 Physical Parameters (PPS) Physical Parameters (PPS) Select from Inventory of Active Sampling Point ID) Select from Inventory of Active Sampling Point ID) Select from Inventory of Active Sampling Point ID) Monitoring Period Select from Inventory of Active Sampling Point S 4/1/25 - 6/30/25 10/1/25 - 12/31/25 10/1/25 - 12/31/25 10/1/25 - 12/31/25 11/1/26 - 3/31/26 4/1/26 - 6/30/25 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate (1040) Sompling Point (Sampling Point ID) Monitoring Period Sompling Point (Sampling Point ID) Monitoring Period 1 routine (RT) per quarter Collection Period Compliance Status 4/1/26 - 6/30/25 Complete 10/1/25 - 1/3/1/25 1 routine (RT) per quarter Collection Period Compliance Status 1 routine (RT) per quarter Collection Period Compliance Status 1 routine (RT) per quarter Collection Period Compliance Status 1 routine (RT) per quarter Collection Period Compliance Status 1/1/26 - 1/3/31/26 4/1/25 - 6/30/25 Nitrite (1041) Sompling Point (Sampling Point ID) Monitoring Period Nonitoring Period Compliance Status 1/1/26 - 1/3/31/26 4/1/25 - 6/30/25 Nitrite (1041) Sompling Point (Sampling Point ID) Monitoring Period Compliance Status ENTRY POINT (3) 1/1/26 - 1/3/1/26 1/1/26 - 1/3/1/26 WELL (WSF ID: 21491) E. Coli (3014) Sompling Point (Sampling Point ID) Monitoring Period Complete Collection Period Compliance Status Complete Collection			Connections			1			
Total Coliform (3100)	Towns Served: MONROE								
Total Coliform (3100)		Monite	oring Reau	ireme	nts				
Sampling Point (Sampling Point ID)	Water System Facility: DISTRIBUTION								
Select from Inventory of Active Sampling Points	Total Coliform (3100)						1 r	outine (RT	per quarter
7/1/25 - 9/30/25 Complete	Sampling Point (Sampling Point ID)			Monitori	ng Perio	d Col	lection Perio	od Comp	liance Status
10/1/25 - 12/31/25 1/1/26 - 3/31/26 1/1/26 - 3/31/26 1/1/26 - 3/31/26 1/1/26 - 3/31/26 1/1/26 - 3/31/26 1/1/26 - 3/31/25 1/1/26 - 3/31/25 1/1/26 - 3/31/25 1/1/26 - 3/31/25 1/1/26 - 3/31/25 1/1/26 - 3/31/26 1/1/26 - 3/31/25 Complete 1/1/26 - 1/31/26	Select from Inventory of Active Sampli	ng Points		4/1/25 -	6/30/25	5		C	omplete
1/1/26 - 3/31/26 4/1/26 - 6/30/26				7/1/25 -	9/30/25	5		C	omplete
Physical Parameters (PPS)				10/1/25 -	12/31/2	25			
Physical Parameters (PPS)				1/1/26 -	3/31/26	5			
Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 4/1/25 - 6/30/25 Complete 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 (1040) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1 routine (RT) per quarter Collection Period Compliance Status ENTRY POINT (3) 4/1/25 - 6/30/25 Complete 10/1/25 - 12/31/25 1/1/26 - 3/31/26 4/1/26 - 6/30/25 Complete 10/1/25 - 12/31/25 1/1/26 - 3/31/26 4/1/26 - 6/30/26 Nitrite (1041) Sampling Point (Sampling Point ID) Monitoring Period Compliance Status ENTRY POINT (3) 1 routine (RT) per year Collection Period Compliance Status 1/1/26 - 1/2/31/25 Complete 1/1/26 - 1/2/31/25 Complete 1/1/26 - 12/31/25 Complete 1/1/26 - 12/31/25 Complete 1/1/26 - 12/31/25 Complete 1/1/26 - 12/31/26 Water System Facility: WELL (WSF ID: 21491) E. Coli (3014) Sampling Point (Sampling Point ID) Monitoring Period Compliance Status VELL (2) 4/1/25 - 6/30/25 Complete Collection Period Compliance Status				4/1/26 -	6/30/26	5			
Select from Inventory of Active Sampling Points	Physical Parameters (PPS)						1 r	outine (RT	per quarter
7/1/25 - 9/30/25 Complete	Sampling Point (Sampling Point ID)			Monitori	ng Perio	d Col	lection Perio	od Comp	liance Status
10/1/25 - 12/31/25 1/1/26 - 3/31/26 4/1/26 - 6/30/26	Select from Inventory of Active Sampli	ng Points		4/1/25 -	6/30/25	5		C	omplete
1/1/26 - 3/31/26 4/1/26 - 6/30/26				7/1/25 -	9/30/25	5		C	omplete
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				10/1/25 -	12/31/2	25			
Nitrate (1040) Sumpling Point (ID) Sumpling Point (ID) Sumpling Point (Sampling Point (ID) Sumpling				1/1/26 -	3/31/26	5			
Nitrate (1040) Monitoring Period Collection Period Compliance Status				4/1/26 -	6/30/26	5			
Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status	Water System Facility: ENTRY POINT	(WSF ID: 00700)							
ENTRY POINT (3) 4/1/25 - 6/30/25 Complete	Nitrate (1040)						1 r	outine (RT	per quarter
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 Nitrite (1041)	Sampling Point (Sampling Point ID)			Monitori	ng Perio	d Col	lection Perio	od Comp	liance Status
10/1/25 - 12/31/25 1/1/26 - 3/31/26 4/1/26 - 6/30/26	ENTRY POINT (3)			4/1/25 -	6/30/25	5			omplete
1/1/26 - 3/31/26 4/1/26 - 6/30/26				7/1/25 -	9/30/25	5		C	omplete
A/1/26 - 6/30/26			:	10/1/25 -	12/31/2	25			
Nitrite (1041) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status ENTRY POINT (3) 1/1/24 - 12/31/24 Complete 1/1/25 - 12/31/25 Complete 1/1/26 - 12/31/26 Water System Facility: WELL (WSF ID: 21491) E. Coli (3014) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status WELL (2) 4/1/25 - 6/30/25 Complete 7/1/25 - 9/30/25 Complete				1/1/26 -	3/31/26	5			
Sampling Point (Sampling Point ID) ENTRY POINT (3) Monitoring Period Collection Period Compliance Status 1/1/24 - 12/31/24 Complete 1/1/25 - 12/31/25 Complete 1/1/26 - 12/31/26 Water System Facility: WELL (WSF ID: 21491) E. Coli (3014) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status WELL (2) 4/1/25 - 6/30/25 Complete 7/1/25 - 9/30/25 Complete				4/1/26 -	6/30/26	5			
ENTRY POINT (3) 1/1/24 - 12/31/24 Complete 1/1/25 - 12/31/25 Complete 1/1/26 - 12/31/26 Water System Facility: WELL (WSF ID: 21491) E. Coli (3014) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status WELL (2) 4/1/25 - 6/30/25 Complete 7/1/25 - 9/30/25 Complete	Nitrite (1041)							1 routine	RT) per year
1/1/25 - 12/31/25 Complete	Sampling Point (Sampling Point ID)			Monitori	ng Perio	d Col	lection Perio	od Comp	liance Status
### Time Indicate the Indicate System Facility: WELL (WSF ID: 21491) ### E. Coli (3014) ### Sampling Point (Sampling Point ID) ### WELL (2) ### Monitoring Period Collection Period Compliance Status ### 4/1/25 - 6/30/25 ### Complete ### Toutine (RT) per quarter ### Collection Period Compliance Status ### A/1/25 - 9/30/25 ### Complete ### Co	ENTRY POINT (3)			1/1/24 - :	12/31/2	4		C	omplete
Water System Facility: WELL (WSF ID: 21491) E. Coli (3014) Sampling Point (Sampling Point ID) WELL (2) 4/1/25 - 6/30/25 Complete 7/1/25 - 9/30/25 Complete				1/1/25 - :	12/31/2	5		C	omplete
E. Coli (3014) Sampling Point (Sampling Point ID) WELL (2) Monitoring Period Collection Period Compliance Status 4/1/25 - 6/30/25 Complete 7/1/25 - 9/30/25 Complete				1/1/26 - :	12/31/2	6			
Sampling Point (Sampling Point ID)Monitoring PeriodCollection PeriodCompliance StatusWELL (2)4/1/25 - 6/30/25Complete7/1/25 - 9/30/25Complete	Water System Facility: WELL (WSF ID	: 21491)							
WELL (2) 4/1/25 - 6/30/25 Complete 7/1/25 - 9/30/25 Complete	E. Coli (3014)						1 r	outine (RT	per quarter
7/1/25 - 9/30/25 Complete	Sampling Point (Sampling Point ID)			Monitori	ng Perio	d Col	lection Perio	od Comp	liance Status
·	WELL (2)			4/1/25 -	6/30/25	5		C	omplete
10/1/25 - 12/31/25				7/1/25 -	9/30/25	5		C	omplete
			:	10/1/25 -	12/31/2	25			
1/1/26 - 3/31/26				1/1/26 -	3/31/26	5			
4/1/26 - 6/30/26				4/1/26 -	6/30/26	5			
Water System Facility and Sampling Point Inventory	Water	System Facili	ity and Sar	npling	Point	Inven	tory		
Water Total Lead and									
System Water System Facility Sampling Point Sampling Point Coliform Copper Stage Facility ID ID Description Status Rule Rule Tier Asbestos WQP 2 DBPR				nt	Stat	D.,			_

CT0850154	AMERICAN PIE	NC	25	Р	GW
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
	Water Quality Monitoring and Con	npliance S	Schedul	e	
	dominociour D'opar amont of 1 abite modific	. 2111111118	5 Tracer	Decement	

Residential Commercial Industrial

1

Combined

Agricultural

Service

Connections

Connecticut Department of Public Health Drinking Water Section

Towns Served: MONROE

150 MAIN STREET

Local Address (where applicable)

	Water System Facility and Sampling Point Inventory													
Water					Total	Lead and								
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper			Stage					
Facility ID)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR					
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ									
		AP001	SINGLE SINK	Α	Υ		Υ							
		AP002	HAND SINK	Α	Υ		Υ							
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α										
		UPSTREAM	WITHIN 5 SERVICE CON	Α										
00700	ENTRY POINT	3	ENTRY POINT	Α										
21491	WELL	2	WELL	Α										
55126	TREATMENT PLANT													

			Co	ontact Inf	ormation						
Name				Organization			Job Title				
Mr. David Chuckta				Chucks' Corn	er LLC		Owner/Member				
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City		Zip Code		
PO Box 393						Seymou	ſ	СТ	06483		
Business Phone	Extension	Fax	Мо	bile Phone	e Phone Emergency Phone Email						
203-915-3005						dafill145	@yahoo.cor	n			
Contact Role(s): Le	gal Contact, O	wner	·								
Name				Organization				Job Title			
Mr. Leo Zeko				American Pie	2	Restaurant Owner					
Mailing Address Lin	e One		Mailing Addr	ess Line Two		City		State	Zip Code		
150 Main Street						Monroe		СТ	06468		
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Ad	ldress				
	1				203-339-2822		L@yahoo.co				

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 schedule.

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

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

Water Quality Monitoring a PWS Name PWS Name	nd Compliance	Schodula						
PWS ID PWS Name		Schedule						
	Classification	Population Ov	wner Type Primary Source					
TO850174 MONROE FOOD MART	NC	25	P GW					
ocal Address (where applicable) Service	Residential Commer	cial Industrial	Combined Agricultural					
45 MAIN STREET Connection	1							
owns Served: MONROE								
Monitoring Re	quirements							
Vater System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)								
Total Coliform (3100)		1 rd	outine (RT) per quarter					
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Perio	•					
Select from Inventory of Active Sampling Points	4/1/25 - 6/30/25		Complete					
	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							
Physical Parameters (PPS)			outine (RT) per quarter					
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Perio						
Select from Inventory of Active Sampling Points	4/1/25 - 6/30/25		Complete					
	7/1/25 - 9/30/25	Complete						
	10/1/25 - 12/31/25							
	1/1/26 - 3/31/26							
Alatan Coatana Facilitan FAITRY DOINT (MCF ID. 00700)	4/1/26 - 6/30/26							
Water System Facility: ENTRY POINT (WSF ID: 00700)								
Nitrate And Nitrite (NOX)	Adamitanto o Dania d		1 routine (RT) per year					
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Sta							
ENTRY POINT (3)	1/1/24 - 12/31/24	Complete						
	1/1/25 - 12/31/25		Complete					
Motor Cystom Facility: WILL (WSFID: 496F4)	1/1/26 - 12/31/26							
Water System Facility: WELL (WSF ID: 48654)			(>=)					
E. Coli (3014)	Adamitanto o Dania d	outine (RT) per quarter						
Sampling Point (Sampling Point ID)	Monitoring Period	d Compliance Status						
WELL (2)	4/1/25 - 6/30/25		Complete					
	7/1/25 - 9/30/25 10/1/25 - 12/31/25		Complete					
	1/1/26 - 3/31/26							
	4/1/26 - 6/30/26							
Public Notification	· · · · · · ·							
	<u> </u>	Notification	PN Certification					
/iolation/Situation Period	Tier Required		Due to DPH Received					
. Coli M&R Violation 1/1/25 - 3/31/2			10/11/2026					
Water System Facility and S	ampling Point Inv	entory						
Water		Total Lead an	d					
System Water System Facility Sampling Point Sampling F		oliform Coppei						
Facility ID Description	Status	Rule Rule Tie	er Asbestos WQP 2 DBPR					
00600 DISTRIBUTION SYSTEM 4 DISTRIBUTION	ON SYSTEM A	Υ						
DOWNSTREAM WITHIN 5 S	ERVICE CON A							
MFM001 KIT SNK TR	PL SNK A	Υ	Υ					
Water System Facility and S Water System Facility Sampling Point Sampling Facility ID O0600 DISTRIBUTION SYSTEM 1/1/25 - 3/31/2 Sampling Point Sampling Facility ID Description 00600 DISTRIBUTION SYSTEM 4 DISTRIBUTION	Requirements Notice Public Tier Required 3 10/1/202 ampling Point Inv oint Co Status ON SYSTEM A	6 entory Total Lead an oliform Copper Rule Rule Tie	10/11/2026 d r Stage					

	Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name		Classification	Population	Owner Type	Primary Source						
CT0850174	MONROE FOOD MART			NC	25	Р	GW					
Local Address	(where applicable)	Service	Residen	ntial Commer	cial Industr	ial Combin	ed Agricultural					
145 MAIN STREET Connections 1												

Connecticut Department of Public Health Drinking Water Section

Towns Served: MONROE

Wa	ter System Facil	ity and Sampling P	oint l	nventoi	ry			
Water System Water System Facility	Sampling Point	Sampling Point		Total Coliform	Lead and Copper			Stage
Facility ID	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
	MFM002	KIT HAND SNK BACK	Α	Υ		Υ		
	MFM003	KIT HAND SNK FRONT R	Α	Υ		Υ		
	MFM004	RR GENERIC RR	Α	Υ		Υ		
	MFM005	MOP SINK	Α	Υ				
	MFM006	KIT HAND SNK FRONT L	Α	Υ				
	UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700 ENTRY POINT	3	ENTRY POINT	Α					
48654 WELL	2	WELL	Α					
63171 UV TREATMENT								

			Co	ontact Inf	ormation							
Name				Organization	1		Job Title					
Mr. Joseph McCorr	nick			Chestnut Pet	troleum Distributor	Ehs Director						
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code			
536 Main Street						New Paltz NY 12561						
Business Phone	Extension	Fax	Мо	bile Phone	Emergency Phone	Email Address						
845-256-0162					845-256-5020	020 jmccormick@cpdgroup.com						
Contact Role(s): A	dministrative	Contact	"		1							

Name				Organization	ı		Job Title				
Mr. Rajiv Mehta				Rs Monroe Realty LLC Property Owner							
Mailing Address Line	e One		Mailing Address Line Two City State Zip						Zip Code		
16 Arbor Lane						Mahwah	Mahwah NJ 074				
Business Phone	Extension	Fax	N	1obile Phone	Emergency Phone	Email Ad	ldress				
973-332-8762		rajivmehta2015.rm@gmail.com									

Contact Role(s): Owner

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.

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

	Conn	ecticut Depa	artment of	F Public H	lealth	Dr	inkir	ng W	'ater	Se	ction					
	GOIII	Water Qua									001011					
PWS ID	PWS Na		incy Monic	or mg am	u Gon	_					ner Type	Primar	v Source			
CT085905		DONUTS				0.0.0	NC		25		P		W			
Local Add	lress (where app	olicable)		Service	Residen	tial	Comme	rcial I	ndustri	al	Combine	d Agı	ricultural			
135 MAIN		•		Connections			1									
Towns Sei	rved: MONROE															
			Monit	oring Requ	ireme	nts										
Water Sy	ystem Facility:	DISTRIBUTION S	YSTEM (WSF I	D: 00600)												
Total Co	oliform (3100)								1	l rou	tine (RT	per o	quarter			
Sam	pling Point (Sar	mpling Point ID)			Monitori	ing P	eriod	Collec	tion Pe	riod	Comp	liance	Status			
Selec	ct from Invento	ry of Active Sampling	g Points		4/1/25 -	6/30)/25				C	omple	te			
					7/1/25 -	9/30)/25				C	omple	te			
				<u> </u>	10/1/25 -	12/3	31/25									
				1/1/26 - 3/31/26												
					4/1/26 -	6/30)/26									
Physical	l Parameters	(PPS)							1	l rou	tine (RT	per o	quarter			
Samj	pling Point (Sar	mpling Point ID)		Monitoring Period Collection Period Comp								pliance Status				
Selec	ct from Invento	ry of Active Sampling	g Points		4/1/25 - 6/30/25						Complete					
					7/1/25 -	9/30	0/25				C	omple	te			
				:	10/1/25 -	12/3	31/25									
					1/1/26 -	3/31	L/26									
					4/1/26 -	6/30	0/26									
Water Sy	ystem Facility:	ENTRY POINT (\	VSF ID: 00700)													
Nitrate A	And Nitrite (N	IOX)								1	routine (RT) p	er year			
Sam	pling Point (Sar	npling Point ID)			Monitori	ing P	eriod	Collec	tion Pe	riod	Сотр	liance	Status			
ENTF	RY POINT (3)				1/1/24 -	12/3	1/24				C	omple	te			
					1/1/25 -	12/3	1/25				С	omple	te			
					1/1/26 -	12/3	1/26									
		Water S	ystem Facili	ity and Sar	npling	Poi	int Inv	ento	ry							
Water								Total	Lead							
System		Facility	Sampling Point		nt		C	oliforn					Stage			
Facility IE			ID	Description			Status	Rule	Rule	Tier	Asbesto	s WQI	P 2 DBPR			
00600	DISTRIBUTION	SYSTEM	4	DISTRIBUTION	I		Α	Υ								
			DD001	TRIPLE SINK			Α	Υ			Υ					
			DD002	RR MENS RR			Α	Υ			Υ					
		DD003	RR LADY ROO			Α	Υ			Y						
			DD004	HAND SINK #1			A	Y			Y					
			DD005	HAND SINK #2 A				Y								
			DD006	HAND SINK #3			A	Y			Y					
			DD007	HAND SINK #4			A	Υ			Υ					
			DOWNSTREAM				A									
00755	ENTEN		UPSTREAM	WITHIN 5 SER	VICE CON	N	A									
00700	ENTRY POINT		3	ENTRY POINT			A									
48861	WELL		2	WELL			Α									

55415 TREATMENT PLANT

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CT0859054	DUNKIN DONUTS	NC	25	Р	GW								
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source								
	Water Quality Monitoring and Compliance Schedule												
	Connecticut Department of Fublic Health	שוואוווועוו	5 Water	occuon									

Residential

Commercial

1

Industrial

Combined

Agricultural

Service

Connections

Connecticut Department of Public Health Drinking Water Section

Towns Served: MONROE

135 MAIN STREET

Local Address (where applicable)

	Contact Information												
Name				Organization	1		Job Title						
Mr. Setu Kalariya				Monroe Coff	fee, LLC		General Manager						
Mailing Address Line	e One		Mailing Addr	ess Line Two		City	State	Zip Code					
135 Main St.						Monroe		СТ	06468				
Business Phone Extension Fax N				obile Phone	Emergency Phone	Email Address							
865-242-5837					973-332-8762	setu.kalariya@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.
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End of schedule

	Conne	*	partment of								ion		
DIA/C ID	DVA/C AL		ality Monit	oring an	u Con	_					E. un = D	ulua - :-	. Ca
PWS ID	PWS Nam					Clas		on Popi			ıype P	rimary G\	
CT085905				Camila	Daridan	L! _ I	NC		25	P	a la tra la al		
	ress (where appl	icable)		Service Connections	Residen	tiai	Comm		ndustria	I Cor	nbined	Agri	cultural
	evelt avenue			Connections			1						
Towns Ser	ved: MONROE			• • • •	•								
Water Sv	stem Facility:	DISTRIBUTION	SYSTEM (WSF I	oring Requ D: 00600)	ııreme	nts							
-	liform (3100)			,					1	routin	e (RT)	per a	uarter
	oling Point (Sam	pling Point ID)			Monitori	ng P	eriod	Collec	- tion Peri		Compli		
		of Active Sampli	ng Points		4/1/25 -							mplet	
	·	•	- -		7/1/25 -	9/30	0/25				Со	mplet	e
					 10/1/25 -							-	
					1/1/26 -								
					4/1/26 -								
Physical	Parameters (F	PPS)							1	routin	e (RT)	per q	uarter
-	oling Point (Sam				Monitori	ng P	Period	Collec	tion Peri		Compli		
Selec	t from Inventory	of Active Sampli	ng Points		4/1/25 -	6/30	0/25				Со	mplet	e
					7/1/25 -	9/30	0/25				Co	mplet	e
					10/1/25 -	12/3	31/25						
					1/1/26 -	3/31	1/26						
					4/1/26 -	6/30	0/26						
Water Sys	stem Facility:	ENTRY POINT	(WSF ID: 00700)										
Nitrate A	And Nitrite (N	OX)								1 rou	tine (F	RT) pe	r year
Samp	oling Point (Sam	pling Point ID)			Monitori	ng P	Period	Collec	tion Peri	od	Compli	ance S	Status
ENTR	Y POINT (3)			_	1/1/24 -	12/3	31/24				Complete		
					1/1/25 -	12/3	31/25				Со	mplet	e
					1/1/26 -	12/3	31/26						
			Other C	ompliance	Sched	ule	es						
Compliand	ce Schedule Acti	vity				Due l	Date		Achiev	ed Dat	е		
CROSS CO	NNECTION SURV	/EY REPORT			3	3/1/2	2025						
		Water	System Facil	ity and Sar	npling	Po	int In	vento	ry				
Water			-	-				Total	Lead a	nd			
System	Water System I	Facility	Sampling Point		nt			Coliform					Stage
Facility ID)		ID	Description			Status	Rule	Rule 1	ier As	bestos	WQP	2 DBPR
00600	DISTRIBUTION S	SYSTEM	4	DISTRIBUTION	1		Α	Υ					
			DOWNSTREAM	WITHIN 5 SER	VICE CON	1	Α						
			UPSTREAM	WITHIN 5 SER	VICE CON	ı	Α						
00700	ENTRY POINT		3	ENTRY POINT			Α						
48889	WELL 1		2	WELL 1			Α						
48891	WELL 2		2	WELL 2			Α						
52078	ATMOSPHERIC	STORAGE											
62287	TREATMENT FA	CILITY											
			Con	tact Inform	mation								
Name			0	rganization						Jol	Title		
Mr. Bryan	Gilmour			irfield Catering	g Group			Pu	rchasing				
_	ddress Line One		Mailing Addres		•				City		tate	Zip C	Code
									•				

	Connectic	ut Depa	i unent or	I ublic i	licaru.	ועו	מוואווו ב	vvaler	360	LUUII		
	Wat	ter Qual	ity Monito	oring an	nd Con	npl	iance S	Schedul	le			
PWS ID	PWS Name					Clas	sification	Population	Owner Type		Prim	ary Source
CT0859053	THE WATERVIEW	I					NC	25	Р			GW
Local Address (w	here applicable)			Service	Resider	ntial Commerci		mercial Industri		Combine	ed A	gricultural
215 ROOSEVELT	AVENUE			Connections	6	1						
Towns Served: N	IONROE				·			·				
506 Candlewood	Lake Road						Brookfi	eld		СТ	(06804
Business Phon	e Extension	Fax	Mobile	e Phone E	Emergency	y Pho	ne Email A	ddress				
			203-98	84-5087			bg@fai	rfieldcatere	rs.con	n		
Contact Role(s):	Administrative (Contact, Lega	al Contact									

Connecticut Department of Public Health Drinking Water Section

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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End of schedule

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C	Connecticut Department of Public Health Drinking Water Section										
	Water Quality Mo	onitoring and		_							
PWS ID P	WS Name			Clas	sification	Population	Own	ner Type P	rimary Source		
CT0859064 R	OUTE 34 PLAZA - MONROE				NC	49		Р	GW		
Local Address (wh	ere applicable)	Service	Resident	tial	Commerci	al Industr	ial	Combined	Agricultural		
230 ROOSEVELT D	RIVE	Connections			6						
Towns Served: MC	ONROE										
	M	onitoring Requ	iremer	nts							
Water System Fa	acility: DISTRIBUTION SYSTEM (WSF ID: 00600)									
Total Coliform	(3100)						1 rou	tine (RT)	per quarter		
Sampling Poi	int (Sampling Point ID)		Monitorin	ng Pe	eriod C	ollection Pe	eriod	Compl	iance Status		
Select from Ir	nventory of Active Sampling Points		4/1/25 -	6/30)/25			Co	mplete		
			7/1/25 -	9/30)/25			Cc	mplete		
			10/1/25 -	12/3	31/25						
			1/1/26 -	3/31	./26						
			4/1/26 -	6/30)/26						
Physical Parame	eters (PPS)						1 rou	tine (RT)	per quarter		
-	int (Sampling Point ID)		Monitorir	ng Pe	eriod C	ollection Pe		• •	iance Status		
Select from Ir	nventory of Active Sampling Points		4/1/25 -					Co	mplete		
			7/1/25 -	9/30)/25			Co	mplete		
			10/1/25 -						•		
			1/1/26 -								
			4/1/26 -								
Water System Fa	acility: ENTRY POINT (WSF ID: 00	700)									
Nitrate And Nit		•					1	routine (I	RT) per year		
	int (Sampling Point ID)		Monitorir	na Pi	eriod C	ollection Pe			iance Status		
ENTRY POINT			1/1/24 - 1						mplete		
2111111101111			1/1/25 - 1						mplete		
			1/1/26 - 1						mpiece		
Water System Fa	acility: WELL #1 (WSF ID: 54538)		1,1,20	12,5	1,20						
E. Coli (3014)	demey. ••• •• •• •• •• •• •• •• •• •• •• •• •						1 rou	tino (PT)	per quarter		
-	int (Sampling Point ID)		Monitorin	na Di	eriod C	ollection Pe			iance Status		
WELL #1 (2)	int (Sumpling Former 12)		4/1/25 -	_		Onection re	iiou		mplete		
VVLLL #1 (2)			7/1/25 -		-				mplete		
			10/1/25 -					CC	ilipiete		
		-	1/1/26 -								
			4/1/26 -								
	- III				·						
	Public	Notification R Compliance	Notice	me		otification		PN Cer	tification		
Violation/Situatio	on	Period	Tier		Required	Performe	ed D	ue to DPH			
Total Coliform MC		10/1/14 - 12/31/14	2		1/30/2014	_		2/10/2014			
Total Coliform MC		12/1/14 - 12/31/14	2		3/1/2015			3/11/2015			
Total Coliform MC		1/1/15 - 1/31/15	2		3/7/2015			3/17/2015			
Total Coliform MC		2/1/15 - 2/28/15	2		4/9/2015			/19/2015			
Total Coliform MC		3/1/15 - 3/31/15	2		6/3/2015			5/13/2015			
. 310. 30311111110						ntor		, _5, _5			
	Water System I	-acility and Sar	npling	POI	int inve	intory					

Sampling Point Sampling Point

Total

Coliform Copper

Lead and

Water

System Water System Facility

Stage

	Co	onnectic	ut Depa	rtment o	f Public	Health	Drii	nking	Water	Section	
		Wat	ter Oual	lity Monit	toring a	nd Con	nplia	nce S	Schedul	le	
PWS ID	PW	/S Name	Q didis								Primary Source
CT0859064	RO	UTE 34 PLAZA	- MONROE					С	49	Р	GW
Local Addre	ess (wher	re applicable)			Service	Resider	ntial Co	mmerci	al Industri	al Combine	ed Agricultural
230 ROOSE	-				Connection	ns		6			
Towns Serv	ed: MON	NROE									
							Sta				
00600	DISTRIBU	JTION SYSTEM		4	DISTRIBUTI		-	4			
				DOWNSTREAM	I WITHIN 5 S	SERVICE COI	N A	4			
				RT34P001	DUNKIN HS	5 1	,	4	Υ		
				RT34P002	DUNKIN HS	5 2	,	4	Υ		
				RT34P003	DUNKIN HS	3	,	4	Υ		
				RT34P004	POST OFFI	CUNISEX BE	R /	4	Υ		
				UPSTREAM	WITHIN 5 S	SERVICE COI	N A	4			
00700 E	ENTRY PO	TNIC		3	ENTRY POI	NT	,	4			
54538 \	WELL #1			2	WELL #1		,	4			
61178	reatmi	ENT PLANT									
				Cor	ntact Info	rmation	1				
Name				О	rganization					Job Title	<u> </u>
Mr. Emanu	el Pinhei	iro		Fi	ifth Realty, L	LC			Owner		
Mailing Add	dress Line	e One		Mailing Addres	s Line Two				City	State	Zip Code
400 Washin	gton Str	eet						Westw	ood	MA	02090
Business	Phone	Extension	Fax	Mob	ile Phone	Emergency	y Phone	Email A	ddress		
203-993	-4420			781-	718-4971			manny	pinheiro@g	mail.com	
Contact Rol	e(s): Ac	dministrative (Contact, Leg	al Contact, Ow	ner						

Please note the following:

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	Connections	lanautus ant al	Dublic Health	Duinle	in a IAI	oton Co	ation		
			Public Health		_		ction		
		Quality Monit	oring and Com	-					
PWS ID	PWS Name		(lation Own			
CT0859074	588 MONROE TNPK			NC		!5	Р	GW	
	where applicable)		Service Residentia	al Comn	nercial In	idustrial	Combined	Agric	ultural
588 MONROE T			Connections				1		
Towns Served:	MONROE								
Matax Custom	Facility DICTRIBUTE		oring Requiremen	ts					
Total Coliforn	Facility: DISTRIBUTE n. (3100)	ON SYSTEM (WSF II	D: 00600)			1 rou	tine (RT)	ner au	arter
	n (3100) Point (Sampling Point ID))	Monitoring	n Period	Collecti	ion Period		iance St	
	n Inventory of Active San	-	4/1/25 - 6		Concen	ion i criou		mplete	
Sciect iron	in inventory of Active 3an	принд гоптез	7/1/25 - 9					mplete	
			10/1/25 - 1					mplete	
			1/1/26 - 3					picte	
			4/1/26 - 6						
Physical Para	meters (PPS)		7/1/20 0	730/20		1 rou	tine (RT)	ner au	arter
•	Point (Sampling Point ID))	Monitoring	a Period	Collecti	ion Period		iance St	
	n Inventory of Active San	•	4/1/25 - 6					mplete	
	,		7/1/25 - 9					mplete	
			10/1/25 - 1					mplete	
			1/1/26 - 3						
			4/1/26 - 6						
Water System	Facility: ENTRY POIN	NT (WSF ID: 00700)							
Nitrate And N	•	, ,				1	routine (F	≀T) per	vear
	Point (Sampling Point ID))	Monitoring	g Period	Collecti	ion Period		iance St	-
ENTRY POI	NT (3)	•	1/1/24 - 12			-		mplete	
			1/1/25 - 12					mplete	
			1/1/26 - 12	2/31/26					
	Wat	er System Facili	ity and Sampling F	oint I	nventoi	ry			
Water		-			Total	Lead and			
	er System Facility		Sampling Point		Coliform	Copper			Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2	? DBPR
00501 WEL		2	WELL 1	Α					
00600 DIST	RIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DDH001	NAIL SALON	Α	Υ		Υ		
		DDH002	RR FRONT	Α	Υ		Υ		
		DDH003	HAND SINK FRONT	Α	Υ		Υ		
		DDH004	MASSAGE ROOM	Α	Υ		Υ		
		DDH005	FACIAL ROOM	Α	Υ		Υ		
		DDH006	WAX ROOM NO 1	Α	Υ		Υ		
		DDH007	WAX ROOM NO 2	Α	Υ		Υ		
		DDH008	RR BACK	Α	Υ		Υ		
		DDH009	RR 1ST FL VIDEO PROD	Α	Υ		Υ		
		DDH010	RR 2ND FLOOR	Α	Υ		Υ		
			WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					

ENTRY POINT

Α

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3

00700 ENTRY POINT

	Water Quality Monitoring and Compliance Schedule												
PWS ID	PWS ID PWS Name					opulation	Owner Type	Primary Source					
CT0859074	CT0859074 588 MONROE TNPK						Р	GW					
Local Address (ocal Address (where applicable) Service Resid					l Industria	al Combine	ed Agricultural					

Connecticut Department of Public Health Drinking Water Section

588 MONROE TURNPIKE Towns Served: MONROE

Contact Information											
Name					Organization				Job Title		
Mr. Gaetano Marra	, Jr.				Marracorp Co	ommercial Holdings		Member			
Mailing Address Lin	e One		Mailing	Addr	ess Line Two		City	State	Zip Code		
588 Monroe Turnpi	ke						Monroe		СТ	06468	
Business Phone Extension Fax N					bile Phone	Emergency Phone	Email Ad	dress			
203-693-1185		203	3-627-8726		gaetano	marrahomes	@gmail.com				

Connections

Contact Role(s): Administrative Contact, Legal Contact

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End of schedule

1

Connecticut Departmen	nt of Public H	lealth I	Orinkin	g Water S	Section	
Water Quality M	onitoring and	d Comp	oliance	Schedule		
PWS ID PWS Name		С	lassification	Population O	wner Type Pri	mary Source
CT0859094 MONROE LITTLE LEAGUE BEARDSLEY	FIELDS		NC	25	L	GW
Local Address (where applicable)	Service	Residentia	ol Commerc	ial Industrial	Combined	Agricultural
67 CROSS HILL ROAD	Connections		1			
Towns Served: MONROE						
M	onitoring Requ	iremen	ts			
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)					
Total Coliform (3100)					routine (RT)	
Sampling Point (Sampling Point ID)	ı	Monitoring		Collection Perio	-	nce Status
Select from Inventory of Active Sampling Points		7/1/25 - 7,				nplete
		8/1/25 - 8,				nplete
		9/1/25 - 9,				nplete
		10/1/25 - 1			Con	nplete
		4/1/26 - 4				
		5/1/26 - 5, 6/1/26 - 6,				
Physical Parameters (PPS)		0/1/20 - 0/	/30/20	1	routine (RT)	nor month
Sampling Point (Sampling Point ID)		Monitoring	Period (L Collection Perio		nce Status
Select from Inventory of Active Sampling Points		7/1/25 - 7,				nplete
, , , , , , , , , , , , , , , , , , , ,		8/1/25 - 8,				nplete
		9/1/25 - 9				nplete
	-	10/1/25 - 10				nplete
		4/1/26 - 4	/30/26			
		5/1/26 - 5,	/31/26			
		6/1/26 - 6,	/30/26			
Water System Facility: ENTRY POINT (WSF ID: 0	0700)					
Nitrate And Nitrite (NOX)					1 routine (R	Γ) per year
Sampling Point (Sampling Point ID)	ı	Monitoring	Period (Collection Perio	od Complia	nce Status
ENTRY POINT (3)		1/1/24 - 12			Con	nplete
		1/1/25 - 12			Con	nplete
		1/1/26 - 12				
Oth	ner Compliance	Schedu	les			
Compliance Schedule Activity		Du	e Date	Achieve	ed Date	
RESPOND TO SANITARY SURVEY		8/2	29/2018			
RESPOND TO SANITARY SURVEY		5/-	4/2025			
Public	c Notification R	equiren	nents			
	Compliance	Notice	Public N	<u>lotification</u>	PN Certij	<u>fication</u>
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received
REVISED TOTAL COLIFORM RULE (RTCR) TT Violation	4/2/23 - 5/15/25	2	11/12/2023		11/22/2023	
REVISED TOTAL COLIFORM RULE (RTCR) TT Violation	4/2/24 - 5/15/25	2	9/5/2024		9/15/2024	
E. Coli M&R Violation	4/17/25 -	3	10/1/2026		10/11/2026	
Water System	Facility and Sar	npling P		-		
Water	Daint Committee D. 1	••		otal Lead ai		6.
System Water System Facility Sampling Facility ID ID	Point Sampling Point Description	π		liform Coppe Rule Rule Ti	r er Asbestos V	Stage
00600 DISTRIBUTION SYSTEM 4	DISTRIBUTION	I CYCTENA	<u>Status</u> A	nuie nuie II	ei wanealoa I	WAL Z DOLK
4	DISTRIBUTION	JIJILIVI				

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	Connectic	ut Dana	rtment o	f Public	Health	Drir	nking !	Mater	Sa	ction	
		•	lity Monit							Ction	
PWS ID P	WS Name	ter Qua	iity Moiii	toring a	nu Con					er Type Pi	imary Sourc
	IONROE LITTLE	LEΔGLIE REA	ARDSI EV EIEI DS	<u> </u>		N		25	OWI	I	GW
Local Address (who		LLAGOL DLA	INDSELT TILEDS	Service	Resident		mmercial	Industri	al	Combined	Agricultura
67 CROSS HILL ROA				Connection		ilai co	1	maastri	ai .	combined	Agriculture
Towns Served: MC							-				
Towns served. We		Mater S	stem Facil	ity and S	ampling	Poin	t Invon	tory			
*	System Facility		Sampling Point	Sampling P	Point	Politi	Tota Colifo	ıl Lead rm Cop _l	per		Stage
Facility ID			ID	Description	1	Sta	tus Rul	e Rule	Tier	Asbestos	WQP 2 DBF
			BF001	CONCESSIO	N STAND	A	Υ				
			DOWNSTREAM	WITHIN 5 S	ERVICE CON	A	4				
			UPSTREAM	WITHIN 5 S	ERVICE CON	<i> </i>	4				
00700 ENTRY I	POINT		3	ENTRY POI	NT	A	4				
58261 WELL			2	WELL		A	4				
			Cor	ntact Info	rmation						
Name			0	rganization						Job Title	
Little League Base	ball of Monroe	, Inc									
Mailing Address Li	ne One		Mailing Addres	s Line Two				City		State	Zip Code
PO Box 339							Monroe			СТ	06468
Business Phone	Extension	Fax	Mob	ile Phone	Emergency	Phone	Email Add	dress			
Contact Role(s):	Owner										
Name			0	rganization						Job Title	
Mr. Ryan Driscoll			Li	ttle League B	Beardsley			Past Presi	dent		
Mailing Address Li	ne One		Mailing Addres	s Line Two				City		State	Zip Code
PO Box 339							Monroe			CT	06468
Business Phone	Extension	Fax	Mob	ile Phone	Emergency	Phone	Email Add	dress			
			203-	858-0471			rdriscoll@	monroel	ittlele	eague.org	
Contact Role(s):	Administrative	Contact									
Name			0	rganization						Job Title	
Mr. Jonathan Dero	osa		N	1onroe Little	League			President			
Mailing Address Li	ne One		Mailing Addres	s Line Two				City		State	Zip Code
PO Box 339							Monroe			СТ	06468
Business Phone	Extension	Fax	Mob	ile Phone	Emergency	Phone	Email Add	dress			
781-910-0623							jderosa@	monroeli	ttlele	ague.org	
Contact Role(s): L	egal Contact										

Please note the following:

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- 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

Connecticut Department of Public			_			ction	
Water Quality Monitoring a	nd Con	-					
PWS ID PWS Name		Cla		-	Own		imary Source
CT0859104 241 ROOSEVELT DRIVE			NC	25		Р	GW
Local Address (where applicable) Service	Resider	ntial	Commerci	al Industria	al (Combined	Agricultural
Connection	15					1	
Towns Served: MONROE		_					
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)	quireme	ents	3				
Total Coliform (3100)					1 roı	ıtine (RT)	per month
Sampling Point (Sampling Point ID)	Monitor	ina F	Period C	ollection Pei			ance Status
Select from Inventory of Active Sampling Points	7/1/25				100		mplete
Select Hom inventory or recive sumpring Forms	8/1/25		-				mplete
	9/1/25						mplete
	10/1/25						mplete
	11/1/25						mplete
	12/1/25						•
	1/1/26	- 1/3	1/26				
	2/1/26	- 2/2	8/26				
	3/1/26	- 3/3	1/26				
	4/1/26	- 4/3	0/26				
	5/1/26	- 5/3	1/26				
	6/1/26	- 6/3	0/26				
Physical Parameters (PPS)					1 rou		per month
Sampling Point (Sampling Point ID)	Monitor			ollection Per	riod		ance Status
Select from Inventory of Active Sampling Points	7/1/25						mplete
	8/1/25						mplete
	9/1/25						mplete
	10/1/25						mplete
	11/1/25					Cor	mplete
	12/1/25						
	1/1/26						
	2/1/26						
	3/1/26 4/1/26						
	5/1/26						
	6/1/26						
Water System Facility: ENTRY POINT (WSF ID: 00700)	0/1/20	J/ 3	J 20				
Nitrate And Nitrite (NOX)					1 -	outino (P	T) per year
Sampling Point (Sampling Point ID)	Monitor	ina F	Period C	ollection Pei		-	ance Status
ENTRY POINT (3)	1/1/24 -						mplete
- V-1	1/1/25 -						mplete
	1/1/26 -						1
Other Complian							

3/1/2026

CROSS CONNECTION SURVEY REPORT

Schedule Generation Date: 12/12/2025 Page 33

	Water Quality Monitoring and Compliance Schedule												
PWS ID	VS ID PWS Name					Population	Owner Type	Primary Source					
CT0859104	59104 241 ROOSEVELT DRIVE					25	Р	GW					
Local Address	(where applicable)	Service	Residen	ntial	Commerci	al Industri	al Combin	ed Agricultural					
		Connections					1						

Connecticut Department of Public Health Drinking Water Section

Towns Served: MONROE

Water System Facility and Sampling Point Inventory												
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	WOP	Stage 2 DBPR			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A								
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α								
		HP005	HANDSINK 1	Α	Υ							
		HP007	COFFEE PREP	Α	Υ							
		HP009	3 BAY SINK	Α	Υ							
		HP010	MENS ROOM	Α	Υ							
		HP012	LADIES ROOM	Α	Υ							
		HP014	HANDSKIN 2	Α	Υ							
		UPSTREAM	WITHIN 5 SERVICE CON	Α								
00700	ENTRY POINT	3	ENTRY POINT	Α								
58501	WELL 2	2	WELL 2	Α		·	·					

Contact Information											
Name				Organization	1			Job Title			
Mr. Arthur Weeder	1			Pmg			Manager				
Mailing Address Line One Mailing Addr			Mailing Addr	ess Line Two			City	State	Zip Code		
2900 Telestar Ct						Falls Chu	rch	VA	22042		
Business Phone	Extension	Fax	Мо	bile Phone	Emergency Phone	Email Ad	dress				
508-725-6024						aweeder	@petromg.c	om			

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

	Connecticut Dep	artment of	Dublic F	[aalth	Dr	inki	nα V	Vate	or S	action	n		
	•	ality Monit					_			ectio	l I		
DIA/C ID		lanty Monit	ornig an	u Con						T	- D:		Caaa
PWS ID	PWS Name				Class	NC	on Pop		on Ov	vner Typ	e Pr	imary GV	
CT0859114	yhere applicable)		Service	Residen	tial (Comme	rcial	35 Indus	trial	L	204		ultural
Local Address (V	viiere арріісавіе)		Connections	Residen	tiai	COMMI	ciciai	iiiuus	uiai	1	ieu	Agric	uituiai
Towns Served: I	MONROF												
Towns Screed. I	VIONNOE	Monito	oring Requ	iromo	ntc								
Water System	Facility: DISTRIBUTION			meme	1115								
Total Coliforn	•		,						1 ro	utine (f	RT) r	er al	ıarter
	Point (Sampling Point ID)			Monitori	ing Pe	eriod	Colle	ction		_		ince S	
	n Inventory of Active Sampli	ng Points		4/1/25 -							_	nplete	
	· · ·			7/1/25 -								nplete	
				10/1/25 -								-	
				1/1/26 -	3/31	/26							
				4/1/26 -	6/30	/26							
Physical Para	meters (PPS)								1 ro	utine (F	RT) p	er qu	ıarter
Sampling I	Point (Sampling Point ID)			Monitori	ing Pe	eriod	Colle	ction	Period	d Cor	nplic	ince S	tatus
Select from	n Inventory of Active Sampli	ng Points		4/1/25 -	6/30	/25					Cor	nplete	j
				7/1/25 -	9/30	/25					Cor	nplete	j
				10/1/25 -	12/3	1/25							
				1/1/26 -	3/31	/26							
				4/1/26 -	6/30	/26							
Water System	Facility: ENTRY POINT	(WSF ID: 00700)											
Nitrate (1040	0)								1 ro	utine (F		-	
Sampling I	Point (Sampling Point ID)		_	Monitori	ing Pe	eriod	Colle	ction	Period	d Cor	nplic	ince S	tatus
ENTRY POI	NT (3)			4/1/25 -	6/30	/25					Cor	nplete	j
				7/1/25 -							Cor	nplete	<u>;</u>
				10/1/25 -									
				1/1/26 -									
				4/1/26 -	6/30	/26							
Nitrite (1041										L routin	-		-
	Point (Sampling Point ID)			Monitori			Colle	ction	Period	d Cor	•	ince S	
ENTRY POI	NT (3)			1/1/24 -	-	-						nplete	
				1/1/25 -							Cor	nplete	j
14/-161	E. III MELLA IMPEL	D (2000)		1/1/26 -	12/31	1/26							
-	Facility: WELL 1 (WSF I	D: 60098)							_				•
E. Coli (3014)				0 d = 14 =1	· D .		6-11-	-41		utine (f		-	
	Point (Sampling Point ID)			Monitori			Colle	ction	Period	1 Cor	_	ince S	
WELL 1 (2)				4/1/25 -	-	-						nplete	
				7/1/25 -							cor	nplete	:
				- 10/1/25 - 1/1/26									
				4/1/26 -									
	Matau	Custom Facili	tu and Car			-		o w -					
	water	System Facili	ty and Sar	npling	POI	nt in							
Water	er System Facility	Sampling Point	Camplina Doi	nt			Total		ad and				Cter-
System Water Facility ID	a system rucility		Description	16	_		Colifori Rule		opper ile Tie	r Asbes	tos		Stage 2 DBPR
-, -			•		<u> </u>	tatus							

	С	onnectic	ut Dep	artmer	nt of	f Public	Н	ealth	Dri	inki	ng V	Vat	ter S	ection	
		Wa	ter Qua	ality Mo	onit	coring a	no	d Com	pli	anc	e Scl	hed	dule		
PWS ID	PV	VS Name		- J		0 :			_					ner Type F	Primary Source
CT085911	4 50	0 PURDY HILL	ROAD							NC		35		L	GW
Local Add		re applicable)				Service		Residenti	al C	Comm	ercial		ustrial	Combined	Agricultura
	•					Connectio	ns							1	
Towns Se	rved: MO	NROE													
			Water 9	System F	acil	ity and S	an	npling I	Poi	nt In	vent	ory	•		
Water											Total		ead and	1	
System		ystem Facility			Point	Sampling I		t			Colifor		Copper		Stage
Facility II				ID		Description			Si	tatus	Rule		Rule Tie	r Asbestos	WQP 2 DBPI
00600	DISTRIB	UTION SYSTEM	1	4		DISTRIBUT				Α	Υ				
						WITHIN 5 S				Α					
				PH00		BUILD 1 DE				Α	Υ			Υ	
				PH00		BUILD 1 DE	NT	RR1		Α	Υ			Υ	
				PH00	3	BUILD 1 DE	ENT	RR2		Α	Υ			Y	
				PH00	4	BUILD 1 DE	NT	RR3		Α	Υ			Υ	
				PH00	5	BUILD 1 IN	S RF	R1		Α	Υ			Υ	
				PH00	6	BUILD 1 IN	S RF	₹2		Α	Υ			Υ	
				PH00	7	BUILD1 CN	1S 2	ND FL RR		Α	Υ			Υ	
				PH00	8	BUILD1 3R	D FL	STO RR		Α	Υ			Υ	
				PH00	9	BUILD2 EN	GIN	EERG RR1		Α	Υ			Υ	
				PH01	0	BUILD2 EN	GIN	EERG RR2	2	Α	Υ			Υ	
				PH01	1	BUILD2 CH	IRO	RR1		Α	Υ			Υ	
				PH01	2	BUILD2 CH	IRO	RR2		Α	Υ			Υ	
				PH01	3	B2 ENGIN I	KITC	CHEN		Α	Υ				
				UPSTRE	AM	WITHIN 5 S	SER\	/ICE CON		Α					
00700	ENTRY P	OINT		3		ENTRY POI	NT			Α					
60098	WELL 1			2		WELL 1				Α					
60413	TREATM	IENT PLANT													
					Con	tact Info	rn	nation							
Name					O	rganization								Job Title	
Mr. Thom	nas Diblas	i		-	Cł	narberry Squ	uare	Condo As	ssoc		Р	rope	erty Mar	nager	
Mailing A	ddress Lir	ie One		Mailing A	ddres	s Line Two						City		State	Zip Code
500 Purdy	Hill Road	l, Suite 10								Mo	nroe			СТ	06468
Busines	s Phone	Extension	Fax	(Mobi	ile Phone	Em	nergency I	Phon	e Em	ail Addı	ress			
203-45	2-1331	108	203-268	-8103			2	203-988-2	523	Tor	nD@Di	Blasi	-Engrs.c	com	
Contact R	ole(s): A	dministrative	Contact												
Name					O	rganization								Job Title	
Mr. Jon D	. Chadys				Cł	nararry Squa	re (Condo Ass	ос		Р	resio	dent		
Mailing A	ddress Lin	ie One		Mailing A	ddres	s Line Two						City		State	Zip Code
500 Purdy	Hill Rd.			Unit #3						Мо	nroe			СТ	06468
Busines	s Phone	Extension	Fax	(Mobi	ile Phone	Em	nergency l	Phon	e Em	ail Addı	ress			
203-45	2-0239									jdc	dmd@s	bcgl	obal.ne	t	
				-											

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Schedule Generation Date: 12/12/2025

Contact Role(s): Legal Contact

	Connection	cut Depa	rtment	of Public	Health	Drii	nking	g Water	Sec	tion		
	Wa	iter Qua	lity Mon	nitoring a	nd Con	nplia	nce S	Schedul	le			
PWS ID	PWS Name					Classif	ication	Population	Owne	r Type	Primary S	ource
Т0859114	500 PURDY HIL	L ROAD				Ν	IC	35	I	L	GW	
ocal Address (w	here applicable			Service	Residen	itial Co	mmerci	al Industri	al Co	ombine	ed Agricu	ltural
				Connection	ns					1		
owns Served: M	IONROE					,					,	
Name				Organization					J	ob Title	9	
Charbarry Squar	e Condominium	Association										
Mailing Address I	Line One		Mailing Add	ress Line Two				City		State	Zip Cod	de
00 Purdy Hill Rd			Unit #3				Monro	e		CT	06468	3
Business Phone	e Extension	Fax	M	obile Phone	Emergency	/ Phone	Email A	Address				
203-452-0239							jdcdmo	l@sbcgloba	l.net			
Contact Role(s):	Owner	•	•	1			•					

Contact Noie(3). Owner

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End of schedule

		Connecticut Dej Water Ou	partment of lality Monit								ction		
PWS ID		PWS Name	tarrey 1-10111e		4 0011	_	ification				ner Type	Primar	v Source
CT085913	4	GREAT HOLLOW LAKE				0.0.00	NC		35		L		W
		vhere applicable)		Service	Residen	tial (Comm	ercial	Industri	ial	Combine		icultural
454 PURD				Connections							4	- 1.0	
Towns Ser	ved: N	MONROE											
			Monito	oring Requ	ireme	nts							
Water Sy	stem	Facility: DISTRIBUTION											
Total Col	liforn	n (3100)								1 ro	utine (R	T) per	month
Samp	oling F	Point (Sampling Point ID)			Monitori	ng Pe	riod	Colle	ection Pe	riod	Comp	oliance	Status
Selec	t fron	Inventory of Active Sampl	ing Points		7/1/25 -	7/31	/25				(Comple	te
					8/1/25 -	8/31	/25				(Comple	te
					9/1/25 -	9/30	/25				(Comple	te
					10/1/25 -	10/3	1/25						
					4/1/26 -	4/30	/26						
					5/1/26 -	5/31	/26						
					6/1/26 -	6/30	/26						
Physical	Para	meters (PPS)								1 ro	utine (R	T) per	month
Samp	oling F	Point (Sampling Point ID)			Monitori	ng Pe	riod	Colle	ction Pe	riod	Comp	oliance	Status
Selec	t from	Inventory of Active Sampl	ing Points		7/1/25 -	7/31	/25					Comple	te
					8/1/25 -	8/31	/25				(Comple	te
					9/1/25 -	9/30	/25				(Comple	te
				í	10/1/25 -	10/3	1/25						
					4/1/26 -	4/30	/26						
					5/1/26 -	5/31	/26						
					6/1/26 -	6/30	/26						
Water Sy:	stem	Facility: ENTRY POINT	(WSF ID: 00700)										
Nitrate A	And N	itrite (NOX)								1	routine	(RT) pe	er vear
		Point (Sampling Point ID)			Monitori	ng Pe	riod	Colle	ction Pe		Comp		-
		NT (3)			1/1/24 -							Comple	
		. ,			1/1/25 -							Comple	
					1/1/26 -								
Water Sy:	stem	Facility: WELL 1	(WS	F ID: 61004)	, .	<u>, </u>	•						
E. Coli (3	3014)	·								1 ro	utine (R	T) per	month
-	-	Point (Sampling Point ID)			Monitori	ng Pe	riod	Colle	ction Pe		-	oliance	
WELL	1 (2)				7/1/25 -							Comple	
	. ,				8/1/25 -							Comple	
					9/1/25 -							Comple	
					10/1/25 -								
					4/1/26 -								
					5/1/26 -								
					6/1/26 -								
		Water	System Facili	ity and Sar				vent	ory				
Water System		er System Facility	Sampling Point		nt			Total Colifor	т Сор	per			Stage
Facility ID			ID	Description			tatus	Rule	Rule	Tier	Asbesto	s WQP	2 DBPR
00600	DIST	RIBUTION SYSTEM	4	DISTRIBUTION	SYSTEM		Α	Υ					

	Water Quality Monit	oring an	d Con	npl	iance S	Schedul	le	
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
СТ0859134	GREAT HOLLOW LAKE				NC	35	L	GW
Local Address	(where applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	d Agricultural
454 PURDY HI	LL	Connections					4	

Connecticut Department of Public Health Drinking Water Section

Towns Served: MONROE

	Wate	er System Facili	ity and Sampling P	oint Ir	nventoi	у			
Water					Total	Lead and			
System Wa	ater System Facility	Sampling Point	Sampling Point		Coliform	Copper			Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		GHL001	LADIES ROM	Α	Υ				
		GHL002	SLOP SINK GARAGE	Α	Υ				
		GHL003	HAND SINK	Α	Υ				
		GHL004	MENS RR	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700 EN	TRY POINT	3	ENTRY POINT	Α					
61004 WE	ELL 1	2	WELL 1	Α					
62957 TRE	FΔTMFNT PI ΔNT - I IV								

			Co	ontact Inf	ormation						
Name				Organization		Job Title					
Mr. Terrence Roon	ey .			Town of Mor	roe		First Selectr	man			
Mailing Address Line One Mailing Addr				ess Line Two		City		State	Zip Code		
7 Fan Hill Rd						Monroe		СТ	06468		
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	dress				
203-452-2821						Firstsele	Firstselectman@monroect.gov				

Contact Role(s): Administrative Contact, Legal Contact

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

	nnecticut Depa	rtment o	of Public	Health	Drii	nking	Water	Sect	ion	
	Water Qua	lity Moni	toring a	nd Com	nolia	nce So	chedul	e		
PWS ID PWS	Name		0011110						Type P	rimary Source
	MONROE TURNPIKE, LL	LC				IC	45	Р	7,50	GW
Local Address (where			Service	Resident	tial Co	mmercial	Industri	al Coi	nbined	Agricultural
1565 MONROE TURNI			Connection			1				8 11 11
Towns Served: MONR										
		Moni	toring Rec	quireme	nts					
Water System Facili	ity: DISTRIBUTION SY									
Total Coliform (31	.00)						1	routin	e (RT)	per quarter
Sampling Point ((Sampling Point ID)			Monitorii	ng Peri	od Col	lection Pe	riod	Compl	iance Status
Select from Inver	ntory of Active Sampling	Points		4/1/25 -	6/30/2	25			Co	mplete
				7/1/25 -	9/30/2	25			Co	mplete
				10/1/25 -	12/31/	/25				
				1/1/26 -	3/31/2	26				
				4/1/26 -	6/30/2	26				
Physical Parameter	rs (PPS)						1	routin	e (RT)	per quarter
Sampling Point ((Sampling Point ID)			Monitorii	ng Peri	od Col	lection Pe	riod	Compl	iance Status
Select from Inver	ntory of Active Sampling	Points		4/1/25 -	6/30/2	!5			Cc	mplete
				7/1/25 -	9/30/2	25			Cc	mplete
				10/1/25 -	12/31/	′ 25				
				1/1/26 -	3/31/2	26				
				4/1/26 -	6/30/2	26				
Water System Facili	ity: ENTRY POINT (W	/SF ID: 00700)							
Nitrate And Nitrite	· (NOX)							1 rou	ıtine (F	RT) per year
Sampling Point ((Sampling Point ID)			Monitorii	ng Peri	od Col	lection Pe	riod	Compl	iance Status
ENTRY POINT (3)	1			1/1/24 - 1	12/31/	24			Co	mplete
				1/1/25 - 3	12/31/	25			Co	mplete
				1/1/26 - 3	12/31/	26				
				-/ -/						
	Water Sy	ystem Faci	lity and Sa		Poin	t Inven	tory			
Water				ampling	Poin	Tota	al Lead			
System Water Syst		Sampling Poin	t Sampling P	ampling	Poin	Toto Colife	al Lead orm Copp	per		Stage
System Water Syst Facility ID	tem Facility	Sampling Poin ID	t Sampling Po Description	ampling	Sto	Toto Colifo Itus Rui	al Lead orm Copp le Rule	per	bestos	Stage WQP 2 DBPR
System Water Syst Facility ID	ION SYSTEM	Sampling Poin ID 4	t Sampling Po Description	oint ON SYSTEM	Sto	Toto Colifo Itus Rui A Y	al Lead orm Copp le Rule	per	bestos	_
System Water Syst Facility ID	ION SYSTEM	Sampling Poin ID 4 DOWNSTREAN	t Sampling Po Description DISTRIBUTION WITHIN 5 SI	oint ON SYSTEM ERVICE CON	Sto	Tote Colife atus Rui A Y A Y	al Lead orm Copp le Rule	per	bestos	
System Water System Facility ID 00600 DISTRIBUT	ION SYSTEM	Sampling Poin ID 4 DOWNSTREAN UPSTREAM	t Sampling Po Description DISTRIBUTION WITHIN 5 SI WITHIN 5 SI	ampling oint ON SYSTEM ERVICE CON	Sto	Tota Colife A Y A Y A Y	al Lead orm Copp le Rule	per	bestos	
System Water System Facility ID 00600 DISTRIBUTE 00700 ENTRY POI	ION SYSTEM	Sampling Poin ID 4 DOWNSTREAN UPSTREAM 3	DISTRIBUTION WITHIN 5 SI WITHIN 5 SI ENTRY POIN	ampling oint ON SYSTEM ERVICE CON	Sto	Tota Colifd A Y A Y A Y	al Lead orm Copp le Rule	per	bestos	
System Water System Facility ID 00600 DISTRIBUTE 00700 ENTRY POI 62819 WELL 1	ION SYSTEM	Sampling Poin ID 4 DOWNSTREAN UPSTREAM	t Sampling Po Description DISTRIBUTION WITHIN 5 SI WITHIN 5 SI	ampling oint ON SYSTEM ERVICE CON	Sto	Tota Colife A Y A Y A Y	al Lead orm Copp le Rule	per	bestos	_
System Water System Facility ID 00600 DISTRIBUTE 00700 ENTRY POI	ION SYSTEM	Sampling Poin ID 4 DOWNSTREAN UPSTREAM 3	DISTRIBUTION WITHIN 5 SI WITHIN 5 SI ENTRY POIN	ampling oint ON SYSTEM ERVICE CON	Sto	Tota Colifd A Y A Y A Y	al Lead orm Copp le Rule	per	bestos	
System Water System Facility ID 00600 DISTRIBUTE 00700 ENTRY POI 62819 WELL 1	ION SYSTEM	Sampling Poin ID 4 DOWNSTREAN UPSTREAM 3	DISTRIBUTION WITHIN 5 SI WITHIN 5 SI ENTRY POIN	oint ON SYSTEM ERVICE CON ERVICE CON	Sto	Tota Colifd A Y A Y A Y	al Lead orm Copp le Rule	per	bestos	
System Water System Facility ID 00600 DISTRIBUTE 00700 ENTRY POI 62819 WELL 1	ION SYSTEM	Sampling Poin ID 4 DOWNSTREAM UPSTREAM 3 2	DISTRIBUTION M WITHIN 5 SI WITHIN 5 SI ENTRY POIN WELL 1	oint ON SYSTEM ERVICE CON ERVICE CON	Sto	Tota Colifd A Y A Y A Y	al Lead orm Copp le Rule	per Tier As	<i>bestos</i> b Title	
System Water System Facility ID 00600 DISTRIBUTE 00700 ENTRY POI 62819 WELL 1 62824 TREATMEN	ION SYSTEM	Sampling Poin ID 4 DOWNSTREAM UPSTREAM 3 2	DISTRIBUTION WITHIN 5 SI WITHIN 5 SI ENTRY POIN WELL 1	oint ON SYSTEM ERVICE CON ERVICE CON T	Sta	Tota Colifd A Y A Y A Y	al Lead orm Copp le Rule	per Tier As		
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System Water System Facility ID 00600 DISTRIBUTE 00700 ENTRY POI 62819 WELL 1 62824 TREATMEN Name Mr. Anthony Galbo	TION SYSTEM INT	Sampling Poin ID 4 DOWNSTREAM UPSTREAM 3 2	DISTRIBUTION WITHIN 5 SI WITHIN 5 SI ENTRY POIN WELL 1 ntact Info Drganization L565 Monroe	oint ON SYSTEM ERVICE CON ERVICE CON T	Sta	Tota Colifd A Y A Y A Y	al Lead orm Copp le Rule	Jo	b Title	WQP 2 DBPR
System Water System Facility ID 00600 DISTRIBUTE 00700 ENTRY POI 62819 WELL 1 62824 TREATMEN Name Mr. Anthony Galbo Mailing Address Line (193 Sturgess Road)	TION SYSTEM INT	Sampling Poin ID 4 DOWNSTREAM UPSTREAM 3 2 Col Mailing Addre	DESCRIPTION DISTRIBUTION WITHIN 5 SI WITHIN 5 SI ENTRY POIN WELL 1 That Info Drganization US65 Monroe USS Line Two	oint ON SYSTEM ERVICE CON ERVICE CON T	Sta	Tota Colifo A Y A Y A Y A A Fairfield	al Lead orm Copp le Rule	Jo	b Title	WQP 2 DBPR

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

				0		1			
PWS ID	PWS Name					Classification	Population	Owner Type	Primary Source
СТ0859144	1565 MONROE TURN	PIKE, LLC	:			NC	45	Р	GW
Local Address (v	vhere applicable)			Service	Residen	itial Commerci	ial Industri	ial Combine	ed Agricultural
1565 MONROE	TURNPIKE			Connections		1			
Towns Served: N	MONROE								

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