

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0878011	BREEZY KNOLL ASSOCIATION	C	100	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		25			Agricultural

Towns Served: LITCHFIELD, MORRIS

Monitoring Requirements

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

Asbestos (1094)	1 routine (RT) per nine years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/31		
Total Coliform (3100)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Lead And Copper (PBCU)	5 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/28	6/1-9/30	
	1/1/29 - 12/31/31	6/1-9/30	
Physical Parameters (PPS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

Net Gross Alpha (4000)	1 routine (RT) per six years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/20 - 12/31/25		Complete
	1/1/26 - 12/31/31		
Uranium (4006)	1 routine (RT) per six years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/20 - 12/31/25		Complete
	1/1/26 - 12/31/31		
Combined Radium-226/228 (4010)	1 routine (RT) per six years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/20 - 12/31/25		Complete
	1/1/26 - 12/31/31		
Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		
Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0878011	BREEZY KNOLL ASSOCIATION	C	100	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: LITCHFIELD, MORRIS

Monitoring Requirements

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

Nitrate And Nitrite (NOX)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
		1/1/26 - 12/31/26		
		1/1/27 - 12/31/27		
Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/23 - 12/31/25		Complete
		1/1/26 - 12/31/28		
		1/1/29 - 12/31/31		
Organic Chemicals (VOCS)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/24 - 12/31/26		
		1/1/27 - 12/31/29		

Water System Facility: WELL 1 (WSF ID: 1544)

E. Coli (3014)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)		7/1/25 - 9/30/25		Complete
		10/1/25 - 12/31/25		Complete
		1/1/26 - 3/31/26		
		4/1/26 - 6/30/26		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION EXEMPTION		3/1/2030

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and	Stage
					Coliform Rule	Copper Rule Tier	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		BREEZY001	BREEZY400	A	Y	3	
		BREEZY002	BREEZY402	A	Y	3	
		BREEZY003	BREEZY404	A	Y	3	Y
		BREEZY004	BREEZY406	A	Y	3	
		BREEZY005	BREEZY408	A	Y	3	
		BREEZY006	BREEZY410	A	Y	3	
		BREEZY007	BREEZY412	A	Y	3	
		BREEZY008	BREEZY414	A	Y	3	
		BREEZY009	BREEZY416	A	Y	3	
		BREEZY010	BREEZY418	A	Y	3	
		BREEZY011	BREEZY420	A	Y	3	

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0878011	BREEZY KNOLL ASSOCIATION	C	100	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
	25				

Towns Served: LITCHFIELD, MORRIS

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
					Rule			
	BREEZY012	BREEZY422		A	Y	3		
	BREEZY013	BREEZY424		A	Y	3		
	BREEZY014	BREEZY426		A	Y	3		
	BREEZY015	BREEZY428		A	Y	3		
	BREEZY016	BREEZY430		A	Y	3		
	BREEZY017	BREEZY432		A	Y	3		
	BREEZY018	BREEZY434		A	Y	3		
	BREEZY019	BREEZY436		A	Y	3		
	BREEZY020	BREEZY443		A	Y	3		
	BREEZY021	BREEZY KNOLL RD 7		A	Y	3		
	BREEZY022	BREEZY KNOLL RD 3		A	Y	3		
	BREEZY023	BREEZY KNOLL RD 5		A	Y	3		
	BREEZY024	BREEZY KNOLL RD 9		A	Y	3		
	BREEZY025	SPERLING CAMP DAVID		A	Y	3		
	DOWNSTREAM	WITHIN 5 SERVICE CON		A				
	UPSTREAM	WITHIN 5 SERVICE CON		A				
00700	ENTRY POINT	3	ENTRY POINT	A				
1544	WELL 1	2	WELL	A				
47131	PRESSURE TANK							

Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM	Certification Expiration	
Operator Name	Operator Type	Certification(s)	
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2026 6/30/2026
CROWNSHAW, MICHAEL L	ASSIGNED OPERATOR	SMALL WATER SYSTEM OPERATOR	3/31/2028

Contact Information

Name	Organization	Job Title			
Mr. Robert Maddox		Water Contact			
Mailing Address Line One		Mailing Address Line Two	City	State	Zip Code
300 Flax Hill Road #11			Norwalk	CT	06854
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
917-856-3589					water@breezyknoll.org

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

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0878011	BREEZY KNOLL ASSOCIATION	C	100	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		25			Agricultural

Towns Served: LITCHFIELD, MORRIS

Name	Organization	Job Title		
Mr. Steve Friedman		Treasurer		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
890 West End Avenue #11B		New York	NY	10025
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
917-689-7462				Email Address treasurer@breezyknoll.org

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

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

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

End of schedule

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0878021	ELDRIDGE ELDERLY HOUSING	C	40	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
109 EAST ST (RT 109)	Connections	21			

Towns Served: MORRIS

Monitoring Requirements

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

Asbestos (1094)	1 routine (RT) per nine years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/22 - 12/31/30		
Total Coliform (3100)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Lead And Copper (PBCU)	5 routine (RT) per six months		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 12/31/25		Complete
	1/1/26 - 6/30/26		
	7/1/26 - 12/31/26		
Physical Parameters (PPS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Water System Facility: **ENTRY POINT - WELLS 2, 3, & 4** (WSF ID: 00700)

Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - WELLS 2, 3, & 4 (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - WELLS 2, 3, & 4 (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
Radionuclides - Gross Alpha, Combined Radium & Uranium (RADA)	1 routine (RT) per six years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - WELLS 2, 3, & 4 (3)	1/1/23 - 12/31/28		
Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - WELLS 2, 3, & 4 (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0878021	ELDRIDGE ELDERLY HOUSING	C	40	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
109 EAST ST (RT 109)		21			

Towns Served: MORRIS

Monitoring Requirements

Water System Facility: ENTRY POINT - WELLS 2, 3, & 4 (WSF ID: 00700)

Organic Chemicals (VOCS)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELLS 2, 3, & 4 (3)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	3/7/2020	
SUBMIT FISCAL AND ASSET MANAGEMENT CERT	1/1/2021	
RESPOND TO SANITARY SURVEY	2/24/2024	
SUBMIT CCR TO THE DEPARTMENT	6/30/2024	
SUBMIT CCR CERTIFICATION FORM	8/9/2024	
SUBMIT CCR TO THE DEPARTMENT	6/30/2025	
SUBMIT CCR CERTIFICATION FORM	8/9/2025	
CROSS CONNECTION SURVEY REPORT	3/1/2026	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2026	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper	Asbestos	WQP 2	DBPR	Stage
					Coliform Rule	Copper Rule Tier					
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y						
		DOWNSTREAM	WITHIN 5 SERVICE CON	A							
		ELD001	SENIOR CTR KITCHEN	A	Y		N				
		ELD002	UNIT #1	A	Y		N				
		ELD003	UNIT #5	A	Y		N				
		ELD004	UNIT #15	A	Y		N				
		ELD005	UNIT #17	A	Y		N				
		ELD006	UNIT #21	A	Y		N				
		ELD007	MENS BATH LEFT SINK	A							
		ELD008	MENS BATH SINK RIGHT	A							
		ELD009	DRINKING FOUNTAIN	A	Y		N				
		ELD010	WOMEN BATH SINK LEFT	A							
00700	ENTRY POINT - WELLS 2, 3, & 4	ELD011	WOMEN BATH SINK RIGH	A							
		ELD012	UTILITY SINK	A	Y		N				
		UPSTREAM	WITHIN 5 SERVICE CON	A							
1543	WELL 2	3	EP - WELLS 2, 3, & 4	A							
50951	ATMOSPHERIC STORAGE	2	WELL 2	A							

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0878021	ELDRIDGE ELDERLY HOUSING	C	40	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
109 EAST ST (RT 109)		21			

Towns Served: MORRIS

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper Rule	Asbestos Rule Tier	Stage WQP 2	DBPR
					Coliform	Copper Rule	Asbestos Rule Tier	Stage WQP 2	DBPR	
50956	TREATMENT PLANT									
55144	WELL 3	2	WELL 3	A						
59706	WELL 4	2	WELL 4	A						

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 50956)

Facility Classification:	CLASS 1 TREATMENT PLANT			Certification Expiration
Operator Name	Operator Type	Certification(s)		
GRELA, GEORGE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	9/30/2026	

Contact Information

Name	Organization	Job Title		
Mr. Tom Weik	Town of Morris	First Selectman		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
Morris Community Hall	3 East Street, P.O. Box 66	Morris	CT	06763-0066
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-567-7430		860-567-7432		1stselectman@morrisct.gov

Contact Role(s): Administrative Contact, Legal Contact

Name	Organization	Job Title		
Town of Morris Elderly Housing				
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
109 East Street		Morris	CT	06763
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
				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

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

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

End of schedule

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