

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0970372	CURTIS PACKAGING	NTNC	180	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
44 BERKSHIRE ROAD		1			

Towns Served: NEWTOWN

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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	1/1/20 - 12/31/28		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<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
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per month</b>		
<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	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		
<b>Total Coliform (3100)</b>	<b>3 repeat (RP) per period</b>		
<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	9/4/25 - 9/9/25		Complete
	10/8/25 - 10/13/25		Complete
	10/8/25 - 10/13/25		
	10/8/25 - 10/13/25		
	11/12/25 - 11/17/25		
	11/12/25 - 11/17/25		
	11/12/25 - 11/17/25		
	12/17/25 - 12/22/25		Complete
<b>Total Coliform (3100)</b>	<b>3 temporary routine (TR) per month</b>		
<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	10/1/25 - 10/31/25		Complete
<b>Lead And Copper (PBCU)</b>	<b>5 routine (RT) per year</b>		
<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	1/1/25 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/26	6/1-9/30	
	1/1/27 - 12/31/27	6/1-9/30	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>		
<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
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per month</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>

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## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0970372	CURTIS PACKAGING	NTNC	180	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
44 BERKSHIRE ROAD	Connections	1			

Towns Served: NEWTOWN

### Monitoring Requirements

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

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/25 - 11/30/25		
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Water System Facility: **ENTRY POINT - HILL WELL** (WSF ID: 00701)

Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - HILL WELL (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		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - HILL WELL (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)	1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - HILL WELL (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

Organic Chemicals (VOCS)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - HILL WELL (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Water System Facility: **HILL WELL** (WSF ID: 55537)

E. Coli (3014)	1 triggered (TG) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
HILL WELL (2)	9/3/25 - 9/9/25		Complete
	10/7/25 - 10/13/25		Complete
	10/7/25 - 10/13/25		
	10/7/25 - 10/13/25		

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0970372	CURTIS PACKAGING	NTNC	180	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
44 BERKSHIRE ROAD	Connections	1			

Towns Served: NEWTOWN

### Monitoring Requirements

Water System Facility: HILL WELL (WSF ID: 55537)

E. Coli (3014)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
		11/11/25 - 11/17/25		Complete
		11/11/25 - 11/17/25		
		11/11/25 - 11/17/25		
		12/16/25 - 12/22/25		Complete

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
L2 ASSESSMENT (MULTIPLE TC+, 2ND IN 12M)	1/23/2026	
CROSS CONNECTION SURVEY REPORT	3/1/2026	

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and	Stage
					Coliform Rule	Copper Rule Tier	
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		GW5001	MENS SHOP BATH	A	Y	2	Y
		GW5002	WOMENS SHOP BATH	A	Y	2	
		GW5003	LOWER OFFICE BATH	A	Y	2	
		GW5004	UPPER MENS BATH	A	Y	2	
		GW5005	UPPER WOMENS BATH	A	Y	2	
		GWS001	MENS SHOP BATH	I	Y		
		GWS002	WOMENS SHOP BATH	I	Y		
		GWS003	LOWER OFFICE BATH	I	Y		
		GWS004	UPPER MENS BATH	I	Y		
		GWS005	UPPER WOMENS BATH	I	Y		
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00701	ENTRY POINT - HILL WELL	3	EP - HILL WELL	A			
55537	HILL WELL	2	HILL WELL	A			

### Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM	Certification Expiration
Operator Name	Operator Type	Certification(s)
LEMKE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II

### Contact Information

Name	Organization	Job Title		
Mr. Donald R. Droppo, Jr	Curtis Packaging	Owner		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
44 Berkshire Road		Sandy Hook	CT	06482

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0970372	CURTIS PACKAGING	NTNC	180	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
44 BERKSHIRE ROAD		1			

Towns Served: NEWTOWN

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-426-5861		203-426-2684		203-264-9795	dondropo@curtispackaging.com

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

Name	Organization	Job Title		
Mr. Robert Knapp	Curtis Packaging	Quality Engineer		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
44 Berkshire Rd		Sandy Hook	CT	06482
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-270-5711				203-240-6476
				rknapp@curtispackaging.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

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

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

**End of schedule**

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0970462	HOUSATONIC VALLEY WALDORF SCHOOL ECC-RED	NTNC	55	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
40 DODGINGTOWN ROAD	Connections	1			

Towns Served: NEWTOWN

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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	1/1/20 - 12/31/28		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per month</b>		
<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	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		
<b>Lead And Copper (PBCU)</b>	<b>5 routine (RT) per year</b>		
<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	1/1/25 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/26	6/1-9/30	
	1/1/27 - 12/31/27	6/1-9/30	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per month</b>		
<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	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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

<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0970462	HOUSATONIC VALLEY WALDORF SCHOOL ECC-RED	NTNC	55	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
40 DODGINTOWN ROAD	Connections	1			

Towns Served: NEWTOWN

### Monitoring Requirements

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

Inorganic Chemicals (IOCS)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
		1/1/26 - 12/31/28		
		1/1/29 - 12/31/31		
Nitrate And Nitrite (NOX)			1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete	
	1/1/26 - 12/31/26			
	1/1/27 - 12/31/27			
Pesticides, Herbicides and PCBs-Phase II (SOC2)			1 routine (RT) per three years	
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			
Pesticides, Herbicides and PCBs-Phase V (SOC5)			1 routine (RT) per three years	
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)			1 routine (RT) per three years	
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			

### Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7 PH	4
Start Date: 1/1/2015		Compliance History:	
		Monitoring Period	Operating Limit
			Monitoring Compliance Status:
		8/1/2025 - 8/31/2025	Compliance Status:
		9/1/2025 - 9/30/2025	
		10/1/2025 - 10/31/2025	
		11/1/2025 - 11/30/2025	
		12/1/2025 - 12/31/2025	

### Other Compliance Schedules

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0970462	HOUSATONIC VALLEY WALDORF SCHOOL ECC-RED	NTNC	55	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
40 DODGINTOWN ROAD	Connections	1			

Towns Served: NEWTOWN

## 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	Stage DBPR
					Rule	Rule Tier				
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y					
		DOWNSTREAM	WITHIN 5 SERVICE CON	A						
		DRED007	SUNFLOWER BATHROOM	A	Y	N				
		DRED008	MAIN FLOOR BATHROOM	A	Y	N				
		DRED009	KITCHEN ISLAND SINK	A	Y	N				
		DRED010	KITCHEN COUNTER SINK	A	Y	N				
		DRED011	BLUEBELL BATHROOM	A	Y	N				
00700	ENTRY POINT	UPSTREAM	WITHIN 5 SERVICE CON	A						
		3	ENTRY POINT	A						
10470	WELL	2	WELL	A						
45142	WATER TREATMENT									
56522	ATMOSPHERIC TANKS									
56524	BOOSTER PUMPS									

## Certified Operator Information

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

**Facility Classification:** SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
LEMKE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2027

## Contact Information

Name	Organization	Job Title
Mr. Naveen Terway	Waldorf School	Treasurer
Mailing Address Line One	Mailing Address Line Two	City
40 Dodgingtown Road		State
Business Phone	Extension	Zip Code
203-364-1113	103	203-361-0603
Mobile Phone	Emergency Phone	Email Address
		office@waldorfct.org

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

Name	Organization	Job Title
Mr. Alexander Volage	Housatonic Valley Waldorf Schl	Facilities Manager
Mailing Address Line One	Mailing Address Line Two	City
40 Dodgintown Road		State
Business Phone	Extension	Zip Code
203-364-1113	105	06470
Mobile Phone	Emergency Phone	Email Address
		AVOLAGE@WALDORFCT.ORG

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

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

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
<b>CT0970462</b>	<b>HOUSATONIC VALLEY WALDORF SCHOOL ECC-RED</b>			NTNC	55	P	GW
Local Address (where applicable)		Service	Residential	Commercial	Industrial	Combined	Agricultural
40 DODGINGTOWN ROAD		Connections	1				

Towns Served: NEWTOWN

**Please note the following:**

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

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

**End of schedule**

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0975033	HEAD O MEADOW ELEMENTARY SCHOOL	NTNC	506	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
94 BOGGS HILL ROAD	Connections	1			

Towns Served: NEWTOWN

### Monitoring Requirements

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

<b>Chlorine Residual (1012)</b>	<b>1 routine (RT) per quarter</b>		
<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
<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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	1/1/20 - 12/31/28		Complete
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<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		
<b>Disinfectant Byproducts - TTHM &amp; HAA5 (DBP)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
CRS RM 415 (HOM020)	1/1/25 - 12/31/25	8/1-8/31	Complete
	1/1/26 - 12/31/26	8/1-8/31	
	1/1/27 - 12/31/27	8/1-8/31	
<b>Lead And Copper (PBCU)</b>	<b>10 routine (RT) per three years</b>		
<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	1/1/25 - 12/31/27	6/1-9/30	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>		
<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)

<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0975033	HEAD O MEADOW ELEMENTARY SCHOOL	NTNC	506	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
94 BOGGS HILL ROAD	Connections	1			

Towns Served: NEWTOWN

**Monitoring Requirements**

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

Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			
Pesticides, Herbicides and PCBs-Phase V (SOC5)			1 routine (RT) per three years	
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)			1 routine (RT) per three years	
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			

Water System Facility: **WELL #3 (WSF ID: 10471)**

E. Coli (3014)		1 routine (RT) per quarter		
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			

Water System Facility: **WELL #4 (WSF ID: 10472)**

E. Coli (3014)		1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL 1 (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			

**Monthly Water System Facility (WSF) Level Monitoring Requirements**

Water System Facility: **ENTRY POINT (WSFID: 00700)**

Analyte	Monitoring Requirement (Summary Type)	Operating Limit		Samples Req/Month	
		Minimum:	0.2 MG/L	Daily	
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)				
Start Date: 8/1/2004		Compliance History:	Monitoring Period	Operating Limit	Monitoring
			8/1/2025 - 8/31/2025	Compliance Status:	Compliance Status:
			9/1/2025 - 9/30/2025		
			10/1/2025 - 10/31/2025		
			11/1/2025 - 11/30/2025		
			12/1/2025 - 12/31/2025		

*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
CT0975033	HEAD O MEADOW ELEMENTARY SCHOOL	NTNC	506	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
94 BOGGS HILL ROAD	Connections	1			

Towns Served: NEWTOWN

**Other Compliance Schedules**

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

**Water System Facility and Sampling Point Inventory**

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper	Asbestos	WQP 2	DBPR Stage
					Coliform Rule	Rule Tier				
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y					
		DOWNSTREAM	WITHIN 5 SERVICE CON	A						
		HOM001	K HAND SINK	A	Y	1				
		HOM002	K TRPL SINK L	A	Y	1				
		HOM003	K TRPL SINK M	A	Y	1				
		HOM004	K TRPL SINK R	A	Y	1				
		HOM005	WF CAF	A	Y	1				
		HOM006	NURSES SINK	A	Y	1				
		HOM007	WF BY NURSES OFF	A	Y	1				
		HOM008	FAC RM SINK	A	Y	1				
		HOM009	WF BY GYM	A	Y	1				
		HOM010	CRWF RM 318	A	Y	1				
		HOM011	CRWF RM 406	A	Y	1				
		HOM012	CRWF RM 212	A	Y	1				
		HOM013	G RM R SINK RM 410	A	Y	1				
		HOM014	G RM L SINK RM 410	A	Y	1				
		HOM015	CRS RM 401A	A	Y	1				
		HOM016	CRS RM 403	A	Y	1				
		HOM017	PRINC OFFICE	A	Y	1				
		HOM018	RM 401 HALL SINK	A	Y	1				
		HOM019	MATH/SCI AREA	A	Y	1				
		HOM020	CRS RM 415	A	Y	1				
		HOM021	BOILER ROOM 127	A	Y	N				Y
		UPSTREAM	WITHIN 5 SERVICE CON	A						
00700	ENTRY POINT	3	ENTRY POINT	A						
10471	WELL #3	2	WELL	A						
10472	WELL #4	2	WELL 1	A						
1407	HEAD O MEADOW TREATMENT PLANT									
54286	ATMOSPHERIC STORAGE									
59071	PUMP FACILITY									

**Certified Operator Information**

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0975033	HEAD O MEADOW ELEMENTARY SCHOOL	NTNC	506	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
94 BOGGS HILL ROAD	Connections	1			

Towns Served: NEWTOWN

## Certified Operator Information

Water System Facility: HEAD O MEADOW TREATMENT PLANT (WSF ID: 1407)

**Facility Classification:** CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
GRANT, SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2026 9/30/2026
PETITTI, ANDY	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2028 12/31/2028

## Contact Information

Name	Organization	Job Title		
Mr. John Barlow	Newtown Public Schools	Dir. of Facilities		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
3 Primrose Street		Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Email Address
203-426-7614	7614		203-733-0491	barlowj@newtown.k12.ct.us

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

Name	Organization	Job Title		
Mr. Jeffrey Capeci	Newtown Public Schools	First Selectman		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
3 Primrose St		Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Email Address
203-270-4201			203-470-3736	jeff.capeci@newtown-ct.gov

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

**Please note the following:**

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

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

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

**End of schedule**

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0975073	EVERSOURCE - NEWTOWN AREA WORK CENTER	NTNC	145	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
20 BARNABAS ROAD	Connections	1			

Towns Served: NEWTOWN

**Monitoring Requirements**

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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	1/1/20 - 12/31/28		Complete
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<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		
<b>Lead And Copper (PBCU)</b>	<b>5 routine (RT) per three years</b>		
<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	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>		
<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)

<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<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		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL (2)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0975073	EVERSOURCE - NEWTOWN AREA WORK CENTER	NTNC	145	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
20 BARNABAS ROAD	Connections	1			

Towns Served: NEWTOWN

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	2/4/2021	
CROSS CONNECTION SURVEY REPORT		3/1/2026

Water System Facility and Sampling Point Inventory						
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier Asbestos WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A		
		NU001	LUNCH ROOM	A	Y	N
		NU002	ENTRY REST ROOM	A	Y	N
		NU003	M ROOM SINK 1	A	Y	N
		NU004	M ROOM SINK 2	A	Y	N
		NU005	M ROOM SINK 3	I	Y	1
		NU006	L ROOM SINK 1	A	Y	N
		NU007	L ROOM SINK 2	A	Y	N
		NU008	MEN LOCKER RM SNK 1	A	Y	N
		NU009	MEN LOCKER RM SNK 2	A	Y	N
		NU010	MEN LOCKER RM SNK 3	A	Y	N
		NU011	MEN LOCKER RM SNK 4	A	Y	N
		NU012	MEN LOCKER RM SNK 5	A	Y	N
		NU013	LAD LOCKER RM SNK 1	A	Y	N
		NU014	LAD LOCKER RM SNK 2	A	Y	N
		NU015	GARAGE REST ROOM	A	Y	N
		UPSTREAM	WITHIN 5 SERVICE CON	A		
00700	ENTRY POINT	3	ENTRY POINT	A		
10474	WELL	2	WELL	A		
61801	WELL 2	2	WELL 2	A		

## Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM	Certification Expiration
Operator Name	Operator Type	Certification(s)
NACHBAR, AARON D.	CHIEF OPERATOR	SMALL WATER SYSTEM OPERATOR

## Contact Information

Name		Organization			Job Title		
Eversource Energy							
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
20 Barnabas Road					Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-270-5868							

*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
CT0975073	EVERSOURCE - NEWTOWN AREA WORK CENTER	NTNC	145	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
20 BARNABAS ROAD	Connections	1			

Towns Served: NEWTOWN

Contact Role(s): **Owner**

Name		Organization			Job Title		
<b>Ms. Rebecca L. Roberts</b>					Asso Envrmntl Spclst		
Mailing Address Line One		Mailing Address Line Two		City		State	Zip Code
107 Selden St				Berlin		CT	06037
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-665-3285					rebecca.roberts@eversource.com		

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

Name		Organization			Job Title		
<b>Mr. Thomas R. McDermott</b>		Eversource Energy			Manager, F Operation		
Mailing Address Line One		Mailing Address Line Two		City		State	Zip Code
107 Selden Street				Berlin		CT	06037
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-665-4531				860-665-4531	thomas.r.mcdermott@eversource.com		

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

Name		Organization			Job Title		
<b>Mr. John Whelan</b>		Eversource Energy			Supervisor		
Mailing Address Line One		Mailing Address Line Two		City		State	Zip Code
20 Barnabas Road				Newtown		CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-832-4782				860-280-4473	john.h.whelan@eversource.com		

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

**Please note the following:**

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

*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
CT0979113	ROCKY GLEN MILL	NTNC	70	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
75 GLEN ROAD	6				

Towns Served: NEWTOWN

### Monitoring Requirements

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

<b>Chlorine Residual (1012)</b>	<b>1 routine (RT) per quarter</b>				
<b>Sampling Point (Sampling Point ID)</b>					
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25	Complete			
<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>				
<b>Sampling Point (Sampling Point ID)</b>					
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28				
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>				
<b>Sampling Point (Sampling Point ID)</b>	Monitoring Period	Collection Period	Compliance Status		
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25	Complete			
	10/1/25 - 12/31/25				
	1/1/26 - 3/31/26				
	4/1/26 - 6/30/26				
<b>Disinfectant Byproducts - TTHM &amp; HAA5 (DBP)</b>	<b>1 routine (RT) per year</b>				
<b>Sampling Point (Sampling Point ID)</b>	Monitoring Period	Collection Period	Compliance Status		
THIRD FLOOR LADIES (RGM017)	1/1/25 - 12/31/25	8/1-8/31	Complete		
	1/1/26 - 12/31/26	8/1-8/31			
	1/1/27 - 12/31/27	8/1-8/31			
<b>Lead And Copper (PBCU)</b>	<b>5 routine (RT) per six months</b>				
<b>Sampling Point (Sampling Point ID)</b>	Monitoring Period	Collection Period	Compliance Status		
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				
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>				
<b>Sampling Point (Sampling Point ID)</b>	Monitoring Period	Collection Period	Compliance Status		
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25	Complete			
	10/1/25 - 12/31/25				
	1/1/26 - 3/31/26				
	4/1/26 - 6/30/26				
<b>Water Quality Parameters Orthophosphate, Total Alkalinity, T (WQP8)</b>	<b>2 routine (RT) per six months</b>				
<b>Sampling Point (Sampling Point ID)</b>	Monitoring Period	Collection Period	Compliance Status		
Select from Inventory of Active Sampling Points	7/1/25 - 12/31/25				
	1/1/26 - 6/30/26				
	7/1/26 - 12/31/26				
Water System Facility: <b>ENTRY POINT</b> (WSF ID: 00700)					
<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>				
<b>Sampling Point (Sampling Point ID)</b>	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				

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0979113	ROCKY GLEN MILL	NTNC	70	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
75 GLEN ROAD	6				

Towns Served: NEWTOWN

## Monitoring Requirements

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

1 routine (RT) per year			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
1 routine (RT) per three years			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
1 routine (RT) per three years			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Water System Facility: WELL (WSF ID: 10477)

1 routine (RT) per quarter			
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		
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Water System Facility: WELL #2 (WSF ID: 51587)

1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL 2 (2)	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		

## Monthly Water System Facility (WSF) Level Monitoring Requirements

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0979113	ROCKY GLEN MILL	NTNC	70	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
75 GLEN ROAD	Connections	6			

Towns Served: NEWTOWN

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily	
<b>Start Date:</b> 3/1/2006		<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
		8/1/2025 - 8/31/2025	Y	
		9/1/2025 - 9/30/2025	Y	
		10/1/2025 - 10/31/2025	Y	
		11/1/2025 - 11/30/2025	Y	
		12/1/2025 - 12/31/2025	Y	
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
Orthophosphate	<spaces> ( )	Maximum: 2.0 MG/L	2	
<b>Start Date:</b> 8/1/2021		<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
		8/1/2025 - 8/31/2025		
		9/1/2025 - 9/30/2025		
		10/1/2025 - 10/31/2025		
		11/1/2025 - 11/30/2025		
		12/1/2025 - 12/31/2025		
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
Orthophosphate	Entry Point Phosphate Monitoring (PHOS)	Minimum: 1.0 MG/L	2	
<b>Start Date:</b> 8/1/2021		<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
		8/1/2025 - 8/31/2025	N	
		9/1/2025 - 9/30/2025	N	
		10/1/2025 - 10/31/2025	N	
		11/1/2025 - 11/30/2025	Y	
		12/1/2025 - 12/31/2025	Y	
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	4	
<b>Start Date:</b> 8/1/2021		<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
		8/1/2025 - 8/31/2025	Y	
		9/1/2025 - 9/30/2025	Y	
		10/1/2025 - 10/31/2025	Y	
		11/1/2025 - 11/30/2025	Y	
		12/1/2025 - 12/31/2025	Y	
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
Phosphate (as PO4)	<spaces> ( )	Maximum: 6.7 MG/L	2	
<b>Start Date:</b> 2/1/2025		<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
		8/1/2025 - 8/31/2025		

**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
CT0979113	ROCKY GLEN MILL	NTNC	70	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
75 GLEN ROAD	6				

Towns Served: NEWTOWN

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit		Samples Req/Month	
		Maximum:	6.7 MG/L	2	Monitoring
Phosphate (as PO4)	<spaces> ( )				Compliance Status:
Start Date:	2/1/2025	Monitoring Period	Operating Limit	Monitoring	Compliance Status:
		9/1/2025 - 9/30/2025			
		10/1/2025 - 10/31/2025			
		11/1/2025 - 11/30/2025			
		12/1/2025 - 12/31/2025			

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2026	
CROSS CONNECTION SURVEY REPORT	3/1/2027	

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total		Lead and Coliform Rule		Copper Rule Tier		Asbestos WQP 2 DBPR		Stage
				Status	Coliform Rule	Copper Rule Tier	Asbestos WQP 2 DBPR	Copper Rule Tier	Asbestos WQP 2 DBPR	Copper Rule Tier	Asbestos WQP 2 DBPR	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y							
		DOWNSTREAM	WITHIN 5 SERVICE CON	A								
		RGM001	RR LADIES GROUND FLR	A	Y	2	Y	2	Y	Y	Y	
		RGM002	RR MENS GROUND FLR	A	Y	2	Y	2	Y	Y	Y	
		RGM003	RR LADY ROOM 1F	A	Y	2	Y	2	Y	Y	Y	
		RGM004	RR MENS RM 1F	A	Y	2	Y	2	Y	Y	Y	
		RGM005	RR LADY RM 2F	A	Y	2	Y	2	Y	Y	Y	
		RGM006	RR MENS RM 2F	A	Y	2	Y	2	Y	Y	Y	
		RGM007	RR LADY RM 3F	A	Y	2	Y	2	Y	Y	Y	
		RGM008	RR MENS RM 3F	A	Y	2	Y	2	Y	Y	Y	
		RGM009	EASTERN ACCT KITCHEN	A	Y	2	Y	2	Y	Y	Y	
		RGM010	KIT SNK RESTAURANT	A	Y	2	Y	2	Y	Y	Y	
		RGM011	RR LADIES RESTRONT R	A	Y	2	Y	2	Y	Y	Y	
		RGM012	RR LADIES RESTRONT L	A	Y	2	Y	2	Y	Y	Y	
		RGM013	RESTAURANT SINK	A	Y	2	Y	2	Y	Y	Y	
		RGM014	RESTAURANT LADIES R	A	Y	2	Y	2	Y	Y	Y	
		RGM015	SECOND FLOOR LADIES	A	Y	2	Y	2	Y	Y	Y	
		RGM016	FIRST FLOOR LADIES	A	Y	2	Y	2	Y	Y	Y	
		RGM017	THIRD FLOOR LADIES	A	Y	2	Y	2	Y	Y	Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A								
00700	ENTRY POINT	3	ENTRY POINT	A								
10477	WELL	2	WELL	A								
50600	ATMOSPHERIC STORAGE											
51471	TREATMENT PLANT											

**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
CT0979113	ROCKY GLEN MILL	NTNC	70	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
75 GLEN ROAD	6				

Towns Served: NEWTOWN

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Status	Lead and Coliform Rule	Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
51587	WELL #2	2	WELL 2	A				

## Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 51471)

Facility Classification:	CLASS 1 TREATMENT PLANT			Certification Expiration
Operator Name	Operator Type	Certification(s)		
LEMKE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2027	

## Contact Information

Name	Organization	Job Title
<b>Madison Properties</b>		
Mailing Address Line One	Mailing Address Line Two	City
3611 14Th Avenue	Suite 552	Brooklyn
Business Phone	Extension	Fax
212-596-8200		
Mobile Phone		Emergency Phone
		Email Address

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

Name	Organization	Job Title
<b>Mrs. Debby Zieg</b>		
Mailing Address Line One	Mailing Address Line Two	City
3611 14Th Ave	Suite 420	Brooklyn
Business Phone	Extension	Fax
212-596-8200	217	212-596-8201
Mobile Phone		Emergency Phone
		Email Address
		debby@madisonprop.com

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

Name	Organization	Job Title
<b>Mr. Jacob Kohn</b>		
Mailing Address Line One	Mailing Address Line Two	City
40 Oser Avenue	Suite 4	Hauppauge
Business Phone	Extension	Fax
917-846-1115		
Mobile Phone		Emergency Phone
		Email Address
		kohnjacob@gmail.com

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.**

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0979333	HOUSATONIC VALLEY WALDORF SCHOOL - WHITE	NTNC	200	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
1-3 JACKLIN ROAD	Connections	3			

Towns Served: NEWTOWN

**Monitoring Requirements**

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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	1/1/20 - 12/31/28		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<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		
<b>Lead And Copper (PBCU)</b>	<b>5 routine (RT) per three years</b>		
<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	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>		
<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)

<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		

*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
CT0979333	HOUSATONIC VALLEY WALDORF SCHOOL - WHITE	NTNC	200	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
1-3 JACKLIN ROAD	Connections	3			

Towns Served: NEWTOWN

### Monitoring Requirements

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

Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
		1/1/29 - 12/31/31		
Organic Chemicals (VOCS)			1 routine (RT) per three years	
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			

### Other Compliance Schedules

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

Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule Tier	Asbestos	WQP 2 DBPR	Stage
Facility ID							
00600 DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
	DOWNSTREAM	WITHIN 5 SERVICE CON	A				
	HVV001	RR LOBBY ADMIN OFF	A	Y	2	Y	
	HVV002	RR LOBBY BUILD 1	A	Y	2	Y	
	HVV003	KIT SNK OFFICE	A	Y	2	Y	
	HVV004	KITCHENETTE SNK BDL1	A	Y	2	Y	
	HVV005	RR BOYS ROOM BULD 1	A	Y	2	Y	
	HVV006	RR GIRLS ROOM BLD 1	A	Y	2	Y	
	HVV007	RR BUILDING 1	A	Y	2	Y	
	HVV008	RR BUILDING 2	A	Y	2	Y	
	UPSTREAM	WITHIN 5 SERVICE CON	A				
00700 ENTRY POINT	3	ENTRY POINT	A				
10478 WELL	2	WELL	A				
45145 TREATMENT PLANT							
53128 ATMOSPHERIC TANKS							

### Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 45145)

Facility Classification:	Certification Expiration		
Operator Name	Operator Type	Certification(s)	
LEMKE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2027

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0979333	HOUSATONIC VALLEY WALDORF SCHOOL - WHITE	NTNC	200	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
1-3 JACKLIN ROAD		3			Agricultural

Towns Served: NEWTOWN

## Contact Information

Name	Organization	Job Title		
Mr. Naveen Terway	Waldorf School	Treasurer		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
40 Dodgingtown Road		Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-364-1113	103	203-361-0603		Email Address office@waldorfct.org

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

Name	Organization	Job Title		
Mr. Alexander Volage	Housatonic Valley Waldorf Schl	Facilities Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
40 Dodginton Road		Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-364-1113	105			Email Address AVOLAGE@WALDORFCT.ORG

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

**Please note the following:**

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

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

**End of schedule**

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0979343	7 BERKSHIRE ROAD - NEWTOWN	NTNC	103	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
7 BERKSHIRE RD			1		

Towns Served: NEWTOWN

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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	1/1/20 - 11/30/23	1/1-11/30	
	1/1/24 - 12/31/32		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<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		
<b>Lead And Copper (PBCU)</b>	<b>5 routine (RT) per three years</b>		
<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	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>		
<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)

<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0979343	7 BERKSHIRE ROAD - NEWTOWN	NTNC	103	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
7 BERKSHIRE RD			1		

Towns Served: NEWTOWN

## Monitoring Requirements

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

Organic Chemicals (VOCS)	1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

Water System Facility: WELL 1 (WSF ID: 49887)

E. Coli (3014)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL 1 (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 and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP 2 DBPR	Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	A					
		DOWNSTREAM	WITHIN 5 SERVICE CON	A					
		LE001	PRESCHOOL 1	A	Y	N	Y		
		LE002	PRESCHOOL 2	A	Y	N	Y		
		LE003	INFANTS TODDLER RM 1	A	Y	N	Y		
		LE004	INFANTS TODDLER RM 2	A	Y	N	Y		
		LE005	INFANTS TODDLER RM 3	A	Y	N	Y		
		LE006	INFANTS TODDLER RM 4	A	Y	N	Y		
		LE007	BREAKROOM STAFF	A	Y	N	Y		
		UPSTREAM	WITHIN 5 SERVICE CON	A					
00700	ENTRY POINT	3	ENTRY POINT	A					
49887	WELL 1	2	WELL 1	A					
57214	TREATMENT PLANT								

## Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 57214)

Facility Classification:	CLASS 1 TREATMENT PLANT	Certification Expiration
Operator Name	Operator Type	Certification(s)
LEMKE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II
		3/31/2027

*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
CT0979343	7 BERKSHIRE ROAD - NEWTOWN	NTNC	103	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
7 BERKSHIRE RD			1		

Towns Served: NEWTOWN

## Contact Information

Name	Organization	Job Title		
Mr. Bill P. Hoadley	H&Y Construction, Inc	Vice President		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
831 Federal Road		Brookfield	CT	06804
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-775-2246				203-948-5055
				billh@hyconstruction.com

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

Name	Organization	Job Title		
Ms. Lucia Fonseca	Aces International Education	Assistant Director		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
7 Berkshire Road		Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-304-1059				203-510-2636
				lfonseca@aces.org

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

**Please note the following:**

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

*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.**

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0979403	TURNBERRY REALTY, LLC	NTNC	123	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
12 TURNBERRY LANE (LOT11)			1		

Towns Served: NEWTOWN

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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	1/1/20 - 12/31/28		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<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		
<b>Lead And Copper (PBCU)</b>	<b>5 routine (RT) per three years</b>		
<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	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>		
<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)

<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>	<b>1 (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25	1/1-12/31	Waiver
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>

*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
CT0979403	TURNBERRY REALTY, LLC	NTNC	123	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
12 TURNBERRY LANE (LOT11)	Connections		1		

Towns Served: NEWTOWN

### Monitoring Requirements

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

Organic Chemicals (VOCS)	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		

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	1/19/2024	
CROSS CONNECTION SURVEY REPORT	3/1/2026	

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Status	Lead and Coliform Rule	Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	001	CAFETERIA SINK	A	Y	N		
		002	MAIN MENS ROOM RHS	A	Y	N	Y	
		003	MAIN MENS ROOM LHS	A	Y	N	Y	
		004	FITNESS CENTER MENS	A	Y	N		
		005	UPSTAIRS SINK	A	Y	N		
		006	UPSTAIRS MEN RM RH	A	Y	N		
		007	MAIN LADIES ROOM	A	Y	N		
		008	FITNESS LADIES ROOM	A	Y	N		
		009	UPSTAIRS LADIES ROOM	A	Y	N		
		4	DISTRIBUTION SYSTEM	A	Y			
	DOWNTSTREAM	WITHIN 5 SERVICE CON		A				
	UPSTREAM	WITHIN 5 SERVICE CON		A				
00700	ENTRY POINT	3	ENTRY POINT	A				
55637	WELL #1	2	WELL #1	A				
55641	WELL #2	2	WELL #2	A				
55643	ATMOSPHERIC TANK							

### Certified Operator Information

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

Facility Classification:	Certification Expiration		
Operator Name	Operator Type	Certification(s)	
GRANT, SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2026
PETITTI, ANDY	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2028
		WATER TREATMENT PLANT OPERATOR - CLASS I	12/31/2028

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0979403	TURNBERRY REALTY, LLC	NTNC	123	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
12 TURNBERRY LANE (LOT11)	Connections		1		

Towns Served: NEWTOWN

## Contact Information

Name	Organization	Job Title		
Mr. David Kramer		Member		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
12 Turnberry Ln		Newtown	CT	06482
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
718-677-0784	103	718-250-2278		347-279-2372
				david@hilltopm.com

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

Name	Organization	Job Title		
Ms. Kimberly Dart	Turnberry Realty/Premium Asset	Asset Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
PO Box 300-490		Brooklyn	NY	11230
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
281-630-1918				kim@premiumassetsllc.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

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

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

**End of schedule**

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0975143	SMT CORPORATION	NTNC	73	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
14 HIGH BRIDGE RD			1		

Towns Served: NEWTOWN

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per month</b>		
<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	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		
<b>Lead And Copper (PBCU)</b>	<b>5 routine (RT) per six months</b>		
<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		
	1/1/26 - 6/30/26		
	7/1/26 - 12/31/26		
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per month</b>		
<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	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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

<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 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
CT0975143	SMT CORPORATION			NTNC	73	P	GW
Local Address (where applicable)		Service	Residential	Commercial	Industrial	Combined	Agricultural
14 HIGH BRIDGE RD		Connections		1			

Towns Served: NEWTOWN

## Monitoring Requirements

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

Inorganic Chemicals (IOCS)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
		1/1/26 - 12/31/28		
		1/1/29 - 12/31/31		
Nitrate And Nitrite (NOX)			1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete	
	1/1/26 - 12/31/26			
	1/1/27 - 12/31/27			
Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)			1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	7/1/25 - 9/30/25		Complete	
	10/1/25 - 12/31/25		Complete	
	1/1/26 - 3/31/26			
	4/1/26 - 6/30/26			
Organic Chemicals (VOCS)			1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	7/1/25 - 9/30/25			
	10/1/25 - 12/31/25			
	1/1/26 - 3/31/26			
	4/1/26 - 6/30/26			

## Other Compliance Schedules

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

Water System Facility and Sampling Point Inventory							
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos WQP 2 DBPR Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		SMT 001	EAST MENS RM RT SNK	A	Y	2	
		SMT 002	EAST MENS RM LFT SNK	A	Y	2	
		SMT 003	EAST LAD RM RT SNK	A	Y	2	
		SMT 004	EAST LAD RM LFT SNK	A	Y	2	
		SMT 005	EAST KITCHEN SINK	A	Y	2	
		SMT 006	BLUE SLOP SINK	A	Y	2	
		SMT 007	BLUE SAFETY SINK	A	Y	2	
		SMT 008	RED SLOP SINK	A	Y	2	
		SMT 009	RED KITCHEN SINK	A	Y	2	

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0975143	SMT CORPORATION	NTNC	73	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
14 HIGH BRIDGE RD			1		

Towns Served: NEWTOWN

## 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
					Y	2	Y	2
	SMT 010	RED LAD RM RT SNK	A	Y	2			
	SMT 011	RED LAD RM LFT SNK	A	Y	2			
	SMT 012	RED MENS RM RT SNK	A	Y	2			
	SMT 013	RED MENS RM LFT SNK	A	Y	2			
	SMT 014	RED REAR SLOP SINK	A	Y	2			
	SMT 015	TAPE AND REEL SNK	A	Y	2			
	SMT 016	DESTRUCTIBLE SNK	A	Y	2			
	SMT 017	WEST MENS RM SNK	A	Y	2			
	SMT 018	WEST LAD RM SNK	A	Y	2			
	SMT 019	OFFICE MENS RT SNK	A	Y	2			
	SMT 020	OFFICE MENS LFT SNK	A	Y	2			
	SMT 021	OFFICE LAD RM RT SNK	A	Y	2			
	SMT 022	OFFICE LAD LFT SNK	A	Y	2			
	SMT 023	OFFICE KIT SNK	A	Y	2			
	UPSTREAM	WITHIN 5 SERVICE CON	A					
00700	ENTRY POINT	3	ENTRY POINT	A				
62564	WELL 1	2	WELL 1	A				

## Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM	Certification Expiration
Operator Name	Operator Type	Certification(s)
LEMKE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II

## Contact Information

Name	Organization	Job Title
Mr. Thomas Sharpe	Smt Corporation	Vice President
Mailing Address Line One	Mailing Address Line Two	City
206 Hattertown Rd		State
Business Phone	Extension	Zip Code
204-994-9772	203-270-4798	
		Email Address
		trsharpe58@gmail.com

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

Name	Organization	Job Title
Mr. Ciro Colelli	Smt Corp	Facilities Tech
Mailing Address Line One	Mailing Address Line Two	City
14 High Bridge Rd		State
		Zip Code
Business Phone	Extension	
203-491-5895		Sandy Hook
		CT
		06482
		Email Address
		ccolelli@smtcorp.com

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

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

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
<b>CT0975143</b>	<b>SMT CORPORATION</b>			NTNC	73	P	GW
Local Address (where applicable)		Service	Residential	Commercial	Industrial	Combined	Agricultural
14 HIGH BRIDGE RD		Connections		1			
Towns Served: NEWTOWN							
<b>Please note the following:</b>							
<ol style="list-style-type: none"> <li>1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.</li> <li>2. If a Collection Period is specified, all water quality samples must be collected during the specified period.</li> <li>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</li> </ol>							
<i>If you have any questions, please contact the Drinking Water Section at (860) 509-7333.</i> <a href="http://www.ct.gov/dph/publicdrinkingwater">http://www.ct.gov/dph/publicdrinkingwater</a>							

**End of schedule**