

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1080011	AQUARION-HAWKSTONE	C	120	P	SWP
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: OXFORD, SEYMOUR

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
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>		
<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
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>Disinfectant Byproducts - TTHM &amp; HAA5 (DBP)</b>	<b>1 routine (RT) per year</b>		
<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
HAWKSTONE SS 2008 (02916)	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 three years</b>		
<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
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 month</b>		
<b>Sampling Point (Sampling Point ID)</b>	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
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		

**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

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CT1080011	AQUARION-HAWKSTONE	C	120	P	SWP
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: OXFORD, SEYMOUR

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2025	
MAIL/HAND DELIVER NOTICE TO CONSUMERS	12/31/2025	
CERTIFY LEAD SL NOTIFICATION	7/1/2026	

## 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	02914	HAWKSTONE SS	A	Y		
		02915	BIRMINGHAM MP	A	Y		
		02916	HAWKSTONE SS 2008	A			Y
		02916D	HAWKSTONE SS 2008 -	A	Y		
		02916U	HAWKSTONE SS 2008 -	A	Y		
		4	DISTRIBUTION SYSTEM	A	Y		
	DOWNSTREAM	WITHIN 5 SERVICE CON		A			
		PB5696	22 PALMER LN OXFD	A		3	
		PB5697	10 PALMER LN OXFORD	A		3	
		PB5698	15 PALMER LN OXFORD	A		1	
		PB5699	12 HAWKSTONE TE OXFD	A		3	
		PB5700	3 HAWKSTONE TE OXFD	A		3	
		PB6225	21 PALMER LN OXFD	A		3	
		PB6226	8 HAWKSTONE TE OXFD	A		3	
		PB6316	3 PALMER LANE	A		1	
		PB6964	6 HAWKSONTE TERR	A	Y	3	
		PB8606	12 PALMER LN	A		1	
		PB8607	13 PALMER LN	A		1	
		PB8608	14 PALMER LN	A		1	
		PB8609	17 PALMER LANE	A		1	
		PB8610	19 PALMER LANE	A		1	
		PB8611	23 PALMER LN	A		1	
	UPSTREAM	WITHIN 5 SERVICE CON		A			

45896 INTERCONNECTION -  
CT0930011 - RWA

## Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM	Certification Expiration
Operator Name	Operator Type	Certification(s)
HORN, ROBERT	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III
		WATER TREATMENT PLANT OPERATOR - CLASS III

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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
CT1080011	AQUARION-HAWKSTONE	C	120	P	SWP
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
	65				Agricultural

Towns Served: OXFORD, SEYMOUR

## Contact Information

Name	Organization	Job Title		
Mr. John P. Walsh	Aquarion Water Company	Vice President		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
835 Main Street	Mail Stop 700	Bridgeport	CT	06604
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-337-5852		203-337-5938		781-413-6175
				jwalsh@aquarionwater.com

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

Name	Organization	Job Title		
Mr. Robert J. Ulrich	Aquarion Water Company of Ct	Vp-Supply & Utility		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
505 Huntington St.		Shelton	CT	06484
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-926-4320		203-929-5297		203-395-3205
				rulrich@aquarionwater.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
CT1085061	AQUARION-OXFORD TOWNE CENTER	C	449	P	GWP
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
300 OXFORD ROAD, OXFORD	Connections	5	17		

Towns Served: OXFORD

### 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	1/1/17 - 12/31/25		Complete
	1/1/26 - 12/31/34		
<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>
OTC 357 OXFORD RD SS (00572)	1/1/25 - 12/31/25	9/1-9/30	Complete
	1/1/26 - 12/31/26	9/1-9/30	
	1/1/27 - 12/31/27	9/1-9/30	
<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
	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
CCTS 7: DWS TO SPECIFY OPTIMAL WQPS	6/30/2019	
CROSS CONNECTION SURVEY REPORT		3/1/2025

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule	Asbestos Rule Tier	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	00004	OXFORD TOWNE CTR SS	I	Y			
		00571	OXFORD TOWN CENTER M	A	Y	N		
		00572	OTC 357 OXFORD RD SS	A	Y	N	Y	Y
		00573	140 MAIN ST M32	A	Y	N		Y

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1085061	AQUARION-OXFORD TOWNE CENTER	C	449	P	GWP
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
300 OXFORD ROAD, OXFORD	Connections	5	17		Agricultural

Towns Served: OXFORD

## 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
		4	DISTRIBUTION SYSTEM	A				
		PB8053	OTC 170 OXFORD RD	I			N	
		PB8081	OTC 150 MAIN ST	I			N	
		PB8084	OTC 154 MAIN ST	I			N	
		PB8085	OTC 160 MAIN ST	I			N	
		PB8086	OTC 304 OXFORD RD	I			N	
		PB8087	OTC 274 OXFORD RD	I			N	
		PB8088	OTC 280 OXFORD RD	I			N	
		PB8089	OTC 159 MAIN ST	I			N	
		PB9467	400 BOULDER PASS UNI	A			N	
		PB9468	400 BOULDER PASS UNI	A			N	
		PB9469	400 BOULDER PASS UNI	A			N	
		PB9470	400 BOULDER PASS UNI	A			N	
		PB9471	400 BOULDER PASS UNI	A			N	
		PB9472	500 BOULDER PASS UNI	A			N	
		PB9473	500 BOULDER PASS UNI	A			N	
		PB9474	500 BOULDER PASS UNI	A			N	
		PB9475	500 BOULDER PASS UNI	A			N	
		PB9476	500 BOULDER PASS UNI	A			N	
60122	INTERCONNECTION - HERITAGE WATER CO.	00571	OXFORD TOWN CENTER	A		Y		
			M					

## Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM	Certification Expiration
Operator Name	Operator Type	Certification(s)
BURKE, JONATHAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II
HORN, ROBERT	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III
		WATER TREATMENT PLANT OPERATOR - CLASS III
		6/30/2028

## Contact Information

Name	Organization	Job Title		
Mr. John P. Walsh	Aquarion Water Company	Vice President		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
835 Main Street	Mail Stop 700	Bridgeport	CT	06604
Business Phone	Extension	Fax	Mobile Phone	Email Address
203-337-5852		203-337-5938		781-413-6175 jwalsh@aquarionwater.com

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

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Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
300 OXFORD ROAD, OXFORD			5	17				
Towns Served: OXFORD								
Name			Organization			Job Title		
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Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
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***End of schedule***