	Connecticut Departmen	t of Public F	lealth	ı Dı	rinkin	g V	Vater	· Se	ection	
	Water Quality Mo					_				
PWS ID	PWS Name	Jintoring an	u doi.	_					ner Type	Primary Sourc
CT1080112	CHRIST EPISCOPAL CHURCH				NTNC		34	-	P	GW
	where applicable)	Service	Resider			cial	Industri	al	Combine	ed Agricultura
470 QUAKER FA		Connections			1					
Towns Served: (OXFORD					l l				
	Mo	onitoring Requ	iireme	ents	}					
Water System	Facility: DISTRIBUTION SYSTEM (V									
Asbestos (10	94)						1 rc	outii	ne (RT) p	er nine years
Sampling I	Point (Sampling Point ID)		Monitor	ing P	Period	Colle	ection Pe			oliance Status
Select from	n Inventory of Active Sampling Points		1/1/20 -	12/3	31/28					
Total Coliforn	n (3100)							1 rc	outine (R	T) per month
Sampling I	Point (Sampling Point ID)		Monitor	ing P	Period	Colle	ection Pe	riod	Comp	oliance Status
Select fron	n Inventory of Active Sampling Points		7/1/25	- 7/3	1/25				(Complete
			8/1/25	- 8/3	1/25				(Complete
			9/1/25	- 9/3	0/25				(Complete
			10/1/25	- 10/	31/25				(Complete
			11/1/25	- 11/	30/25					
			12/1/25	- 12/	31/25					
			1/1/26	- 1/3	1/26					
			2/1/26	- 2/2	8/26					
			3/1/26	- 3/3	1/26					
			4/1/26	- 4/3	0/26					
			5/1/26							
			6/1/26	- 6/3	0/26					
Total Coliforn	•								•	P) per period
	Point (Sampling Point ID)		Monitor			Colle	ection Pe	riod	Com	oliance Status
Select fron	n Inventory of Active Sampling Points		7/15/25							
			7/17/25	- 7/2	22/25					Complete
Lead And Cop	• •									(RT) per year
	Point (Sampling Point ID)		Monitor				ection Pe			oliance Status
Select fron	n Inventory of Active Sampling Points		1/1/24 -				6/1-9/30			Complete
			1/1/25 -				6/1-9/30		(Complete
			1/1/26 -	12/3	31/26		6/1-9/30			_,
Physical Para	• •								-	T) per month
	Point (Sampling Point ID)		Monitor			Colle	ection Pe	rıod		oliance Status
Select from	n Inventory of Active Sampling Points		7/1/25	- //3	1/25				(Complete

8/1/25 - 8/31/25

9/1/25 - 9/30/25

10/1/25 - 10/31/25

11/1/25 - 11/30/25 12/1/25 - 12/31/25 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 Complete

Complete

Complete

	Connecticut Dep Water Qu	partment of ality Monit				U		ection	
PWS ID	PWS Name		0 - 1					ner Type Pi	imary Source
CT1080112	CHRIST EPISCOPAL CHURC	CH			NTNC	<u>'</u>	34	P	GW
Local Address (where applicable)		Service	Residentia	al Comm	nercial	Industrial	Combined	Agricultural
470 QUAKER FA	ARMS RD		Connections		1	L			
Towns Served:	OXFORD			I	1				
		Monito	oring Requ	iiremen	ts				
Water System	Facility: ENTRY POINT								
Inorganic Che	emicals (IOCS)						1 routin	e (RT) per	three years
Sampling	Point (Sampling Point ID)			Monitoring	g Period	Collec	tion Period	Compli	ance Status
ENTRY PO	INT (3)			1/1/23 - 12	2/31/25				
				1/1/26 - 12	2/31/28				
Nitrate And N	Nitrite (NOX)						1	routine (R	T) per year
Sampling	Point (Sampling Point ID)			Monitoring	g Period	Collec	tion Period	Compli	ance Status
ENTRY PO	INT (3)			1/1/24 - 12	2/31/24			Со	mplete
				1/1/25 - 12	2/31/25			Со	mplete
				1/1/26 - 12	2/31/26				
Pesticides, Ho	erbicides and Polychlorin	ated Biphenyls (PCBs) (SOCS))			1 routin	e (RT) per	three years
Sampling	Point (Sampling Point ID)			Monitoring	g Period	Collec	tion Period	Compli	ance Status
ENTRY PO	INT (3)			1/1/23 - 12	2/31/25				
				1/1/26 - 12	2/31/28				
Organic Chen	nicals (VOCS)						1	routine (R	T) per year
Sampling	Point (Sampling Point ID)			Monitoring	g Period	Collec	tion Period	Compli	ance Status
ENTRY PO	INT (3)			1/1/24 - 12	2/31/24				
				1/1/25 - 12	2/31/25			Со	mplete
				1/1/26 - 12	2/31/26				
Water System	Facility: WELL 1 (WSF I	D: 10813)							
E. Coli (3014	1						1 trig	gered (TG)	per period
-	, Point (Sampling Point ID)			Monitoring	g Period	Collec	tion Period		ance Status
WELL 1 (2)				7/14/25 - 7	7/20/25			-	
				7/16/25 - 7				Со	mplete
		Other C	ompliance	Schedu	ıles				
Compliance Sch	nedule Activity			Du	ue Date		Achieved	Date	
CROSS CONNEC	CTION EXEMPTION			3/	1/2030				
	Water	System Facil	ity and Sar	mpling F	oint Ir	nvento	ory		
Water						Total	Lead and		
	er System Facility	Sampling Point		nt		Coliforn			Stage
Facility ID		ID	Description		Status		Rule Tie	Asbestos	WQP 2 DBPR
00600 DIST	RIBUTION SYSTEM	4	DISTRIBUTION		Α	Υ			
		CEC001	RR MEN RM N			Υ	2	Υ	
		CEC002	RR MEN RM N		Α	Υ	2	Υ	
		CEC003	RR LADY RM I		Α	Υ	2	Υ	
		CEC004	RR LADY RM I		Α	Υ	2	Υ	
		CEC005	RR CHURCH C		Α	Υ	2	Υ	
		CEC006	RR PRIEST OF		Α	Υ	2	Υ	
		CEC007	KIT SNK TRP L		Α	Υ	2	Υ	
		CEC008	KIT SNK TRP L	WR LEVR	Α	Υ	2	Υ	

	Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS ID PWS Name CI						Owner Type	Primary Source		
CT1080112	CHRIST EPISCOPAL CHURCH				NTNC	34	Р	GW		
Local Address (where applicable) Service			Resider	ntial Commerc		al Industri	al Combin	ed Agricultural		
470 OLIAKER	FARMS RD	Connections			1					

Connecticut Department of Public Health Drinking Water Section

Towns Served: OXFORD

Wat	ter System Facili	ity and Sampling P	oint Ir	nventoi	ry		
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage 2 DBPR
	CEC009	KIT SNK SING LWR LEV	Α	Υ	2	Υ	
	CEC010	KIT SNK HAND LWR LEV	Α	Υ	2	Υ	
	CEC011	RR UNISEX	Α	Υ	2	Υ	
	DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
	UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700 ENTRY POINT	3	ENTRY POINT	Α				
10813 WELL 1	2	WELL 1	Α				

Certified Operator Information

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

Facility Classification: SMALL \	WATER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
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	12/31/2025

Co	miaci miormation	
	Organization	Job Title
10	Christ Church Quaker Farms	Prop Mgr/Committee

Mr. Michael Evanch	าด			Christ Church	Quaker Farms	Prop Mgr/Comr	nittee	
Mailing Address Lin	e One		Mailing Addr	ess Line Two		City	State	Zip Code
470 Quaker Farms F	Road					Oxford	СТ	06478
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Address		
203-305-5905						FIRETECH314@YAHOO.C	ОМ	

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

Name

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

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

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

End of schedule

	Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule								
PWS ID	PWS ID PWS Name					Population	Owner Typ	oe Pr	imary Source
CT1085013	144 OXFORD ROAD, LLC			NTNC		25	Р		GW
Local Address (ocal Address (where applicable) Service Res					Industri	al Comb	ined	Agricultural
144 OXFORD R	DAD			13					

144 OXFORD ROAD	Connections		13		
Towns Served: OXFORD					
Mon	itoring Requ	irements			
Water System Facility: DISTRIBUTION SYSTEM (WS	F ID: 00600)				
Asbestos (1094)				1 routin	e (RT) per nine year
Sampling Point (Sampling Point ID)		Monitoring P	eriod	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points		1/1/20 - 12/3	1/28		
Total Coliform (3100)				1 rou	tine (RT) per quarte
Sampling Point (Sampling Point ID)		Monitoring P	eriod	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points		4/1/25 - 6/30	0/25		Complete
		7/1/25 - 9/30	0/25		Complete
	:	10/1/25 - 12/3	31/25		
		1/1/26 - 3/3	1/26		
		4/1/26 - 6/30	0/26		
Lead And Copper (PBCU)				5 routine	(RT) per three year
Sampling Point (Sampling Point ID)		Monitoring P	eriod	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points		1/1/23 - 12/3	1/25	6/1-9/30	Complete
		1/1/26 - 12/3	1/28	6/1-9/30	
Physical Parameters (PPS)				1 rou	tine (RT) per quarte
Sampling Point (Sampling Point ID)		Monitoring P	eriod	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points		4/1/25 - 6/30	0/25		Complete
		7/1/25 - 9/30	0/25		Complete
	:	10/1/25 - 12/3	31/25		
		1/1/26 - 3/3	1/26		
		4/1/26 - 6/30	0/26		
Water System Facility: ENTRY POINT (WSF ID: 0070	0)				
Inorganic Chemicals (IOCS)				1 routine	(RT) per three year
Sampling Point (Sampling Point ID)		Monitoring P	eriod	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/23 - 12/3	1/25		
		1/1/26 - 12/3	1/28		
Nitrate And Nitrite (NOX)				1	routine (RT) per yea
Sampling Point (Sampling Point ID)		Monitoring P	eriod	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/24 - 12/3	1/24		Complete
		1/1/25 - 12/3	1/25		Complete
		1/1/26 - 12/3	1/26		
Pesticides, Herbicides and PCBs-Phase II (SOC2)				1 routine	(RT) per three year
Sampling Point (Sampling Point ID)		Monitoring P	eriod	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/23 - 12/3	1/25		
		1/1/26 - 12/3	1/28		
Pesticides, Herbicides and PCBs-Phase V (SOC5)				1 routine	(RT) per three year
Sampling Point (Sampling Point ID)		Monitoring P	eriod	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/23 - 12/3	1/25		
		1/1/26 - 12/3	1/28		

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1085013	144 OXFORD ROAD, LLC				NTNC	25	Р	GW
Local Address (where applicable)		Service	Residential		Commercia	al Industri	al Combine	ed Agricultural
144 OXFORD RO)AD	Connections			13			

Towns Served: OXFORD

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
ENTRY POINT (3)	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		

Other Compliance Schedules

Compliance Schedule Activity

Due Date

Achieved Date

CROSS CONNECTION SURVEY REPORT 3/1/2025

	Wat	er System Facili	ity and Sampling P	oint In	vento	у		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBP
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		TK001	UNIT 1-A REST RM SNK	Α	Υ	2	Υ	
		TK002	UNIT 1-B REST RM SNK	Α	Υ	2	Υ	
		TK003	UNIT 1-C REST RM SNK	Α	Υ	2	Υ	
		TK004	UNIT 1-D REST RM SNK	Α	Υ	2	Υ	
		TK005	UNIT 1-D KIT SNK	Α	Υ	2	Υ	
		TK006	UNIT E-1 REST RM SNK	Α	Υ	2	Υ	
		TK007	UNIT E-2 REST RM SNK	Α	Υ	2	Υ	
		TK008	UNIT 1-F REST RM SNK	Α	Υ	2	Υ	
		TK009	UNIT 1-F RT KIT SNK	Α	Υ	2	Υ	
		TK010	UNIT 1-F LFT KI SNK	Α	Υ	2	Υ	
		TK011	UNIT 1-F RT WSH SNK	Α	Υ	2	Υ	
		TK012	UNIT 1-F LFT WSH SNK	Α	Υ	2	Υ	
		TK013	UNIT 1-G KIT SNK	Α	Υ	2	Υ	
		TK014	UNIT 1-G MENS RM	Α	Υ	2	Υ	
		TK015	UNIT 1-G LADIES RM	Α	Υ	2		
		TK016	UNIT 1-H FRONT SNK	Α	Υ	2		
		TK017	UNIT 1-H REAR SNK	Α	Υ	2		
		TK018	UNIT 1-H SINGLE SNK	Α	Υ	2		
		TK019	UNIT 1-H HAND SNK	Α	Υ	2		
		TK020	UNIT 1-H TRPL SNK	Α	Υ	2		
		TK021	UNIT 1-H SLOP SNK	Α	Υ	2		
		TK022	UNIT 2-A REST RM SNK	Α	Υ	2		
		TK023	UNIT 2-B REST RM SNK	Α	Υ	2		
		TK024	UNIT 2-C REST RM SNK	Α	Υ	2		
		TK025	UNIT 2-D REST RM SNK	Α	Υ	2		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				

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

	Connaction	t Don	netm (ant a	f Dublic	Hoolth D)rin	king I	Maton	C.	ction	
	Connecticu	•						_			ction	
	Wat	er Qua	ility N	Monit	toring a	nd Comp	oliar	ice Sc	hedule	9		
PWS ID	PWS Name					Cla	assific	ation Po	pulation	Owr	ner Type Pi	rimary Sourc
CT1085013	144 OXFORD ROA	D, LLC					NTN	С	25		Р	GW
Local Address (w	here applicable)				Service	Residential	Com	mercial	Industrial	I	Combined	Agricultura
144 OXFORD ROA	AD				Connection	IS		13				
Towns Served: O	XFORD											
	١	Water S	ystem	n Facil	ity and Sa	ampling Po	oint	Invent	tory			
Water								Tota	l Lead a	ınd		
System Water	r System Facility		Samplin	ng Point	Sampling P			Colifo	rm Coppe	er		Stage
Facility ID			I	D	Description		Stati	us Rule	e Rule T	Tier	Asbestos	WQP 2 DBF
10504 WELL	#1			2	WELL #1		Α					
10505 WELL	#2			2	WELL #2		Α					
55057 WELL	#3		:	2	WELL#3		Α					
57411 TREAT	MENT PLANT											
			Cer	tified	Operato	r Informat	tion					
Water System F	acility: TREATN	ΛFNT PI			-							
•	ntion: CLASS 1 TRE		-	02.0								Certification
Operator Name	CENSS I THE	7 (11012141		ator Typ	ne .	Certification(s	s)					Expiration
LEMKE, BRIAN				OPERATO		WATER TREAT		PI ANT C	PFRATOR :	- CI	ASS II	3/31/2027
			•		tact Info							3, 5 =, = 5 = 1
Nama						IIIIatioii					Job Title	
Name Mr. Thomas Kello					rganization 44 Oxford Ro	24110			Member		Job Title	
			Mailing			du LLC					Ctata	7in Codo
Mailing Address I 1636 Dixwell Ave			IVIAIIII1g	g Addres	s Line Two			Hamden	City		State	Zip Code 06514
Business Phone		Fax	,	Mob	ile Phone	Emergency Ph			lrocc		CI	00314
203-281-5521		Гал	•	IVIOD	lie Priorie	203-248-83:		IIIaii Aut	11 622			
Contact Role(s):						203-240-03.	13					
Name	Legal Contact			Ο	rganization						Job Title	
Mr. Edward J. Ke	elleher				44 Oxford Ro	ad IIC					JOD TICIC	
Mailing Address I			Mailing		s Line Two	uu, EEC			City		State	Zip Code
1636 Dixwell Ave				571000	<u> </u>		ŀ	lamden	0.01		CT	06514
Business Phone		Fax		Mob	ile Phone	Emergency Ph			lress		.	
203-281-5521		203-288			2	203-494-73		ed@tomr				
	Administrative C		-	1			-		,			
Name				0	rganization						Job Title	
144 Oxford Road	ILLC				<u> </u>							
Mailing Address I			Mailing	g Addres	s Line Two				City		State	Zip Code
1636 Dixwell Ave				-			ŀ	Hamden	-		СТ	06514
			1			- 51					1 1	

Contact Role(s): Owner

Business Phone

Please note the following:

Extension

- 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.

Fax

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

Emergency Phone Email Address

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.

Mobile Phone

	Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source				
CT1085033	PLEASANT VALLEY SHOPPING PLAZA				NTNC	89	Р	GW				
Local Address (w	(here annlicable)	Service	Residen	tial	Commerci	al Industria	Combine	d Agricultural				

248 OXFORD ROAD	Connections	15			
Towns Served: OXFORD	1		-	1	1
Mor	nitoring Requ	iremen	ts		
Water System Facility: DISTRIBUTION SYSTEM (WS					
Chlorine Residual (1012)				1 r	outine (RT) per month
Sampling Point (Sampling Point ID)		Monitoring	g Period	Collection Period	d Compliance Status
Select from Inventory of Active Sampling Points		7/1/25 - 7	/31/25		Complete
		8/1/25 - 8	/31/25		Complete
		9/1/25 - 9	/30/25		Complete
	-	10/1/25 - 1	0/31/25		Complete
		11/1/25 - 1	1/30/25		Complete
Asbestos (1094)				1 rout	ine (RT) per nine years
Sampling Point (Sampling Point ID)		Monitoring	g Period	Collection Period	d Compliance Status
Select from Inventory of Active Sampling Points		1/1/20 - 12	2/31/28		
Total Haloacetic Acids (2456)					1 routine (RT) per year
Sampling Point (Sampling Point ID)		Monitoring	g Period	Collection Period	d Compliance Status
UNIT 1-2 ROSES SINK (PVSC007)		1/1/24 - 12	2/31/24	7/1-7/30	Complete
		1/1/25 - 12	2/31/25	7/1-7/30	Complete
		1/1/26 - 12	2/31/26	7/1-7/30	
Total Trihalomethanes (2950)					1 routine (RT) per year
Sampling Point (Sampling Point ID)		Monitoring	g Period	Collection Period	d Compliance Status
PLAYSCHOOL KITCHEN (PVSC004)		1/1/24 - 12	2/31/24	7/1-7/31	Complete
		1/1/25 - 12	2/31/25	7/1-7/31	Complete
		1/1/26 - 12	2/31/26	7/1-7/31	
Total Coliform (3100)				1 r	outine (RT) per month
Sampling Point (Sampling Point ID)		Monitoring	g Period	Collection Period	d Compliance Status
Select from Inventory of Active Sampling Points		7/1/25 - 7	/31/25		Complete
		8/1/25 - 8	/31/25		Complete
		9/1/25 - 9	/30/25		Complete
		10/1/25 - 1	0/31/25		Complete
	-	11/1/25 - 1	1/30/25		Complete
	-	12/1/25 - 1	2/31/25		
		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		
Lead And Copper (PBCU)				5 routi	ne (RT) per six months
Sampling Point (Sampling Point ID)		Monitoring	g Period	Collection Period	· · ·
Select from Inventory of Active Sampling Points		1/1/25 - 6	/30/25		Complete
		7/1/25 - 12	2/31/25		Complete
		1/1/26 - 6	/30/26		

	Connecticut Department				O			tion	
	Water Quality Mon	litoring and	a Con	_					
PWS ID	PWS Name								rimary Source
CT1085033	PLEASANT VALLEY SHOPPING PLAZA	1			NTNC	89		Р	GW
Local Address (v	where applicable)	Service	Residen	itial	Commercia	l Industri	al C	ombined	l Agricultural
248 OXFORD RO	OAD	Connections	15						
Towns Served:	OXFORD								
	Mon	itoring Requ	ireme	nts					
Water System	Facility: DISTRIBUTION SYSTEM (WS	F ID: 00600)							
Physical Para	meters (PPS)						1 rou	tine (RT) per month
Sampling	Point (Sampling Point ID)		Monitori	ing P	eriod Co	llection Pe	riod	Compl	iance Status
Select from	m Inventory of Active Sampling Points		7/1/25 -	7/31	L/25			Co	omplete
			8/1/25 -	8/31	1/25			Co	omplete
			9/1/25 -	9/30)/25			Co	omplete
		:	10/1/25 -	10/3	31/25			Co	omplete
			11/1/25 -	11/3	30/25			Co	omplete
		:	12/1/25 -	12/3	31/25				
			1/1/26 -	1/31	1/26				
			2/1/26 -	2/28	3/26				
			3/1/26 -	3/31	L/26				
			4/1/26 -	4/30)/26				
			5/1/26 -	5/31	L/26				
			6/1/26 -	6/30)/26				
Water System	Facility: ENTRY POINT (WSF ID: 0070	00)							
Inorganic Che	emicals (IOCS)					1 ro	utine (RT) per	three years
Sampling	Point (Sampling Point ID)		Monitori	ing P	eriod Co	llection Pe	riod	Compl	iance Status
ENTRY PO	INT (3)		1/1/23 -	12/3	1/25			Co	omplete
			1/1/26 -	12/3	1/28				
Nitrate And N	Nitrite (NOX)						1 rc	outine (RT) per year
Sampling	Point (Sampling Point ID)		Monitori	ing P	eriod Co	llection Pe	riod	Compl	iance Status
ENTRY POI	INT (3)		1/1/24 -	12/3	1/24			Co	omplete
			1/1/25 -	12/3	1/25			Co	omplete
			1/1/26 -	12/3	1/26				
Pesticides, He	erbicides and PCBs-Phase II (SOC2)					1 ro	utine (RT) per	three years
Sampling	Point (Sampling Point ID)		Monitori	ing P	eriod Co	llection Pe	riod	Compl	iance Status
ENTRY POI	INT (3)		1/1/23 -	12/3	1/25			Co	omplete
			1/1/26 -	12/3	1/28				
Pesticides, Ho	erbicides and PCBs-Phase V (SOC5)					1 ro	utine (RT) per	three years
Sampling	Point (Sampling Point ID)		Monitori	ing P	eriod Co	llection Pe			iance Status
ENTRY PO	INT (3)		1/1/23 -	12/3	1/25			Co	omplete
			1/1/26 -	12/3	1/28				
Organic Chen	nicals (VOCS)					1 ro	utine (RT) per	three years
_	Point (Sampling Point ID)		Monitori	ing P	eriod Co	llection Pe			iance Status
ENTRY PO	INT (3)		1/1/23 -	12/3	1/25			Co	omplete
			1/1/26 -	12/3	1/28				
	Monthly Water System Fa	cility (WSF) I	.evel N	/lon	itoring	Require	men	ts	
	menum, mater equient a	, (1101)							

		_							_				
	Conne	•	artment of ality Monit					_			ction		
PWS ID	PWS Nam		anty Monit	oring and	ı Güli						er Type	Primar	y Source
CT1085033		ັ Γ VALLEY SHOPPII	NG PLAZA				NTNC		89	OWII	P		iW
Local Address (Service	Residen		Comme	rcial	Industri	al (Combine	_	ricultural
248 OXFORD RO		,		Connections	15								
Towns Served:	OXFORD												
Water System	Facility: 1	ENTRY POINT (WSFID: 00700)										
Analyte		Monitoring Req	uirement (Summa	ary Type)	Ope	rating	Limit			5	Samples	Req/M	lonth
Chlorine		Entry Point RDC	(EPRD)		Mini	imum	: 0.5 M	G/L			Conf	tinuous	5
Start Date:	4/1/2018			Complia	nce Histo	ory:		Operat	ing Lim	it	Monit	oring	
				Monitor	ing Perio	d		-	iance St			iance S	Status:
				7/1/2025	5 - 7/31/2	2025			Υ				
				8/1/2025	5 - 8/31/2	2025			Υ				
				9/1/2025	5 - 9/30/2	2025			Υ				
				10/1/202	25 - 10/3	1/202	5		Υ				
				11/1/202	25 - 11/3	0/202	5						
Analyte		Monitoring Req	uirement (Summa	ary Type)	Ope	rating	g Limit			5	Samples	Req/M	lonth
рН		Entry Point pH N	Monitoring (PHRD	•			: 7.0 PI	1				4	
Start Date:	1/1/2004			Complia		-		-	ing Lim		Monit	_	
				Monitor			(Compl	iance St	atus:	Compl	iance S	Status:
				7/1/2025									
				8/1/2025									
				9/1/2025			_						
				10/1/202									
				11/1/202									
			Other Co	ompliance	Sched	lules	S						
Compliance Scl	hedule Activ	vity				Due D	ate		Achie	ved D	Date		
CROSS CONNEC	CTION SURV	EY REPORT				3/1/2	026						
SUBMIT LEAD C	CONSUMER	NOTICE CERTIFICA	ATE		3	3/31/2	2026						
		Water	System Facili	ty and Sar	npling	Poi	nt Inv	/ento	ory				
Water								Total	Lead	and			
	er System F	acility	Sampling Point		nt		C	oliforr					Stage
Facility ID			ID	Description			tatus	Rule	Rule	Tier	Asbesto	s WQF	2 DBPR
00600 DIST	RIBUTION S	SYSTEM	4	GENERIC DIST			Α	Υ					
			DOWNSTREAM			N	Α						
			PVSC001	UNIT 9 NONN	AS KS		Α	Υ	2	<u>'</u>	Υ		

Water System	Water System Facility	Sampling Point	Sampling Point		Total Coliform	Lead and Copper		Stage
acility ID		ID	Description	Status	Rule		Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		PVSC001	UNIT 9 NONNAS KS	Α	Υ	2	Υ	
		PVSC002	UNIT 8 NU LOOK SINK	Α	Υ	2	Υ	
		PVSC003	PLAYSHOOL STAFF BR	Α	Υ	2	Υ	
		PVSC004	PLAYSCHOOL KITCHEN	Α	Υ	2	Υ	Υ
		PVSC005	UNIT 13 OXFORD PC	Α	Υ	2	Υ	
		PVSC006	UNIT 4 OXFORD DENTAL	Α	Υ	2	Υ	
		PVSC007	UNIT 1-2 ROSES SINK	Α	Υ	2	Υ	Υ
		PVSC008	UNIT 6-7 BAR SINK	Α	Υ	2	Υ	
		PVSC009	UNIT 11 CUSTOM BLD	Α	Υ	2	Υ	
		PVSC010	UNIT 14 KITCHEN SPLY	Α		2	Υ	
		PVSC011	UNIT 12 MTG CO SINK	Α	Υ	2	Υ	
		PVSC012	THE OFFICE BR	Α	Υ	2	Υ	
		PVSC013	CPM KITCHEN SINK	Α	Υ	2	Υ	

	Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source				
CT1085033	CT1085033 PLEASANT VALLEY SHOPPING PLAZA					89	Р	GW				
Local Address (Local Address (where applicable)			Residential		al Industri	al Combine	ed Agricultural				
248 OXFORD RO	Connections	15										

Connecticut Department of Public Health Drinking Water Section

Towns Served: OXFORD

	Water	System Facil	ity and Sampling Po	oint Ir	nvento	ry			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description		Total Coliform Rule	Lead and Copper Rule Tier	Ashestos	WOR	Stage
rucinty ID	<u>'</u>	PVSC014	KINDERCARE TOD SINK	Status A	Υ	2	Y	WQI	2 DDFN
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
10506	WELL #2	2	WELL #2	Α					
10507	WELL #1	2	WELL #1	Α					
10513	COMBINED WELL #1 AND #2	2	COMBINED WELL #1 AND	Α					
48695	PLEASANT VALLEY TREATMENT STATION								

Certified Operator Information

Water System Facility: PLEASANT VALLEY TREATMENT STATION (WSF ID: 48695)

Facility Classification: CLASS 1 T	REATMENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
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	12/31/2025

	Contact Information											
Name				Organization	1		Job Title					
Dr. Terry Blake				T&J Realty								
Mailing Address Line	e One		Mailing Addr	ess Line Two			City	State	Zip Code			
3333 Main St						Stratford		СТ	06614			
Business Phone	Extension	Fax	Мс	bile Phone	Emergency Phone	Email Ad	dress					
203-258-2997						terryblak	e723@aol.c	om				

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

Please note the following:

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

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

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

End of schedule