

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1100112	AQUARION-NORTH MOUNTAIN			NTNC	370	L	SWP	
Local Address (where applicable)			Service	Residential	Commercial	Industrial	Combined	Agricultural
201 NORTH MOUNTAIN ROAD PLAINVILLE			Connections			3		
Towns Served: PLAINVILLE								

Monitoring Requirements

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

Asbestos (1094) **1 routine (RT) per nine years**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
DISTRIBUTION (4)	1/1/17 - 12/31/25		Complete
	1/1/26 - 12/31/34		

Total Coliform (3100) **1 routine (RT) per quarter**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Lead And Copper (PBCU) **5 routine (RT) per three years**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/25 - 12/31/27	6/1-9/30	
	1/1/28 - 12/31/30	6/1-9/30	

Physical Parameters (PPS) **1 routine (RT) per quarter**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION SURVEY REPORT	3/1/2025	

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	07236	NORTH MOUNTAIN INTER	A	Y			
		07237	HHC ROOM 1108	A	Y	N		
		07238	HHC ROOM 1116	A		N		
		07239	HHC ROOM 1544	A	Y	N		
		07240	HHC ROOM 1616	A	Y	N		
		07241	HHC ROOM B109	A	Y	N		
		4	DISTRIBUTION	A	Y			
	DOWNSTREAM		DISTRIBUTION	A	Y			
		HHC1108	HHC ROOM 1108	A	Y			
		HHC1116	HHC ROOM 1116	A	Y			
		HHC1544	HHC ROOM 1544	A	Y			

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.

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Towns Served: PLAINVILLE								

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	Stage WQP 2 DBPR
		HHC1616	HHC ROOM 1616	A	Y			
		HHCB109	HHC ROOM B109	A	Y			
		NMPS1108	NMPS-ROOM 1108	A	Y	N		
		NMPS1116	NMPS-ROOM 1116	A	Y	N		
		NMPS1544	NMPS-ROOM 1544	A	Y	N		
		NMPS1616	NMPS ROOM 1616	A	Y	N		
		NMPSB109	NMPS-ROOM B109	A	Y	N		
		UPSTREAM	DISTRIBUTION	A	Y			
60462 INTERCONNECTON - CT0890011								

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
HAVEL, DOUGLAS G.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2027
		WATER TREATMENT PLANT OPERATOR - CLASS III	6/30/2027
HELMING, TRAVIS	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	9/30/2028
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2028
FARRELLY, MARC	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2027
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2027
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	8/26/2024
HOGE, TYLER N	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2027

Contact Information

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	Email Address		
203-926-4320			203-929-5297			203-395-3205	rulrich@aquarionwater.com		

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

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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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