	Connecticut Department	of Public H	lealth	Dr	inkin	σWa	ater	Se	ction	
	Water Quality Mon					_			CCIOII	
PWS ID	PWS Name		u dom	_					er Type I	Primary Source
CT1130011	PORTLAND WATER DEPARTMENT			Clus	C	5,0		OWI	L	SWP
	vhere applicable)	Service	Resident	tial	Commerc		dustria	اد	Combined	_
Local Address (V	where applicable,	Connections	2,053		240	Jan III	29	ui	COMBINE	Agriculturur
Towns Served: N	MIDDLETOWN, PORTLAND		2,033		240					
		nitoring Requ	ireme	nts						
Water System	Facility: DISTRIBUTION SYSTEM (WS									
Chlorine Resid	dual (1012)							6 ro	utine (R1) per month
	Point (Sampling Point ID)		Monitorii	ng Pe	eriod (Collecti			=	liance Status
	Inventory of Active Sampling Points		7/1/25 -							omplete
	, , , ,		8/1/25 -							omplete
			9/1/25 -		-					omplete
			10/1/25 -							omplete
			 11/1/25 -							omplete
			 12/1/25 -							<u> </u>
Asbestos (10	94)			· ·			1 ro	utin	e (RT) pe	er nine years
Sampling F	Point (Sampling Point ID)		Monitori	ng Pe	eriod (Collecti	on Pei	riod	Comp	liance Status
Select from	Inventory of Active Sampling Points		1/1/23 - :	12/3:	1/31					
Total Coliform	n (3100)							6 ro	utine (R1) per month
Sampling F	Point (Sampling Point ID)		Monitorii	ng Pe	eriod (Collecti			-	liance Status
Select from	Inventory of Active Sampling Points		7/1/25 -	7/31	L/25				С	omplete
			8/1/25 -	8/31	L/25				С	omplete
			9/1/25 -	9/30)/25				С	omplete
			10/1/25 -	10/3	31/25				С	omplete
			11/1/25 -	11/3	30/25				С	omplete
			12/1/25 -	12/3	31/25					
			1/1/26 -	1/31	L/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					
Disinfectant B	Syproducts - TTHM & HAA5 (DBP)						2	rou	tine (RT)	per quarter
Sampling F	Point (Sampling Point ID)		Monitori	ng Pe	eriod (Collecti	on Pei	riod	Comp	liance Status
69 BARLET	T ST PUMP ST. (PORT 10)		4/1/25 -	6/30)/25	4/1	-4/30		С	omplete
			7/1/25 -	9/30)/25	7/1	-7/31		С	omplete
			10/1/25 -	12/3	31/25	10/1	-10/31	1	С	omplete
			1/1/26 -				-1/31			
			4/1/26 -	6/30)/26	4/1	-4/30			
379 OLD M	ARLBOROUGH TPK (PORT2D)		4/1/25 -				-4/30			omplete
			7/1/25 -	9/30)/25	7/1	-7/31		С	omplete
			10/1/25 -				-10/31	1	С	omplete
			1/1/26 -				-1/31			
			4/1/26 -	6/30)/26	4/1	-4/30			
Lead And Cop										three years
	Point (Sampling Point ID)		Monitori			Collecti		riod		liance Status
Select from	Inventory of Active Sampling Points		1/1/23 - 3	12/3	1/25	6/1	-9/30		С	omplete

	Connecticut Department	of Public F	laalth	D	rinkin	σ I	Nator	· C	action	
	Water Quality Mon					_			ection	
PWS ID	PWS Name	intornig an	u Con	_		_			unor Tuno Dr	imary Source
				Cla		I PC	5,010	UV	L	SWP
CT1130011	PORTLAND WATER DEPARTMENT	Service	Residen	+ial	Commer	reiel	Industri	ial	Combined	_
Local Address	(where applicable)	Connections	2,053		240	Clai	29	ldI	Combined	Agricultural
Towns Convode	MIDDLETOWN, PORTLAND	00111100110113	2,053)	240		29			
Towns Serveu.			•							
Water Systen	Mon Facility: DISTRIBUTION SYSTEM (W	nitoring Requ SF ID: 00600)	ııreme	nts	•					
-	pper (PBCU)	,					20 ro	utir	ne (RT) per	three years
	Point (Sampling Point ID)		Monitori	ina F	Period	Coll	ection Pe			ance Status
J. J. J.			1/1/26 -				6/1-9/30			
Physical Para	ameters (PPS)		, , -		, -		-, -,		outine (RT)	per month
-	Point (Sampling Point ID)		Monitori	ina F	Period	Coll	ection Pe			ance Status
	m Inventory of Active Sampling Points		7/1/25 -							mplete
			8/1/25 -							mplete
			9/1/25 -		-					mplete
			10/1/25 -							mplete
			11/1/25 -							mplete
					-					<u> </u>
			1/1/26 -	-						
			8/26							
		3/1/26 - 3/31/26								
			4/1/26 -							
			5/1/26 -		-					
			6/1/26 -	_	-					
Water Systen	n Facility: ENTRY POINT (WSF ID: 007	['] 00)	• •	<u>, </u>	•					
Net Gross Al	• • •						1 ro	utir		three years
Sampling	Point (Sampling Point ID)		Monitori			Coll	ection Pe	riod		ance Status
ENTRY PC	DINT (3)		1/1/23 -						Со	mplete
			1/1/26 -	12/3	31/28					
Uranium (40	•						1 ro	utir		three years
	Point (Sampling Point ID)		Monitori			Coll	ection Pe	riod		ance Status
ENTRY PC	DINT (3)		1/1/23 -						Со	mplete
			1/1/26 -	12/3	31/28					
	adium-226/228 (4010)						1 ro	utir		three years
	Point (Sampling Point ID)		Monitori			Coll	ection Pe	rioc		ance Status
ENTRY PC	DINT (3)		1/1/23 -						Со	mplete
			1/1/26 -	12/3	31/28					
	article Activity (4100)									three years
	Point (Sampling Point ID)		Monitori			Coll	ection Pe	rioc		ance Status
ENTRY PC	DINT (3)		1/1/23 -						Со	mplete
			1/1/26 -	12/3	31/28					
	Beta Particle & Photon Emitters (4101)	-								three years
	Point (Sampling Point ID)		Monitori			Coll	ection Pe	riod		ance Status
ENTRY PC	DINT (3)		1/1/23 -						Со	mplete
			1/1/26 -	12/3	31/28					
Tritium (410	02)						1 ro	utir	ne (RT) per	three years

Monitoring Period

Collection Period

Sampling Point (Sampling Point ID)

Compliance Status

Connecticut Departme	nt of Public F	lealth	Dr	inkin	σV	Vater	- S	ection	
Water Quality M					_			cction	
PWS ID PWS Name	8 -		_				-	ner Type P	rimary Source
CT1130011 PORTLAND WATER DEPARTMENT				С	_	5,010		L	SWP
Local Address (where applicable)	Service	Residen	tial	Commer	cial	Industr	ial	Combined	Agricultural
	Connections	2,053	3	240		29			
Towns Served: MIDDLETOWN, PORTLAND									l
M	lonitoring Requ	uireme	nts						
Water System Facility: ENTRY POINT (WSF ID: 0	0700)								
Tritium (4102)						1 ro	utin	e (RT) per	three years
Sampling Point (Sampling Point ID)		Monitori	ng P	eriod	Colle	ection Pe			ance Status
ENTRY POINT (3)		1/1/23 -	12/3	1/25				Со	mplete
		1/1/26 -	12/3	1/28					
Strontium-90 (4174)						1 ro	utin	e (RT) per	three years
Sampling Point (Sampling Point ID)		Monitori	ng P	eriod	Colle	ection Pe	riod	l Compli	ance Status
ENTRY POINT (3)	<u>-</u>	1/1/23 -	12/3	1/25				Co	mplete
		1/1/26 -	12/3	1/28					
Inorganic Chemicals (IOCS)						1 ro	utin	e (RT) per	three years
Sampling Point (Sampling Point ID)		Monitori	ng P	eriod	Colle	ection Pe			ance Status
ENTRY POINT (3)		1/1/25 -	12/3	1/27					
Nitrate And Nitrite (NOX)							1	l routine (F	RT) per year
Sampling Point (Sampling Point ID)		Monitori	ng P	eriod	Colle	ection Pe	riod	l Compli	ance Status
ENTRY POINT (3)		1/1/24 -	12/3	1/24				Сс	mplete
		1/1/25 -	12/3	1/25				Со	mplete
		1/1/26 -	12/3	1/26					
Pesticides, Herbicides and Polychlorinated Biphe	enyls (PCBs) (SOCS)				2 ro	utin	e (RT) per	three years
Sampling Point (Sampling Point ID)		Monitori	ng P	eriod	Colle	ection Pe	riod	l Compli	ance Status
ENTRY POINT (3)		1/1/23 -	12/3	1/25				Co	mplete
		1/1/26 -	12/3	1/28					
Organic Chemicals (VOCS)							1	L routine (F	RT) per year
Sampling Point (Sampling Point ID)		Monitori	ng P	eriod	Colle	ection Pe	eriod	l Compli	ance Status
ENTRY POINT (3)		1/1/24 -	12/3	1/24				Со	mplete
		1/1/25 -	12/3	1/25				Co	mplete
		1/1/26 -	12/3	1/26					
Water System Facility: GLASTONBURY RD WELL	1 (WSF ID: 434)								
E. Coli (3014)							1 r	outine (RT)	per month
Sampling Point (Sampling Point ID)		Monitori	ng P	eriod	Colle	ection Pe	eriod	l Compli	ance Status
GLASTONBURY RD WELL (2)		7/1/25 -	7/3:	1/25				Co	mplete
		8/1/25 -	8/3:	1/25				Co	mplete
		9/1/25 -	9/30	0/25		-		Co	mplete
		10/1/25 -	10/3	31/25				Со	mplete
		11/1/25 -	11/3	30/25				Co	mplete
		12/1/25 -	12/3	31/25				Со	mplete
		1/1/26 -	1/3	1/26					
		2/1/26 -	2/28	3/26					
		3/1/26 -	3/3:	1/26					
		4/1/26 -	4/30	0/26					
		5/1/26 -	5/3	1/26					
		C /4 /2C	- 1-	- /					

6/1/26 - 6/30/26

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

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT1130011	PORTLAND WATER DEPARTMENT				С	5,010	L	SWP
Local Address (v	Local Address (where applicable)		Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
		Connections	2,05	3	240	29		

Towns Served: MIDDLETOWN, PORTLAND

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

vater system racinty.	LIVINI I OIIVI (WSI ID. 00700)				
Analyte	Monitoring Requirement (Summary Typ	e)	Operating Limit		Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring	(CHLR)	Minimum: 0.2 N	ИG/L	Daily
Start Date: 2/1/2003		Compliance	History:	Operating Limit	Monitoring
	N	Nonitoring P		Compliance Status	: Compliance Status:
	7	7/1/2025 - 7/	/31/2025		
	8	3/1/2025 - 8/	/31/2025		
	9	/1/2025 - 9/	/30/2025		
	1	.0/1/2025 - 1	10/31/2025		
	1	1/1/2025 - 1	11/30/2025		

Other Compliance SchedulesCompliance Schedule ActivityDue DateAchieved DateCERTIFY LEAD SL NOTIFICATION7/1/20251/5/2025SUBMIT LEAD CONSUMER NOTICE CERTIFICATE12/29/2025MAIL/HAND DELIVER NOTICE TO CONSUMERS12/31/2025CROSS CONNECTION SURVEY REPORT3/1/2026CERTIFY LEAD SL NOTIFICATION7/1/2026

Water System Facility and Sampling Point Inventory

Water					Total	Lead and			
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper			Stage
Facility ID)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
00600	DISTRIBUTION SYSTEM	001	RESERVOIR TANK	Α	Υ	2			
		002	WELL TREATED/DRAW	Α	Υ	2			
		003	505 G'BURY TPKE	Α	Υ	2			
		004	236 PALEY FARM RD	Α	Υ	3			
		005	72 HIGH STREET	Α	Υ	3			
		006	226 MAIN STREET	Α	Υ	2			
		007	217 PICKERING STREET	Α	Υ	2			
		800	ROSE HILL ROAD	1	Υ	3			
		010	LOWER MAIN STREET	Α		2			
		011	29 MYRTLE ROAD	Α		3			
		012	111 COX ROAD	Α		3			
		013	63 COX ROAD	Α		3			
		014	64 FREESTONE AVE.	Α		3			
		015	481 MAIN STREET	Α		3			
		016	20 TUCCITTO ROAD	Α		3			
		017	4 SUSAN CIRCLE	Α		3			
		018	180 OLD MARLBOROUGH	Α		3			
		019	19 TAYLOR DRIVE	Α		3			
		020	9 SCENIC DRIVE	Α		3			
		021	16 SPRING STREET	Α		3			

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

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1130011	PORTLAND WATER DEPARTMENT				С	5,010	L	SWP
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
		Connections	2.05	3	240	29		

Towns Ser	ved: MIDDLETOWN, PORTLAND								
	Water	System Facili	ity and Sampling Po	oint Ir	ventor	У			
Water					Total	Lead and			
System	Water System Facility		Sampling Point		Coliform	Copper			Stage
Facility ID)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBP
		022	24 WILLIAM STREET	Α		3			
		023	40 EDGEWOOD ROAD	Α		3			
		024	430 MAIN STREET	Α		3			
		025	24 PICKERING STREET	I		2			
		026	29 CHURCH STREET	Α		3			
		027	GLORIA HEIGHTS	I		3			
		028	55 EAST MAIN STREET	Α		3			
		029	20 BELL COURT	Α		3			
		030	5 DOGWOOD DRIVE	Α		2			
		031	224 COX ROAD	Α		3			
		032	328 MAIN STREET	Α		3			
		033	1 MICHAEL DRIVE	Α		3			
		034	32 EAST MAIN STREET	Α		3			
		4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		PORT 10	69 BARLETT ST PUMP S	Α					Υ
		PORT1	MDC ENTRY	Α	Υ				
		PORT1D	956 GLASTONBURY RD	Α	Υ				
		PORT1U	DRAGHI FARM STAND	Α	Υ				
		PORT2	RESERVOIR TANK	Α	Υ				
		PORT2D	379 OLD MARLBOROUGH	Α	Υ				Υ
		PORT2U	RESERVOIR TANK IN	Α	Υ				
		PORT3	594 MAIN - FIRE CO 2	Α	Υ				
		PORT3D	575 MAIN -GUILDER SC	Α	Υ				
		PORT3U	634 MAIN-CELLAR SAVE	Α	Υ				
		PORT4	265 MAIN - POLICE	Α	Υ				
		PORT4D	245 MAIN - LIB BANK	Α	Υ				
		PORT4U	269 MAIN - BANK AMER	Α	Υ				
		PORT5	81 HIGH -VALLEY VIEW	Α	Υ				
		PORT5D	44 HIGH - GREYSTONE	Α	Υ				
		PORT5U	95 HIGH -HIGH SCHOOL	Α	Υ				
		PORT6	WASTEWATER PLANT	Α	Υ				
		PORT6D	1 LOW MAIN - ANIMAL	Α	Υ				
		PORT6U	LOWER MAIN	Α	Υ				
		PORT9	HIGH STREET TANK	Α	Υ				
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
232	WELL TREATMENT STATION			- •					
434	GLASTONBURY RD WELL 1	2	GLASTONBURY RD WELL	Α					
	nformation has been provided to help ow				with drinkir	na water aval	itv monitorin	a reauii	rements.

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.

(Connecticu	ıt Depa	rtment	of Public	c Health	Dri	nking	g Wa	ter S	Secti	on	
	Wat	er Qual	lity Mon	itoring a	and Con	nplia	ance	Sche	dule	<u> </u>		
PWS ID F	WS Name										ype P	rimary Source
CT1130011 F	ORTLAND WAT	R DEPARTN	MENT				С	5,01	10	L		SWP
Local Address (wh	ere applicable)			Service	Resider	ntial Co	ommerc	ial Inc	lustrial	Com	bined	Agricultural
				Connection	ons 2,053	3	240		29			
Towns Served: M	DDLETOWN, PO	RTLAND										
	,	Water Sy	stem Fac	cility and	Sampling	Poin	nt Inve	entory	y			
Water							Т	otal	Lead ar	nd		
*	System Facility	2		int Sampling				liform	Coppe			Stage
Facility ID			ID	Description	on	Sto	atus ^F	Rule	Rule Ti	er Asb	estos	WQP 2 DBPR
	CONNECTION - 0011 - ROUTE 17											
47020 2 RESE	RVOIR STORAGE	TANKS										
47022 HIGH S	TREET TANK											
			Certifie	d Operat	or Inform	nation	n					
Water System F	acility: DISTRI	BUTION SY	STEM (WS	F ID: 00600)								
Facility Classificat			-									Certification
Operator Name			Operator 1	уре	Certificatio	on(s)						Expiration
LYNCH, WILLIAM									9/30/2027			
W						EATMEN	NT PLAN	IT OPER	ATOR -	CLASS		6/30/2027
Water System F	acility: WELL 1	REATMEN	T STATION	(WSF ID: 23	2)							
Facility Classificat	ion: CLASS 1 TR	EATMENT PI	LANT									Certification
Operator Name			Operator 1	уре	Certification	on(s)						Expiration
LYNCH, WILLIAM	J.		CHIEF OPERA	ATOR	DISTRIBUTI	ION SYS	STEM OP	PERATO	R - CLAS	SS II		9/30/2027
					WATER TRE	6/30/2027						
ARMSTRONG, KYL	.E		ASSIGNED O	PERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I							9/30/2028
					WATER TRE	EATMEN	NT PLAN	LANT OPERATOR - CLASS II 9/30/2028				
			Co	ontact Inf	ormation	1						
Name				Organization	1					Job	Title	
Portland												
Mailing Address L	ine One		Mailing Addr	ress Line Two				City	У	St	ate	Zip Code
Business Phone	Extension	Fax	Me	obile Phone	Emergency	y Phone	e Email <i>i</i>	Address	;			
Contact Role(s):	Owner											
Name				Organization						Job	Title	
Mr. Ryan O'halpii	1		I	Town of Port	land			Dir. o	of Publi	c Work	S	
	ailing Address Line One Mailing Address Line Tw							City	У		ate	Zip Code
33 East Main Stre							Portla			(T	06480
Business Phone 860-342-6734	Extension	Fax	M	obile Phone	908-770-	-		Address in@por		org		
Contact Role(s):	Administrative (Contact										

	Connecticut Department of Public Health Drinking Water Section											
	Wa	ter Qua	lity Mon	itoring	and	d Con	nplia	ince S	Schedul	le		
PWS ID	PWS Name						Classi	fication	Population	Owner Type	Primary Source	
CT1130011	PORTLAND WATER DEPARTMENT							С	5,010	L	SWP	
Local Address (wh	Service		Resider	ntial Co	ommerci	al Industri	al Combine	ed Agricultural				
		Connect	ions	2,053		240	29					
Towns Served: M	IDDLETOWN, PC	RTLAND		·								
Name				Organizatio	Organization Job Title					e		
Mr. Ryan Curley				Town of Portland First Selectman								
Mailing Address L	ine One		Mailing Addr	ess Line Two)				City	State	Zip Code	
33 East Main Stre	et		P.O. Box 71					Portlan	ıd	СТ	06480	
Business Phone	Extension	Fax	Mo	obile Phone	Er	nergency	/ Phone	Email A	Address	,		
860-342-6715								rcurley	@portlandc	t.org		
Contact Role(s):	Legal Contact		<u>'</u>									

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 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 H	lealth	Dr	inkin	ıg W	ater	Se	ction	
Water Quality Monito	oring an	d Con	npli	ance	Sch	edul	e		
PWS ID PWS Name	7		_					ner Type Pr	imary Source
CT1130021 CTWC - RIVERCREST DIVISION			0.0.0	С		88	-	Р	GW
	Service	Residen	tial	Commer		Industria	al	Combined	Agricultural
LYMAN LANE	Connections	22							
Towns Served: PORTLAND		I							
Monito	ring Requ	ireme	nts						
Water System Facility: DISTRIBUTION SYSTEM (WSF ID	: 00600)								
Chlorine Residual (1012)							1 ro	utine (RT)	per month
Sampling Point (Sampling Point ID)		Monitori	ing Pe	eriod	Collec	tion Per	riod	Complic	ance Status
Select from Inventory of Active Sampling Points		7/1/25 -	7/31	/25				Cor	mplete
		8/1/25 -	8/31	/25				Cor	mplete
		9/1/25 -	9/30	/25				Cor	mplete
		10/1/25 -	10/3	1/25				Cor	mplete
		11/1/25 -	11/3	0/25				Cor	mplete
Asbestos (1094)						1 ro	utin	e (RT) per	nine years
Sampling Point (Sampling Point ID)		Monitori	ing Pe	eriod	Collec	tion Per	riod	Compli	ance Status
Select from Inventory of Active Sampling Points		1/1/23 -	12/3	1/31					
Total Coliform (3100)							1 ro		per month
Sampling Point (Sampling Point ID)		Monitori	ing Pe	eriod	Collec	tion Per	riod	Compli	ance Status
Select from Inventory of Active Sampling Points		7/1/25 -	7/31	/25				Cor	mplete
		8/1/25 -	8/31	/25				Cor	mplete
		9/1/25 -	9/30	/25				Cor	mplete
		10/1/25 -	10/3	1/25				Cor	mplete
		11/1/25 -	11/3	0/25				Cor	mplete
		12/1/25 -	12/3	1/25					
		1/1/26 -							
		2/1/26 -	2/28	/26					
		3/1/26 -							
		4/1/26 -							
		5/1/26 -	5/31	/26					
		6/1/26 -	6/30	/26					
Disinfectant Byproducts - TTHM & HAA5 (DBP)								-	T) per year
Sampling Point (Sampling Point ID)		Monitori				tion Per	riod		ance Status
SAMPLING STATION (RC5000)		1/1/24 -		-		/1-8/31			mplete
		1/1/25 -	-	-		/1-8/31		Cor	mplete
		1/1/26 -	12/3	1/26	8,	/1-8/31			
Lead And Copper (PBCU)									six months
Sampling Point (Sampling Point ID)		Monitori			Collec	tion Per	riod		ance Status
Select from Inventory of Active Sampling Points		7/1/25 -						Cor	mplete
		1/1/26 -	6/30	/26					
Lead And Copper (PBCU)								-	T) per year
Sampling Point (Sampling Point ID)		Monitori				tion Per	riod		ance Status
Select from Inventory of Active Sampling Points		1/1/24 -	12/3	1/24	6,	/1-9/30		Cor	mplete

1/1/25 - 6/30/25

Monitoring Period

7/1/25 - 7/31/25

6/1-6/30

Collection Period

Schedule Generation Date: 12/12/2025

Physical Parameters (PPS)

Sampling Point (Sampling Point ID)

Select from Inventory of Active Sampling Points

Complete

Compliance Status

Complete

1 routine (RT) per month

Connecticut Department of I	Public H	lealth	Dı	rinking	g Wate	er S	Section	
Water Quality Monito	ring an	d Con	lar	iance s	Sched	ule		
PWS ID PWS Name			_					rimary Source
CT1130021 CTWC - RIVERCREST DIVISION				С	88		P	GW
Local Address (where applicable)	Service	Residen	tial	Commerc	ial Indus	trial	Combined	Agricultural
	Connections	22						
Towns Served: PORTLAND								
Monitor	ring Requ	iireme	nts					
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:								
Physical Parameters (PPS)						1	routine (RT)	per month
Sampling Point (Sampling Point ID)		Monitori	ng P	Period C	Collection	Perio	d Compli	ance Status
		8/1/25 -	8/3	1/25			Со	mplete
		9/1/25 -	9/3	0/25			Со	mplete
		10/1/25 -	10/	31/25			Со	mplete
		11/1/25 -	11/	30/25			Со	mplete
		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				
Water System Facility: ENTRY POINT (WSF ID: 00700)								
Inorganic Chemicals (IOCS)								three years
Sampling Point (Sampling Point ID)		Monitori			Collection	Perio	d Compli	ance Status
ENTRY POINT (3)		1/1/24 -						
		1/1/27 -	12/3	31/29				•
Nitrate And Nitrite (NOX)								RT) per year
Sampling Point (Sampling Point ID)		Monitori			Collection	Perio		ance Status
ENTRY POINT (3)		1/1/24 -						mplete
		1/1/25 -					Co	mplete
Padianuslidas Grass Alpha Cambined Padium & Hrani	um (DADA)	1/1/26 -	12/3	31/20		1 -	outing (DT)	per quarter
Radionuclides - Gross Alpha, Combined Radium & Urani Sampling Point (Sampling Point ID)	-	I Monitori	na P	Period (Collection			ance Status
ENTRY POINT (3)		4/1/25 -			onceron i	CITO		mplete
ENTITY (3)		7/1/25 -	_	-				mplete
		10/1/25 -						mplete
		1/1/26 -						p.c.c
		4/1/26 -	•	•				
Pesticides, Herbicides and Polychlorinated Biphenyls (PC	CBs) (SOCS		-,-	-,		1 r	outine (RT)	per quarter
Sampling Point (Sampling Point ID)		Monitori	ng P	Period C	Collection			ance Status
ENTRY POINT (3)		7/1/25 -	9/3	0/25			Со	mplete
	:	10/1/25 -	12/	31/25				
		1/1/26 -	3/3	1/26				_
		4/1/26 -	6/3	0/26				
Organic Chemicals (VOCS)						1 r	outine (RT)	per quarter
Sampling Point (Sampling Point ID)		Monitori	ng P	Period C	Collection	Perio	d Compli	ance Status
ENTRY POINT (3)		7/1/25 -	9/3	0/25			Co	mplete

10/1/25 - 12/31/25

Conno	ations Donartment of Di	ablia Haalth Drinki	na Watan Ca	ation
	cticut Department of Pu		O	CUOII
	Water Quality Monitori	<u> </u>		
PWS ID PWS Name				er Type Primary Source
	VERCREST DIVISION	C	88	P GW
Local Address (where applic	-	rvice Residential Commonnections 22	ercial Industrial	Combined Agricultural
LYMAN LANE	Col	nnections 22		
Towns Served: PORTLAND				
Matar Custom Facility		ng Requirements		
	ENTRY POINT (WSF ID: 00700)		1	tine (DT) was assessed
Organic Chemicals (VOC Sampling Point (Samp	•	Monitoring Period	Collection Period	tine (RT) per quarter Compliance Status
Sumpling Point (Sump	ing Foint ibj	1/1/26 - 3/31/26	Collection Period	Compliance Status
		4/1/26 - 6/30/26		
Organic Chemicals (VO	CE)	4/1/20 - 0/30/20	1 :	routine (RT) per year
Sampling Point (Samp		Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	mig rome ib/	1/1/24 - 12/31/24	Concetion remod	Complete
LIVINI I OIIVI (3)		1/1/25 - 6/30/25	1/1-6/30	Complete
Water System Facility: \	WELL 7 (WSE ID: 63310)	1/1/25 0/30/25	1/1 0/30	complete
E. Coli (3014)	7VLLE 7 (VV31 1D. 03310)		1	utine (RT) per month
Sampling Point (Samp	ding Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL 7 (2)	mig i ome ibj	8/1/25 - 8/31/25	Concetion i criod	Complete
(2)		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		oop.oco
		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		
Mon	thly Water System Facility	(WSF) Level Monitori	ng Requiremer	nts
Water System Facility: E	NTRY POINT (WSFID: 00700)			
Analyte	Monitoring Requirement (Summary T	Type) Operating Limit		Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitor	ing (CHLR) Minimum: 0.05	MG/L	Daily
Start Date: 8/1/2025		Compliance History:	Operating Limit	Monitoring
		Monitoring Period	Compliance Status:	Compliance Status:
		8/1/2025 - 8/31/2025		
		9/1/2025 - 9/30/2025		
		10/1/2025 - 10/31/2025		
		11/1/2025 - 11/30/2025		
Analyte	Monitoring Requirement (Summary T			Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 F	PH	Daily
Start Date: 12/1/2014		Compliance History:	Operating Limit	Monitoring
		Monitoring Period	Compliance Status:	Compliance Status:
		7/1/2025 - 7/31/2025		
		8/1/2025 - 8/31/2025		
		9/1/2025 - 9/30/2025		

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

PWS ID	PWS Name			Classification	Populatio	Owner	Туре	Primary Source
CT1130021	CTWC - RIVERCREST DIVISION			С	88	Р		GW
Local Address (v	vhere applicable)	Service	Residen	tial Commer	cial Indust	rial Co	mbine	d Agricultural
LYMAN LANE		Connections	22					

Towns Served: PORTLAND

Water System Facility: ENTRY POINT (WSFID: 00700)

Samples Req/Month **Analyte Monitoring Requirement (Summary Type) Operating Limit** Entry Point pH Monitoring (PHRD) Minimum: 7.0 PH Daily рΗ **Compliance History: Start Date: 12/1/2014 Monitoring Operating Limit Monitoring Period Compliance Status: Compliance Status:** 10/1/2025 - 10/31/2025

11/1/2025 - 11/30/2025

11/1/2023 - 11/30/202

Other Compliance Schedules

Compliance Schedule Activity

Due Date

Achieved Date

CROSS CONNECTION SURVEY REPORT 3/1/2029

LRUSS CO	NNECTION SURVEY REPORT		3/	1/2029					
	Wate	System Facili	ity and Sampling P	oint Ir	ventor	у			
Water					Total	Lead and			
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper		9	Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2	DBPF
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		RC5000	SAMPLING STATION	Α	Υ				Υ
		RIVC001	6 LYMAN ROAD	Α	Υ	3			
		RIVC002	10 LYMAN ROAD	1	Υ	3			Υ
		RIVC003	42 LYMAN ROAD	Α	Υ	3			
		RIVC004	36 LYMAN ROAD	Α	Υ	3			
		RIVC005	5 LYMAN ROAD	Α	Υ	3			
		RIVC006	21 LYMAN ROAD	Α	Υ	3			
		RIVC007	18 LYMAN ROAD	Α	Υ	3			
		RIVC009	27 LYMAN	Α	Υ				
		RIVC010	6 WELLWYN DRIVE	Α	Υ	1			
		RIVC011	46 WELLWYN DRIVE	Α	Υ	1			
		RIVC012	2 LYMAN ROAD	Α	Υ	3			
		RIVC013	7 LYMAN ROAD	Α	Υ	3			
		RIVC014	13 LYMAN ROAD	Α	Υ	3			
		RIVC015	15 LYMAN ROAD	Α	Υ	3			
		RIVC016	27 LYMAN ROAD	Α		3			
		RIVC017	28 LYMAN ROAD	Α	Υ	3			
		RIVC018	57 PAYNE BLVD	Α	Υ	3			
		RIVC019	63 PAYNE BLVD	Α	Υ	3			
		RIVC020	64 PAYNE BLVD	Α	Υ	3			
		RIVC021	5 WELLWYN DRIVE	Α	Υ	3			
		RIVC022	10 WELLWYN DRIVE	Α	Υ	3			
		RIVC023	38 WELLWYN DRIVE	Α	Υ	3			
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
36739	ATMOSPHERIC STORAGE								

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.

Water System Facility and Sampling Point Inventory Water System Facility Sampling Point Sampling Point Coliform Copper Status Rule Ter Asbestos WQ 2 Status Ter Te	C	onnecticut	•						_			Luon	
CT1130021 CTWC - RIVERCREST DIVISION			r Qual	ity Mon	itoring a	nd Con	_		_				
Comparison Com							Class	sification	Po		Owne		
Vater System Facility and Sampling Point Inventory Vater System Facility Sampling Point Sampling Point Total Lead and Copper Status Rule Total Lead and Copper Rule Tier Asbestos WQP 2.1	CT1130021 CT	WC - RIVERCREST	r division	l				С		88		Р	GW
Water System Facility and Sampling Point Inventory Water System Water System Facility Sampling Point Sampling Point Coliform Copper Status Rule Rule Tier Asbestos WQP 2.1 36741 PRESSURE TANK 52689 PUMP STATION 574 RIVERCREST PUMP HOUSE 63310 WELL 7 2 WELL 7 A Certified Operator Information Water System Facility: RIVERCREST PUMP HOUSE (WSF ID: 574) Facility Classification: CLASS 1 TREATMENT PLANT Operator Name Operator Type Certification(s) WATER TREATMENT PLANT OPERATOR - CLASS III 6/30/2 WATER TREATMENT PLANT OPERATOR - CLASS III 6/30/2 WATER TREATMENT PLANT OPERATOR - CLASS III 9/30/2 HINES, DAVE ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 9/30/2 WATER TREATMENT PLANT OPERATOR - CLASS III 9/30/2 CONTACT Information Name Organization	Local Address (whe	re applicable)					tial	Commerc	ial	Industria	al C	Combined	Agricultura
Water System Facility and Sampling Point Inventory Water System Water System Facility Sampling Point Sampling Point Sampling Point Sampling Point Status Rule Title	LYMAN LANE				Connection	1S 22							
Water System Facility Sampling Point Satus Rule Rule Tier Asbestos WQP 2 10 Maling Address Line One Malling Address Line One	Towns Served: POR	TLAND											
System Water System Facility ID		W	ater Sy	stem Fac	cility and Sa	ampling	Poi	nt Inve	ent	ory			
Pacility ID Description Status Rule Rule Tier Asbestos WQP 2 136741 PRESSURE TANK	Water							7	otal	Lead o	and		
36741 PRESSURE TANK 52689 PUMP STATION 574 RIVERCREST PUMP HOUSE 63310 WELL 7 2 WELL 7 A Certified Operator Information Water System Facility: RIVERCREST PUMP HOUSE (WSF ID: 574) Facility Classification: CLASS 1 TREATMENT PLANT Operator Name Operator Type Certification(s) Expiral KORNATZ, CHRISTOPHER CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 6/30/2 WATER TREATMENT PLANT OPERATOR - CLASS III 9/30/2 WATER TREATMENT PLANT OPERATOR - CLASS II 9/30/2 WATER TREATMENT PLA	•	ystem Facility	5					Со	lifor				Stage
STATE STAT	Facility ID			ID	Description			tatus	Rule	Rule	Tier	Asbestos	WQP 2 DBP
STATE RIVERCREST PUMP HOUSE	36741 PRESSU	RE TANK											
Certified Operator Information Water System Facility: RIVERCREST PUMP HOUSE (WSF ID: 574) Facility Classification: CLASS 1 TREATMENT PLANT Operator Name Operator Type Certification(s) CASSI TREATMENT PLANT Operator Name Operator Type Certification(s) CASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III JAJ1/2 HINES, DAVE ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III JAJ1/2 HINES, DAVE ASSIGNED OPERATOR Organization Connecticut Water Company Vp, Service Delivery Mailing Address Line One Waliling Address Line Two Osa West Main Street Contact Role(s): Extension Mr. Gerald McDermott Mr. Gerald McDermott Mailing Address Line One Mailing Add	52689 PUMP S	ΓΑΤΙΟΝ											
Certified Operator Information Water System Facility: RIVERCREST PUMP HOUSE (WSF ID: 574) Facility Classification: CLASS 1 TREATMENT PLANT Operator Name Operator Type Certification(s) CONNATZ, CHRISTOPHER CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 6/30/2 WATER TREATMENT PLANT OPERATOR - CLASS III 3/31/2 HINES, DAVE ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 9/30/2 CONTACT Information Name Organization Organi	574 RIVERCR	EST PUMP HOUSE	E										
Water System Facility: RIVERCREST PUMP HOUSE (WSF ID: 574) Facility Classification: CLASS 1 TREATMENT PLANT Operator Name Operator Type Certification(s) KORNATZ, CHRISTOPHER CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 3/31/2 WATER TREATMENT PLANT OPERATOR - CLASS III 3/31/2 HINES, DAVE ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 9/30/2 Contact Information Name Organization	63310 WELL 7			2	WELL 7			Α					
Water System Facility: RIVERCREST PUMP HOUSE (WSF ID: 574) Facility Classification: CLASS 1 TREATMENT PLANT Operator Name Operator Type Certification(s) KORNATZ, CHRISTOPHER CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 3/31/2 HINES, DAVE ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 3/31/2 HINES, DAVE ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 9/30/2 Contact Information Name Organization Organization Organization Organization Organization Organization Octivy State Zip Cod 39 West Main Street Clinton CT 06413 Business Phone Extension Fax Mobile Phone Emergency Phone Email Address 860-664-6140 Contact Role(s): Legal Contact, Owner Mailing Address Line One Mailing Address Line Two City State Contact Role(s): Legal Contact, Owner Mailing Address Line One Mailing Address Line Two City State Clinton CT 06413 Business Phone Extension Fax Mobile Phone Emergency Phone Email Address Clinton CT 06413 Business Phone Extension Fax Mobile Phone Emergency Phone Email Address Clinton CT 06413 Business Phone Extension Fax Mobile Phone Emergency Phone Email Address ctwcdphadmin@ctwater.com Chall Business Phone Extension Fax Mobile Phone Emergency Phone Email Address ctwcdphadmin@ctwater.com				Certifie	d Operato	r Inform	atio	on					
Certification: CLASS 1 TREATMENT PLANT Operator Name Operator Type Certification(s) KORNATZ, CHRISTOPHER CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III JA/31/2 HINES, DAVE ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III JA/31/2 HINES, DAVE ASSIGNED OPERATOR Organization Name Organization Organization Organization Mailing Address Line One Mailing Address Line Two Contact Role(s): Legal Contact, Owner Name Organization Or	Water System Fac	cility: RIVERCR	EST PUM	P HOUSE (WSF ID: 574)								
Operator Name OPERATOR OPANION OPERATOR				-	,								Certification
CONTACT, CHRISTOPHER CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 3/31/2 WATER TREATMENT PLANT OPERATOR - CLASS III 9/30/2 CONTACT Information Name Organization Organization Organization Organization Organization Organization Organization Organization Organization Connecticut Water Company Vp, Service Delivery Mailing Address Line One Mailing Address Line Two City State Zip Cod 3/3 West Main Street Clinton CT 06413 Business Phone Extension Extension Fax Mobile Phone Emergency Phone Email Address 800-391-1924 craig.patla@ctwater.com Contact Role(s): Legal Contact, Owner Name Organization Organization Job Title Wr. Gerald McDermott Mailing Address Line One Emergency Phone Emergency Phone					уре	Certificatio	n(s)						Expiration
WATER TREATMENT PLANT OPERATOR - CLASS III 3/31/2 HINES, DAVE ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 9/30/2 Contact Information Name Organization Job Title Wr. Craig J. Patla Connecticut Water Company Vp, Service Delivery Mailing Address Line One Mailing Address Line Two City State Zip Cod 38 West Main Street Clinton CT 06413 Business Phone Extension Fax Mobile Phone Emergency Phone Email Address 860-664-6140 S00-391-1924 craig.patla@ctwater.com Contact Role(s): Legal Contact, Owner Name Organization Job Title Wr. Gerald McDermott The Connecticut Water Company Manager, Service Del Wailing Address Line One Mailing Address Line Two City State Zip Cod 38 West Main Street Clinton CT 06413 Business Phone Extension Fax Mobile Phone Emergency Phone Email Address 860-664-6125 Clinton CT 06413 Business Phone Extension Fax Mobile Phone Emergency Phone Email Address 860-664-6125 Contact Role(s): Administrative Contact		PHER						/STEM OF	PERA	TOR - CLA	ASS II	1	6/30/2028
Contact Information Name Organization Mailing Address Line One Mailing Address Phone Mr. Graid McDermott Mr. Graid McDermott Mr. Graid McDermott Mailing Address Line One Mailing Address Line Two Clinton CT O6413 Mobile Phone Emergency Phone Email Address 860-664-6140 Contact Role(s): Mailing Address Line One Mailing Address Line Two Contact Role(s): Mailing Address Clinton CT Ofganization Manager, Service Del Mailing Address Line One Mailing Address Line Two Clinton City Manager, Service Del Mailing Address Line One Mailing Address Line Two Clinton CT O6413 Mailing Address Line One Mailing Address Line Two Clinton CT O6413 Mailing Address Line One Mailing Address Line Two Clinton CT O6413 Mobile Phone Emergency Phone Email Address Clinton CT O6413 Mobile Phone Emergency Phone Email Address Cutwcdphadmin@ctwater.com Contact Role(s): Administrative Contact	,												3/31/2027
Contact Information Name Organization Organization Organization Vp, Service Delivery Mailing Address Line One Mailing Address Line Two Organization Organizatio	HINES, DAVE			ASSIGNED OF									9/30/2027
Mr. Craig J. Patla Mr. Craig J. Patla Mailing Address Line One Mailing Address Line One Mailing Address Line Two Clinton CT 06413 Business Phone Extension Contact Role(s): Mailing Address Line One Mailing Address Line Two Contact Role(s): Mailing Address Line Two Contact Role(s): Mobile Phone Emergency Phone Emergency Phone Emergency Phone Email Address Address Mobile Phone Mailing Address Line One Mailing Address Line Two Contact Role(s): Mailing Address Line One Mailing Address Line Two Mobile Phone Emergency Phone City State Cip Cod Contact Role(s): Manager, Service Del Mailing Address Line Two City State Cip Cod Contact Role(s): Mailing Address Line Two Cip O6413 Contact Role(s): Administrative Contact Administrative Contact													0,00,000
Mr. Craig J. Patla Connecticut Water Company Vp, Service Delivery Mailing Address Line One Mailing Address Line Two Clinton CT 06413 Business Phone Extension Fax Mobile Phone Emergency Phone 800-391-1924 craig.patla@ctwater.com Contact Role(s): Legal Contact, Owner Ware Organization Mailing Address Line One Mailing Address Line Two Mailing Address Line One Mailing Address Line Two Clinton Contact Role(s): State Clinton Crity Clinton Crity State Clinton Crity State Clinton Crity State Clinton CT 06413 Business Phone Extension Business Phone Extension Fax Mobile Phone Emergency Phone Email Address Clinton CT 06413 Contact Role(s): Administrative Contact	Namo				1	illiation						Job Titlo	
Mailing Address Line One Mailing Address Line Two Clinton CT O6413 Business Phone Extension Fax Mobile Phone Emergency Phone Email Address 860-664-6140 Contact Role(s): Legal Contact, Owner Name Organization The Connecticut Water Company Mailing Address Line One Mailing Address Line Two City State Zip Cod Administrative Contact Contact Role(s): Mailing Address Line Two Contact Role(s): Emergency Phone Email Address Clinton City State Zip Cod Cod Cod Cod Cod Cod Cod Cod						lator Compa	201/			n Sonvice			
Business Phone Extension Fax Mobile Phone Emergency Phone Email Address 860-664-6140				Mailing Addr		ater Compa	ану		V	-	: Dell		Zin Codo
Business Phone Extension Fax Mobile Phone Emergency Phone Email Address 860-664-6140 800-391-1924 craig.patla@ctwater.com Contact Role(s): Legal Contact, Owner Name Organization Job Title Mr. Gerald McDermott The Connecticut Water Company Manager, Service Del Mailing Address Line One Mailing Address Line Two City State Zip Cod 93 West Main Street Clinton CT 06413 Business Phone Extension Fax Mobile Phone Emergency Phone Email Address 860-664-6125 ctwcdphadmin@ctwater.com Contact Role(s): Administrative Contact				ivialling Auur	ess Line Two			Clinto	n	City			
860-664-6140 Contact Role(s): Legal Contact, Owner Name Organization The Connecticut Water Company Manager, Service Del Mailing Address Line One Mailing Address Line Two Other Mailing A			Гоч	N/A	ahila Dhana	Emorgonou	Dha					CI	00413
Contact Role(s): Legal Contact, Owner Name Organization Job Title Mr. Gerald McDermott The Connecticut Water Company Manager, Service Del Mailing Address Line One Mailing Address Line Two City State Zip Cod 93 West Main Street Clinton CT 06413 Business Phone Extension Fax Mobile Phone Emergency Phone Email Address 860-664-6125 ctwcdphadmin@ctwater.com Contact Role(s): Administrative Contact		EXTENSION	FdX	IVIC	oblie Phone								
Name Mr. Gerald McDermott Mailing Address Line One Mailing Address Line Two Mailing Address Line Two City State Zip Cod Ginton CT O6413 Business Phone Extension Ray Mobile Phone Emergency Phone Email Address ctwcdphadmin@ctwater.com Contact Role(s): Administrative Contact		and Contact Own				800-391-	1924	craig.	Jatia	@Ctwate	1.0011	[1]	
Mr. Gerald McDermott Mailing Address Line One Mailing Address Line Two City State Zip Cod Giss State Cinton CT O6413 Business Phone Extension Fax Mobile Phone Emergency Phone Emergency Phone Email Address ctwcdphadmin@ctwater.com Contact Role(s): Administrative Contact		gai Contact, Owi	ner		Organization							Joh Titlo	
Mailing Address Line One Mailing Address Line Two City State Zip Cod Grave State Clinton CT O6413 Business Phone Extension Fax Mobile Phone Emergency Phone Email Address ctwcdphadmin@ctwater.com Contact Role(s): Administrative Contact						+ \\/a+a Ca				1			
93 West Main Street Business Phone Extension Fax Mobile Phone Emergency Phone Email Address 860-664-6125 Contact Role(s): Administrative Contact				N 4 = 111 A -1 -1		ut water co	mpa	ny			Servic		7:- CI-
Business Phone Extension Fax Mobile Phone Emergency Phone Email Address 860-664-6125 ctwcdphadmin@ctwater.com Contact Role(s): Administrative Contact				ivialling Addr	ess line Two			Clinto		City			
860-664-6125 ctwcdphadmin@ctwater.com Contact Role(s): Administrative Contact			F	0.4	- I- il - Di	F	DI					CI	06413
Contact Role(s): Administrative Contact		extension	Fax	IVIO	Dulle Prione	Emergency	PNOI						
***		duninistrustinos C	****					ctwca	pnac	ımm@ct\	water	.com	
			ntact										
Please note the following:		•			alice control of the state	and the			C				
 The residual disinfectant concentration must be measured at the same location and time as each total coliform sample. If a Collection Period is specified, all water quality samples must be collected during the specified period. 									torm	sample.			

Connecticut Department of Public Health Drinking Water Section

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

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.

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

End of schedule

Connecticut Dep	partment of Public H	Iealth	Drinki	ng V	<i>N</i> ater	Sec	tion	
Water Ou	ality Monitoring an	d Con	nplianc	e Sc	hedul	e		
PWS ID PWS Name			_				r Type Pri	imary Sourc
CT1130064 SOLANO INN LLC			С		96		P	GW
Local Address (where applicable)	Service	Residen	itial Commi	ercial	Industria	al C	ombined	Agricultura
1503 PORTLAND COBALT ROAD	Connections						13	
Towns Served: PORTLAND	'		1	'				1
	Monitoring Requ	ıireme	nts					
Water System Facility: DISTRIBUTION	SYSTEM (WSF ID: 00600)							
Asbestos (1094)					1 ro	utine	(RT) per	nine years
Sampling Point (Sampling Point ID)		Monitor	ing Period	Coll	ection Per	riod	Complic	nce Status
Select from Inventory of Active Sampli	ng Points	1/1/18 -	12/31/26					
		1/1/27 -	12/31/35					
Total Coliform (3100)					2	routi		er quarter
Sampling Point (Sampling Point ID)			ing Period	Coll	ection Per	riod	Complic	ince Status
Select from Inventory of Active Sampli	ng Points		6/30/25					nplete
			9/30/25				Cor	mplete
			12/31/25					
			3/31/26					
		4/1/26 -	6/30/26					
Lead And Copper (PBCU)							-	T) per year
Sampling Point (Sampling Point ID)			ing Period		ection Per	riod		ince Status
Select from Inventory of Active Sampli	ng Points		12/31/24		6/1-9/30			nplete
			12/31/25		6/1-9/30		Cor	nplete
		1/1/26 -	12/31/26		6/1-9/30		(2-1)	
Physical Parameters (PPS)		D. d. a. mida w	ing Dovind	C-11				er quarter
Sampling Point (Sampling Point ID)			ing Period	Coll	ection Pei	100		ince Status
Select from Inventory of Active Sampli	ng Points		6/30/25					nplete
			· 9/30/25 · 12/31/25				Cor	nplete
			3/31/26					
			6/30/26					
Water System Facility: ENTRY POINT	(WSF ID: 00700)	4/1/20	0/30/20					
Inorganic Chemicals (IOCS)	(1101 121 007 007				1 rou	ıtine ((RT) per t	hree years
Sampling Point (Sampling Point ID)		Monitor	ing Period	Coll	ection Per			ince Status
ENTRY POINT (3)			12/31/25				•	nplete
		1/1/26 -	12/31/28					
Nitrate And Nitrite (NOX)						1 rc	outine (R	T) per year
Sampling Point (Sampling Point ID)		Monitor	ing Period	Coll	ection Per	riod	Complia	ince Status
ENTRY POINT (3)		1/1/24 -	12/31/24				Cor	nplete
		1/1/25 -	12/31/25				Cor	nplete
		1/1/26 -	12/31/26					
Radionuclides - Gross Alpha, Combine	d Radium & Uranium (RADA)			1 :	routin	ne (RT) pe	er six years
Sampling Point (Sampling Point ID)		Monitor	ing Period	Coll	ection Per	riod	Complia	nce Status
ENTRY POINT (3)		1/1/25	12/31/30					

Monitoring Period

1/1/23 - 12/31/25

1/1/26 - 12/31/28

ENTRY POINT (3)

Sampling Point (Sampling Point ID)

Compliance Status

Complete

Collection Period

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
CT1130064	SOLANO INN LLC				С	96	Р	GW
Local Address (w	here applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
1503 PORTLAND	COBALT ROAD	Connections					13	

Towns Served: PORTLAND

Monitoring Requirements

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

Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		

Other Compliance Schedules

	•		
Compliance Schedule Activity	Due Date	Achieved Date	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2025		
CROSS CONNECTION SURVEY REPORT	3/1/2029		

	Wa	ater System Facili	ity and Sampling P	oint In	ventor	У		
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		RP1497-F1	FRONT HOTEL UNIT 1	Α	Υ	N		
		RP1497-F10	FRONT HOTEL UNT 10	Α	Υ	N		
		RP1497-F11	DISTRIBUTION SYSTEM	Α	Υ	N		
		RP1497-F12	FRONT HOTEL UNIT 12	Α	Υ	N		
		RP1497-F13	FRONT HOTEL UNIT 13	Α	Υ	N		
		RP1497-F14	FRONT HOTEL UNIT 14	Α	Υ	N		
		RP1497-F2	FRONT HOTEL UNIT 2	Α	Υ	N		
		RP1497-F3	HOTEL FRONT UNIT 3	Α	Υ	N		
		RP1497-F4	FRONT HOTEL UNIT 4	Α	Υ	N		
		RP1497-F5	FRONT HOTEL UNIT 5	Α	Υ	N		
		RP1497-F6	FRONT HOTEL UNIT 6	Α	Υ	N		
		RP1497-F7	FRONT HOTEL UNIT 7	Α	Υ	N		
		RP1497-F8	FRONT HOTEL UNIT 8	Α	Υ	N		
		RP1497-F9	FRONT HOTEL UNIT 9	Α	Υ	N		
		RP1497-R1	REAR HOTEL UNIT 1	Α	Υ	N		
		RP1497-R10	REAR HOTEL UNIT 10	Α	Υ	N		
		RP1497-R11	REAR HOTEL UNIT 11	Α	Υ	N		
		RP1497-R12	REAR HOTEL UNIT 12	Α	Υ	N		
		RP1497-R13	REAR HOTEL UNIT 13	Α	Υ	N		
		RP1497-R14	REAR HOTEL UNIT 14	Α	Υ	N		
		RP1497-R15	REAR HOTEL UNIT 15	Α	Υ	N		
		RP1497-R16	REAR HOTEL UNIT 16	Α	Υ	N		
		RP1497-R17	REAR HOTEL UNIT 17	Α	Υ	N		
		RP1497-R18	REAR HOTEL UNIT 18	Α	Υ	N		
		RP1497-R19	REAR HOTEL UNIT 19	Α	Υ	N		

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			Clas	ssification	Population	Owner Type	Primary Source
CT1130064	SOLANO INN LLC				С	96	Р	GW
Local Address (where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
1503 PORTLAN	D COBALT ROAD	Connections					13	

Towns Served: PORTLAND

Water System Facility and Sampling Point Inventory								
Water				Total	Lead and			
System Water System Facility		Sampling Point		Coliform	Copper			Stage
Facility ID	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP .	2 DBPR
	RP1497-R2	REAR HOTEL UNIT 2	Α	Υ	N			
	RP1497-R20	REAR HOTEL UNIT 20	Α	Υ	N			
	RP1497-R21	REAR HOTEL UNIT 21	Α	Υ	N			
	RP1497-R22	REAR HOTEL UNIT 22	Α	Υ	N			
	RP1497-R23	REAR HOTEL UNIT 23	Α	Υ	N			
	RP1497-R24	REAR HOTEL UNIT 24	Α	Υ	N			
	RP1497-R3	REAR HOTEL UNIT 3	Α	Υ	N			
	RP1497-R4	REAR HOTEL UNIT 4	Α	Υ	N			
	RP1497-R5	REAR HOTEL UNIT 5	Α	Υ	N			
	RP1497-R6	REAR HOTEL UNIT 6	Α	Υ	N			
	RP1497-R7	REAR HOTEL UNIT 7	Α	Υ	N			
	RP1497-R8	REAR HOTEL UNIT 8	Α	Υ	N			
	RP1497-R9	REAR HOTEL UNIT 9	Α	Υ	N			
	RP1509-1	8 ROOM HOTEL UNIT 1	Α	Υ	N			
	RP1509-2	9 ROOM HOTEL UNIT 1	Α	Υ	N			
	RP1509-3	10 ROOM HOTEL UNIT 1	Α	Υ	N			
	RP1509-4	11 ROOM HOTEL UNIT 1	Α	Υ	N			
	RP1509-5	12 ROOM HOTEL UNIT 1	Α	Υ	N			
	RP1509-6	13 ROOM HOTEL UNIT 1	Α	Υ	N			
	RP1509-7	14 ROOM HOTEL UNIT 1	Α	Υ	N			
	RP1509-8	15 ROOM HOTEL UNIT 1	Α	Υ	N			
	RP1555-U4	1555 P-C RD U4	Α	Υ	3			
	RP1555-U5	1555 P-C RD U5	Α	Υ	3			
	RP1555-U6	1555 P-C RD U6	Α	Υ	3			
	RP1557	1557 P-C RD	Α	Υ	3			
	RP1559	1559 P-C RD	Α	Υ	3			
	RP1561	1561 P-C RD	Α					
	UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700 ENTRY POINT	3	ENTRY POINT	Α					
21966 WELL 1	2	WELL	A					
57384 HYDROPNEUMATIC TANKS								

57384 HYDROPNEUMATIC TANKS

Certified Operator Information

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

water system racinty. Distribution statem (war ib. 00000)								
Facility Classification: SMALL WATER SYSTEM								
Operator Name	Operator Type	Certification(s)	Expiration					
COSSETTE, EVAN J	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2027					
		DISTRIBUTION SYSTEM OPERATOR IN TRAINING	6/30/2027					
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2027					

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	Connecticu	it Depa	irtment of	Public	Health	Dri	inking	Water	Sec	tion	
	Wat	er Qua	lity Monit	oring a	nd Con	npli	ance S	Schedu	le		
PWS ID	PWS Name					Class	ification	Population	Owne	r Type	Primary Source
CT1130064	SOLANO INN LLC						С	96	6 P		GW
Local Address (where applicable)				Service	Resider	tial Commercial		l Industrial (ombine	ed Agricultural
1503 PORTLAND COBALT ROAD				Connection	ns					13	
Towns Served: PORTLAND											
Contact Information											
Name Organization						Job Title				5	
Mr. Carlos I Solano So				lano Inn		President					
Mailing Address Line One Mail			Mailing Address Line Two				City			Zip Code	
1503 Portland-Cobalt Road					Portland			I CT		06480	
Business Phon	e Extension	Fax	Mobi	le Phone	Emergency	/ Phon	ne Email Address				
860-342-0010					914-760	0-1700 Solanoinn.Lindaly@gmail.com					
Contact Role(s):	Legal Contact, O	wner									
Name Organization						Job Title					
Ms. Nancy Alvarado Solano Inn LLC			•								
Mailing Address Line One Mailing A			Mailing Address	s Line Two		City				State	Zip Code
1503 Portland-Cobalt Road							Portlan	d		CT	06480

Contact Role(s): Administrative Contact

Extension

Please note the following:

Business Phone

914-441-9800

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.

Mobile Phone

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

Solanoinn.Lindaly@gmail.com

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

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

End of schedule