Connecticut Department of Public	Health	D	rinking	g Wat	er	Section	on		
Water Quality Monitoring a	nd Con	npl	iance	Sched	lule	9			
PWS ID PWS Name		_	sification	T			pe Pr	imary Source	
CT1140471 STRAWBERRY PARK			NTNC	1,04		P		GW	
Local Address (where applicable) Service	Residen	ntial	Commerc		ıstrial	Com	bined	Agricultural	
42 PIERCE RD Connection								U	
Towns Served: PRESTON									
Monitoring Red	uireme	nts							
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)	ian eme								
Asbestos (1094)					1 rou	itine (R	T) per	nine years	
Sampling Point (Sampling Point ID)	Monitor	ing F	eriod (	Collection	Peri	od C	omplic	ance Status	
Select from Inventory of Active Sampling Points	1/1/17 -	12/3	31/25				Cor	mplete	
	1/1/26 -	12/3	31/34						
Total Coliform (3100)					1	routine	(RT)	per month	
Sampling Point (Sampling Point ID)	Monitor	ing F	eriod (	Collection	Peri	od C	omplio	ance Status	
Select from Inventory of Active Sampling Points	7/1/25 -	- 7/3	1/25				Cor	mplete	
	8/1/25 -	- 8/3	1/25				Cor	mplete	
	9/1/25 -	- 9/3	0/25				Cor	mplete	
	10/1/25 -	- 10/	31/25				Cor	mplete	
	4/1/26 -	- 4/3	0/26						
	5/1/26 -	- 5/3	1/26						
	6/1/26 -	- 6/3	0/26						
Lead And Copper (PBCU)				5	rout	ine (RT	) per t	three years	
Sampling Point (Sampling Point ID)	Monitor			Collection	Peri	od C	omplic	ance Status	
Select from Inventory of Active Sampling Points	1/1/23 -			6/1-9	/30		Cor	mplete	
	1/1/26 -	12/3	1/28	6/1-9	/30				
Physical Parameters (PPS)					1	routine	e (RT)	per month	
Sampling Point (Sampling Point ID)	Monitor			Collection	Peri	od C		ance Status	
Select from Inventory of Active Sampling Points	7/1/25 -						Complete		
	8/1/25 -						Cor	mplete	
	9/1/25 -		-					mplete	
	10/1/25 -						Cor	mplete	
	4/1/26 -		-						
	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)	Monitor			Collection	Peri	od C	omplio	ance Status	
ENTRY POINT (3)	1/1/23 -		-						
	1/1/26 -	12/3	31/28						
Nitrate And Nitrite (NOX)							-	T) per year	
Sampling Point (Sampling Point ID)	Monitor			Collection	Peri	od C		ance Status	
ENTRY POINT (3)	1/1/24 -		-					mplete	
	1/1/25 -						Cor	mplete	
	1/1/26 -	12/3	1/26						
Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOC						-		three years	
Sampling Point (Sampling Point ID)	Monitor			Collection		od C		ance Status	
ENTRY POINT (3)	1/1/23 -	12/3	31/25	1/1-12	2/31		W	/aiver	

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 De	epartment of	f Public Health	n Drin	king V	Vater S	Section		
	Water Q	uality Monit	coring and Cor	npliar	nce Sc	hedule	<u>)</u>		
PWS ID	PWS Name			_			wner Type	Primary	/ Source
CT114047	1 STRAWBERRY PARK			NTN	IC	1,047	Р	G\	W
Local Addı	ress (where applicable)		Service Resider	ntial Con	nmercial	Industrial	Combine	ed Agri	cultural
42 PIERCE	RD		Connections 380	)					
Towns Ser	rved: PRESTON								
		Monit	oring Requireme	ents					
Water Sy	stem Facility: ENTRY POIN	T (WSF ID: 00700)							
Pesticide	es, Herbicides and Polychlor	inated Biphenyls (	PCBs) (SOCS)			1 rout	ine (RT) pe	er three	years
Samp	pling Point (Sampling Point ID)		Monitor	ring Perio	d Colle	ction Peri	od Com	pliance S	Status
ENTR	RY POINT (3)		1/1/26 -	12/31/2	3 4	/1-10/31			
_	Chemicals (VOCS)						1 routine		•
	pling Point (Sampling Point ID)			ring Perio		ction Peri		pliance S	
ENTR	RY POINT (3)			12/31/2				Complet	
				12/31/2				Complet	e
				12/31/2	5				
		Other C	ompliance Sche	dules					
Complian	ce Schedule Activity			Due Date	?	Achiev	ed Date		
CROSS CO	NNECTION SURVEY REPORT			3/1/2026	5				
	Wate	er System Facil	ity and Sampling	<b>Point</b>	Invent	ory			
Water					Tota	Lead a	nd		
System	Water System Facility		Sampling Point		Colifor				Stage
Facility ID	)	ID	Description	Stat	us Rule	Rule T	ier Asbesto	os WQP	2 DBPF
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Л А	Υ				
		4-1	Site #65	Α	Υ				
		4-2	Site #160B	Α	Υ				
		4-3	Site #328C	Α	Y				
		4-4	Site #Stage 1	A	Y				
		4-5	Site #338	Α	Υ				
			WITHIN 5 SERVICE CO		V	N.			
		MW021-160B		Р	Y	N			
		MW021-328C MW021-338		Р	Y Y	N			
			SITE 338	P P	Ϋ́Υ	N N			
		MW021-65 MW021-S1	SITE 65	P	Y	N			
		UPSTREAM	WITHIN 5 SERVICE CO	-	Ţ	IN			
00700	ENTRY POINT	3	ENTRY POINT	A A					
1778	WELL #2	2	WELL #2	A					
1779	WELL #3	2	WELL #3	A					
50961	ATMOSPHERIC STORAGE TANK		WELL HJ	^					
50967	HYDROPNEUMATIC STORAGE	•							
30307	TANK								

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

Facility Classification:SMALL WATER SYSTEMCertificationOperator NameOperator TypeCertification(s)ExpirationLAFRAMBOISE, PAUL F.CHIEF OPERATORDISTRIBUTION SYSTEM OPERATOR - CLASS I9/30/2027

**Certified Operator Information** 

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	t Depa	artment o	of Public	c Health	ı D	rinking	g Water	Section			
	Wate	er Oua	lity Mon	itoring a	and Cor	np	liance	Schedul	le			
PWS ID P	WS Name			<u> </u>		_				Primary Source		
CT1140471 S	TRAWBERRY PAF	RK					NTNC	1,047	P	GW		
Local Address (wh	ere applicable)			Service	Resider	ntial	Commerc	ial Industri	al Combin	ed Agricultura		
42 PIERCE RD				Connection	ons 380	)						
Towns Served: PRI	ESTON			I								
			Certifie	d Operat	or Inforn	nat	ion					
Water System Fa	acility: DISTRIB	SUTION S	YSTEM (WSF	ID: 00600)								
Facility Classificat	ion: SMALL WAT	ER SYSTEM	1							Certification		
Operator Name		Operator Ty										
					WATER TR	EATI	MENT PLAN	T OPERATOR	R - CLASS II	9/30/2027		
			Co	ntact Inf	ormatio	า						
Name				 Organization					Job Titl	e		
Strawberry Park P	roperties LLC											
Mailing Address Li	ne One		Mailing Addre	ess Line Two	City				State	Zip Code		
P. O. Box 5489							Salt Sp	rings	32134			
Business Phone	Extension	Fax	Мо	bile Phone	Emergenc	y Ph	one Email Address					
860-334-9953												
Contact Role(s):	Owner											
Name				Organization					Job Titl	е		
Mr. Eduard Maye	r			Strawberry P	ark			Manager				
Mailing Address Li	ne One		Mailing Addre	ess Line Two				City	State	Zip Code		
P.O. Box 5489			Salt Springs FL 32:									
Business Phone	Extension	Fax	Мо	bile Phone	Emergenc	y Ph	one Email <i>i</i>	Address				
860-886-1944							emaye	er@elitereso	rts.com			
Contact Role(s):	Administrative Co	ontact, Leg	gal Contact									
Please note the fo	llowing:											

## Please note the following:

- 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 Departmen	at of Dublic I	Iool+h	D	ain lein a	TMotor	1 C	oction		
	Connecticut Departmen				•	_		ection		
DIA/C ID	Water Quality M	omtoring an	a Con	_			_	- D	ner Type Primary Source	
PWS ID	PWS Name				-	Ov				
CT1149033	PRESTON VETERANS MEMORIAL SCHO		Dasidas		NTNC	500	:-1	Compleined	GW	
<u> </u>	(where applicable)	Service Connections	Residen	tiai	Commerc	ial Industr	ıaı	Combined	Agricultural	
325 SHETUCKE		Connections			1					
Towns Served:			•	_						
Mala Cala		onitoring Requ	ııreme	nts						
Asbestos (10	n Facility: DISTRIBUTION SYSTEM (1	WSF ID: 00600)				1	+i	ine (RT) per	nine veers	
•	Point (Sampling Point ID)		Monitori	ina D	ariad (	ollection Pe			ince Status	
	m Inventory of Active Sampling Points		1/1/20 -			onection Pe	1100	i Compile	ince Status	
Total Colifor	· · ·		1/1/20	12/3	1,20		1 ro	outine (RT) p	er quarter	
	Point (Sampling Point ID)		Monitori	ina P	eriod (	Collection Pe			ance Status	
	m Inventory of Active Sampling Points		4/1/25 -						nplete	
, , , , , , , , , , , , , , , , , , , ,	,		7/1/25 -		-				nplete	
			 10/1/25 -						nplete	
			1/1/26 -							
			4/1/26 -	6/30	0/26					
Lead And Co	pper (PBCU)					5 ro	utir	ne (RT) per t	hree years	
Sampling	Point (Sampling Point ID)		Monitori	ing P	eriod (	Collection Pe	riod	d Complic	ance Status	
Select fro	m Inventory of Active Sampling Points		1/1/25 -	12/3	1/27	6/1-9/30	)			
Physical Para	ameters (PPS)						1 ro	utine (RT) p	er quarter	
Sampling	Point (Sampling Point ID)		Monitori	ing P	eriod (	Collection Pe	eriod	d Complia	ance Status	
Select fro	m Inventory of Active Sampling Points		4/1/25 -	6/30	0/25			Cor	mplete	
			7/1/25 - 9/30/25					Cor	mplete	
			10/1/25 - 12/31/25					Cor	mplete	
			1/1/26 -	3/32	1/26					
			4/1/26 -	6/30	0/26					
Water System	n Facility: ENTRY POINT (WSF ID: 0	0700)								
•	emicals (IOCS)					1 ro	utir	ne (RT) per t	-	
Sampling	Point (Sampling Point ID)		Monitori			Collection Pe	eriod	d Complia	ance Status	
ENTRY PO	DINT (3)		1/1/24 -							
			1/1/27 -	12/3	1/29					
	Nitrite (NOX)							L routine (R		
	Point (Sampling Point ID)		Monitori			Collection Pe	riod		ance Status	
ENTRY PO	DINT (3)		1/1/24 -						mplete	
			1/1/25 -					Cor	mplete	
			1/1/26 -	12/3	1/26					
	erbicides and Polychlorinated Biphe	• • •	-					ne (RT) per t	-	
	Point (Sampling Point ID)		Monitori			Collection Pe	erioc		ance Status	
ENTRY PO	ENTRY POINT (3)				1/25			Cor	mplete	
			1/1/26 - 12/31/28						_	
~	micals (VOCS)							L routine (R		
Sampling	Point (Sampling Point ID)		Monitori	ng P	eriod (	Collection Pe	rioc	a Complia	ince Status	

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1/1/24 - 12/31/24

1/1/25 - 12/31/25

1/1/26 - 12/31/26

Schedule Generation Date: 12/12/2025

ENTRY POINT (3)

Complete

Complete

## 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
CT1149033 PRESTON VETERANS MEMORIAL SCHOOL					NTNC	500	L	G۷	V
Local Address (w	Service	Resider	ntial	Commercia	al Industri	al Combin	ed Agric	ultural	
325 SHETUCKET	TURNPIKE	Connections			1				

Towns Served: PRESTON

## **Other Compliance Schedules**

Compliance Schedule Activity

Due Date

Achieved Date

CROSS CO	NNECTION SURVEY REPORT		3/	1/2025				
	Wa	ter System Facili	ity and Sampling P	oint Ir	ventor	У		
Water System Facility ID	Water System Facility		Sampling Point Description		Total Coliform Rule	Lead and Copper	Asbestos	Stage WQP 2 DBPR
	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Υ			-
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		PVM-1	ROOM 1	Α	Υ	2		
		PVM-10	ROOM 10	Α	Υ	2		
		PVM-11	CUSTODIANS ROOM	Α	Υ	2		
		PVM-12	MENS ROOM	Α	Υ	2		
		PVM-13	WOMENS ROOM	Α	Υ	2		
		PVM-14	MECHANICAL ROOM	Α	Υ	2		
		PVM-15	ROOM 15	Α	Υ	2		
		PVM-16	BOY/GIRL TEAM LAV	Α	Υ	2		
		PVM-17	NURSES ROOM	Α	Υ	2		
		PVM-18	ART ROOM	Α	Υ	2		
		PVM-19	MUSIC ROOM	Α	Υ	2		
		PVM-2	ROOM 2	Α	Υ	2		
		PVM-20	ROOM 20	Α	Υ	2		
		PVM-21	ROOM 21	Α		2		
		PVM-22	ROOM 22	Α	Υ	2		
		PVM-23	ROOM 23	Α	Υ	2		
		PVM-24	ROOM 24	Α	Υ	2		
		PVM-25	KITCHEN	Α	Υ	2	Υ	
		PVM-26	ROOM 26	Α	Υ	2		
		PVM-27	ROOM 27	Α	Υ	2		
		PVM-28	ROOM 28	Α	Υ	2		
		PVM-29	ROOM 29	Α	Υ	2		
		PVM-3	ROOM 3	Α	Υ	2		
		PVM-30	ROOM 30	Α	Υ	2		
		PVM-31	ROOM 31	Α	Υ	2		
		PVM-32	CUSTODIANS ROOM	Α	Υ	2		
		PVM-33	CUSTODIANS ROOM	Α	Υ	2		
		PVM-34	CUSTODIANS ROOM	Α	Υ	2		
		PVM-35	BOYS AND GIRLS LAV	Α	Υ	2		
		PVM-36	ROOM 36	Α	Υ	2		
		PVM-37	ROOM 37	Α	Υ	2		
		PVM-38	ROOM 38	Α	Υ	2		
		PVM-39	ROOM 39	Α	Υ	2		

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	Co	nnectic	ut Denar	rtment c	of Public	Health	Dr	rink	ing V	Vater	Se	ction		
	00		•		toring a							001011		
PWS ID	P\M/	S Name	ter quar	icy Mon	toring ar	ia don	_					ner Type I	Primary	/ Source
CT1149033			ANS MEMOR	IAI SCHOOL				NTNC	011 1 0	500	OWI	L	G'	
		e applicable)	AND MEMORI	IAL SCHOOL	Service	Residen		Comm	ercial	Industri	al	Combined	_	cultural
325 SHETU					Connection		ciai	1		maastri	ui	COMBINE	7 7 811	cartara
Towns Serv														
1011113 3611	cu. TRES	1011	Water Sv	stem Faci	lity and Sa	ampling	Po	int Ir	vent	orv				
Water			Trate. 57	J. C	ney and o	~P8	. •		Total		and			
	Water Sys	stem Facility	S	ampling Poin	t Sampling Po	oint			Colifor					Stage
Facility ID	•	•		ID	Description			Status	Rule			Asbestos	WQP	_
				PVM-4	ROOM 4		•	A	Υ	2	2			
				PVM-40	ROOM 40			Α	Υ	2				
				PVM-41	TEACHERS F	ROOM		Α	Y	2				
				PVM-42	MEN AND V		٩V	Α	Y	2				
				PVM-43	BOYS AND G			Α	Y	2				
				PVM-44	OFFICE BAT			Α	Y	2				
				PVM-45	OFFICE KITC			Α	Y	2				
				PVM-46	CUSTODIAN			Α	Y	2				
				PVM-5	ROOM 5	J CLOSE I		Α	Y	2				
				PVM-6	ROOM 6			A	Y	2				
				PVM-7	ROOM 7			A	Y	2				
				PVIVI-7 PVM-8	ROOM 8				Ϋ́					
				_				A		2				
				PVM-9	ROOM 9	-D. 46F 601		A	Υ	2	<u>′</u>			
				UPSTREAM	WITHIN 5 SE		V	A						
	ENTRY PC	DINT		3	ENTRY POIN	IT		Α						
11009	WELL #1			2	WELL #1			Α						
11010	WELL #2			2	WELL #2			Α						
	PRESTON PUMPHO	VETERANS M USE	IEMORIAL											
53763	ATMOSPH	HERIC STORA	GE											
				Certified	d Operato	r Inform	nati	on						
Water Sys	tem Faci	lity: PREST	ON VETERA	NS MEMOR	AL PUMPHO	USE (WS	F ID:	1697	)					
Facility Clas	ssification	1: CLASS 1 TF	REATMENT PLA	ANT									Certij	fication
Operator N	lame			Operator Ty	ре	Certificatio	on(s)						Ехр	iration
HOUSE, MI	CHAEL D.		C	HIEF OPERAT	OR \	NATER TRE	ATM	1ENT P	LANT O	PERATO	R - CL	ASS II	3/3	1/2026
				Co	ntact Info	rmation	1							
Name					 Organization							Job Title		
Dr. Roy M.	Seitsinge	r, Jr.			Preston Board	of Education	on		S	uperinte	nden			
Mailing Add			N	Mailing Addre						City		State	Zip (	Code
Preston Pul				Route 64				Pre	eston	,		CT		365
Business		Extension	Fax		oile Phone	Emergency	/ Pho			ress				
Dasiness			TUX	1,1101						. 555				

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860-949-0222

seitsingerr@prestonschools.org

Schedule Generation Date: 12/12/2025 Page 6

860-889-8695

Contact Role(s): Administrative Contact, Legal Contact

860-889-6098

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

		_		U						
PWS ID	PWS Name					Cla	ssification	Population	Owner Type	<b>Primary Source</b>
CT1149033	PRESTON VETERANS I				NTNC	500	L	GW		
Local Address (v	Local Address (where applicable)			Service	Residen	itial Commerci		al Industri	al Combine	ed Agricultural
325 SHETUCKET TURNPIKE			Connections	ns		1				
Towns Served: F	PRESTON								·	

## Please note the following:

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

End of schedule