

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1200062	ROXBURY MARKET PROPERTIES, LLC			NC	49	P	GW
Local Address (where applicable)		Service	Residential	Commercial	Industrial	Combined	Agricultural
26 NORTH STREET		Connections	1				
Towns Served: ROXBURY							

Monitoring Requirements

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

Total Coliform (3100)		1 routine (RT) per month		
<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	8/1/25 - 8/31/25		Complete	
	9/1/25 - 9/30/25		Complete	
	10/1/25 - 10/31/25		Complete	
	11/1/25 - 11/30/25		Complete	
	12/1/25 - 12/31/25		Complete	
	1/1/26 - 1/31/26			
	2/1/26 - 2/28/26			
	3/1/26 - 3/31/26			
	4/1/26 - 4/30/26			
	5/1/26 - 5/31/26			
	6/1/26 - 6/30/26			
	7/1/26 - 7/31/26			

Total Coliform (3100)		3 repeat (RP) per period		
<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	9/9/25 - 9/14/25		Complete	

Physical Parameters (PPS)		1 routine (RT) per month		
<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	8/1/25 - 8/31/25		Complete	
	9/1/25 - 9/30/25		Complete	
	10/1/25 - 10/31/25		Complete	
	11/1/25 - 11/30/25		Complete	
	12/1/25 - 12/31/25		Complete	
	1/1/26 - 1/31/26			
	2/1/26 - 2/28/26			
	3/1/26 - 3/31/26			
	4/1/26 - 4/30/26			
	5/1/26 - 5/31/26			
	6/1/26 - 6/30/26			
	7/1/26 - 7/31/26			

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

Nitrate And Nitrite (NOX)		1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete	
	1/1/26 - 12/31/26			
	1/1/27 - 12/31/27			

Water System Facility: **WELL (WSF ID: 10559)**

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			Classification	Population	Owner Type	Primary Source
CT1200062	ROXBURY MARKET PROPERTIES, LLC			NC	49	P	GW
Local Address (where applicable)		Service	Residential	Commercial	Industrial	Combined	Agricultural
26 NORTH STREET		Connections	1				
Towns Served: ROXBURY							

Monitoring Requirements

Water System Facility: WELL (WSF ID: 10559)

E. Coli (3014) 1 triggered (TG) per period

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL (2)	9/8/25 - 9/14/25		

E. Coli (3014) 1 routine (RT) per month

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL (2)	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7 PH	4
Start Date: 2/1/2012	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		
	12/1/2025 - 12/31/2025		

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
RESPOND TO SANITARY SURVEY	2/19/2012	
CROSS CONNECTION EXEMPTION	3/1/2015	
CROSS CONNECTION EXEMPTION	3/1/2025	

Public Notification Requirements

<i>Violation/Situation</i>	<i>Compliance Period</i>	<i>Notice Tier</i>	<i>Public Notification Required</i>	<i>Public Notification Performed</i>	<i>PN Certification Due to DPH</i>	<i>PN Certification Received</i>
E. Coli	7/1/25 - 9/10/25	3	11/18/2026		11/28/2026	

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1200062	ROXBURY MARKET PROPERTIES, LLC			NC	49	P	GW
Local Address (where applicable)		Service	Residential	Commercial	Industrial	Combined	Agricultural
26 NORTH STREET		Connections	1				
Towns Served: ROXBURY							

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
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MW004-C	COFFEE SINK	P	Y			
		MW004-RMF	RM FRONT SINK	P	Y	N		
		MW004-RMKB	RM K BACK SNK	P	Y	N		
		MW004-RMKDB	RM K DBL SINK	P	Y	N		
		MW004-RMKH	RM K HAND SINK	P	Y	N		
		MW017-PO	P.O. REST ROOM	P	Y	N		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10559	WELL	2	WELL	A				
55326	TREATMENT PLANT							

Contact Information

Name				Organization			Job Title		
Ms. Maureen Burmann				Roxbury Market Properties LLC			Member		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
26 North St.						Roxbury		CT	06783
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
203-948-7572					roxburymarketproperties@gmail.com				

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

Name				Organization			Job Title		
Roxbury Market Properties LLC									
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
26 North St						Roxbury		CT	06783
Business Phone		Extension	Fax		Mobile Phone		Emergency Phone	Email Address	

Contact Role(s): **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

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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1200014	CHRIST EPISCOPAL CHURCH			NC	25	P	GW	
Local Address (where applicable)			Service	Residential	Commercial	Industrial	Combined	Agricultural
CHURCH STREET			Connections		1			
Towns Served: ROXBURY								

Monitoring Requirements

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

Total Coliform (3100)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		

Physical Parameters (PPS)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		

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

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	11/13/2019	
RESPOND TO SANITARY SURVEY	10/12/2025	

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
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
22073	WELL	2	WELL	A				

Contact Information

Name		Organization			Job Title		
Mr. Stephen R. Nagy		Christ Episcopal Church			Priest In Charge		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
4 Weller'S Bridge Road		P.O. Box 4			Roxbury	CT	06783
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-355-3695			860-354-4113		christchurchroxbury@gmail.com		

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

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1200014	CHRIST EPISCOPAL CHURCH			NC	25	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
CHURCH STREET					1			

Towns Served: ROXBURY

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

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End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1200024	ROXBURY CONGREGATIONAL CHURCH			NC	25	P	GW	
Local Address (where applicable)			Service	Residential	Commercial	Industrial	Combined	Agricultural
24 CHURCH STREET			Connections		1			
Towns Served: ROXBURY								

Monitoring Requirements

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

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		

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		

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

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

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
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
22074	WELL	2	WELL	A				

Contact Information

Name				Organization		Job Title			
Mr. Rev. David F. Peters				Roxbury Cong. Church		Minister			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
24 Church St						Roxbury		CT	06783
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
860-355-1978			860-354-7430			860-355-8830	david@roxburychurch.org		
Contact Role(s): Administrative Contact									

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1200024	ROXBURY CONGREGATIONAL CHURCH	NC	25	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
24 CHURCH STREET			1			

Towns Served: ROXBURY

Name	Organization	Job Title
Roxbury Cong. Church		

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
24 Church		Roxbury	CT	06783

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-355-1978					

Contact Role(s): **Owner**

Name	Organization	Job Title
Mr. Fred Karl	Roxbury Cong. Church	Chairperson

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
24 Church Street		Roxbury	CT	06783

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-355-1978				860-355-8830	

Contact Role(s): **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.

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End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1200013	162 BAKER ROAD			NC	36	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
162 BAKER ROAD				2	1			

Towns Served: ROXBURY

Monitoring Requirements

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

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		

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		

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

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **ENTRY POINT (WSFID: 00700)**

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7 PH	4	
Start Date: 9/1/2013	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			
	12/1/2025 - 12/31/2025			
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
pH	Entry Point pH Monitoring (PHRD)	Maximum: 8.0 PH	4	
Start Date: 9/1/2013	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			
	12/1/2025 - 12/31/2025			

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1200013	162 BAKER ROAD			NC	36	P	GW
Local Address (where applicable)		Service	Residential	Commercial	Industrial	Combined	Agricultural
162 BAKER ROAD		Connections	2	1			
Towns Served: ROXBURY							

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION EXEMPTION	3/1/2026	

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
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
		WR001	WRAGG REST RM SINK	A	Y	1		
		WR002	MAMIES K HAND SINK 1	A	Y	1		
		WR003	MAMIES K HAND SINK 2	A	Y	1		
		WR004	MAMIES UTIL SINK	A	Y	1		
		WR005	MAMIES PREP SINK	A	Y	1		
		WR006	MAMIES DISHWASH SNK	A	Y	1		
		WR007	MAMIES REST RM SINK	A	Y	1		
		WR008	DAY CARE REST RM	A	Y	1		
		WR009	DAY CARE OFF SINK 1	A	Y	1		
		WR010	DAY CARE OFF SINK 2	A	Y	1		
		WR011	DAY CARE TODDLERS S	A	Y	1		
00700	ENTRY POINT	3	ENTRY POINT	A				
11025	WELL	2	WELL	A				
58213	TREATMENT PLANT							

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 58213)			
Facility Classification: CLASS 1 TREATMENT PLANT			
Operator Name	Operator Type	Certification(s)	Certification Expiration
HURLBUT, ANDREW	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026

Contact Information

Name				Organization			Job Title		
Roxbury Depot Holding Company LLC									
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
19 Golden Harvest Rd						Roxbury		CT	06783
Business Phone		Extension	Fax	Mobile Phone		Emergency Phone	Email Address		
Contact Role(s):		Owner							

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1200013	162 BAKER ROAD	NC	36	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial
162 BAKER ROAD		2	1		
Towns Served: ROXBURY					
Name		Organization		Job Title	
Mr. Edwin N. Cady, Jr.		Roxbury Depot Holding Co., LLC		Owner	
Mailing Address Line One		Mailing Address Line Two		City	State
89 Flag Swamp Rd				Roxbury	CT
Zip Code					
06783					
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-232-8461				203-232-8387	edwincady@hotmail.com
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

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

End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1200094	MINE HILL DISTILLERY & CRAFT CAFE			NC	30	P	GW
Local Address (where applicable)		Service	Residential	Commercial	Industrial	Combined	Agricultural
5 MINE HILL ROAD		Connections		2			
Towns Served: ROXBURY							

Monitoring Requirements

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

Total Coliform (3100)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		

Physical Parameters (PPS)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		

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

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

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
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSSTREAM	WITHIN 5 SERVICE CON	A	Y			
		MHD001	2ND FL UTILITY SINK	A	Y			
		MHD002	2ND FL BAR SINK	A	Y			
		MHD003	2ND FL BATHROOM	A	Y			
		MHD004	TRAIN STATION BAR	A	Y			
		MHD005	TOP FLOOR BAR SINK	A	Y			
		MHD006	TOP FL BATHROOM SINK	A	Y			
		MHD007	GROUND FL UTILITY	A	Y			
		UPSTREAM	WITHIN 5 SERVICE CON	A	Y			
00700	ENTRY POINT	3	ENTRY POINT	A				
62804	WELL 1	2	WELL 1	A				
62808	ATMOSPHERIC TANKS							

Contact Information

Name	Organization	Job Title		
Mr. Ronald Neugold	Mine Hill Distillery, LLC	General Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
5 Mine Hill Road	Roxbury	CT		06783

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	Classification	Population	Owner Type	Primary Source
CT1200094	MINE HILL DISTILLERY & CRAFT CAFE	NC	30	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial
5 MINE HILL ROAD			2		
Towns Served: ROXBURY					
5 Mine Hill Road			Roxbury	CT	06765
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-210-1872			203-885-6808	608-212-2357	chris@minehilldistillery.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

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.