

# 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
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		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	9/9/25 - 9/14/25		Complete

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		
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: 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
26 NORTH STREET	Connections	1			

Towns Served: ROXBURY

## Monitoring Requirements

Water System Facility: WELL (WSF ID: 10559)

E. Coli (3014)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	WELL (2)	9/8/25 - 9/14/25		
E. Coli (3014)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	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: Monitoring Period	Operating Limit
		8/1/2025 - 8/31/2025	Monitoring Compliance Status:
		9/1/2025 - 9/30/2025	Compliance Status:
		10/1/2025 - 10/31/2025	
		11/1/2025 - 11/30/2025	
		12/1/2025 - 12/31/2025	

## Other Compliance Schedules

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

## Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification Required	PN Certification Performed	Due to DPH	Received
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 Connections	Residential	Commercial	Industrial	Combined
26 NORTH STREET		1			

Towns Served: ROXBURY

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point		Status	Total Coliform	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
		ID	Description		Rule	WQD		
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		
00700	ENTRY POINT	UPSTREAM	WITHIN 5 SERVICE CON	A				
		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
203-948-7572		
Mobile Phone		Emergency Phone
		Email Address
		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 Connections	Residential	Commercial	Industrial	Combined
CHURCH STREET			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 ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule	Asbestos	WQP 2 DBPR	Stage
					Rule	Tier			
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
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**

# 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
24 CHURCH STREET			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		

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule	Asbestos Rule Tier	WQP 2	DBPR Stage
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
24 Church St		State
Business Phone	Extension	Zip Code
860-355-1978	860-354-7430	Roxbury
Emergency Phone	Mobile Phone	CT
860-355-8830	david@roxburychurch.org	06783

Contact Role(s): Administrative Contact

*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
CT1200024	ROXBURY CONGREGATIONAL CHURCH	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
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
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
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

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

**End of schedule**

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS 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
162 BAKER ROAD		2	1		

Towns Served: ROXBURY

### Monitoring Requirements

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

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		

  

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)

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		

### 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:	Monitoring Period	Compliance History:	Operating Limit
9/1/2013		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:	Monitoring Period	Compliance History:	Operating Limit
9/1/2013		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 Connections	Residential	Commercial	Industrial	Combined
162 BAKER ROAD		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	Lead and Coliform Rule	Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Y				
		DOWNTREAM	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)			
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Facility Classification:	CLASS 1 TREATMENT PLANT	
Operator Name	Operator Type	Certification(s)
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
19 Golden Harvest Rd		State
		Zip Code
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	Combined	Agricultural	
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	Zip Code
89 Flag Swamp Rd					Roxbury		CT	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

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

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

***End of schedule***

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS 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	Combined
5 MINE HILL ROAD			2		

Towns Served: ROXBURY

### Monitoring Requirements

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

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		

  

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)

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	Total Coliform		Lead and Copper Rule Tier	Asbestos	WQP 2 DBPR Stage
				Status	Rule			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	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			
00700	ENTRY POINT	UPSTREAM	WITHIN 5 SERVICE CON	A	Y			
		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
Mine Hill Road		State Zip Code

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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 Connections	Residential	Commercial	Industrial	Combined	Agricultural
5 MINE HILL ROAD					2			
Towns Served: ROXBURY								
5 MINE HILL ROAD					ROXBURY	C1	00785	
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): <b>Administrative Contact, Legal Contact</b>								

**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**