	Connecticut Departmer Water Quality Mo							
PWS ID		omtoring and						Duima a mar Caraman
CT1230014	PWS Name HIGHLAND CAMPGROUND			NC	tion P	50	P	Primary Source GW
	where applicable)	Service	Resident		nercial		Combine	T
42 TOLERATION		Connections	Resident		1	illuustilai	Combine	- Agricultural
Towns Served:					1			
TOWITS SELVEU.		onitorina Dogu	iromo					
Water System	Facility: DISTRIBUTION SYSTEM (onitoring Requ WSF ID: 00600)	iiremei	ills				
Total Coliforn	n (3100)					1	routine (R	T) per month
Sampling	Point (Sampling Point ID)		Monitorii	ng Period	Col	lection Perio	od Com	oliance Status
Select fror	m Inventory of Active Sampling Points		7/1/25 -	7/31/25			(Complete
			8/1/25 -	8/31/25			(Complete
			9/1/25 -	9/30/25			(Complete
			10/1/25 -	10/31/25			(Complete
			5/1/26 -					
			6/1/26 -	6/30/26				
-	meters (PPS)					1	routine (R	T) per month
	Point (Sampling Point ID)		Monitorii		Col	lection Perio		oliance Status
Select fror	n Inventory of Active Sampling Points		7/1/25 -					Complete
			8/1/25 -					Complete
			9/1/25 -					Complete
		-		10/31/25	1	10/1-10/10	(Complete
			5/1/26 -					
			6/1/26 -	6/30/26				
-	Facility: ENTRY POINT (WSF ID: 00	0700)						
Nitrate And I								(RT) per year
	Point (Sampling Point ID)		Monitorii		Coll	lection Perio		oliance Status
ENTRY PO	INT (3)		1/1/24 - 1					Complete
			1/1/25 - 1				(Complete
		0 1:	1/1/26 - 1					
		er Compliance						
Compliance Sci				Due Date		Achieve	ed Date	
	CTION SURVEY REPORT			3/1/2020				
	CTION SURVEY REPORT			3/1/2021				
	CTION SURVEY REPORT			3/1/2022				
	CTION SURVEY REPORT			3/1/2024				
	CTION SURVEY REPORT			3/1/2025				
CROSS CONNEC	CTION SURVEY REPORT			3/1/2026				
	Public	Notification R	equire	ments				
Violation/Situa	ntion	Compliance Period	Notice Tier	<u>Pub</u> Requ		<u>ification</u> Performed	PN Ce	ertification H Received
_	. COLIFORM RULE (RTCR) TT Violation	5/2/23 - 4/20/24	2	7/5/2		. c.,oiined	7/15/202	
	Water System I					tory		
Water					Tota	<u>-</u>	nd	
	er System Facility Sampling	Point Sampling Poi	nt		Colifo			Stage
Facility ID	ID	Description		Status	s Rul	e Rule Ti	ier Asbesto	s WQP 2 DBPR
00600 DIST	RIBUTION SYSTEM 4	DISTRIBUTION	SYSTEM	Α	Υ			

Schedule Generation Date: 12/12/2025 Page 1

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
CT1230014	HIGHLAND CAMPGROUND				NC	50	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
42 TOLERATION ROAD		Connections			1			

Towns Served: SCOTLAND

Wate	Water System Facility and Sampling Point Inventory												
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR					
	DOWNSTREAM	WITHIN 5 SERVICE CON	Α										
	UPSTREAM	WITHIN 5 SERVICE CON	Α										
00700 ENTRY POINT	3	ENTRY POINT	Α										
22100 WELL	2	WELL	Α										
59553 HYDROPNEUMATIC TANK													

Contact Information												
Name				Organization	1	Job Title						
Mr. James Davis				Highland Car	Highland Campground							
Mailing Address Line One Mailing Addre			dress Line Two			City	State	Zip Code				
42 Toleration Road		F	O Box 305	5		Scotland		СТ	06264			
Business Phone	Extension	Fax	N	1obile Phone	Emergency Phone	Email Ad	ldress					
860-423-5684		860-423-56	684			mdavis24@snet.net						

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 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

C		ut Departme								ection		
	Wa	ter Quality N	Moni	toring a	nd Con	ıplia	nce So	chedu	ıle			
PWS ID PY	WS Name					Classifi	ication P	opulation	n Ow	ner Type F	rimary Sou	ırce
CT1230034 SC	COTLAND FIRE	DEPT				N	С	25		L	GW	
Local Address (whe	ere applicable)			Service	Residen	tial Co	mmercial	Industi	rial	Combined	l Agricultu	ural
47 BROOK ROAD (F	ROUTE 14)			Connection	ns		2					
Towns Served: SCC	OTLAND											
		r	Monit	oring Red	quireme	nts						
Water System Fa	cility: DISTR	IBUTION SYSTEM	(WSF	ID: 00600)								
Total Coliform ((3100)								1 rou	utine (RT)	per quart	ter
Sampling Poi	nt (Sampling P	oint ID)			Monitori	ng Peri	od Col	lection P	eriod	Compl	iance Statu	us
Select from In	ventory of Acti	ve Sampling Points			4/1/25 -	6/30/2	5			Co	omplete	
					7/1/25 -	9/30/2	5			Co	omplete	
					10/1/25 -	12/31/	25					
					1/1/26 -	3/31/2	6					
					4/1/26 -	6/30/2	6					
Physical Parame									1 rou		per quart	
	nt (Sampling P				Monitori			lection P	eriod		iance Statu	IS
Select from Ir	ventory of Acti	ve Sampling Points			4/1/25 -						omplete	
					7/1/25 -					Co	omplete	
					10/1/25 -							
					1/1/26 -							
					4/1/26 -	6/30/2	6					
•	•	POINT (WSF ID:	00700									
Nitrate And Nitr	• •									_	RT) per ye	
	nt (Sampling P	oint ID)			Monitori			lection P	eriod		iance Statu	IS
ENTRY POINT	(3)				1/1/24 -						omplete	
					1/1/25 -					Co	omplete	
					1/1/26 -	12/31/2	26					
		Ot	ther C	Compliand	ce Sched	ules						
Compliance Sched					L	Due Da	te	Achi	ieved	Date		
RESPOND TO SANI	TARY SURVEY				7	/30/20	23					
		Water System	ı Facil	lity and Sa	ampling	Poin	t Inven	tory				
Water							Tota	al Lead	d and			
	System Facility		_	Sampling P			Colifo		pper		Sta	_
Facility ID			D	Description		Sta			e Tier	Asbestos	WQP 2 DE	BPR
00600 DISTRIB	BUTION SYSTEM		4 	DISTRIBUTI								
				WITHIN 5 S								
			REAM	WITHIN 5 S								
00700 ENTRY I	POINT		3	ENTRY POIN	NT	F						
22102 WELL			2	WELL		<i>P</i>	4					
			Cor	ntact Info	rmation							
Name				rganization						Job Title		
Mr. Daniel D. Sym	е	П	T	own of Scotla	and			First Sele	ectma	n		
Mailing Address Li	ne One	Mailing	Addres	ss Line Two				City		State	Zip Code	!
9 Devotion Road		P.O. Bo	x 288				Scotland			CT	06264	
Business Phone	Extension	Fax	Mob	ile Phone	Emergency	Phone	Email Ad	dress				
860-456-7797		860-456-3666					Scotland					- 1

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

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1230034	SCOTLAND FIRE DEPT			NC	25	L	GW
Local Address (w	Service	Residen	tial Commerc	ial Industri	al Combine	ed Agricultural	
47 BROOK ROAD (ROUTE 14)		Connections		2			

Towns Served: SCOTLAND

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 schedule.

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

End of schedule

Page 4

		45 11: 7	- 11	_					
	Connecticut Department				•	_			
	Water Quality Mor	nitoring an	d Con	npl	iance :	Sche	dule	9	
PWS ID	PWS Name			Classification			ation (Owner Type	Primary Source
CT1231024	CHRISTIAN FELLOWSHIP CHURCH OF SCO	TLAND			NC	10	0	Р	GW
Local Address ((where applicable)	Service	Residen	itial	Commerc	rcial Industrial		Combine	d Agricultural
140 PUDDING	HILL ROAD	Connections					2		
Towns Served:	SCOTLAND								
	Mor	nitoring Requ	uireme	nts					
Water Systen	n Facility: DISTRIBUTION SYSTEM (WS	SF ID: 00600)							
Total Colifor	m (3100)						1	routine (R) per month
Sampling	Point (Sampling Point ID)		Monitori	ing P	eriod C	Collectio	on Peri	od Comp	liance Status
Select fro	m Inventory of Active Sampling Points		7/1/25 -	7/32	1/25			С	omplete
			8/1/25 -	8/32	1/25			С	omplete
			9/1/25 -	9/30	0/25			C	omplete
			10/1/25 -						omplete
			11/1/25 -	11/3	30/25			С	omplete
			12/1/25 -	12/3	31/25				
			1/1/26 -						
			2/1/26 -						
			3/1/26 - 3/31/26						
			4/1/26 -						
			5/1/26 -						
	(6/1/26 -	6/30	0/26				
Total Colifor	•							•	P) per period
	Point (Sampling Point ID)		Monitori			Collectio	on Peri		liance Status
	m Inventory of Active Sampling Points	-	10/11/25	- 10/	16/25		_		omplete
•	ameters (PPS)		Monitori	in a D	ariad (`allastis		=	() per month
	Point (Sampling Point ID)		Monitori			Collectio	on Peri		liance Status
Select ITO	m Inventory of Active Sampling Points		7/1/25 - 8/1/25 -		-				omplete omplete
			9/1/25 -						omplete
			9/1/25 - 10/1/25 -						omplete
			11/1/25 -						omplete
			11/1/25 - 12/1/25 -						ompiete
			1/1/26 -						
			2/1/26 -						
			3/1/26 -						
			4/1/26 -						
			5/1/26 -						
			6/1/26 -						
Water Systen	n Facility: ENTRY POINT (WSF ID: 0070	00)	, ,==	, = \					
	Nitrite (NOX)							1 routine (RT) per year
	Point (Sampling Point ID)		Monitori	ing P	eriod C	Collectio	on Peri	-	liance Status
ENTRY PC	DINT (3)		1/1/24 -	12/3	1/24			C	omplete
			1/1/25 -	12/3	1/25			C	omplete

1/1/26 - 12/31/26

Schedule Generation Date: 12/12/2025

Water System Facility: WELL 1 (WSF ID: 57528)

			CD 111 Y	7.1	_		_	A.V	-			
	Connecticut Dep	partment of	t Public H	lealth	ı Di	rinki	ng V	Vate	r Se	ction		
	Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name				Clas	Classification I		pulation	Owr	ner Type P	rimary Source	
CT123102	4 CHRISTIAN FELLOWSHIP CI	HURCH OF SCOTLA	AND			NC		100		Р	GW	
Local Add	ress (where applicable)		Service	Residen	ntial	Comme	ercial	Industr	ial	Combined	Agricultural	
140 PUDD	ING HILL ROAD		Connections							2		
Towns Served: SCOTLAND												
Monitoring Requirements												
Water Sy	stem Facility: WELL 1 (WSF II	D: 57528)										
E. Coli (3014)							1	trigg	gered (TG)	per period	
Sam	oling Point (Sampling Point ID)			Monitor	ing P	eriod	Colle	ection Pe	eriod	Compli	ance Status	
WELI	_ 1 (2)		1	0/10/25	- 10/	16/25				Co	mplete	
Other Compliance Schedules												
Complian	ce Schedule Activity				Due	Date		Achi	eved	Date		
CROSS CO	NNECTION SURVEY REPORT				3/1/2	2027						
	Water	System Facil	ity and Sai	npling	Ро	int In	vent	ory				
Water							Tota	l Lead	and			
System	Water System Facility	Sampling Point		nt			Colifor		•		Stage	
Facility IE)	ID	Description			Status	Rule	Rule	? Tier	Asbestos	WQP 2 DBPR	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	I SYSTEM	1	Α						
		DOWNSTREAM	WITHIN 5 SER	VICE COI	N	Α						
		UPSTREAM	WITHIN 5 SER	VICE COI	N	Α						
00700	ENTRY POINT	3	ENTRY POINT			Α						
57528	WELL 1	2	WELL 1			Α						
57532	ATMOSPHERIC TANKS											
		Con	tact Infori	nation	1							
Name		Oı	rganization							Job Title		
Mr. Kevin	Caswell	Cł	nristian Fellows	hip Chur	ch		[Deacon				
Mailing Ad	ddress Line One	Mailing Address	s Line Two					City		State	Zip Code	

Contact Role(s): Administrative Contact, Legal Contact

Extension

Please note the following:

140 Pudding Hill Road

Business Phone

860-456-2759

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

Mobile Phone

P.O. Box 344

2. If a Collection Period is specified, all water quality samples must be collected during the specified period.

Fax

860-423-9177

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.

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

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

End of schedule

06264

СТ

Scotland

Office@cfcscotland.org

Emergency Phone Email Address

959-444-2919

	Connecticut Department	of Public Health Drinkin	ng Water Se	ction
	•	nitoring and Compliance		
PWS ID	PWS Name			er Type Primary Source
CT1231034	THE VINEYARD AT HILLYLAND	NC	28	P GW
Local Address	(where applicable)	Service Residential Comme	rcial Industrial (Combined Agricultural
75 MURPHY H	ILL ROAD	Connections 1		
Towns Served	SCOTLAND			
	Moi	nitoring Requirements		
Water Syster	m Facility: DISTRIBUTION SYSTEM (WS	SF ID: 00600)		
Total Colifor	m (3100)		1 rou	itine (RT) per month
Sampling	Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select fro	m Inventory of Active Sampling Points	7/1/25 - 7/31/25		Complete
		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		
		4/1/26 - 4/30/26		
		5/1/26 - 5/31/26		
		6/1/26 - 6/30/26		
Total Colifor	m (3100)		3 re	peat (RP) per period
Sampling	Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select fro	m Inventory of Active Sampling Points	6/26/25 - 7/1/25		Complete
		7/23/25 - 7/28/25		Complete
		8/30/25 - 9/4/25		Complete
		9/30/25 - 10/5/25		Complete
Physical Par	ameters (PPS)		1 rou	ıtine (RT) per month
Sampling	Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select fro	m Inventory of Active Sampling Points	7/1/25 - 7/31/25		Complete
		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		
		4/1/26 - 4/30/26		
		5/1/26 - 5/31/26		
		6/1/26 - 6/30/26		
Water Syster	n Facility: ENTRY POINT (WSF ID: 007	00)		
Nitrate (104	-		1 rou	tine (RT) per quarter
-	Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY PO	DINT (3)	4/1/25 - 6/30/25		Complete
		7/1/25 - 9/30/25		Complete
		10/1/25 - 12/31/25		Complete
		1/1/26 - 3/31/26		
		1/1/20 0/20/20		

4/1/26 - 6/30/26

Monitoring Period

1/1/24 - 12/31/24

1/1/25 - 12/31/25

ENTRY POINT (3)

Sampling Point (Sampling Point ID)

Nitrite (1041)

1 routine (RT) per year

d Compliance Status

Complete

Complete

Collection Period

Connecticut Depa							ction	
Water Qua	lity Monit	oring a	nd Comp	oliano	e Sch	edule		
PWS ID PWS Name			C	lassificati	ion Popu	ulation Owr	ner Type P	rimary Source
CT1231034 THE VINEYARD AT HILLYLAN	D			NC	:	28	Р	GW
Local Address (where applicable)		Service	Residentia	al Comm	nercial I	ndustrial	Combined	Agricultural
75 MURPHY HILL ROAD		Connection	ns	1	L			
Towns Served: SCOTLAND								
	Monito	oring Red	quiremen	ts				
Water System Facility: ENTRY POINT (V			<u>. </u>					
Nitrite (1041)						1	routine (I	RT) per year
Sampling Point (Sampling Point ID)			Monitoring	y Period	Collect	tion Period	Compl	iance Status
			1/1/26 - 12	2/31/26				
Water System Facility: WELL (WSF ID: 6	51338)							
E. Coli (3014)						1 trigg	gered (TG) per period
Sampling Point (Sampling Point ID)			Monitoring	y Period	Collect	tion Period	Compl	iance Status
WELL (2)			6/25/25 -	7/1/25			Co	mplete
			7/22/25 - 7	7/28/25			Co	mplete
			8/29/25 - 9	9/4/25			Co	mplete
			9/29/25 - 1	10/5/25			Co	mplete
Water System Facility: WELL 2 (BARN W	/ELL) (WSF ID:	63020)						
E. Coli (3014)						1 trigg	ered (TG) per period
Sampling Point (Sampling Point ID)			Monitoring	g Period	Collect	tion Period		iance Status
WELL 2 (BARN WELL) (2)			6/25/25 -	7/1/25				
			7/22/25 - 7	7/28/25				
			8/29/25 - 9	9/4/25				
			9/29/25 - 1	10/5/25				
	Other C	ompliano	ce Schedu	les				
Compliance Schedule Activity			Du	ie Date		Achieved I	Date	
L2 ASSESSMENT (MULTIPLE TC+, 2ND IN 12M)		11/	/1/2025				
Water S	ystem Facili	ity and S	ampling P	oint Ir	nvento	ry		
Water					Total	Lead and		
	Sampling Point				Coliform			Stage
Facility ID	ID	Description		Status	Rule	Rule Tier	Asbestos	WQP 2 DBPR
00600 DISTRIBUTION SYSTEM	4	DISTRIBUTION		Α	Υ			
	DOWNSTREAM			Α	Υ			
	UPSTREAM		ERVICE CON	Α	Υ			
00700 ENTRY POINT	3	ENTRY POIN	NT	Α				
61338 WELL	2	WELL		Α				
63020 WELL 2 (BARN WELL)	2	WELL 2 (BA	RN WELL)	Α				
	Con	tact Info	rmation					
Name	Oı	rganization					Job Title	
Hillyand Farm Inc								
Mailing Address Line One	Mailing Address	s Line Two			C	ity	State	Zip Code
75 Murphy Hill Road				Wi	ndham		СТ	06280
Business Phone Extension Fax	Mobi	le Phone	Emergency P	hone Em	nail Addre	SS		
860-456-4877								
Contact Role(s): Owner								
						<u></u>		

Connecticut Department of Fubility Training Water Section													
	Wa	ter Qua	lity M	onitor	ing ar	nd Con	npl	liance S	Schedul	le			
PWS ID	PWS Name						Classification P		Population	Owner Typ	e Pr	rimary Source	
CT1231034	THE VINEYARD AT HILLYLAND						NC		28	Р		GW	
Local Address (where applicable)					rvice	Resider	ntial	Commerci	ial Industri	al Combi	ned	Agricultural	
75 MURPHY HILL ROAD					nnection	S		1					
Towns Served: SC	OTLAND									<u> </u>			
Name	e Or ₁				ganization					Job Title			
Mr. Douglas Stearns Hillyar					nd Farm I	nc							
Mailing Address Line One Mailing Addres				Address Lin	Line Two				City	State	5	Zip Code	
75 Murphy Hill Road								Windh	am	СТ		06280	
Business Phone	Extension	Fax	ax Mobile		hone	Emergency	/ Pho	one Email A	Address				
860-456-4877		860-423-1648				860-456	-487	4877 stearnslaw@hotmail.com					
0													

Connecticut Department of Public Health Drinking Water Section

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

End of schedule

Schedule Generation Date: 12/12/2025 Page 9