

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1330062	AMGRAPH PACKAGING, INC.	NTNC	125	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
90 VERSAILLES ROAD	Connections		1		

Towns Served: SPRAGUE

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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	1/1/20 - 12/31/28		
<b>Total Haloacetic Acids (2456)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WT WASH SINK (18WWAT)	1/1/25 - 12/31/25	9/1-9/30	Complete
	1/1/26 - 12/31/26	9/1-9/30	
	1/1/27 - 12/31/27	9/1-9/30	
<b>Total Trihalomethanes (2950)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
PLATE ROOM SINK (10PR)	1/1/25 - 12/31/25	9/1-9/30	Complete
	1/1/26 - 12/31/26	9/1-9/30	
	1/1/27 - 12/31/27	9/1-9/30	
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per quarter</b>		
<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		Complete
	4/1/26 - 6/30/26		
<b>Lead And Copper (PBCU)</b>	<b>10 routine (RT) per six months</b>		
<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 - 12/31/25		Complete
	1/1/26 - 6/30/26		
	7/1/26 - 12/31/26		
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per quarter</b>		
<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		Complete
	4/1/26 - 6/30/26		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<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		

*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
CT1330062	AMGRAPH PACKAGING, INC.	NTNC	125	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
90 VERSAILLES ROAD	Connections		1		

Towns Served: SPRAGUE

### Monitoring Requirements

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	
	1/1/27 - 12/31/27			
Pesticides, Herbicides and PCBs-Phase II (SOC2)			1 routine (RT) per three years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete	
	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			
Pesticides, Herbicides and PCBs-Phase V (SOC5)			1 routine (RT) per three years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete	
	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			
Organic Chemicals (VOCS)			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		Complete	
	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	
			Minimum: 0.55 MG/L	Daily
Chlorine	Entry Point RDC (EPRD)			
Start Date: 9/1/2021		Compliance History:	Operating Limit	Monitoring
		Monitoring Period	Compliance Status:	Compliance Status:
		8/1/2025 - 8/31/2025	Y	
		9/1/2025 - 9/30/2025	Y	
		10/1/2025 - 10/31/2025	Y	
		11/1/2025 - 11/30/2025	Y	
		12/1/2025 - 12/31/2025	Y	

### Other Compliance Schedules

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

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total		Lead and Coliform Rule	Copper Rule Tier	Asbestos	WQP 2 DBPR	Stage
				Status	Coliform Rule					
00600	DISTRIBUTION SYSTEM	10PR	PLATE ROOM SINK	A	Y	N				Y
		11CSIE	CSIE SINK	A	Y	3				
		12LDROM	LADIES ROOM SINK	A	Y	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	Classification	Population	Owner Type	Primary Source
CT1330062	AMGRAPH PACKAGING, INC.	NTNC	125	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
90 VERSAILLES ROAD			1		

Towns Served: SPRAGUE

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
					Y	3	Y	Y
	13MNRM	MENS ROOM SINK	A	Y				
	14WSLT	SLIT WASH UP SINK	A	Y				
	15CEO	CEO OFFICE SINK	A	Y		3		
	16WBRK	BREAK ROOM	A	Y		3		
	17WENT	ENTRANCE WASH SINK	A	Y		3		
	18WWAT	WT WASH SINK	A	Y		3		
	19WOFF	OFFSET WASH SINK	A	Y		3		
	1-LDRM	LADIES ROOM SINK FLG	A	Y		3		
	20WELE	ELEC SHOP SINK	A	Y		3		
	21WM80	WM80 SINK	A	Y		3		
	2-KIT	KITCHEN SINK	A	Y		3		
	3-LDRM	LADIES ROOM SINK FLG	A	Y		3		
	4	DISTRIBUTION SYSTEM	A	Y				
	4-LKRM	LOCKER ROOM FLAG	A	Y				
	4-LOCKERRM	LOCKER ROOM	A	Y		3		
	5-MENSROOM	MENS ROOM FLAG	A	Y		3		
	5-MNRM	MENS ROOM	A	Y		3		
	6FA	FIRST AID ROOM	A	Y		3		
	6LAB	LAB SINK	A	Y		N		
	7FAR	FIRST AID ROOM	A	Y		3		
	8MNRM	MENS ROOM SINK	A	Y		3		
	9LDRM	LADIES ROOM SINK	A	Y		3		
	DOWNSTREAM	WITHIN 5 SERVICE CON	A					
	UPSTREAM	WITHIN 5 SERVICE CON	A					
00700	ENTRY POINT	3	ENTRY POINT	A				
61160	TREATMENT PLANT							
62639	WELL 4	2	WELL 4	A				

## Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 61160)

Facility Classification:	CLASS 2 TREATMENT PLANT			Certification Expiration
Operator Name	Operator Type	Certification(s)		
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II		6/30/2027
		DISTRIBUTION SYSTEM OPERATOR - CLASS III		6/30/2026
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I		6/30/2028
		WATER TREATMENT PLANT OPERATOR - CLASS II		6/30/2026
NIGRO, DAVID	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I		3/31/2028

*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
CT1330062	AMGRAPH PACKAGING, INC.	NTNC	125	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
90 VERSAILLES ROAD	Connections		1		

Towns Served: SPRAGUE

## Contact Information

Name	Organization	Job Title		
Mr. Kenneth Fontaine	Amgraph Packaging, Inc.	President		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
90 Papermill Road		Baltic	CT	06330
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-822-2031		860-822-9941		860-961-3585 kafontai@amgraph.com

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

Name	Organization	Job Title		
Ms. Pamela Thibeault	Amgraph Packaging, Inc.	Maint & Reli Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
90 Papermill Rd		Baltic	CT	06330
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-822-2043		860-822-6458		860-822-2000 pamela.thibeault@amgraph.com

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1331033	MOHEGAN SUN CC PAUTIPAUG - CLUBHOUSE	NTNC	40	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
7 DOWS LANE	Connections		3		

Towns Served: SPRAGUE

### Monitoring Requirements

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

<b>Asbestos (1094)</b>	<b>1 routine (RT) per nine years</b>		
<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	1/1/20 - 12/31/28		
<b>Total Coliform (3100)</b>	<b>2 routine (RT) per quarter</b>		
<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
	4/1/26 - 6/30/26		
<b>Lead And Copper (PBCU)</b>	<b>10 routine (RT) per six months</b>		
<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 - 12/31/25		
	1/1/26 - 6/30/26		
	7/1/26 - 12/31/26		
<b>Physical Parameters (PPS)</b>	<b>2 routine (RT) per quarter</b>		
<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
	4/1/26 - 6/30/26		

Water System Facility: CLUB HOUSE TREATMENT PLANT (WSF ID: 53250)

<b>Arsenic (1005)</b>	<b>1 routine (RT) per quarter</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
CLUBHOUSE TP ENTRY POINT (MSCC011)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	4/1/26 - 6/30/26		
<b>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
CLUBHOUSE TP ENTRY POINT (MSCC011)	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
CLUBHOUSE TP ENTRY POINT (MSCC011)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
CLUBHOUSE TP ENTRY POINT (MSCC011)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per quarter</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>

*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
CT1331033	MOHEGAN SUN CC PAUTIPAUG - CLUBHOUSE	NTNC	40	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
7 DOWS LANE	Connections		3		

Towns Served: SPRAGUE

**Monitoring Requirements**

Water System Facility: CLUB HOUSE TREATMENT PLANT (WSF ID: 53250)

Organic Chemicals (VOCS)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
CLUBHOUSE TP ENTRY POINT (MSCC011)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	4/1/26 - 6/30/26		

Water System Facility: MAINTENANCE BARN TREATMENT PLANT (WSF ID: 53251)

Arsenic (1005)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
MAINTENANCE TP EP (MSCC012)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	4/1/26 - 6/30/26		

Di(2-Ethylhexyl) - Phthalate (2039)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
MAINTENANCE TP EP (MSCC012)	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		

Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
MAINTENANCE TP EP (MSCC012)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
MAINTENANCE TP EP (MSCC012)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)	1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
MAINTENANCE TP EP (MSCC012)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

Organic Chemicals (VOCS)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
MAINTENANCE TP EP (MSCC012)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	4/1/26 - 6/30/26		

**Other Compliance Schedules**

Compliance Schedule Activity	Due Date	Achieved Date

*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
CT1331033	MOHEGAN SUN CC PAUTIPAUG - CLUBHOUSE	NTNC	40	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
7 DOWS LANE			3		

Towns Served: SPRAGUE

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT		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	Copper	Asbestos	WQP 2	DBPR Stage
					Coliform Rule	Copper Rule Tier				
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A						
		DOWNSTREAM	WITHIN 5 SERVICE CON	A						
		MSCC 004X	CLUB KITCHEN #1	I	Y	2		Y		
		MSCC 007X	MENS ROOM SINK DS	I	Y	2				
		MSCC 008X	MENS ROOM SINK US	I	Y	2				
		MSCC 009X	MAIN BLDG SINK #1	I	Y	2				
		MSCC001	MSCC 001	I	Y					
		MSCC002	MSCC 002	I	Y					
		MSCC003	MSCC 003	I	Y					
		MSCC004	CLUB KITCHEN #1	A	Y	2		Y		
		MSCC005	CLUB KITCHEN #2	A	Y	2				
		MSCC006	CLUBHOUSE BAR	A	Y	2				
		MSCC007	CLUB MENS D-STAIRS	A	Y	2				
		MSCC008	CLUB MENS U-STAIRS	A	Y	2				
		MSCC009	MAINT SINK #1	A	Y	2				
		MSCC010	TRIPLE T KITCHEN SIN	A	Y	2				
		MSCC011	GENERATED BY BATCH	A	Y					
		MSCC012	GENERATED BY BATCH	A	Y					
		MSCC015	TRIPLE T MENS ROOM	A		2				
		MSCC016	TRIPLE T WOMENS ROOM	A	Y	2				
		MSCC017	TRIPLE T KITCHEN SIN	A	Y	2				
		UPSTREAM	WITHIN 5 SERVICE CON	A						
53250	CLUB HOUSE TREATMENT PLANT	MSCC002	EP - CLUB HOUSE TP	I						
		MSCC011	CLUBHOUSE TP ENTRY P	A						
53251	MAINTENANCE BARN TREATMENT PLANT	MSCC003	EP - MAINT BARN TP	I						
		MSCC012	MAINTENANCE TP EP	A						
58758	WELL 14	MSCC014	WELL 14	A						
58760	WELL 7	MSCC013	WELL 7	A						
61687	ATMOSPHERIC STORAGE TANKS (5)									

## 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.

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1331033	MOHEGAN SUN CC PAUTIPAUG - CLUBHOUSE	NTNC	40	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
7 DOWS LANE			3		

Towns Served: SPRAGUE

## Certified Operator Information

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

**Facility Classification:** SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
CLARK, CHRIS C.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2027

## Contact Information

Name		Organization			Job Title		
<b>Mr. Chris C. Clark</b>		Mohegan Utility Authority			Operations Mng		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
3 Crow Hill Road					Uncasville	CT	06382
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-862-6280		860-862-6367		860-204-4008	cclark@moheganmail.com		

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

Name		Organization			Job Title		
<b>Ms. Marcia Seligman</b>		Mohegan Sun					
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
1 Mohegan Sun Blvd					Uncasville	CT	06382
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-862-7108				860-862-7108			

Contact Role(s): **Legal Contact**

Name		Organization			Job Title		
<b>Mr. Raymond Pineault</b>		Mohegan Golf, LLC			Owner		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
One Mohegan Sun Boulevard					Uncasville	CT	06382
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-862-6339		860-862-3100		860-961-2263	rpineault@moheganmail.com		

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**