

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1340032	JOHNSON MEMORIAL HOSPITAL, INC	C	250	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
201 CHESTNUT HILL ROAD	Connections	8			

Towns Served: STAFFORD

**Monitoring Requirements**

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

<b>Chlorine Residual (1012)</b>	<b>1 routine (RT) per month</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	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
<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	1/1/23 - 12/31/31		
<b>Total Coliform (3100)</b>	<b>1 routine (RT) per month</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	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		
<b>Disinfectant Byproducts - TTHM &amp; HAAs (DBP)</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>
1ST FLOOR KITCHEN OB (JMH01)	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>Lead And Copper (PBCU)</b>	<b>5 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>
Select from Inventory of Active Sampling Points	1/1/25 - 12/31/27	6/1-9/30	
<b>Physical Parameters (PPS)</b>	<b>1 routine (RT) per month</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	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		

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

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Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
201 CHESTNUT HILL ROAD	Connections	8			

Towns Served: STAFFORD

### Monitoring Requirements

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

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

Net Gross Alpha (4000)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	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		

Uranium (4006)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	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		

Combined Radium-226/228 (4010)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	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
ENTRY POINT (3)	1/1/25 - 12/31/27		

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		

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)	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		

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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
CT1340032	JOHNSON MEMORIAL HOSPITAL, INC	C	250	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
201 CHESTNUT HILL ROAD	Connections	8			

Towns Served: STAFFORD

**Monitoring Requirements**

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

Organic Chemicals (VOCS)	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		

**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:	0.3 MG/L	Continuous	Monitoring
Chlorine	Entry Point RDC (EPRD)				Compliance Status:
<b>Start Date:</b> 4/1/2020		<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>	<b>Compliance Status:</b>
		Monitoring Period	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
SUBMIT FISCAL AND ASSET MANAGEMENT CERT	1/1/2021	
RESPOND TO SANITARY SURVEY	1/22/2026	
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 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				
		JMH01	1ST FLOOR KITCHEN OB	A		2		Y
		JMH02	2 ND FLOOR PANTRY	A		3		
		JMH03	3 RD FLOOR PANTRY	P		3		
		JMH04	PUMP HOUSE	P	Y			
		JMH09	GND FLOOR MAIN KIT	P	Y	3		
		JMH10	BOILER ROOM	P				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
1471	WELL 5	2	WELL 5	A				
1472	WELL 8	2	WELL 8	A				
1473	WELL 7	2	WELL 7	A				
1474	WELL 6	2	WELL 6	A				

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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
CT1340032	JOHNSON MEMORIAL HOSPITAL, INC	C	250	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
201 CHESTNUT HILL ROAD	Connections	8			

Towns Served: STAFFORD

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total	Lead and Coliform	Copper	Stage
				Status	Rule	Rule Tier	
36704	JMH TREATMENT PLANT						
53695	STORAGE TANK						
60816	PUMP STATION						

## Certified Operator Information

Water System Facility: JMH TREATMENT PLANT (WSF ID: 36704)

Facility Classification:	CLASS 1 TREATMENT PLANT			Certification Expiration
Operator Name	Operator Type		Certification(s)	
GRANT, SHANE	CHIEF OPERATOR		WATER TREATMENT PLANT OPERATOR - CLASS II	
			DISTRIBUTION SYSTEM OPERATOR - CLASS II	
PETITTI, ANDY	ASSIGNED OPERATOR		DISTRIBUTION SYSTEM OPERATOR - CLASS I	
			WATER TREATMENT PLANT OPERATOR - CLASS I	
			12/31/2028	

## Contact Information

Name	Organization			Job Title		
Johnson Memorial Hospital, Inc						
Mailing Address Line One	Mailing Address Line Two			City	State	Zip Code
Emergency Contact				Emergency Contact	CT	06000
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-684-4251						

Contact Role(s): Owner

Name	Organization			Job Title		
Mr. Tony Armelin	Trinity Health of New England			Manager of Facilities		
Mailing Address Line One	Mailing Address Line Two			City	State	Zip Code
201 Chestnut Hill Road				Stafford Springs	CT	06074
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-684-8583					tony.armelin@trinityhealthofne.org	

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**

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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
CT1341303	STAFFORD HOLLOW WATER ASSOCIATION	C	429	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		9	4	1	

Towns Served: STAFFORD

### 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	1/1/18 - 12/31/26		
	1/1/27 - 12/31/35		
<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		
	4/1/26 - 6/30/26		
<b>Lead And Copper (PBCU)</b>	<b>5 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>
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/28	6/1-9/30	
	1/1/29 - 12/31/31	6/1-9/30	
<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		
	4/1/26 - 6/30/26		

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

<b>Net Gross Alpha (4000)</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>Uranium (4006)</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>Combined Radium-226/228 (4010)</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>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)	1/1/24 - 12/31/26		

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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
CT1341303	STAFFORD HOLLOW WATER ASSOCIATION	C	429	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: STAFFORD

## Monitoring Requirements

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

Inorganic Chemicals (IOCS)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
		1/1/27 - 12/31/29		
Nitrate And Nitrite (NOX)	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		
Pesticides, Herbicides and PCBs-Phase II (SOC2)	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)	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)	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: TREATMENT PLANT (WSFID: 11375)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 6.8 PH	4
Start Date: 9/1/2007		Compliance History: Monitoring Period	Operating Limit Compliance Status: Monitoring 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

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT FISCAL AND ASSET MANAGEMENT CERT	1/1/2021	
MAIL/HAND DELIVER NOTICE TO CONSUMERS	12/31/2025	2/6/2025
CROSS CONNECTION SURVEY REPORT	3/1/2026	

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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
CT1341303	STAFFORD HOLLOW WATER ASSOCIATION	C	429	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		9	4	1	

Towns Served: STAFFORD

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CERTIFY LEAD SL NOTIFICATION	7/1/2026	2/13/2025
MAIL/HAND DELIVER NOTICE TO CONSUMERS	12/31/2026	
CERTIFY LEAD SL NOTIFICATION	7/1/2027	

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and	Stage	
					Coliform Rule	Copper Rule Tier		
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		SHWA001	MILLPOND RAW	A	Y	N	Y	
		SHWA002	MILLPOND KIT SINK	A	Y	N	Y	
		SHWA003	MILLPOND BATHROOM	A	Y	N	Y	
		SHWA004	POST OFFICE 216 EAST	A	Y	N	Y	
		SHWA005	HAIRDRESSER 216 EAST	A	Y	N	Y	
		SHWA006	TYCO	A	Y	N	Y	
		SHWA007	TOWN BUILDING	A	Y	N	Y	
		SHWA008	TOWN GARAGE	A	Y	N	Y	
		SHWA009	163 ORCUTTVILLE	A	Y	N		
		SHWA010	277 ORCUTTVILLE	A	Y	N	Y	
		SHWA011	265 ORCUTTVILLE	A	Y	N	Y	
		SHWA012	266 ORCUTTVILLE	A	Y	N	Y	
		SHWA013	268 ORCUTTVILLE	A	Y	N	Y	
		SHWA014	267 ORCUTTVILLE	A	Y	N	Y	
		SHWA015	212 ORCUTTVILLE	A	Y	N	Y	
		SHWA016	262 ORCUTTVILLE	A	Y	N	Y	
		SHWA017	263 ORCUTTVILLE	A	Y	N	Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
11375	TREATMENT PLANT							
50787	WELL 2	2	WELL 1A	A				

## Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 11375)

**Facility Classification:** CLASS 2 TREATMENT PLANT

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

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Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		9	4	1	

Towns Served: STAFFORD

## Contact Information

Name	Organization	Job Title		
Mr. Todd B. Schull	Ttm Printed Circuit Group, Inc	Cfo		
Mailing Address Line One 1665 Scenic Avenue	Mailing Address Line Two Suite 250	City Costa Mesa	State CA	Zip Code 92626
Business Phone 714-327-3000	Extension	Fax	Mobile Phone	Emergency Phone
				Email Address

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

Name	Organization	Job Title		
Mr. Brian Santos	Ttm Technologies	Eh&S Manager		
Mailing Address Line One 4 Old Monson Road	Mailing Address Line Two	City Stafford	State CT	Zip Code 06076
Business Phone 860-746-6289	Extension	Fax 860-684-0714	Mobile Phone	Emergency Phone 413-813-9707
				Email Address brian.santos@ttmtech.com

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

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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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