	Connecticut Dej Water Qu	partment of lality Monit							
PWS ID	PWS Name			C	lassificati	on Po	pulation C	wner Type P	rimary Source
CT1460493	JOHANSEN PROPERTIES				NC		50	Р	GW
Local Address	(where applicable)		Service	Residentia	l Comm	ercial	Industrial	Combined	Agricultural
458 TALCOTT\	/ILLE ROAD		Connections		1				
Towns Served	: VERNON								
		Monite	oring Requ	irement	ts				
Water Syster	m Facility: DISTRIBUTION								
Total Colifor	rm (3100) g Point (Sampling Point ID)			Monitoring	Period	Colle	1 ection Perio	routine (RT	per month
	om Inventory of Active Sampl	ing Points		7/1/25 - 7/		Conc			mplete
36.666.116	m mentory of fletive sample			8/1/25 - 8/					mplete
				9/1/25 - 9/					mplete
				10/1/25 - 10	-				mplete
				11/1/25 - 11					mplete
				12/1/25 - 12					1
			<u> </u>	1/1/26 - 1/					
				2/1/26 - 2/					
				3/1/26 - 3/					
				4/1/26 - 4/					
				5/1/26 - 5/					
				6/1/26 - 6/					
Physical Par	ameters (PPS)				·		1 1	outine (RT)	per quarter
-	g Point (Sampling Point ID)			Monitoring	Period	Colle	ection Perio		iance Status
Select fro	om Inventory of Active Sampl	ing Points		4/1/25 - 6/	/30/25			Co	mplete
				7/1/25 - 9/	/30/25			Co	mplete
				10/1/25 - 12	2/31/25			Co	mplete
				1/1/26 - 3/	/31/26				
				4/1/26 - 6/	/30/26				
Water Syster	m Facility: ENTRY POINT	(WSF ID: 00700)							
Nitrate And	Nitrite (NOX)							1 routine (I	RT) per year
Sampling	g Point (Sampling Point ID)			Monitoring	Period	Colle	ection Perio	od Compl	iance Status
ENTRY PO	OINT (3)			1/1/24 - 12	/31/24			Co	mplete
				1/1/25 - 12	/31/25			Cc	mplete
				1/1/26 - 12	/31/26				
		Other C	ompliance	Schedu	les				
Compliance S	chedule Activity			Du	e Date		Achieve	ed Date	
RESPOND TO	SANITARY SURVEY			9/1	3/2019				
	Water	System Facili	ity and Sar	npling P	oint In	vent	ory		
Water						Total	Lead a	nd	
	ater System Facility	Sampling Point		nt		Colifor			Stage
Facility ID		ID	Description		Status	Rule	Rule T	ier Asbestos	WQP 2 DBPR
00600 DIS	STRIBUTION SYSTEM	4	DISTRIBUTION		Α	Υ			
		DOWNSTREAM			Α				
		UPSTREAM	WITHIN 5 SER	VICE CON	Α				
00700 EN	TRY POINT	3	ENTRY POINT		Α				
20026 WE	ELL	2	WELL		Α				

Schedule Generation Date: 12/12/2025 Page 1

Water Quality Monitoring and Compliance Schedule											
WS ID	PWS Name		Classification	Population	Owner Type	Primary Source					
T1460493	JOHANSEN PROPERTIES			NC	50	Р	GW				
ocal Address (w	here applicable)	Residen	tial Commerci	al Industri	al Combine	ed Agricultural					

1

Connections

Connecticut Department of Public Health Drinking Water Section

458 TALCOTTVILLE ROAD Towns Served: VERNON

Contact Information											
Name Organization Job Title											
Mr. Ed Johansen Properties											
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code		
458 Talcottville Rd						Vernon		СТ	06066		
Business Phone	Business Phone Extension Fax Mobile Phone Emergency Phone										
860-729-5669 edjohansen1@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 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

Сс	onnectic	*										ection		
		ter Qual	lity M	lonit	coring a	nd Con					_			
_	/S Name						Clas	ssifica	tion Po	-	Ow	ner Type P		ource
	WHOCA LOD	GE						NC		25		Р	GW	
Local Address (when	re applicable)				Service Connection	Residen	tial		mercial	Industr	ial	Combined	Agricul	itural
195 GRIER ROAD	NON				Connection	13			1					
Towns Served: VERI	NON							_	_					
Water System Fac	ility: DISTR	IBUTION SY			oring Red D: 00600)	quireme	nts							
Total Coliform (3	3100)										1 ro	utine (RT)	per qua	rter
Sampling Poin	-	oint ID)				Monitori	ing Pe	eriod	Coll	ection Pe			ance Sta	
Select from Inv	entory of Act	ive Sampling	Points			4/1/25 -	6/30	0/25				Co	mplete	
						7/1/25 -	9/30	0/25				Со	mplete	
						10/1/25 -	12/3	31/25						
						1/1/26 -	3/31	1/26						
						4/1/26 -	6/30	0/26						
Physical Paramet	ers (PPS)										1 ro	utine (RT)	per qua	rter
Sampling Poin	t (Sampling P	oint ID)				Monitori	ing Po	eriod	Coll	ection Pe	riod	Compli	ance Sta	tus
Select from Inv	entory of Act	ive Sampling	Points			4/1/25 -							mplete	
						7/1/25 -						Со	mplete	
						10/1/25 -								
						1/1/26 -								
						4/1/26 -	6/30	0/26						
Water System Fac	•	Y POINT (W	VSF ID: (00700)										
Nitrate And Nitri	• •											routine (F		1
Sampling Poin		oint ID)				Monitori			Coll	ection Pe	riod		ance Sta	tus
ENTRY POINT (3)					1/1/24 -							mplete	
						1/1/25 -		-				Co	mplete	
						1/1/26 -								
			Ot	her C	ompliand	ce Sched	lule	es						
Compliance Schedu							Due L			Achie	eved	Date		
RESPOND TO SANIT	ARY SURVEY					7	7/17/	2019						
		Water Sy	ystem	Facil	ity and Sa	ampling	Poi	int I	nvent	tory				
Water			C	0 - 1 - 4	C	- 1			Tota			1		_
System Water Sy Facility ID	stem Facility	•	Sampiin! IE		Sampling P Description			_	Colifoi Rule	-		Asbestos		tage DBDD
-	JTION SYSTEM	1	4		DISTRIBUTION			<u>Status</u> A	Y	, naic	1101	ASSESTEDS	WQ1 21	JUI K
00000 DISTRIBE	TION SISILIV				WITHIN 5 S			A						
			UPSTR		WITHIN 5 S			Α						
00700 ENTRY P	TNIC		3		ENTRY POIN		•	Α						
22428 WELL	·····		2		WELL	••		Α						
ZZ IZO WZZZ			_		tact Info	rmation		, ·						
Name					rganization							Job Title		
Mr. Martin D. Sitler	•				ernon-Parks	& Recreation	n De	ept	ſ	Director		100 1100		
Mailing Address Line			Mailing		s Line Two					City		State	Zip Cod	de et
120 South Street	- = :: #		8					Ve	ernon	1		CT	06066	
Business Phone	Extension	Fax		Mobi	ile Phone	Emergency	/ Pho			lress			, , , ,	
860-870-3520		860-870-3	3525		-	860-306-				vernon-c	t.gov	,		
	II.	l .												

	Connecticut Department of Public Health Drinking Water Section											
Water Quality Monitoring and Compliance Schedule												
PWS ID	PWS Name					Clas	sification	Population	Owner Type	Primary Source		
CT1460024	NEWHOCA LODG	GE					NC	25	Р	GW		
Local Address (wh	nere applicable)			Service	Resider	ntial	Commercia	al Industri	al Combin	ed Agricultura		
195 GRIER ROAD	95 GRIER ROAD Connections 1											
Towns Served: VE	RNON			,	,	·		,				
Contact Role(s):	Administrative	Contact										
Name				Organization					Job Titl	e		
Mr. Michael Purc	aro			Town of Verno	on			Town Adn	ninistrator			
Mailing Address L	ine One		Mailing Add	dress Line Two				City	State	Zip Code		
Memorial Buildin	g		14 Park Pla	ce			Vernon		СТ	06066		
Business Phone	Extension	Fax	N	Mobile Phone	Emergency	y Pho	ne Email A	ddress	·			
860-870-3670	860-870-3670 mpurcaro@vernon-ct.gov											
Contact Role(s):	Contact Role(s): Legal Contact											

- 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

		*	ity Monit		nd Com	plia	nce S	chec				
	WS Name								ion Ow	ner Type		
	00 EAST PLAZA					N		25		Р	G۱	
Local Address (wh	* * * * * * * * * * * * * * * * * * * *			Service	Resident	ial Co	mmercia	Indu	strial	Combine	d Agri	cultural
500 TALCOTTVILLE				Connections			1					
Towns Served: VE	RNON											
Water System Fa	acility: DISTRIF	RUTION SY		oring Req	uiremer	nts						
Total Coliform	•	301101131	312.01 (0031 1	D. 00000,					1 roi	utine (RT	1 nor a	uarter
	(3100) int (Sampling Poi	int ID)			Monitorin	na Perio	nd Co	llection	Period	=	oliance S	
	nventory of Active	-	Points		4/1/25 - (rection	T CHOU		Complet	
Select II Sill II	Tremedity of Alexino	c samping			7/1/25 - 9						Complet	
					10/1/25 - :						complet	
					1/1/26 - 3							
					4/1/26 - 0							
Physical Parame	eters (PPS)				-, -,	-,, -			1 roı	utine (RT) per a	uarter
•	int (Sampling Poi	int ID)			Monitorin	g Perio	od Co	llection	Period	-	oliance S	
	nventory of Active		Points		4/1/25 - (_					Complet	
	•				7/1/25 - 9						Complet	
					10/1/25 - :	12/31/	25				<u> </u>	
					1/1/26 - 3	3/31/2	6					
					4/1/26 - (6/30/2	6					
Water System Fa	acility: ENTRY	POINT (W	SF ID: 00700)									
Nitrate And Nit	rite (NOX)								1	routine	(RT) pe	r year
Sampling Po	int /Commilies Dai											-
	ını (Sampıing Poi	int ID)			Monitorin	g Perio	od Co	llection	Period	Com	oliance S	Status
ENTRY POINT		int ID)			<i>Monitorin</i> 1/1/24 - 1			llection	Period		oliance S Complet	_
		int ID)			_	.2/31/2	24	llection	Period	(e
		int ID)			1/1/24 - 1	.2/31/2 .2/31/2	24 25	llection	Period	(Complet	e
		int ID)	Other C	omplianc	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1	.2/31/2 .2/31/2 .2/31/2	24 25	llection	Period	(Complet	e
	T (3)	int ID)	Other C	omplianc	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Sched	.2/31/2 .2/31/2 .2/31/2	24 25 26		Period	(Complet	e
ENTRY POINT	(3)	int ID)	Other C	omplianc	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Sched	2/31/2 2/31/2 2/31/2 2/31/2 ules	24 25 26			(Complet	e
ENTRY POINT Compliance Schea RESPOND TO SAN	dule Activity ITARY SURVEY		Other C	·	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Sched	.2/31/2 .2/31/2 .2/31/2 .2/31/2 ules 	24 25 26 te 5	Antory	chieved	Date	Complet	e
ENTRY POINT Compliance Schea RESPOND TO SAN Water	fule Activity ITARY SURVEY	Water Sy	stem Facil	ity and Sa	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Sched	.2/31/2 .2/31/2 .2/31/2 .2/31/2 ules 	24 25 26 te 5 t Inver	Antory	chieved	Date	Complet	e e
Compliance Scheo RESPOND TO SAN Water System Water	dule Activity ITARY SURVEY	Water Sy		ity and Sa	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Sched	2/31/2 2/31/2 2/31/2 2/31/2 ules bue Dat /1/202 Point	24 25 26 te ts Inver	Antory	chieved ead and Copper	Date	Complet	e e Stage
Compliance Schea RESPOND TO SAN Water System Water Facility ID	dule Activity ITARY SURVEY V System Facility	Water Sy	stem Facil Sampling Point ID	ity and Sa Sampling Po Description	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Schedi D 3 impling	2/31/2 2/31/2 2/31/2 2/31/2 ules bue Dat /1/202 Point	24 25 26 te 25 t Inver Colife	Antory ral Loorm (chieved ead and Copper	Date	Complet	e e Stage
Compliance Schea RESPOND TO SAN Water System Water Facility ID	fule Activity ITARY SURVEY	Water Sy	stem Facil Sampling Point ID 4	ity and Sa Sampling Po Description DISTRIBUTION	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Scheding 3 impling oint	2/31/2 2/31/2 2/31/2 2/31/2 ules uue Dat /1/202 Point	24 25 26 26 27 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	Antory ral Loorm (chieved ead and Copper	Date	Complet	e e Stage
Compliance Schea RESPOND TO SAN Water System Water Facility ID	dule Activity ITARY SURVEY V System Facility	Water Sy	stem Facil Sampling Point ID 4 DOWNSTREAM	Sampling Po Description DISTRIBUTION WITHIN 5 SE	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Sched D 3 impling oint	2/31/2 2/31/2 2/31/2 2/31/2 ules bue Dat /1/202 Point	te to Colification Rule A Y	Antory ral Loorm (chieved ead and Copper	Date	Complet	e e Stage
Compliance Schea RESPOND TO SAN Water System Water Facility ID 00600 DISTRIE	Itale Activity ITARY SURVEY V System Facility BUTION SYSTEM	Water Sy	stem Facil Sampling Point ID 4 DOWNSTREAM UPSTREAM	Sampling Po Description DISTRIBUTION WITHIN 5 SE	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Schedi mpling impling oint ON SYSTEM RVICE CON	2/31/2 2/31/2 2/31/2 2/31/2 ules bue Date /1/202 Point	te Colificatus Ru	Antory ral Loorm (chieved ead and Copper	Date	Complet	e e Stage
Compliance Sched RESPOND TO SAN Water System Water Facility ID 00600 DISTRIE	Itale Activity ITARY SURVEY V System Facility BUTION SYSTEM	Water Sy	stem Facil Sampling Point ID 4 DOWNSTREAM	Sampling Po Description DISTRIBUTION WITHIN 5 SE	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Schedi mpling impling oint ON SYSTEM RVICE CON	2/31/2 2/31/2 2/31/2 2/31/2 ules bue Dat /1/202 Point	te Inver	Antory ral Loorm (chieved ead and Copper	Date	Complet	e e Stage
Compliance Schea RESPOND TO SAN Water System Water Facility ID 00600 DISTRIE	Itale Activity ITARY SURVEY V System Facility BUTION SYSTEM	Water Sy	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2	Sampling Po Description DISTRIBUTION WITHIN 5 SE WITHIN 5 SE ENTRY POIN	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Sched manual street str	2/31/2 2/31/2 2/31/2 2/31/2 ules pue Dat /1/202 Point	te Inver	Antory ral Loorm (chieved ead and Copper	Date	Complet	e e Stage
Compliance Sched RESPOND TO SAN Water System Water Facility ID 00600 DISTRIE	Itale Activity ITARY SURVEY V System Facility BUTION SYSTEM	Water Sy	Stem Facil Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2 Con	Sampling Po Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE ENTRY POINT	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Sched manual street str	2/31/2 2/31/2 2/31/2 2/31/2 ules pue Dat /1/202 Point	te Inver	Antory ral Loorm (chieved ead and Copper	Date	Complet Complet	e e Stage
Compliance Schea RESPOND TO SAN Water System Water Facility ID 00600 DISTRIE	Itale Activity ITARY SURVEY System Facility BUTION SYSTEM POINT	Water Sy	Stem Facil Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2 Con	Sampling Popescription DISTRIBUTION WITHIN 5 SE WITHIN 5 SE ENTRY POINT WELL	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Scheding ampling oint ON SYSTEM RVICE CON T	2/31/2 2/31/2 2/31/2 2/31/2 ules pue Dat /1/202 Point	te Inver	Antory ral Loorm (chieved ead and Copper ule Tier	Date Asbesta	Complet Complet	e e Stage
Compliance Schea RESPOND TO SAN Water System Water Facility ID 00600 DISTRIE	dule Activity ITARY SURVEY V System Facility BUTION SYSTEM POINT	Vater Sy	Stem Facil Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2 Con	Sampling Popescription DISTRIBUTION WITHIN 5 SE WITHIN 5 SE ENTRY POINT WELL Itact Information Transport of the property of th	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Scheding ampling oint ON SYSTEM RVICE CON T	2/31/2 2/31/2 2/31/2 2/31/2 ules pue Dat /1/202 Point	te Inver	Antory ral Loorm (rale R	chieved ead and Copper ule Tier	Date Asbesta	Complet Complet	Stage 2 DBPR
Compliance Schea RESPOND TO SAN Water System Water Facility ID 00600 DISTRIE 00700 ENTRY 22434 WELL Name Mr. Frederick P. K	dule Activity ITARY SURVEY V System Facility BUTION SYSTEM POINT	Vater Sy	Stem Facil Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2 Con	Sampling Popescription DISTRIBUTION WITHIN 5 SE WITHIN 5 SE ENTRY POINT WELL Itact Information Transport of the property of th	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Scheding ampling oint ON SYSTEM RVICE CON T	2/31/2 2/31/2 2/31/2 2/31/2 ules pue Dat /1/202 Point	te Inver	Antory val Leorm Colle R	chieved ead and Copper ule Tier	Date Asbesta	complet Complet	Stage 2 DBPR
Compliance Schea RESPOND TO SAN Water System Water Facility ID 00600 DISTRIE 00700 ENTRY 22434 WELL Name Mr. Frederick P. K Mailing Address Li	dule Activity ITARY SURVEY V System Facility BUTION SYSTEM POINT	Vater Sy	Stem Facil Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2 Con On Mailing Address	Sampling Por Description DISTRIBUTION WITHIN 5 SE WITHIN 5 SE ENTRY POINT WELL Itact Information ew 500 East, Italian Two	1/1/24 - 1 1/1/25 - 1 1/1/26 - 1 e Scheding ampling oint ON SYSTEM RVICE CON T	2/31/2 2/31/2 2/31/2 2/31/2 ules oue Dat /1/202 Point	te Es Colification A A A A A A A A A A A A A A A A A A A	Antory ral Loorm of the Ref. Owne City rer	chieved ead and Copper ule Tier	Date Asbesto Job Title	Complet Complet Zip C	Stage 2 DBPR

rtment o	of Public	Health	Drii	nking	, Water	Section					
ity Moni	toring ar	nd Con	nplia	nce S	Schedul	le					
			Classif	ication	Population	Owner Type	Primary Source				
			Ν	IC	25	Р	GW				
Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultura											
500 TALCOTTVILLE ROAD Connections 1											
al Contact											
(Organization					Job Titl	e				
Mailing Addre	ss Line Two				City	State	Zip Code				
				Colches	ster	СТ	06415				
Caisson Rd Colchester CT 06415 Business Phone Extension Fax Mobile Phone Emergency Phone Email Address											
ontact Role(s): Owner											
	al Contact Mailing Addre	Service Connection Organization Mailing Address Line Two	Service Connections Resider Contact Organization Mailing Address Line Two	Service Connections Residential Connections Organization Mailing Address Line Two	Ity Monitoring and Compliance Scale Classification NC Service Connections Residential Commercial Connections 1 Al Contact Organization Mailing Address Line Two Colches	Classification Population NC 25 Service Connections Residential Commercial Industri Connections 1 Al Contact Organization Mailing Address Line Two Colchester	NC 25 P				

- 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

	Connecticut Dep	artmer	nt of Public F	lealth	Drin	king	Water	Section	
			onitoring an						
PWS ID	PWS Name	anty M	officoring an						Primary Source
CT1460134	ITALIAN SOCIAL CLUB OF R	OCKVILLE			No		25	P P	GW
	(where applicable)	OCKVILLE	Service	Resident		mmercial		-	
56 SNIPSIC STR	* * * * * * * * * * * * * * * * * * * *		Connections	resident		1	maastrio	Combine	7.6.100100101
Towns Served:									
		М	onitoring Requ	uiremei	nts				
Water Systen	n Facility: DISTRIBUTION								
Total Colifor	m (3100)						1	routine (RT	per quarter
Sampling	Point (Sampling Point ID)			Monitorii	ng Perio	od Col	lection Per	iod Comp	liance Status
Select fro	m Inventory of Active Samplir	ng Points		4/1/25 -	6/30/25	5		C	omplete
				7/1/25 -	9/30/25	5		C	omplete
				10/1/25 -	12/31/2	25			
				1/1/26 -	3/31/26	5			
				4/1/26 -	6/30/26	5			
Physical Para	ameters (PPS)						1	routine (RT	per quarter
Sampling	Point (Sampling Point ID)			Monitorii	ng Perio	od Col	lection Per	iod Comp	liance Status
Select fro	m Inventory of Active Samplir	ng Points		4/1/25 -	6/30/25	5		C	omplete
				7/1/25 -	9/30/25	5		C	omplete
				10/1/25 -	12/31/2	25			
				1/1/26 -	3/31/26	5			
				4/1/26 -	6/30/26	5			
Water Systen	n Facility: ENTRY POINT (WSF ID: 0	0700)						
Nitrate And	Nitrite (NOX)							1 routine	RT) per year
Sampling	Point (Sampling Point ID)		_	Monitorii	ng Perio	od Col	lection Per	iod Comp	liance Status
ENTRY PC	DINT (3)			1/1/24 - 1				C	omplete
				1/1/25 - 3	12/31/2	5		C	omplete
				1/1/26 - 3	12/31/2	.6			
		Public	Notification R	Require					
			Compliance	Notice		ublic Not			<u>rtification</u>
Violation/Situ			Period 5 /2 /4 2	Tier		quired	Performed		H Received
	L COLIFORM RULE (RTCR) TT \		6/3/17 - 5/9/18	2		5/2018		4/4/2018	
	L COLIFORM RULE (RTCR) TT \		6/30/17 - 5/9/18	2		5/2018		4/4/2018	
REVISED TOTA	L COLIFORM RULE (RTCR) TT \		11/30/17 - 5/9/18	2		5/2018		4/4/2018	
	Water S	System I	Facility and Sai	mpling	Point	Inven	tory		
Water		- "				Total			
	ter System Facility	Sampling ID	Point Sampling Point Description	nt		Colifo			Stage 2 DRDD
Facility ID	TDIDLITION CVCTENA		·	L CVCTERA	Stat			Her Aspestos	WQP 2 DBPR
00600 DIS	TRIBUTION SYSTEM	4	DISTRIBUTION		A				
			REAM WITHIN 5 SER						
00700 5117	FDV DOINT	UPSTRE							
	TRY POINT	3	ENTRY POINT		A				
22436 WE	LL	2	WELL		А	<u> </u>			
			Contact Infori	mation					
Name			Organization					Job Title	
Mr. Mike Fran	cis		Italian Social Clu	b of Rock	/il		President		
Mailing Addres	ss Line One	Mailing A	ddress Line Two				City	State	Zip Code

Connecticut Department of Public Health Drinking Water Section												
Water Quality Monitoring and Compliance Schedule												
PWS ID	PWS Name					Clas	sification	Population	Owner Type	Primary Source		
CT1460134	ITALIAN SOCIAL	CLUB OF RO	CKVILLE				NC	25	Р	GW		
Local Address (w	here applicable)			Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural		
56 SNIPSIC STREE	T	Connectio	ons		1							
Towns Served: V	owns Served: VERNON											
PO Box 192							Vernon		СТ	06066		
Business Phon	e Extension	Fax	Mol	oile Phone	Emergenc	gency Phone Email Address						
860-875-9540		860-875-5	860 860	-559-5836	mike@acumarkllc.com							
Contact Role(s):	Legal Contact											
Name			(Organization					Job Titl	е		
Mr. Matthew Fis	cher		ľ	talian Soc. Cl	ub of Rockv	ille		President				
Mailing Address	Line One		Mailing Addre	ss Line Two				City	State	Zip Code		
P.O. Box 192 Italian Social Club of Rockville Rockville CT 06066												
Business Phon	e Extension	Fax	Mol	oile Phone	Emergenc	y Pho	ne Email A	ddress				
860-205-9071	860-205-9071 matt.dogman.fischer22@gmail.com											

CD 1.11 - 11 - 1/1. D -1 -1 1 - - 147-4 -

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.

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

End of schedule

	Connecticu	ıt Department o	f Public Health	Drink	ing Wa	ater Se	ction	
	Wat	er Quality Moni	toring and Com	plian	ce Sche	edule		
PWS ID	PWS Name			<u> </u>			ner Type F	Primary Source
CT146025	4 CAMP NEWHOCA	PARK		NC	2	5	Р	GW
Local Addr	ress (where applicable)		Service Resident	ial Comr	nercial In	dustrial	Combined	Agricultura
GRIER ROA	AD		Connections		1			_
Towns Ser	ved: VERNON				1			
		Monit	oring Requiremer	nts				
Water Sy	stem Facility: DISTRI	BUTION SYSTEM (WSF	D: 00600)					
Total Col	liform (3100)					1 rou	ıtine (RT)	per quarter
Samp	oling Point (Sampling Po	int ID)	Monitorin	g Period	Collecti	on Period	Comp	liance Status
Selec	t from Inventory of Activ	e Sampling Points	4/1/25 -	6/30/25			C	omplete
			7/1/25 - :	9/30/25			C	omplete
			4/1/26 -	6/30/26				
Physical	Parameters (PPS)					1 rou	ıtine (RT)	per quarter
Samp	oling Point (Sampling Po	int ID)	Monitorin	g Period	Collecti	on Period	Comp	liance Status
Selec	t from Inventory of Activ	e Sampling Points	4/1/25 -	6/30/25			C	omplete
			7/1/25 - 9	9/30/25			C	omplete
			4/1/26 -	6/30/26				
Water Sy:	stem Facility: ENTRY	POINT (WSF ID: 00700)						
Nitrate A	And Nitrite (NOX)					1	routine (RT) per year
Samp	oling Point (Sampling Po	int ID)	Monitorin	g Period	Collecti	on Period	Comp	liance Status
ENTR	Y POINT (3)		1/1/24 - 1	2/31/24			C	omplete
			1/1/25 - 1	.2/31/25			C	omplete
			1/1/26 - 1	.2/31/26				
	,	Water System Facil	ity and Sampling	Point I	nventor	У		
Water					Total	Lead and		
System	Water System Facility		Sampling Point		Coliform	Copper		Stage
Facility ID)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2 DBP
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
			WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
22448	WELL	2	WELL	Α				
		Cor	ntact Information					
Name		0	rganization				Job Title	
Mr. Marti	n D. Sitler	V	ernon-Parks & Recreatior	n Dept	Dire	ctor		
Mailing Ac	ddress Line One	Mailing Addres	s Line Two		Ci	ty	State	Zip Code
120 South	Street			Ve	ernon		СТ	06066
Business	s Phone Extension	Fax Mob	ile Phone Emergency	Phone Er	nail Addres	S		
860-870	0-3520	860-870-3525	860-306-4	1753 m	sitler@verr	non-ct.gov		
Contact Ro	ole(s): Administrative C	Contact						

Connecticut Department of Public Health Drinking Water Section												
	Wate	er Qua	lity Mon	itoring	and Co	mp	oliance	Schedul	le			
PWS ID P	WS Name					Cl	assification	Population	Owner Type	Pri	mary Source	
CT1460254 C	AMP NEWHOCA	PARK					NC	25	Р		GW	
Local Address (wh	ocal Address (where applicable) Service							ial Industri	al Combine	ed	Agricultural	
GRIER ROAD	RIER ROAD Connections											
Towns Served: VE	RNON			, ,			'			,		
Name				Organization	1				Job Titl	e		
Mr. Michael Purc	aro			Town of Ver	non			Town Adr	ninistrator			
Mailing Address L	ine One		Mailing Add	ess Line Two				City	State		Zip Code	
Memorial Building	S		14 Park Place	2			Verno	n	СТ		06066	
Business Phone	Business Phone Extension Fax Mobile Phone Emergency Phone Email Address											
860-870-3670	860-870-3670 mpurcaro@vernon-ct.gov											
Contact Role(s):												

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End of schedule

	Connecticut	Department of	Public H	lealth	Dr	inkii	ng W	/ater	Se	ction	
	Water	Quality Monit	oring an	d Con	npli	iance	Sch	nedul	le		
PWS ID	PWS Name		<u> </u>		_	sificatio				er Type Pi	rimary Source
CT146301	4 ROCKVILLE FISH AND	GAME - TRAP AND SKE	ET			NC		37		P	GW
Local Add	ress (where applicable)		Service	Residen	tial	Comme	rcial	Industri	al	Combined	Agricultural
	AND GAME ROAD		Connections			1					
Towns Ser	ved: VERNON			I							
		Monito	oring Requ	ireme	nts						
Water Sy	stem Facility: DISTRIBU										
Total Co	liform (3100)							1	l rou	tine (RT)	per quarter
Samı	oling Point (Sampling Point	ID)		Monitori	ing Po	eriod	Collec	ction Pe	riod	Compli	ance Status
Selec	t from Inventory of Active S	ampling Points		4/1/25 -	6/30)/25				Со	mplete
				7/1/25 -	9/30)/25				Co	mplete
				10/1/25 -	12/3	31/25					
				1/1/26 -	3/31	L/26					
				4/1/26 -	6/30)/26					
Physical	Parameters (PPS)							1	l rou	tine (RT)	per quarter
	oling Point (Sampling Point			Monitori	ing Pe	eriod	Collec	ction Pe	riod	Compli	ance Status
Selec	t from Inventory of Active S	ampling Points		4/1/25 -	6/30)/25				Со	mplete
				7/1/25 -	9/30)/25				Со	mplete
				10/1/25 -							
				1/1/26 -	3/31	L/26					
				4/1/26 -	6/30)/26					
Water Sy	stem Facility: ENTRY PC	OINT (WSF ID: 00700)									
Nitrate A	And Nitrite (NOX)								1	routine (F	T) per year
Sam	oling Point (Sampling Point	ID)		Monitori			Collec	ction Pe	riod	Compli	ance Status
ENTR	RY POINT (3)			1/1/24 -	12/3	1/24				Со	mplete
				1/1/25 -	12/3	1/25				Со	mplete
				1/1/26 -	12/3	1/26					
		Other Co	ompliance	Sched	lule	S					
Complian	ce Schedule Activity				Due L	Date		Achie	ved I	Date	
CROSS CO	NNECTION EXEMPTION				3/1/2	2029					
	Wa	ater System Facili	ty and Sar	npling	Poi	int Inv	vento	ory			
Water							Total	Lead			
System	Water System Facility	Sampling Point		nt		C	Coliforn				Stage
Facility ID		ID	Description			<u>Status</u>	Rule	Rule	Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION		l	A					
		TS1	MEN'S ROOM		_	Α	Υ				
		TS2	WOMEN'S RC			A	Y				
		TS3	KITCHEN SINK			Α .	Υ				
00700	ENTRY POINT	3	ENTRY POINT			Α					
60771	WELL 1	2	WELL 1			Α					
62745	CARBON FILTER										
		Con	tact Inform	mation)						
Name		Or	ganization							Job Title	
Mr. Peter	E Kasacek	Ro	ckville Fish An	d Game (Club		15	St Vp			
Mailing Ad	ddress Line One	Mailing Address	Line Two				(City		State	Zip Code
94 Seagra	ves Rd					Cove	entry			СТ	06238

(Connectic	ut Depa	ertment of	Public	Health	Dri	nking	g Wat	er S	ection		
	Wa	ter Qua	lity Monito	oring a	nd Com	pli	ance S	Sched	lule			
PWS ID F	PWS Name						ification Population		ion O	Owner Type Primary Source		
CT1463014 ROCKVILLE FISH AND GAME - TRAP AND SKEET							NC	37		Р	GW	
Local Address (where applicable)				Service	Resident	tial C	ommerci	al Indu	Industrial		d Agricultural	
101 FISH AND GAME ROAD				Connection	IS		1					
Towns Served: VE	RNON					'		1			1	
Business Phone Extension Fax			Mobile Phone Eme		Emergency	cy Phone Email Address						
860-742-7074			860-37	77-8902	860-377-8	60-377-8902 pet		tekasacek@gmail.com				
Contact Role(s):	Administrative	Contact										
Name Org				ganization				Job Title				
Mr. Greg Thomas Rock					ckville Fish & Game Club Trustee							
Mailing Address Line One Mailing Ad			Mailing Address	ddress Line Two			City		State	Zip Code		
P.O. Box 211								Vernon			06066	
Business Phone	Extension	Fax	Mobile	e Phone	Emergency Phone		e Email A	Email Address				
860-610-8150					860-818-8	3903	gregth	gregthomas686@gmail.com				
Contact Role(s):	Legal Contact			,								

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