

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1530024	CAMP MATAUCHA	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
270 SMITH POND ROAD			1		

Towns Served: WATERTOWN

## Monitoring Requirements

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

<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 - 7/31/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
<b>Total Coliform (3100)</b>	<b>3 repeat (RP) per period</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	7/24/25 - 7/29/25		Complete
	8/21/25 - 8/26/25		Complete
<b>Total Coliform (3100)</b>	<b>3 temporary routine (TR) 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
<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		
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

<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		
	1/1/27 - 12/31/27		

Water System Facility: WELL (WSF ID: 22523)

<b>E. Coli (3014)</b>	<b>1 triggered (TG) per period</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL (2)	7/23/25 - 7/29/25		Complete
	8/20/25 - 8/26/25		Complete

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SAMPLING SITE PLAN	12/3/2025	
CROSS CONNECTION SURVEY REPORT	3/1/2026	

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule Status	Asbestos Rule Tier	WQP 2 DBPR Status	Stage

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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
CT1530024	CAMP MATAUCHA	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
270 SMITH POND ROAD			1		

Towns Served: WATERTOWN

## 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	Asbestos	Stage WQP 2	DBPR
					Y	Rule Tier	WQD	DBPR	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y	A	A	A	A
		DOWNSTREAM	WITHIN 5 SERVICE CON	A					
		UPSTREAM	WITHIN 5 SERVICE CON	A					
00700	ENTRY POINT	3	ENTRY POINT	A					
22523	WELL	2	WELL	A					
61555	ATMOSPHERIC STORAGE								
61557	TREATMENT PLANT								

## Contact Information

Name	Organization	Job Title		
Mr. Adam Dubois	YMCA Camp Mataucha	Outdoor Center Dir		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
136 West Main Street		Waterbury	CT	06702
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-754-9622	118			860-706-6036
				Email Address
				adubois@waterburyymca.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
CT1530054	720 THOMASTON ROAD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: WATERTOWN

## 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 Status	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			
23084	WELL	2	WELL	A			

## Contact Information

Name	Organization	Job Title
Mr. John M. Daddona		
Mailing Address Line One	Mailing Address Line Two	City
7 Beal Drive		State
Business Phone	Extension	Zip Code
203-985-5622		
	Fax	Mobile Phone
		Emergency Phone
		Email Address
		JMDADDONA@GMAIL.COM

Contact Role(s): Administrative Contact, Legal Contact, 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
CT1530054	720 THOMASTON ROAD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: WATERTOWN

**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
CT1530064	SUNSET GRILLE	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
834 NORTHFIELD ROAD	Connections		1		

Towns Served: WATERTOWN

**Monitoring Requirements**

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

<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>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		
		1/1/26 - 3/31/26		
		4/1/26 - 6/30/26		

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

<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		
		1/1/27 - 12/31/27		

**Other Compliance Schedules**

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

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point</i>	<i>Sampling Point</i>	<i>Status</i>	<i>Total Coliform</i>	<i>Lead and Copper Rule</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
		<i>ID</i>	<i>Description</i>					
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
		WTNREST001	UPPER KITCHEN SINK 1	A	Y			
		WTNREST002	UPPER KITCHEN SINK 2	A	Y			
		WTNREST003	UPPER MENS BATHRM	A	Y			
		WTNREST004	UPPER LADIES BATHRM	A	Y			
		WTNREST005	UPPER BAR SINK 1	A	Y			
		WTNREST006	UPPER BAR SINK 2	A	Y			
		WTNREST007	LOWER BAR SINK 1	A	Y			
		WTNREST008	LOWER MENS BATHRM	A	Y			
		WTNREST009	LOWER LADIES BATHRM	A	Y			
		WTNREST010	LOWER KITCHEN SINK 1	A	Y			
		WTNREST011	LOWER KITCHEN SINK 2	A	Y			

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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
CT1530064	SUNSET GRILLE	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
834 NORTHFIELD ROAD			1		

Towns Served: WATERTOWN

## 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	Asbestos Rule Tier	Stage WQP 2	DBPR
00700	ENTRY POINT	3	ENTRY POINT	A					
22767	WELL	2	WELL	A					
61559	TREATMENT PLANT								

## Contact Information

Name	Organization	Job Title
<b>Watertown</b>		
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
Town Hall Annex	424 Main Street	Watertown CT
Business Phone	Extension	Fax
860-945-5255		
Mobile Phone		Emergency Phone
		Email Address
Contact Role(s):	<b>Legal Contact, Owner</b>	
Name	Organization	Job Title
<b>Mr. Michael Ganem</b>	Town of Watertown	Director
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
61 Echo Lake Road		Watertown CT 06795
Business Phone	Extension	Fax
860-945-5246		
Mobile Phone		Emergency Phone
		Email Address
		ganem@watertownct.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

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**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
CT1530074	CRESTBROOK PARK PRO-SHOP/MAINTENANCE	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
834 NORTHFIELD ROAD	Connections		2		

Towns Served: WATERTOWN

**Monitoring Requirements**

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

<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>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		
		1/1/26 - 3/31/26		
		4/1/26 - 6/30/26		

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

<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		
		1/1/27 - 12/31/27		

**Other Compliance Schedules**

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

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>WQP 2 DBPR</i>	<i>Stage</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y				
		CRESTBK001	MAINT LOWER SINK	A	Y				
		CRESTBK002	MAINT BATH UPPER	A	Y				
		CRESTBK003	PRO SHOP MENS	A	Y				
		CRESTBK004	PRO SHOP LADIES	A	Y				
		CRESTBK005	SNACK SHACK	A	Y				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A					
		UPSTREAM	WITHIN 5 SERVICE CON	A					
00700	ENTRY POINT	3	ENTRY POINT	A					
22833	PRO-SHOP / MAINTENANCE WELL	2	PS / MA WELL	A					
62065	IRON REMOVAL TREATMENT								

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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
CT1530074	CRESTBROOK PARK PRO-SHOP/MAINTENANCE	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
834 NORTHFIELD ROAD	Connections		2		

Towns Served: WATERTOWN

## Contact Information

Name	Organization	Job Title		
Mr. Robert M Scannell	Town of Watertown	Town Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
Town Manager	424 Main Street	Watertown	CT	06795
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone Email Address
860-945-5255				RSCANNELL@WATERTOWNCT.ORG

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

Name	Organization	Job Title		
Mr. Michael Ganem	Town of Watertown	Director		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
61 Echo Lake Road		Watertown	CT	06795
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone Email Address
860-945-5246				ganem@watertownct.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

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<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
CT1530094	1030 LITCHFIELD ROAD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: WATERTOWN

## 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 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		

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
SAMPLING SITE PLAN		3/31/2025

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	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	101	UTILITY 3 BAY SINK	A	Y	
		102	COUNTER SINK	A	Y	
		103	DELI SINK	A	Y	
		104	BATHROOM SINK	A	Y	
		4	DISTRIBUTION SYSTEM	A	Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A		
		UPSTREAM	WITHIN 5 SERVICE CON	A		
00700	ENTRY POINT	3	ENTRY POINT	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
CT1530094	1030 LITCHFIELD ROAD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		1			

Towns Served: WATERTOWN

## 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	Asbestos Rule Tier	Stage WQP 2 DBPR
22988	WELL #1	2	WELL #1	A				

## Contact Information

Name	Organization	Job Title
Mr. Rubel Choudhry		
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
19 East Mall		Plainview NY 11803
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address
631-492-0341		rubel288@gmail.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

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**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
CT1539024	VFW POST 5157	NC	27	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
866 THOMASTON ROAD			1		

Towns Served: WATERTOWN

## 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		

## Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
E. Coli	7/10/17 - 10/3/17	3	10/3/2018		10/13/2018	
Total Coliform M&R Violation	1/1/25 - 3/31/25	3	10/1/2026		10/11/2026	

## 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 Status	Asbestos Rule Tier	WQP 2 DBPR Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	A			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
52168	WELL 1	2	WELL 1	A			

## Contact Information

Name	Organization				Job Title		
Mr. Robert Neuman	VFW Post 5157						
Mailing Address Line One	Mailing Address Line Two			City		State	Zip Code
P.O. Box 338	866 Thomaston Road			Watertown		CT	06795
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-274-1573				860-274-1573			

**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
CT1539024	VFW POST 5157	NC	27	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
866 THOMASTON ROAD			1		

Towns Served: WATERTOWN

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

Name	Organization	Job Title
Water Oak Post		
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
Thomaston Rd		Watertown CT 06795-0000
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address

Contact Role(s): **Owner**

Name	Organization	Job Title
Mr. George Reardon	VFW 5157	
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
P.O. Box 338	866 Thomaston Road	Watertown CT 06795
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address
860-274-1573		203-232-6114

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**