Connecticut Dep	artmont of	F Public	Health	Dr	inki	nσM	lator	So	ction	
·						<u> </u>			ction	
Water Qua	anty Monit	oring a	na Con							
PWS ID PWS Name				Class	sificatio	on Pop		Owr		rimary Source
CT0190014 QUIET CORNER INN					NC		25		P	GW
Local Address (where applicable)		Service	Residen	itial	Comme	ercial	Industri	al	Combined	Agricultural
479 PROVIDENCE ROAD (ROUTE 6)		Connectio	ns		1					
Towns Served: BROOKLYN										
		oring Re	quireme	nts						
Water System Facility: DISTRIBUTION S	SYSTEM (WSFI	D: 00600)								
Total Coliform (3100)						~ //				per quarter
Sampling Point (Sampling Point ID)			Monitori	-		Colle	ction Pe	riod		iance Status
Select from Inventory of Active Samplin	g Points		10/1/23 -		-					omplete
			1/1/24 -		-				Сс	omplete
			4/1/24 -							
			7/1/24 -	- 9/30)/24					
Physical Parameters (PPS)						~ //				per quarter
Sampling Point (Sampling Point ID)	<u> </u>		Monitori	-		Colle	ction Pe	riod		iance Status
Select from Inventory of Active Samplin	g Points		10/1/23 -							omplete
			1/1/24 -						C	omplete
			4/1/24 -							
			7/1/24 -	- 9/30)/24					
Water System Facility: ENTRY POINT (WSF ID: 00700)									
Nitrate And Nitrite (NOX)						C -11-			-	RT) per year
Sampling Point (Sampling Point ID)			Monitori	-		Colle	ction Pe	riod		iance Status
ENTRY POINT (3)			1/1/23 -							omplete
			1/1/24 -			_				omplete
Water	System Facil	ity and S	- 1/1/25 ampling		•	vonto	n rv			
Water	ystem racm	ity and S	amping	FUI		Total	Lead	and		
System Water System Facility Facility ID	Sampling Point ID	Sampling F Description		c	C Status		n Cop	per	Asbestos	Stage WQP 2 DBPR
00600 DISTRIBUTION SYSTEM	4	DISTRIBUT	ION SYSTEM		A	Y				
	DOWNSTREAM				А					
	UPSTREAM		SERVICE CO		А					
00700 ENTRY POINT	3	ENTRY POI			А					
20399 WELL	2	WELL			А					
		tact Info	rmation							
Name		rganization							Job Title	
Mr. Peter Patel		mericas Best	: Value Inn							
Mailing Address Line One	Mailing Addres					I	City		State	Zip Code
479 Providence Road	0				Broo	oklyn	,		CT	06234
Business Phone Extension Fax	K Mobi	ile Phone	Emergency	/ Phor		-	ess			
860-774-9644			- 5				erinn@ya	ahoo	.com	
Contact Role(s): Administrative Contact, Le	gal Contact. Owr	ner			-1					

PWS ID	PWS Name			Classificat	on F	Population	Owner Type	Prim	nary Source
СТ0190014	QUIET CORNER INN			NC		25	Р		GW
Local Address (where applicable)	Service	Residen	tial Comm	ercia	l Industri	al Combine	ed A	Agricultural
479 PROVIDEN	CE ROAD (ROUTE 6)	Connections		:					
Towns Served:	BROOKLYN								

Please note the following:

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

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

	Connectic	ut Depar	tment of	Public	Health	Drin	nking	Wa	iter Se	ction	
	Wa	ter Ouali	ty Monit	oring a	nd Com	nplia	nce S	che	dule		
PWS ID	PWS Name		•) • - • •							ner Type P	rimary Source
СТ0190024	BROOKLYN'S CO	UNTRY VIEW	RESTAURANT			N		25		P	GW
Local Address (where applicable)			Service	Residen	tial Co	mmercia	I Inc	dustrial	Combined	Agricultural
170 SOUTH STR				Connectio	ns		1				
Towns Served:	BROOKLYN										
			Monito	oring Re	quireme	nts					
Water System	n Facility: DISTR	IBUTION SYS	STEM (WSF II	D: 00600)							
Total Colifor	m (3100)								1 rou	itine (RT)	per quarter
Sampling	Point (Sampling P	oint ID)			Monitori	ng Perio	od Co	llectio	on Period	Compl	iance Status
Select from	m Inventory of Act	ive Sampling P	oints		10/1/23 -	12/31/	23			Co	omplete
					1/1/24 -	3/31/2	4			Co	omplete
					4/1/24 -	6/30/2	4				
					7/1/24 -	9/30/2	4				
Physical Para	ameters (PPS)								1 rou	itine (RT)	per quarter
Sampling	Point (Sampling P	oint ID)			Monitori	ng Perio	od Co	llectio	on Period	Compl	iance Status
Select from	m Inventory of Act	ive Sampling P	oints		10/1/23 -	12/31/	23			Co	omplete
					1/1/24 -	3/31/2	4			Co	omplete
					4/1/24 -	6/30/2	4				
					7/1/24 -	9/30/2	4				
Water System	n Facility: ENTR	Y POINT (WS	SF ID: 00700)								
Nitrate And I	Nitrite (NOX)								1	routine (RT) per year
Sampling	Point (Sampling P	oint ID)			Monitori	ng Perio	od Co	llectio	on Period	Compl	iance Status
ENTRY PO	INT (3)				1/1/23 -	12/31/2	23			Co	omplete
					1/1/24 -	12/31/2	24				
					1/1/25 -	12/31/2	25				
		Water Sys	stem Facili	ty and S	ampling	Point	t Inver	ntor	у		
Water									Lead and		
	ter System Facility	Sc	ampling Point				-		Copper		Stage
Facility ID		-	ID	Descriptio			lus	ıle	Rule Tier	Asbestos	WQP 2 DBPR
00600 DIST	RIBUTION SYSTEM		4		ION SYSTEM			Y			
		D	OWNSTREAM								
00700 517			UPSTREAM		SERVICE CON						
-	RY POINT		3	ENTRY POI	NI	A					
20400 WEI	_L		2	WELL		A	4				
			Con	tact Info	ormation						
Name			Or	ganization						Job Title	
Mr. Jeffrey J. F	ontaine		Fo	ntaine Re			1	Owr	ner		
Mailing Addres	s Line One	Ν	Aailing Address	s Line Two				Cit	У	State	Zip Code
170 South Stre	et				1		Brookly			СТ	06234
Business Pho	ne Extension	Fax	Mobi	le Phone	Emergency		-				
860-230-684					860-774-	4145	bcvresta	auran	t@gmail.c	om	
Contact Role(s)	: Administrative	Contact, Own	er								

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
СТ0190024	BROOKLYN'S COUNTRY VIEW RESTAURANT			NC	25	Р	GW
Local Address (where applicable)	Service	Residen	tial Commerci	ial Industri	al Combine	ed Agricultural
170 SOUTH ST	REET	Connections		1			
Towns Served:	BROOKLYN						

Please note the following:

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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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С		-	rtment of					<u> </u>				ction		
		ter Qual	ity Monit	oring a										
	VS Name					Clas		on Po			Owr	ner Type	Prim	
	ANKS RESTAU	RANT		Constant	Desident	: - I	NC		25		-1	P	-1 0	GW
Local Address (whe				Service Connectio	Resident	iai	Comm		Inc	dustria	al	Combine	d A	gricul
416 PROVIDENCE R Towns Served: BRC				connectic	/15		1							
Towns Served: BRC	JORLYN				•									
					quiremer	nts								
Water System Fa		IBUTION SY	STEM (WSF I	D: 00600)										
Total Coliform (-											tine (RT)	-	-
	nt (Sampling P				Monitorin	-		Coll	ectio	on Pei	riod	Сотр		
Select from In	ventory of Act	ive Sampling	Points		10/1/23 -									lete
					1/1/24 -							C	omp	lete
					4/1/24 -									
	(BES)				7/1/24 -	9/30	0/24			-				
Physical Parame		oint (D)			Manifest		outed	C -1	la -t:			tine (RT)	-	-
	nt (Sampling P		Doints		Monitorin	-		Coll	ectio	on Pei	100	Comp		
Select from in	ventory of Act	ive sampling	Points		10/1/23 -									lete
					1/1/24 -							U	omp	lete
					4/1/24 - 7/1/24 -									
Water System Fa					//1/24-	5/50	<i>J</i> / Z4							
			SF ID. 00700)								1	routino (DT)	
Nitrate And Nitr	nte (NOX)	oint ID)			Monitorin		ariad	Coll	loctiv	on Pei		routine (<i>Comp</i>	-	
ENTRY POINT					1/1/23 - 1	-		Con	etin	JII PEI	100			olete
	(3)				1/1/23 - 1									lete
					1/1/24 - 1								omp	nete
		Mater C.		:					-					
		water sy	stem Facil	ity and s	bampling	POI	int in			-				
Water System Water S	ystem Facility		Sampling Point	Samplina	Point			Toto Colifo		Lead				C+
System Water S Facility ID	ystem rucinty		ID	Descriptio				Rul		Copp Rule		Asbesto	s W/	St OP 21
	UTION SYSTEM	1	4	-	ION SYSTEM	3	Status A	Y	-	nuic	ner	A5005101		
	onon sisten		- DOWNSTREAM				A							
			UPSTREAM		SERVICE CON		A							
00700 ENTRY F	POINT		3	ENTRY PO			A							
20404 WELL			2	WELL			A							
	PHERIC STORA	SE	2	VVLLL			~							
00400 ATMOS	TIERIC STORA	JL	Cor	ntact Info	ormation									
Name				rganization								Job Title		
Mr. Roland Lachar	ite			ank's, Inc.					Assis	stant	Vice			
Mailing Address Lir			Mailing Addres						Cit			State	Zi	p Cod
416 Providence Ro			0				Bro	oklyn				CT		06234
Business Phone	Extension	Fax	Mob	ile Phone	Emergency	Pho			dres	S				
860-774-6071					860-774-6			yn100			m			
Contact Role(s): A	dministrative	Contact, Own	ner		,		I							

				0		I ⁻			-	
PWS ID	PWS Name					Class	ification	Population	Owner Type	Primary Source
СТ0190064	HANKS RESTAU	RANT					NC	25	Р	GW
Local Address (w	here applicable)			Service	Resider	ntial (Commerci	ial Industri	al Combine	ed Agricultural
416 PROVIDENCI	ROAD			Connectio	ns		1			
Towns Served: B	ROOKLYN									
Name				Organization					Job Titl	e
Ms. Lyn M. Lach	arite			Hank's, Inc.				Asst. Pres	ident	
Mailing Address	Line One		Mailing Addr	ess Line Two				City	State	Zip Code
416 Providence F	Road						Brookl	yn	СТ	06234
Business Phone	e Extension	Fax	Mo	bile Phone	Emergenc	y Phon	e Email /	Address		
860-774-6071					860-933	8-3081	rollyn1	.004@aol.co	om	
Contact Role(s):	Legal Contact, C	Dwner								
	Collocation and									

Please note the following:

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

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Co	nnectici	it Dena	rtment o	f Public	Health	Dri	nkin	σW	ater S	ection	า	
			lity Moni					0			1	
PWS ID PW	/S Name	u Qua		toring a			ification				a Dr	imary Source
	R LADY OF LA	SALETTE CH					NC		25	P		GW
Local Address (when				Service	Residen		ommer		ndustrial	Combir	hed	Agricultural
25 PROVIDENCE RO				Connectio			1		laastilai	comon	icu	7.5 realeand
Towns Served: BRO							-					
			Monit	oring Re	quireme	nts						
Water System Fac	ility: DISTRI	BUTION SY			•						_	
Total Coliform (3	100)								1 r	outine (R	(Τ) μ	oer quarter
Sampling Poin	-	oint ID)			Monitori	ng Per	riod	Collect	ion Perio	-		ance Status
Select from Inv	entory of Activ	ve Sampling	Points		10/1/23 -	12/31	/23				Со	mplete
					1/1/24 -	3/31/2	24					
					4/1/24 -	6/30/2	24					
					7/1/24 -	9/30/2	24					
Physical Paramet	ers (PPS)								1 r	outine (R	κτ) μ	oer quarter
Sampling Poin	t (Sampling Po	oint ID)			Monitori	ng Per	riod	Collect	ion Perio	d Con	nplie	ance Status
Select from Inv	entory of Activ	ve Sampling	Points		10/1/23 -	12/31	L/23				Со	mplete
					1/1/24 -	3/31/2	24					
					4/1/24 -							
					7/1/24 -	9/30/2	24					
Water System Fac	ility: ENTRY	POINT (W	/SF ID: 00700									
Nitrate And Nitri	te (NOX)									1 routine	e (R	T) per year
Sampling Poin		oint ID)			Monitori	-		Collect	ion Perio	d Con	-	ance Status
ENTRY POINT (3)				1/1/23 -						Со	mplete
					1/1/24 -							
					1/1/25 -	12/31/	/25					
	I	Water Sy	stem Facil	lity and S	ampling	Poin	nt Invo	ento	ry			
Water								Total				
System Water Sy Facility ID	stem Facility		Sampling Point ID	Description		_		niform Rule	Coppe Bule Ti		tos	Stage WQP 2 DBPR
-	ITION SYSTEM		4		, ION SYSTEM		atus A	Y	Kule II	er Asbes	103	WQF 2 DDFN
UUUUU DISTRIBU			4 DOWNSTREAM				A	T				
			UPSTREAM		SERVICE CON		A					
00700 ENTRY P0	דאור		3	ENTRY POI			A					
20405 WELL			2	WELL			A					
20403 WELL				ntact Info	rmation		<u></u>					
Name				rganization	mation					Job Tit	lo	
Ms. Barbara Laliber	te			ady of Lasale	tte Church			Off	ice Mana		.10	
Mailing Address Line			L Mailing Addres	-					ity	State	2	Zip Code
25 Providence Road							Brook		1	CT	-	06234
Business Phone	Extension	Fax	Moh	ile Phone	Emergency	Phone		-	SS		-	
860-774-6275		860-774-0			860-918-			dy@sn				
Contact Role(s): Ac	lministrative C		-					, с				
\- /												

		201 200	<u> </u>						<u> </u>	
PWS ID	PWS Name					Clas	sification	Population	Owner Type	Primary Sour
СТ0190074	OUR LADY OF LA	SALETTE CH	IURCH				NC	25	Р	GW
Local Address (w	here applicable)				Service	Residential	Commerc	ial Industri	al Combin	ed Agricultur
25 PROVIDENCE	ROAD (ROUTE 6)				Connectior	าร	1			
Towns Served: B	ROOKLYN				1	I				
Name				0	rganization				Job Titl	e
Father Benjamin	Vinjoe			0	ur Lady of La	salette				
Mailing Address	Line One		Mailing	Addres	s Line Two			City	State	Zip Code
P.O. Box 211							Brook	lyn	СТ	06234
Business Phone	e Extension	Fax		Mob	ile Phone	Emergency Pho	ne Email	Address		1
860-774-6275	,	860-774-	0679				ourlad	lybrooklyn@	gmail.com	
Contact Role(s):	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.

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Connecticut De Water Or	partment of uality Monit					0			ection		
PWS ID PWS Name	autry mont	or mg un							ner Type P	rimary So	ource
CT0190104 BROOKLYN MARKET					NC		25		P	GW	
Local Address (where applicable)		Service	Resider	ntial	Comm	ercial	Indust	rial	Combined	Agricul	ltural
107 HARTFORD ROAD (ROUTE 6)		Connections			1						
Towns Served: BROOKLYN			1							1	-
	Monite	oring Requ	uireme	ents	5						
Water System Facility: DISTRIBUTIO		• •		_							
Total Coliform (3100)									utine (RT)		
Sampling Point (Sampling Point ID)			Monitor	-		Colle	ection P	eriod	-	ance Sta	tus
Select from Inventory of Active Samp	ling Points		10/1/23		-					mplete	
			1/1/24						Co	mplete	
			4/1/24								
			7/1/24	- 9/3	0/24			•	. (55		• •
Total Coliform (3100)						~ "			epeat (RP		
Sampling Point (Sampling Point ID)			Monitor			Colle	ection P	eriod		ance Sta	tus
Select from Inventory of Active Samp	ling Points		10/3/23	- 10,	/8/23	• •				mplete	
Total Coliform (3100)					and and		-	-	outine (TR	-	
Sampling Point (Sampling Point ID)	lin - Deinte		Monitor	-		Colle	ection P	eriod		ance Sta	tus
Select from Inventory of Active Samp	ling Points		11/1/23	- 11/	30/23					omplete	
Physical Parameters (PPS)					and and	C -11			utine (RT)		
Sampling Point (Sampling Point ID)	line Deinte		Monitor	-		Colle	ection P	erioa	-	ance Sta	τυς
Select from Inventory of Active Samp	ling Points		10/1/23							omplete	
			1/1/24		-					omplete	
			4/1/24								
Water System Facility: ENTRY POINT	(WSE ID: 00700)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	575	0/24						
Nitrate (1040)								1 roi	utine (RT)	ner ausi	rtor
Sampling Point (Sampling Point ID)			Monitor	ina P	Period	Colle	ection P		. ,	iance Sta	
ENTRY POINT (3)			10/1/23			com		criou		mplete	cus
			1/1/24		-					mplete	
			4/1/24	-	-					inpiece	
			7/1/24		•						
Nitrite (1041)			.,_,_,	5,5	-/- '			1	routine (I	RT) ner v	/ear
Sampling Point (Sampling Point ID)			Monitor	ina P	Period	Colle	ection P			iance Sta	
ENTRY POINT (3)			1/1/23 -	-						mplete	
(_)			1/1/24 -							mplete	
			1/1/25 -								
Water System Facility: WELL (WSF II	D: 20408)		, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, -						
E. Coli (3014)							1	L trig	gered (TG	per per	riod
Sampling Point (Sampling Point ID)			Monitor			Colle	ection P	eriod	Compl	ance Sta	tus
WELL (2)			10/2/23	- 10,	/8/23				Co	mplete	
Water	r System Facili	ty and Sai	npling	; Po	oint In	vent	ory				
Water	-					Tota	l Lea	d and			
System Water System Facility	Sampling Point		nt			Colifor	-	pper			tage
Facility ID	ID	Description			Status	Rule	e Rul	e Tier	Asbestos	WQP 2 L	DBPF
00600 DISTRIBUTION SYSTEM					A	Y					
NOTE: This information has been provided to help o	DOWNSTREAM				A	المراجع والمراجع					

Connecticut Depa	irtment of	f Public 🛛	Health	Dri	nking	g Wa	ter	Section	
Water Qua	lity Monit	toring ar	nd Com	plia	ance S	Sche	dule	è	
PWS ID PWS Name	•			Classi	fication	Popula	ation (Owner Type P	rimary Source
CT0190104 BROOKLYN MARKET				1	١C	25	5	Р	GW
Local Address (where applicable)		Service	Residen	tial Co	ommerci	al Inc	lustria	Combined	Agricultural
107 HARTFORD ROAD (ROUTE 6)		Connection	S		1				
Towns Served: BROOKLYN									
Water S	ystem Facil	ity and Sa	mpling	Poin	t Inve	ntory	y		
Water System Water System Facility Facility ID	Sampling Point ID	Description			Coli	iform	Lead a Coppe Rule T	er	Stage WQP 2 DBPR
	UPSTREAM	WITHIN 5 SE	RVICE CON		A				
00700 ENTRY POINT	3	ENTRY POIN	IT		A				
20408 WELL	2	WELL			A				
	Cor	ntact Info	rmation						
Name	0	rganization						Job Title	
Mr. Hiteshkumar Patel	В	rooklyn Mark	et						
Mailing Address Line One	Mailing Addres	s Line Two				City	У	State	Zip Code
107 Hartford Rd					Brookly			СТ	06374
Business Phone Extension Fax	Mob	ile Phone	Emergency	Phone					
860-774-2621	860-	502-4112			07broc	oklynma	arket@	gmail.com	
Contact Role(s): Administrative Contact, Leg	al Contact, Ow	ner							
Name	0	rganization						Job Title	
Ms. Nayana Patel									
Mailing Address Line One	Mailing Addres	s Line Two				City	У	State	Zip Code
107 Hartford Rd					Brookly	•		СТ	06374
Business Phone Extension Fax	Mob	ile Phone	Emergency	Phone	e Email A	Address	5		
Contact Role(s): Owner									
Please note the following: 1. The residual disinfectant concentration must k	a massurad at th	o como locatio	a and time a	s oach t	total colif	orm con	nnlo		

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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			_			_				
onnectic						0			ction	
Wat	er Qual	ity Moni	toring a	nd Com	plia	nce So	chedu	le		
VS Name				(Classifi	cation Po	opulatior	Owr	ner Type P	rimary Source
RELS GARAGE					N	C	25		Р	GW
re applicable)			Service	Residenti	ial Cor	mmercial	Industr	ial	Combined	Agricultura
D (ROUTE 6)			Connectior	าร		1				
OKLYN										
		Monit	oring Red	quiremen	its					
cility: DISTR	IBUTION SY	STEM (WSF	ID: 00600)							
•								1 rou		
					-		lection Pe	eriod		iance Status
ventory of Acti	ve Sampling	Points								omplete
									Co	omplete
				7/1/24 - 9	9/30/24	4				
										• •
					-		lection Pe	eriod		iance Status
ventory of Acti	ve Sampling	Points								omplete
									Co	omplete
				//1/24-9	9/30/24	4				
Sinty: ENTRY		SF ID: 00700						-	(
t (Campling D	oint (D)			Monitorin	a Doric	nd Coll				
	Jint IDJ				-			enou		omplete
(3)										omplete
										Inplete
	Motor Cu	stom Facil	ity and C				ton			
	water sy	stem Facil	ity and S	ampling i	Point		-			
ustom Eacility	c	ampling Doint	Samplina D	Doint						Stage
ystem ruenty		ID			Char	D			Asbestos	-
JTION SYSTEM		4				lus				
		UPSTREAM	WITHIN 5 S	ERVICE CON	А	۱.				
OINT		3	ENTRY POI		А					
		2	WELL		А	ι				
			ntact Info	rmation						
		CUI								
									Job Title	
		C	rganization orels Garage	Inc			Presiden	t	Job Title	
e One		C	organization orels Garage	Inc			Presiden City	t	Job Title State	Zip Code
e One		C S	organization orels Garage	Inc		Brooklyn	City	t		Zip Code 06234
e One Extension		C S Mailing Addres PO Box 328	organization orels Garage	Inc Emergency I	Phone	Brooklyn	City	t	State	
	VS Name DRELS GARAGE re applicable) D (ROUTE 6) DOKLYN cility: DISTRI 3100) nt (Sampling Po ventory of Action ters (PPS) nt (Sampling Po ventory of Action cility: ENTRY nt (Sampling Po cility: ENTRY cility: ENTRY ci	VS Name DRELS GARAGE PRELS GARAGE PRELS GARAGE PRELS GARAGE PRELS GARAGE PRELS GARAGE PRELS GARAGE PRELS (POUTE 6) DOKLYN CILITY: DISTRIBUTION SY 3100) Int (Sampling Point ID) Ventory of Active Sampling I CILITY: ENTRY POINT (W PRELS (PPS) PRELS (PP	VS Name PRELS GARAGE Pre applicable) D (ROUTE 6) DOKLYN Monit Cility: DISTRIBUTION SYSTEM (WSF I 3100) At (Sampling Point ID) ventory of Active Sampling Points ters (PPS) At (Sampling Point ID) ventory of Active Sampling Points Cility: ENTRY POINT (WSF ID: 00700) At (Sampling Point ID) (3) Water System Facility Sampling Point UTION SYSTEM 4 DOWNSTREAM	VS Name DRELS GARAGE pre applicable) D (ROUTE 6) DOKLYN Monitoring Rec cility: DISTRIBUTION SYSTEM (WSF ID: 00600) 3100) at (Sampling Point ID) ventory of Active Sampling Points ters (PPS) at (Sampling Point ID) ventory of Active Sampling Points cility: ENTRY POINT (WSF ID: 00700) at (Sampling Point ID) (3) Water System Facility and S System Facility UTION SYSTEM 4 DISTRIBUTI DOWNSTREAM WITHIN 5 S UPSTREAM WITHIN 5 S	VS Name DRELS GARAGE pre applicable) D (ROUTE 6) DOKLYN Monitoring Requiremen Cility: DISTRIBUTION SYSTEM (WSF ID: 00600) 3100) nt (Sampling Point ID) ventory of Active Sampling Points 10/1/23 - 3 1/1/24 - 4 4/1/24 - 6 7/1/24 - 5 ters (PPS) nt (Sampling Point ID) Monitorin ventory of Active Sampling Points 10/1/23 - 3 1/1/24 - 4 4/1/24 - 6 7/1/24 - 5 Cility: ENTRY POINT (WSF ID: 00700) nt (Sampling Point ID) Monitorin (3) 10/1/23 - 3 1/1/24 - 6 7/1/24 - 6 7/1/24 - 6 Cility: ENTRY POINT (WSF ID: 00700) Nonitorin (3) 10/1/23 - 3 1/1/24 - 6 7/1/24 - 6 Vater System Facility and Sampling Point ID DOWNSTREAM WITHIN 5 SERVICE CON UPSTREAM WITHIN 5 SERVICE CON	VS Name Classifi DRELS GARAGE Nu DRELS GARAGE Nu D (ROUTE 6) Connections DOKLYN Monitoring Requirements Cility: DISTRIBUTION SYSTEM (WSF ID: 00600) 3100) Monitoring Perid pre applicable Nu pre applicable Service Classifi Connections Pre applicable Service DOKLYN Monitoring Requirements Cility: DISTRIBUTION SYSTEM (WSF ID: 00600) 3100) nt (Sampling Point ID) Monitoring Perid 10/1/23 - 12/31/2 4/1/24 - 6/30/2 7/1/24 - 9/30/2 ters (PPS) 10/1/23 - 12/31/2 tf (Sampling Point ID) Monitoring Perid ventory of Active Sampling Points 10/1/23 - 12/31/2 1/1/24 - 6/30/2 7/1/24 - 9/30/2 cility: ENTRY POINT (WSF ID: 00700) nt (Sampling Point ID) Monitoring Perid (3) 10/1/23 - 12/31/2 1/1/24 - 3/31/2 1/1/24 - 3/31/2 (4) 10/1/23 - 12/31/2 (3) 10/1/23 - 12/31/2 <t< td=""><td>VS Name Classification P. DRELS GARAGE NC NC tre applicable) Service Residential Commercial D (ROUTE 6) Connections 1 1 DOKLYN Monitoring Requirements 1 Cility: DISTRIBUTION SYSTEM (WSF ID: 00600) 3100) Coll attriangling Point ID) Monitoring Period Coll ventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 7/1/24 - 9/30/24 Coll ters (PPS) Monitoring Period Coll tt (Sampling Point ID) Monitoring Period Coll ventory of Active Sampling Points 10/1/23 - 12/31/23 Coll t(Sampling Point ID) Monitoring Period Coll ventory of Active Sampling Points 10/1/23 - 12/31/23 Coll (3) 10/1/23 - 12/31/23 1/1/24 - 9/30/24 Coll (3) 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 T/1/24 - 9/30/24 Water System Facility and Sampling Point Colifo Colifo Colifo tystem Facility Samplin</td><td>NS Name Classification Population DRELS GARAGE NC 25 tre applicable) Service Residential Commercial Industr D (ROUTE 6) Connections 1 1 1 DOKLYN Monitoring Requirements 1 1 1 Story DISTRIBUTION SYSTEM (WSF ID: 00600) 3100) Monitoring Period Collection Period Ventory of Active Sampling Point ID) Monitoring Period Collection Period Collection Period ventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 6/30/24 1/1/24 - 3/31/24 ters (PPS) Monitoring Period Collection Period Collection Period ventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 9/30/24 1/1/24 - 9/30/24 ters (PPS) Monitoring Period Collection Period Collection Period Collection Period ventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24</td><td>NC 25 PRELS GARAGE NC 25 Industrial Commercial Industrial D (ROUTE 6) Connections 1 NOKLYN Industrial Industrial Monitoring Requirements 1 Collection System (WSF ID: 00600) 1 row 3100) 1 row Collection Period Collection Period Ventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 6/30/24 1 row T/1/24 - 9/30/24 1 row Collection Period Collection Period Ventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 tters (PPS) 1 row 1/1/24 - 3/31/24 4/1/24 - 6/30/24 1/1/24 - 3/31/24 4/1/24 - 6/30/24 Collection Period Collection Period (3) 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 1/1/24 - 9/30/24 7/1/24 - 9/30/24 Vater System Facility and Sampling Point Collection Period (3)</td><td>NS Name Classification Population Owner Type P RELS GARAGE NC 25 P re applicable) Service Connections NC 25 P (ndouttoring Requirements Connections 1 Industrial Combined 1 D (ROUTE 6) Connections 1 Industrial Combined 1 DOKLYN MOnitoring Requirements Content (RT) 1 Industrial Combined 1 D (ROUTE 6) Connections 1 Industrial Combined 1 D (ROUTE 6) Connections 2 Industrial Content (RT) 1 Industrial Combined 1 D (ROUTE 6) Connections 2 Industrial Content (RT) 1 Industrial Combined 1 D (ROUTE 6) Connections 2 Industrial Content (RT) 1 Industrial Combined 1 D (ROUTE 6) Connections 2 Industrial Content (RT) 1 Industrial Combined 1 D (ROUTE 6) Industrial Content (RT) 1 Industrial Complexity 2 Industrial Complexity</td></t<>	VS Name Classification P. DRELS GARAGE NC NC tre applicable) Service Residential Commercial D (ROUTE 6) Connections 1 1 DOKLYN Monitoring Requirements 1 Cility: DISTRIBUTION SYSTEM (WSF ID: 00600) 3100) Coll attriangling Point ID) Monitoring Period Coll ventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 7/1/24 - 9/30/24 Coll ters (PPS) Monitoring Period Coll tt (Sampling Point ID) Monitoring Period Coll ventory of Active Sampling Points 10/1/23 - 12/31/23 Coll t(Sampling Point ID) Monitoring Period Coll ventory of Active Sampling Points 10/1/23 - 12/31/23 Coll (3) 10/1/23 - 12/31/23 1/1/24 - 9/30/24 Coll (3) 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 T/1/24 - 9/30/24 Water System Facility and Sampling Point Colifo Colifo Colifo tystem Facility Samplin	NS Name Classification Population DRELS GARAGE NC 25 tre applicable) Service Residential Commercial Industr D (ROUTE 6) Connections 1 1 1 DOKLYN Monitoring Requirements 1 1 1 Story DISTRIBUTION SYSTEM (WSF ID: 00600) 3100) Monitoring Period Collection Period Ventory of Active Sampling Point ID) Monitoring Period Collection Period Collection Period ventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 6/30/24 1/1/24 - 3/31/24 ters (PPS) Monitoring Period Collection Period Collection Period ventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 9/30/24 1/1/24 - 9/30/24 ters (PPS) Monitoring Period Collection Period Collection Period Collection Period ventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24 1/1/24 - 9/30/24	NC 25 PRELS GARAGE NC 25 Industrial Commercial Industrial D (ROUTE 6) Connections 1 NOKLYN Industrial Industrial Monitoring Requirements 1 Collection System (WSF ID: 00600) 1 row 3100) 1 row Collection Period Collection Period Ventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 6/30/24 1 row T/1/24 - 9/30/24 1 row Collection Period Collection Period Ventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 tters (PPS) 1 row 1/1/24 - 3/31/24 4/1/24 - 6/30/24 1/1/24 - 3/31/24 4/1/24 - 6/30/24 Collection Period Collection Period (3) 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 1/1/24 - 9/30/24 7/1/24 - 9/30/24 Vater System Facility and Sampling Point Collection Period (3)	NS Name Classification Population Owner Type P RELS GARAGE NC 25 P re applicable) Service Connections NC 25 P (ndouttoring Requirements Connections 1 Industrial Combined 1 D (ROUTE 6) Connections 1 Industrial Combined 1 DOKLYN MOnitoring Requirements Content (RT) 1 Industrial Combined 1 D (ROUTE 6) Connections 1 Industrial Combined 1 D (ROUTE 6) Connections 2 Industrial Content (RT) 1 Industrial Combined 1 D (ROUTE 6) Connections 2 Industrial Content (RT) 1 Industrial Combined 1 D (ROUTE 6) Connections 2 Industrial Content (RT) 1 Industrial Combined 1 D (ROUTE 6) Connections 2 Industrial Content (RT) 1 Industrial Combined 1 D (ROUTE 6) Industrial Content (RT) 1 Industrial Complexity 2 Industrial Complexity

PWS ID	PWS Name				Classification	Population	Owner Type	Primary Source
СТ0190164	SORELS GARAGE				NC	25	Р	GW
Local Address (where applicable)	Servi	ce	Resident	tial Commerci	ial Industri	al Combine	ed Agricultural
88 HARTFORD F	ROAD (ROUTE 6)	Conn	ections		1			
Towns Served:	BROOKLYN		·			Ċ	·	

Please note the following:

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

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

	Connecticut Depa	irtment of	Public	Health	Drin	nking	g Wa	ater Se	ction	
	Water Qua					<u> </u>				
PWS ID	PWS Name		011115 u		1				ner Type P	rimary Source
CT0190254	BROOKLYN PIZZA RESTAUR				N			7	P	GW
	(where applicable)		Service	Resident		mmerci	-	dustrial	Combined	-
	D ROAD (ROUTE 6)		Connectio			1				
Towns Served:										
		Monite	oring Re	quiremer	nts					
Water Systen	n Facility: DISTRIBUTION S	YSTEM (WSFI	D: 00600)	<u> </u>						
Total Colifor	m (3100)							1 rou	itine (RT)	per quarter
	Point (Sampling Point ID)			Monitorin	ng Perio	od C	ollecti	on Period		iance Status
Select fro	m Inventory of Active Sampling	Points		10/1/23 -	12/31/	/23			Co	omplete
				1/1/24 - 1	3/31/2	24				
				4/1/24 -	6/30/2	24				
				7/1/24 -	9/30/2	24				
Physical Para	ameters (PPS)							1 rou	itine (RT)	per quarter
Sampling	Point (Sampling Point ID)			Monitorin	ng Perio	od C	ollecti	on Period	Compl	iance Status
Select fro	m Inventory of Active Sampling	Points		10/1/23 -	12/31/	/23			Co	omplete
				1/1/24 - 1	3/31/2	24				
				4/1/24 -	6/30/2	24				
				7/1/24 -	9/30/2	24				
Water Systen	n Facility: ENTRY POINT (N	VSF ID: 00700)								
Nitrate And	Nitrite (NOX)							1	routine (RT) per year
Sampling	Point (Sampling Point ID)			Monitorin	ng Perio	od C	ollecti	on Period	Compl	iance Status
ENTRY PO	DINT (3)			1/1/23 - 1	2/31/2	23			Co	omplete
				1/1/24 - 1	2/31/2	24				
				1/1/25 - 1	2/31/2	25				
	Water S	ystem Facili	ity and S	ampling	Point	t Inve	ntor	Ъ		
Water							otal	Lead and		
-	ter System Facility	Sampling Point					-	Copper		Stage
Facility ID		ID	Description		Sta	itus R	ule	Rule Tier	Asbestos	WQP 2 DBPR
00600 DIS	TRIBUTION SYSTEM	4		ION SYSTEM	A		Y			
		DOWNSTREAM								
		UPSTREAM		SERVICE CON						
	RY POINT	3	ENTRY POI	NT	A					
22691 WE		2	WELL		A	4				
		Con	tact Info	ormation						
Name		OI	rganization						Job Title	
Mr. Greg Mich	aelidis	Br	ooklyn Pizza	a			Ow	ner		
Mailing Addres	ss Line One	Mailing Address	s Line Two				Ci	ty	State	Zip Code
109 Hartford R	load (Route 6)					Brookly	yn		СТ	06234
Business Pho	one Extension Fax	Mobi	le Phone	Emergency	Phone	Email A	Addres	S		
860-779-98	38									
Contact Role(s): Administrative Contact, Leg	al Contact, Owr	er							

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
СТ0190254	BROOKLYN PIZZA RESTAURANT			NC	37	Р	GW
Local Address (where applicable)		Service	Residen	tial Commerc	ial Industri	al Combine	ed Agricultural
109 HARTFORD ROAD (ROUTE 6)		Connections		1			
Towns Served:	BROOKLYN			·			

Please note the following:

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

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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		cut Departme iter Quality N					0			ection		
PWS ID	PWS Name	iter Quality M	101110	oring an						ner Type	Priman	
CT0190264	COZY CORNER F	RESTAURANT				NC		25		P		W
	ss (where applicable)			Service	Residential				strial	Combine	1	icultura
679 WAURE		·		Connections			1				0	
Towns Serve	ed: BROOKLYN											
		Γ	Aonite	oring Req	uirement	S						
Water Syst	em Facility: DIST	RIBUTION SYSTEM										
	orm (3100)		•	•					1 ro	utine (RT) per q	uarter
	ng Point (Sampling F	Point ID)			Monitoring	Perio	d Coll	lection	Period	-	oliance	
	from Inventory of Act				10/1/23 - 12						Complet	
					1/1/24 - 3/	31/24					Complet	
					4/1/24 - 6/							
					7/1/24 - 9/							
Physical P	arameters (PPS)								1 ro	utine (RT) per q	uartei
	ng Point (Sampling F				Monitoring			lection	Period	Com	oliance .	Status
Select	from Inventory of Ac	tive Sampling Points			10/1/23 - 12	2/31/2	3				Complet	
			1/1/24 - 3/31/24			31/24				(Complet	te
					4/1/24 - 6/							
					7/1/24 - 9/	30/24						
Nater Syst	em Facility: ENTR	Y POINT (WSF ID:	00700)									
Nitrate (1	•								1 ro	utine (RT		
Sampli	ng Point (Sampling F	Point ID)			Monitoring			lection	Period	Com	oliance .	Status
ENTRY	POINT (3)				10/1/23 - 12	2/31/2	3			(Complet	te
					1/1/24 - 3/	31/24				(Complet	te
					4/1/24 - 6/	30/24						
					7/1/24 - 9/	30/24						
Nitrite (1	•								1	routine	(RT) pe	er year
Sampli	ng Point (Sampling F	Point ID)			Monitoring	Perio	d Coll	lection	Period	Com	oliance .	Status
ENTRY	POINT (3)			1/1/23 - 12/31/23						(Complete	
					1/1/24 - 12/	/31/2	4			(Complet	te
					1/1/25 - 12/	/31/2	5					
		Water System	Facili	ity and Sa	mpling Po	oint	Invent	tory				
Water							Tota	al Le	ad and	1		
	Vater System Facility	-	-	Sampling Po	int		Colifo		Copper			Stage
Facility ID		1	D	Description		Stat		e R	ule Tie	r Asbesto	s WQP	2 DBP
00600 [DISTRIBUTION SYSTEM		1	DISTRIBUTIO		A	Y					
				WITHIN 5 SE		A						
		UPST	REAM	WITHIN 5 SE		A						
00700 E	NTRY POINT		3	ENTRY POIN	Г	A						
22692 \	VELL		2	WELL		A						
			Con	tact Infor	mation							
Name			O	rganization						Job Title	9	
Mr. Konsta	ntinos Plitsas		Co	ozy Corner Res	staurant			Owner	r			
Mailing Add	ress Line One	Mailing	Addres	s Line Two				City		State	Zip (Code
579 Waureg	an Road	P. O. Bo	ox 211			1	Waurega	n		СТ	06387	7-0211
Business I	hone Extension	Fax	Mobi	le Phone E	Emergency Ph	ono	Email Ad	dress				
					inergency i i	ione		aress				

Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations. Schedule Generation Date: 4/3/2024

	~ · ·	0						
PWS ID	PWS Name			Class	sification	Population	Owner Type	Primary Source
СТ0190264	COZY CORNER RESTAURANT			NC		25	Р	GW
Local Address (w	Service	Residen	tial C	Commercia	l Industri	al Combine	ed Agricultural	
679 WAUREGAN	Connections			1				
Towns Served: B	ROOKLYN							

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

Please note the following:

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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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