

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0210024	251 ROUTE 7 S	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
251 ROUTE 7 SOUTH			1		

Towns Served: CANAAN

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 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		

Other Compliance Schedules

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

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
					Rule			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MTSCAFE 001	KITCHEN HANDWASH 1	A	Y	N	Y	
		MTSCAFE 002	KITCHEN HANDWASH 2	A	Y	N	Y	
		MTSCAFE 003	MENS ROOM	A	Y	N	Y	
		MTSCAFE 004	LADIES ROOM	A	Y	N	Y	
		MTSCAFE 005	KITCHEN PREP	A	Y	N	Y	

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
CT0210024	251 ROUTE 7 S	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
251 ROUTE 7 SOUTH			1		

Towns Served: CANAAN

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
					Sampling Point ID	Sampling Point Description	Status	Total Coliform
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
20452	WELL	2	WELL	A				
61323	TREATMENT PLANT							

Contact Information

Name	Organization	Job Title
Artisanal Foods LLC		
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
347 West 36Th Street Sduite 1601		New York NY 10018
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address

Contact Role(s): **Owner**

Name	Organization	Job Title
Mr. Jason Munning		Director of Ops
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
PO Box 717	187 Route 7	Canaan CT 06018
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address

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

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
CT0210044	172 ROUTE 7 N	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
172 ROUTE 7 N			1		

Towns Served: CANAAN

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 - WELL 2 (WSF ID: 00701)

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELL 2 (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	Asbestos Rule Tier	WQP 2 DBPR Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		SP2	FRONT HAND SINK	A	Y		
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00701	ENTRY POINT - WELL 2	3	EP - WELL 2	A			
54110	WELL 2	2	WELL 2	A			
54113	TREATMENT PLANT						

Contact Information

Name	Organization	Job Title
Mr. Ahmed Amer Almasoudi		Owner
Mailing Address Line One	Mailing Address Line Two	City
172 Route 7 N		State
Business Phone	Extension	Zip Code
860-824-4661		
		Falls Village
		CT
		06031
Emergency Phone	Email Address	
	nassariali@yahoo.com	

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

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
CT0210044	172 ROUTE 7 N	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
172 ROUTE 7 N			1		

Towns Served: CANAAN

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