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
CT0220014	CALVARY CHAPEL				NC	25	Р	GW
Local Address (v	here applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
175 WESTMINST	ER ROAD	Connections			1			

Towns Served: CANTERBURY			
Monitorin	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	0600)		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		<u> </u>
	10/1/24 - 10/31/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate (1040)			ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Nitrite (1041)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		

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

PWS ID	PWS Name				Clas	ssification	Population	Owner Type	Primary Source
CT0220014	CALVARY CHAPEL					NC	25	Р	GW
Local Address (	where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
175 WESTMINS	STER ROAD		Connections			1			

Towns Served: CANTERBURY

	Wa	ater System Facili	ity and Sampling P	oint Ir	nvento	ry			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α		·			
20456	WELL	2	WELL	Α					

			Co	ontact Info	ormation					
Name				Organization			Job Title			
Mr. Eric Arnio				Calvary Chapel			Pastor			
Mailing Address Line One Mailing Addr			Mailing Addr	ess Line Two			City	State	Zip Code	
175 Westminster Ro	oad					Canterb	ury	СТ	06331	
Business Phone	Extension	Fax	Мо	bile Phone	Emergency Phone	Email Address				
860-546-9396						rickarnio@hotmail.com				

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 schedule.

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

End of schedule

Schedule Generation Date: 4/3/2024

Page 2

Connecticut Department	t of Public H	lealth	Dr	inking	Water	Section	<u> </u>	
Water Quality Mo				U				
PWS ID PWS Name			Clas	sification	Population	Owner Type	Primary Source	
CT0220034 FIRST CONGREGATIONAL CHURCH				NC	25	Р	GW	
Local Address (where applicable)	Service	Residen	tial	Commercia	al Industria	al Combir	ned Agricultura	
ROUTE 169	Connections	ctions 1						
Towns Served: CANTERBURY	·		·		,			
Mo	nitoring Requ	ireme	nts					
Water System Facility: DISTRIBUTION SYSTEM (W	/SF ID: 00600)							
Total Coliform (3100)					1	routine (R	T) per quarter	
Sampling Point (Sampling Point ID)		Monitoring Period Colle			ollection Per	riod Con	ompliance Status	
Select from Inventory of Active Sampling Points		10/1/23 - 12/31/23				Complete		
	1/1/24 - 3/31/24					Complete		
		4/1/24 -	6/30	0/24				
		7/1/24 -	9/30	0/24				
Physical Parameters (PPS)					1	routine (R	T) per quarter	
Sampling Point (Sampling Point ID)		Monitori	ng P	eriod Co	ollection Per	riod Con	npliance Status	
Select from Inventory of Active Sampling Points		10/1/23 -	12/3	31/23			Complete	
		1/1/24 -	3/3	1/24			Complete	
		4/1/24 -	6/30	0/24				
		7/1/24 -	9/30	0/24				
Water System Facility: ENTRY POINT (WSF ID: 00)	1							

water System Facility: ENTRY POINT (WSF ID: 00/00)			
Nitrate And Nitrite (NOX)		1 rc	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		

Public	Notification R	equiren	nents			
	Compliance	Notice	Public No	<u>tification</u>	PN Certification	
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received
Physical Parameters M&R Violation	4/1/10 - 6/30/10	3	8/19/2011		8/29/2011	

	W	ater System Facili	ty and Sampling P	oint Ir	vento	ry			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	А	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
20458	WELL	2	WELL	Α					
55518	TREATMENT PLANT								

			Co	ontact Inf	ormation					
Name				Organization		Job Title				
Reverend Cheryl Caronna				First Congre	gation Church		Pastor			
Mailing Address Line One Mailing Addr			Mailing Addr	ress Line Two			City	State	Zip Code	
P.O. Box 160 6 South Car		6 South Cant	terbury Rd Cante			ury	СТ	06415		
Business Phone	Extension	Fax	Mo	obile Phone Emergency Phone Er		Email Address				
860-546-9007					860-916-4157	congreg	congregational1@gmail.com			

Con	necticut Department of Public Hea	alth Drinking	g Water	Section	
	Water Quality Monitoring and (	Compliance S	Schedul	e	
PWS N	lame	Classification	Population	Owner Type	Prima

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0220034	FIRST CONGREGATIONAL CHURCH			NC	25	Р	GW
Local Address (where applicable)		Service	Resider	itial Commerc	ial Industri	al Combine	ed Agricultural
ROUTE 169		Connections		1			

Towns Served: CANTERBURY

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

End of schedule

	Connecticut Department of Public Health Drinking Water Section										
	Water Quality Monit	oring and	d Con	npl	liance S	schedul	e				
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source			
CT0220054	SAINT AUGUSTINE CHURCH				NC	26	Р	GW			
Local Address	Service	Resider	ntial Commerci		al Industri	al Combine	ed Agricultural				
144 WESTMIN	144 WESTMINSTER ROAD				1						

Towns Served: CANTERBURY			
Monitori	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	00600)		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		

	Wa	ater System Facili	ity and Sampling Po	oint Ir	nvento	у		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	tage DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		4-1	CHURCH KITCHEN DISH	Α	Υ			
		4-2	HAND SINK	Α	Υ			
		4-3	MEN'S RESTROOM SINK	Α	Υ			
		4-4	RECTORY KITCHEN	Α	Υ			
		4-5	RECTORY RESTROOM SIN	Α	Υ			
		4-6	REC BATH SINK	Α	Υ			
		4-7	REC KIT SINK 2	Α	Υ			
		4-8	REC KIT SINK	Α	Υ			
		4-9	SOURCE	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
20460	WELL	2	WELL	Α				
55843	TREATMENT PLANT							

Connecticut Department of Public Health Drinking Water Section								
Water Quality Monitoring and Con	npliance S	Schedul	e					
PWS Name	Classification	Population	Owner Type	Primary				

PW3 ID	PWS Name			Classifica	ation Po	opulation	Owner Type	Primary 300	arce
CT0220054	SAINT AUGUSTINE CHURCH			NC		26	Р	GW	
Local Address (where applicable)		Service	Resider	ntial Com	nmercial	Industri	al Combin	ed Agriculti	ural
144 WESTMINS	TFR ROAD	Connections			1				

Towns Served: CANTERBURY

DIAKE ID

			Co	ontact Inf	ormation					
Name				Organization	1	Job Title				
Reverend P. Grzegorz Jednaki				St. Andre Be	ssette Parish					
Mailing Address Line One Mailing Address			Mailing Addr	ess Line Two			City	State	Zip Code	
10 Railroad Ave						Plainfield	ł	СТ	06374	
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	dress			
860-564-3313						standreb	standrebparish@gmail.com			

Contact Role(s): Administrative Contact, Legal Contact

## Please note the following:

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End of schedule

	Carr	ationt Demontry	of Deelel's I	In alth Datal	m = IAI-+ C	ati an
	Conne	ecticut Department				ection
DWC ID	PWS Nam	Water Quality Mon	ntoring an	*		man Trunca Duimeam Carre
PWS ID					-	ner Type Primary Source
CT0220084	_	URY MUNICIPAL OFFICES	Camataa	NC	41	L GW
Local Address (		icable)	Service Connections	Residential Comm		Combined Agricultura
1 MUNICIPAL D			Connections	1		
Towns Served:	CANTERBU		itarina Dan	.:		
Water System	n Facility:	DISTRIBUTION SYSTEM (WS	itoring Requ	uirements		
Total Colifor	•	DISTRIBUTION STSTEIN (NOS	1 15. 00000,		1 roi	utine (RT) per quarter
	• •	pling Point ID)		Monitoring Period	Collection Period	
		of Active Sampling Points		10/1/23 - 12/31/23	Concetion i criou	Complete
30,000,1101	inventory	or receive sumpling Follies		1/1/24 - 3/31/24		Complete
				4/1/24 - 6/30/24		Complete
				7/1/24 - 9/30/24		
Dharainal Dana	/r	anc)		7/1/24 - 9/30/24	4	(DT)
Physical Para	-	•		Adamitanton Daniari		utine (RT) per quarter
		pling Point ID)		Monitoring Period	Collection Period	
Select froi	m Inventory	of Active Sampling Points		10/1/23 - 12/31/23		Complete
				1/1/24 - 3/31/24		Complete
				4/1/24 - 6/30/24		
				7/1/24 - 9/30/24		
Water System	n Facility:	ENTRY POINT (WSF ID: 0070	00)			
Nitrate (104	-				1 roi	utine (RT) per quarter
		pling Point ID)		Monitoring Period	Collection Period	Compliance Status
ENTRY PO	OINT (3)			10/1/23 - 12/31/23		Complete
				1/1/24 - 3/31/24		Complete
				4/1/24 - 6/30/24		
				7/1/24 - 9/30/24		
Nitrate And	Nitrite (NO	OX)			1	routine (RT) per year
Sampling	Point (Sam	pling Point ID)		<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY PO	DINT (3)			1/1/23 - 12/31/23		Complete
				1/1/24 - 12/31/24		Complete
				1/1/25 - 12/31/25		·
	Moi	nthly Water System Fac	cility (WSF)		ng Requireme	nts
Water System		ENTRY POINT (WSFID: 00700				
Analyte		Monitoring Requirement (Sum	mary Type)	Operating Limit	:	Samples Req/Month
pН		Entry Point pH Monitoring (PH		Minimum: 7 PF		4
Start Date:	1/1/2014		•	ance History:	Operating Limit	Monitoring
				ring Period	Compliance Status	
				23 - 11/30/2023		•
				023 - 12/31/2023		
				4 - 1/31/2024		
				4 - 2/29/2024		
<del></del>				4 - 3/31/2024		
			5/ 1/ 202	5,51,2524		

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

	Connecticut Department	of I done in	Carti	. ע	عاالكاااا	, water	beenon	
	Water Quality Mon	nitoring and	d Con	npl	liance S	Schedul	le	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0220084	CANTERBURY MUNICIPAL OFFICES				NC	41	L	GW
Local Address (where applicable)		Service	Residen	tial	Commerci	al Industri	al Combin	ed Agricultural
1 MUNICIPAL DRIVE		Connections		1				

Connecticut Department of Public Health Drinking Water Section

	Water System Facility and Sampling Point Inventory									
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	WQP	Stage 2 DBPR	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	А	Υ					
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α						
		UPSTREAM	WITHIN 5 SERVICE CON	Α						
00700	ENTRY POINT	3	ENTRY POINT	Α						
22868	WELL #1	2	WELL #1	Α						
54419	TREATMENT SYSTEM									

54419 TREATM	ENT SYSTEM								
				Contact Inf	ormation				
Name				Organization				Job Title	
Canterbury									
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ac	ldress		
Contact Role(s): O	wner								
Name				Organization				Job Title	
Mr. Roy A. Piper				Town of Can	terbury		First Select	man	
Mailing Address Line	e One		Mailing	Address Line Two			City	State	Zip Code
1 Municipal Drive						Canterb	ury	CT	06331
<b>Business Phone</b>	Extension	Fax		Mobile Phone	Emergency Phone	Email Ac	ldress		
860-546-9693		860-546-7	'805		860-334-4713	firstseled	ctman@can	terburyct.org	
Contact Role(s): Le	gal Contact, O	wner							
Name				Organization				Job Title	
Mr. Christopher Lip	pke			Town of Can	terbury		First Select	man	
Mailing Address Line	e One		Mailing	Address Line Two			City	State	Zip Code
1 Municipal Drive						Canterb	ury	СТ	06331
<b>Business Phone</b>	Extension	Fax		Mobile Phone	Emergency Phone	Email Ac	ldress		
860-546-9693						firstseled	ctman@can	terburyct.org	
Contact Role(s): Ac	dministrative (	Contact							

# Please note the following:

Towns Served: CANTERBURY

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Departme Water Quality N						ection	
	donntoring a						2
PWS ID PWS Name		CI	assificati	-			Primary Source
CT0220094 WRIGHTS MILL FARM - LODGE	Comileo	Dasidantia	NC		25	P	GW
Local Address (where applicable)	Service Connection	Residentia			ndustrial	Combined	d Agricultural
65 CREASEY ROAD	Connectic	7113	1				
Towns Served: CANTERBURY	4						
	Monitoring Re	equirement	:S				
Water System Facility: DISTRIBUTION SYSTEM	(WSF ID: 00600)				4	· · · · /DT\	
Total Coliform (3100)		0.0 10 1	David	C-114		= =	per quarter
Sampling Point (Sampling Point ID)		Monitoring		Collect	ion Period		liance Status
Select from Inventory of Active Sampling Points		1/1/24 - 3/				C	omplete
		4/1/24 - 6/					
Di tal Dana (DDC)		7/1/24 - 9/	30/24				
Physical Parameters (PPS)		0.4 a mila win m	Daviad	Callage			per quarter
Sampling Point (Sampling Point ID)		Monitoring		Collecti	ion Period		liance Status
Select from Inventory of Active Sampling Points		10/1/23 - 12	-				omplete omplete
		1/1/24 - 3/ 4/1/24 - 6/					ompiete
		7/1/24 - 9/					
Water System Facility: ENTRY POINT (WSF ID:	00700\	7/1/24 - 9/	30/24				
-	00700)						DT\
Nitrate And Nitrite (NOX)  Sampling Point (Sampling Point ID)		Monitoring	Dovind	Callast	1 ion Period	=	RT) per year liance Status
ENTRY POINT (3)		1/1/23 - 12		Conecti	ion Periou		omplete
LIVINI FOINI (5)		1/1/23 - 12				C	ompiete
		1/1/24 - 12					
Motor System	. Facility and (			vonto	<b>63.7</b>		
Water System	i racility and s	sampling P	omt m				
Water System Water System Facility Sampli	ng Point Sampling	Point		Total Coliform	Lead and Copper		Stage
	D Descriptio			Rule		Asbestos	WQP 2 DBPR
,	-	TION SYSTEM	Status A	Y			
	STREAM WITHIN 5		Α	•			
UPST	REAM WITHIN 5	SERVICE CON	Α				
UPST 00700 ENTRY POINT		SERVICE CON	A A				
00700 ENTRY POINT	3 ENTRY PO		Α				
00700 ENTRY POINT	3 ENTRY PO 2 WELL	INT					
00700 ENTRY POINT 22966 WELL #1	3 ENTRY PO 2 WELL Contact Info	ormation	Α			Job Title	
00700 ENTRY POINT 22966 WELL #1  Name	3 ENTRY PO 2 WELL  Contact Info  Organization	ormation	Α			Job Title	
00700 ENTRY POINT 22966 WELL #1  Name  Mr. Albert Amundsen	3 ENTRY PO 2 WELL  Contact Info Organization The Lodge At	ormation	Α	Ci	itv		7ip Code
00700 ENTRY POINT 22966 WELL #1  Name  Mr. Albert Amundsen	3 ENTRY PO 2 WELL  Contact Info  Organization	ormation	A	Ci	ity	Job Title State CT	Zip Code 06331

860-774-1455

Contact Role(s): Legal Contact, Owner

	Connectic	ut Depa	rtment c	or Public	Health	ı Dri	nking	, water	Secti	on	
	Wat	ter Qua	lity Moni	itoring a	and Con	nplia	ance S	Schedul	le		
PWS ID	PWS Name					Classi	fication	Population	Owner T	ype P	rimary Source
CT0220094	WRIGHTS MILL F	ARM - LODO	GE .			1	NC	25	Р		GW
Local Address (w	here applicable)			Service	Resider	ntial C	ommerci	al Industri	al Com	bined	Agricultural
65 CREASEY ROA	D			Connectio	ons		1				
Towns Served: C	ANTERBURY				,				,		
Name				Organization					Job	Title	
Mr. Curt Dubois				The Lodge At	Wright's Mi	ill					
Mailing Address	Line One		Mailing Addre	ess Line Two				City	St	ate	Zip Code
65 Creasy Road							Canter	bury	(	CT	06331
Business Phone	e Extension	Fax	Мо	bile Phone	Emergency	y Phon	e Email A	Address	·		
860-774-1455							info@v	vrightsmillfa	arm.com		
Contact Role(s):	Administrative	Contact, Leg	al Contact				·				
Name				Organization					Job	Title	
Sim Realty LLC											
Mailing Address	Line One		Mailing Addre	ess Line Two				City	St	ate	Zip Code
Business Phone	e Extension	Fax	Мо	bile Phone	Emergency	y Phon	e Email A	Address		·	
Contact Role(s):	Owner										

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

End of schedule

Connecticut Department of Public Health			•					
Water Quality Monitoring and Con	npl	ian	ce :	Scł	<u> 1edu</u>	le		
014/6 41	- 01			_	10.00	_	 	

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0220104	CANTERBURY PLAINS MALL				NC	46	Р	GW
Local Address (w	here applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
180 WESTMINST	ER ROAD	Connections			1			

Towns Served: CANTERBURY			<u> </u>
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	00)		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		·
	1/1/25 - 12/31/25		
Water System Facility: WELL #1 (WSF ID: 22941)			
E. Coli (3014)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
WELL (2)	11/1/23 - 11/30/23		Complete
· ·	42/4/22 42/24/22		

12/1/23 - 12/31/23

1/1/24 - 1/31/24

Complete

Complete

				7.7.						
	Connecticut	•							ection	
	Wate	er Quality I	Monitori	ing an	id Comp	olian	ce Sch	edule		
PWS ID	PWS Name				Cl	lassifica	ation Pop	ulation Ow	ner Type P	rimary Sour
CT0220104	CANTERBURY PLAI	NS MALL				NC		46	Р	GW
Local Address	(where applicable)		Ser	vice	Residentia	l Com	mercial I	ndustrial	Combined	Agricultur
180 WESTMIN	ISTER ROAD		Coi	nnections	S		1			
Towns Served:	: CANTERBURY									
			Monitorir	ng Req	uirement	ts				
	m Facility: WELL #1	(WSF ID: 2294	11)							
E. Coli (301	4)							1 rc	outine (RT)	per month
Sampling	Point (Sampling Poir	nt ID)			Monitoring	Period	d Collec	tion Period	Compl	iance Status
					2/1/24 - 2/				Co	mplete
					3/1/24 - 3/	/31/24			Co	mplete
					4/1/24 - 4/	/30/24				
					5/1/24 - 5/	/31/24				
					6/1/24 - 6/	/30/24				
					7/1/24 - 7/	/31/24				
					8/1/24 - 8/	/31/24				
					9/1/24 - 9/	/30/24				
					10/1/24 - 10	0/31/2	4			
		0	ther Com	pliance	e Schedu	les				
Compliance Sc	chedule Activity				Du	e Date	•	Achieved	Date	
CROSS CONNE	ECTION SURVEY REPOR	RT			3/1	1/2029				
	W	later Systen	n Facility	and Sa	mpling P	oint	Invento	ry		
Water							Total	Lead and	1	
,	iter System Facility	Sampli	ng Point San		oint		Coliform	Copper		Stage
Facility ID			ID Des	scription		Statu	<sub>IS</sub> Rule	Rule Tiei	Asbestos	WQP 2 DBI
00600 DIS	TRIBUTION SYSTEM		4 DIS	TRIBUTIO	N SYSTEM	Α	Υ			
		DOWN	STREAM WIT	ΓΗΙΝ 5 SE	RVICE CON	Α				
		S	P2 DIN	IO'S REST	AURANT CO	Α	Υ			
		UPS1	REAM WI	THIN 5 SE	RVICE CON	Α				
00700 EN	TRY POINT		3 EN	TRY POIN	Т	Α				
22941 WE	LL #1		2 WE	LL		Α				
			Contac	t Infor	mation					
Name			Organ	ization					Job Title	
Sharona Sefar	rady		S & M,	, LLC			M	anager		
Mailing Addre	ss Line One	Mailin	g Address Lin	e Two			(	City	State	Zip Code
30 Pleasant S	Street					٧	Vorcester		MA	01602
Business Pho	one Extension	Fax	Mobile Ph	none E	Emergency Pl	hone E	mail Addre	ess		
774-293-01	.12				774-293-01	.12 s	haronainc	@yahoo.co	m	
		ntost Local Cont								
Contact Role(s	s): Administrative Co	ntact, Legai Cont	act							
Contact Role(s Name	s): Administrative Co	ntact, Legal Cont		ization					Job Title	

Mailing Address Line Two

Mobile Phone

Mailing Address Line One

Extension

Contact Role(s): Legal Contact, Owner

Fax

508-772-0022

630 Pleasant Street

**Business Phone** 

508-579-6678

Schedule Generation Date: 4/3/2024 Page 12

Zip Code

01602

State

MA

mdjamshidi@theprofessionalgroupllc.com

City

Worcester

Emergency Phone Email Address

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

	200000			- P			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0220104	CANTERBURY PLAINS MALL			NC	46	Р	GW
Local Address (w	vhere applicable)	Service	Residen	tial Commerc	ial Industri	al Combine	ed Agricultural
180 WESTMINST	FER ROAD	Connections		1			
Towns Served: C	CANTERBURY						·

## 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

		•	Public Health I		_		ction
	Water (	Quality Monit	oring and Comp	olianc	e Sche	edule	
PWS ID	PWS Name		C	lassificati	on Popu	lation Owr	ner Type Primary Source
CT022011	L4 CANTERBURY COMMO	INS		NC	3	9	P GW
Local Add	lress (where applicable)		Service Residentia	al Comm	ercial In	dustrial	Combined Agricultura
	TMINSTER ROAD		Connections	3			0
	rved: CANTERBURY						
		Monito	oring Requiremen	ts			
Water Sy	stem Facility: DISTRIBUTI	ON SYSTEM (WSF II	D: 00600)				
Total Co	oliform (3100)					1 rou	tine (RT) per quarter
Sam	pling Point (Sampling Point ID	)	Monitoring	Period	Collecti	ion Period	<b>Compliance Status</b>
Seled	ct from Inventory of Active San	npling Points	10/1/23 - 1	2/31/23			Complete
			1/1/24 - 3	/31/24			Complete
			4/1/24 - 6				·
			7/1/24 - 9	/30/24			
Physical	Parameters (PPS)					1 rou	tine (RT) per quarter
Sam	pling Point (Sampling Point ID	)	Monitoring	g Period	Collecti	ion Period	Compliance Status
Seled	ct from Inventory of Active San	npling Points	10/1/23 - 1	2/31/23			Complete
			1/1/24 - 3	/31/24			Complete
			4/1/24 - 6	/30/24			
			7/1/24 - 9	/30/24			
Water Sy	stem Facility: ENTRY POIN	NT (WSF ID: 00700)					
Nitrate A	And Nitrite (NOX)					1	routine (RT) per year
Sam	pling Point (Sampling Point ID	)	Monitoring	Period	Collecti	on Period	Compliance Status
ENT	RY POINT (3)		1/1/23 - 12	2/31/23			Complete
			1/1/24 - 12	2/31/24			
			1/1/25 - 12				
	Wat	er System Facili	ty and Sampling F	oint In	ventor	·v	
Water	1100	er oyotem raem	try and bamping i		Total	Lead and	
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper	Stage
Facility II		ID	Description	Status	Rule		Asbestos WQP 2 DBPI
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Υ		
		4-1	A. Pharmacy Sink	Α	Υ		
		4-2	B. Pharmacy Sink	Α	Υ		
		4-3	C. Pharmacy Sink	Α	Υ		
		4-4	Movieland Restroom S	Α	Υ		
		4-5	NY Pizza Dishwasher	Α	Υ		
			WITHIN 5 SERVICE CON	A	-		
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
22947	WELL #1	2	WELL	A			
			tact Information	,,			
Name			ganization				Job Title
Mr. Shaw	yn Reatty		ckerson Group		Dro	perty Mana	
IVII. JIIaW	in Deatty	INI	ckerson Group		FIU	perty ivialle	1861

Zip Code

06437

State

CT

City

hammer.nails4230@gmail.com

Guilford

Emergency Phone Email Address

Mailing Address Line Two

**Mobile Phone** 

800 Village Walk #117

Fax

Mailing Address Line One

Extension

Nickerson Group

**Business Phone** 

860-598-0809

(	Connecticut	Depa	rtment o	f Public	Health	Drir	ıking	g Water	Section	
	Wate	r Qua	lity Monit	toring ai	nd Con	nplia	nce S	Schedul	e	
PWS ID	PWS Name					Classifi	cation	Population	Owner Type	Primary Source
CT0220114	CANTERBURY COM	MONS				N	С	39	Р	GW
ocal Address (w	here applicable)			Service	Residen	tial Co	mmerci	al Industri	al Combine	ed Agricultural
200 WESTMINST	ER ROAD			Connection	S		3			
Towns Served: C	ANTERBURY				,	,		'	'	
Contact Role(s):	Administrative Cor	tact, Leg	al Contact							
Name			С	)rganization					Job Titl	9
Sathyaprasad Bu	rjonrappa		S	olburj LLC						
Mailing Address	ine One		Mailing Addres	ss Line Two				City	State	Zip Code
9 Woodside Ct, E	dison,						New Je	ersey	NJ	08820-2572
Business Phone	Extension	Fax	Mob	ile Phone	Emergency	/ Phone	Email A	Address	·	
							sathya	bc1@gmail.d	com	
Contact Role(s):	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

#### Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule **PWS ID PWS Name** Classification | Population | Owner Type | Primary Source PRUDENCE CRANDALL MUSEUM CT0220134 NC 25 S GW Local Address (where applicable) Commercial Industrial Service Residential Combined Agricultural Connections JCT ROUTES 14 & 169 1

Towns Served: CANTERBURY

Monitoring Requirements										
00600)										
	1 rout	ine (RT) per quarter								
<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>								
1/1/24 - 3/31/24		Complete								
4/1/24 - 6/30/24										
7/1/24 - 9/30/24										
	1 rout	ine (RT) per quarter								
<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>								
10/1/23 - 12/31/23		Complete								
1/1/24 - 3/31/24		Complete								
4/1/24 - 6/30/24										
7/1/24 - 9/30/24										
	1 r	outine (RT) per year								
<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status								
1/1/23 - 12/31/23		Complete								
1/1/24 - 12/31/24		Complete								
1/1/25 - 12/31/25										
	Monitoring Period  1/1/24 - 3/31/24  4/1/24 - 6/30/24  7/1/24 - 9/30/24  Monitoring Period  10/1/23 - 12/31/23  1/1/24 - 6/30/24  7/1/24 - 9/30/24  Monitoring Period  1/1/23 - 12/31/23  1/1/24 - 12/31/23	1 rout  Monitoring Period Collection Period  1/1/24 - 3/31/24  4/1/24 - 6/30/24  7/1/24 - 9/30/24  1 rout  Monitoring Period Collection Period  10/1/23 - 12/31/23  1/1/24 - 6/30/24  7/1/24 - 9/30/24  1 rout  Collection Period  1/1/24 - 1/2/31/24  Collection Period  1/1/23 - 12/31/23  1/1/24 - 12/31/24								

	Wat	ter System Facili	ity and Sampling P	oint Ir	nvento	ry		
Water System Facility IE	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stag WQP 2 DB
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		4-1	Kitchen Tap	Α	Υ			
		4-2	Restroom Tap	Α	Υ			
		4-3	Tank Tap	Α	Υ			
		4-4	Outside Tap	Α	Υ			
		4-5	KITCHEN TAP 2	1	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
22959	WELL #1	2	WELL	Α				
59795	TREATMENT PLANT							

			Co	ontact Info	ormation				
Name				Organization				Job Title	
Mr. Jonathan Kinne	ey					Director of	Operatio		
Mailing Address Lin	Mailing Address Line One Mailing Addres			ess Line Two			City	State	Zip Code
1 Constitution Plaza	a, 2Nd Floor					Hartford		СТ	06103
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Ac	ldress		
860-500-2380						jonathar	n.kinney@ct.	.gov	

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.

(	Connectic	ut Depa	rtment	t of Public	Health	ı Drir	ıking	Water	Section	n	
	Wa	ter Qua	lity Mo	nitoring a	nd Con	nplia	nce S	Schedul	le		
PWS ID	PWS Name					Classifi	ication	Population	Owner Ty	pe P	rimary Source
CT0220134	PRUDENCE CRAI	NDALL MUSE	UM			N	С	25	S		GW
Local Address (wh	nere applicable)			Service	Resider	ntial Co	mmercia	al Industri	al Coml	ined	Agricultural
JCT ROUTES 14 &	169			Connectio	ns		1				
Towns Served: CA	NTERBURY			,	1	'		'			
Contact Role(s):	Legal Contact										
Name				Organization					Job '	Γitle	
Ms. Joan Dimarti	no			Prudence Cra	ndall Museu	ım		Superinte	ndent		
Mailing Address L	ine One		Mailing Ad	dress Line Two				City	Sta	te	Zip Code
1 South Canterbu	ry Road (Gps)		PO Box 58	(Mail)			Canterl	oury	С	Т	06331
Business Phone	Extension	Fax	N	Mobile Phone	Emergency	y Phone	Email A	ddress	'		
860-546-7800	101		8	360-538-3773			Joan.Di	Martino@c	t.gov		
Contact Role(s):	Administrative	Contact, Leg	al 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

	Co		ut Departme								ection		
			er Quality M	ionit	oring a						-		
PWS ID		S Name				(	Classific	cation P		tion Ov	vner Type		
CT0220164			ARM - PAVILION				N	С	25		Р		W
Local Addre	ss (wher	e applicable)			Service	Residenti	al Cor	mmercial	Ind	ustrial	Combine	d Agr	icultural
65 CREASY F	ROAD				Connectio	ns		1					
Towns Serve	ed: CAN	TERBURY											
						quiremen	ts						
-		-	BUTION SYSTEM	(WSF II	D: 00600)								-
Total Colif	•	-									utine (RT		
		: (Sampling Po				Monitorin			lectio	n Period		liance	
Select	trom Inv	entory of Acti	ve Sampling Points			10/1/23 - 1					(	omple	te
						4/1/24 - 6							
						7/1/24 - 9	0/30/24	4					
Physical P											utine (RT		
		: (Sampling Po				Monitorin			lectio	n Period		liance	
Select	from Inv	entory of Acti	ve Sampling Points			10/1/23 - 1					(	comple	te
						4/1/24 - 6							
						7/1/24 - 9	/30/24	4					
Water Syst	tem Fac	ility: ENTRY	POINT (WSF ID:	00700)									
Nitrate An		• •								1	L routine	(RT) po	er year
Sampli	ing Point	: (Sampling Po	oint ID)			Monitorin	g Perio	od Col	lectio	n Period	d Comp	liance	Status
ENTRY	POINT (	3)				1/1/23 - 1	2/31/2	.3			(	comple	te
						1/1/24 - 1							
						1/1/25 - 1	2/31/2	.5					
			Ot	her C	omplian	ce Schedu	ıles						
Compliance	Schedu	le Activity				D	ue Dat	е	-	chieved	l Date		
SEASONAL S	START UI	COMPLETION	V			5,	/1/202	4					
		,	Water System	Facili	ity and S	ampling F	Point	Inven	tory	•			
Water								Tota	al L	ead and	d		
-	Nater Sy	stem Facility	Samplin	g Point	Sampling I			Colifo	rm	Copper			Stage
Facility ID			1	ס	Description	1	Stat	tus Rul	e i	Rule Tie	r Asbesto	s WQF	2 DBPR
00600	DISTRIBU	TION SYSTEM	4	1	DISTRIBUT	ION SYSTEM	Α	. Y					
			DOWNS	TREAM	WITHIN 5 S	SERVICE CON	Α						
			UPST	REAM	WITHIN 5 S	SERVICE CON	Α	Ĺ					
00700 E	ENTRY PO	DINT	3	3	ENTRY POI	NT	Α						
47994 V	WELL #1			2	WELL #1		А						
				Con	tact Info	rmation							
Name				Or	rganization						Job Title		
Mr. Curt Du	ıbois			Th	ne Lodge At	Wright's Mill							
Mailing Add	lress Line	e One	Mailing	Address	s Line Two				City	,	State	Zip	Code
65 Creasy R	oad							Canterbu	ıry		СТ	06	331
Business F	Phone	Extension	Fax	Mobi	le Phone	Emergency F	hone	Email Ad	dress				

info@wrightsmillfarm.com

860-774-1455

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

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

	Traiter Quality 1 1011100	911118 6111	0. 0011	· · P ·	1011100	701100101		
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0220164	WRIGHTS MILL FARM - PAVILION				NC	25	Р	GW
Local Address (w	vhere applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
65 CREASY ROAI	)	Connections			1			

Towns Served: CANTERBURY

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

End of schedule

	Connecticut De	partmer	nt of	Public H	ealth I	Orinki	ng W	/ater S	Sectio	n	
	Water Qu	•					_				
PWS ID	PWS Name			0 -		lassificati				pe Pr	imary Source
CT0229044	KNOLLWOOD PLAZA					NC		65	Р		GW
Local Address (v	vhere applicable)			Service	Residentia	l Comm	ercial	Industrial	Coml	oined	Agricultural
1 KNOLLWOOD	PLAZA			Connections		1					
Towns Served: (	CANTERBURY					1					
		M	onit	oring Requ	irement	ts					
Water System	Facility: DISTRIBUTION	SYSTEM (	WSF I	D: 00600)							
<b>Total Coliforn</b>	n (3100)							1	routine	(RT) p	er quarter
Sampling F	Point (Sampling Point ID)			ı	Monitoring	Period	Colle	ction Peri	od C	omplia	ince Status
Select from	n Inventory of Active Sampl	ing Points		1	10/1/23 - 1	2/31/23				Cor	mplete
					1/1/24 - 3,	/31/24					
					4/1/24 - 6,	/30/24					
					7/1/24 - 9	/30/24					
Physical Para	meters (PPS)							1	routine	(RT) p	er quarter
	Point (Sampling Point ID)				Monitoring		Colle	ction Peri	od Co	omplic	ince Status
Select from	n Inventory of Active Sampl	ing Points		1	10/1/23 - 1					Cor	nplete
					1/1/24 - 3,						
					4/1/24 - 6,	•					
					7/1/24 - 9,	/30/24					
Water System	Facility: ENTRY POINT	(WSF ID: 0	0700)								
Nitrate And N										-	T) per year
	Point (Sampling Point ID)				Monitoring		Colle	ction Peri	od Co		ince Status
ENTRY POI	NT (3)				1/1/23 - 12					Cor	nplete
					1/1/24 - 12						
					1/1/25 - 12						
		Public	Not	ification R	equiren	nents					
			C	ompliance	Notice	<u>Publi</u>	ic Notifi	cation	PI	V Certi	<u>fication</u>
Violation/Situa				Period	Tier	Requir	ed P	erformed	Due to	DPH	Received
Total Coliform N	/I&R Violation		10/1	/21 - 10/31/21	3	3/3/20	23		3/13/2	2023	
	Water	System I	acili	ity and San	npling P	oint In	vent	ory			
Water							Total	Lead a	nd		
*	er System Facility		Point	Sampling Poir	nt		Coliforn				Stage
Facility ID		ID		Description		Status	Rule	Rule T	ier Asbe	estos	WQP 2 DBPR
00600 DISTI	RIBUTION SYSTEM	4		DISTRIBUTION		A					
		DOWNST				A					
		MW0		FUEL SERVICE		A	Y				
		MW0		MENS ROOM		A	Y				
		MW0		WOMENS ROO		A	Y				
		MW0		HAND WASH S THREE BAY SIN		A A	Y Y				
		UPSTRE		WITHIN 5 SER		A	1				
		UPSIKE	.∕~ıVI	VVIIIIIIN 3 3EK	VICE CON	Α					

**ENTRY POINT** 

WELL 1

Α

Α

3

2

00700 ENTRY POINT

54339 WELL 1

	Water Quality N	Monitoring and	d Con	npl	iance S	Schedul	e	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0229044	KNOLLWOOD PLAZA				NC	65	Р	GW
Local Address (v	vhere applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
1 KNOLLWOOD	PLAZA	Connections			1			

Connecticut Department of Public Health Drinking Water Section

			С	ontact Inf	ormation					
Name				Organization	1			Job Title		
Mr. Ronald D. Tadd	ei			D'amato Bro	thers Builders		General Manager			
Mailing Address Line	e One		Mailing Add	ress Line Two			City	State	Zip Code	
46 Taugwonk Spur,	#8					Stoningt	on	СТ	06378	
Business Phone	Extension	Fax	M	obile Phone	Emergency Phone	Email Ac	ldress			
860-535-0859		860-535-	2187		203-627-5242	ron@da	matostoning	gton.com		
Contact Role(s): Ad	lministrative (	Contact, Leg	al Contact, C	Owner						
Name				Organization	1			Job Title		
Canterbury Shoppin	ng Center LLC									
Mailing Address Line	e One		Mailing Add	ress Line Two			City	State	Zip Code	
16 Taugwonk Rd						Stoningt	on	СТ	06378	
Business Phone	Extension	Fax	M	obile Phone	Emergency Phone	Email Ac	ldress			
						toroca®	damatobrot	hore com		

#### Please note the following:

Towns Served: CANTERBURY

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

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 Depar	tment of Public H	lealth	Di	inking	Water	Section	,
	Water Quali	ty Monitoring and	d Com	npl	iance S	Schedul	e	
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
СТ0229054	WICKED COW				NC	25	Р	GW
Local Address (\	where applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
7 PLAINFIELD R	DAD	Connections					1	
Towns Served: (	CANTERBURY							

7 FLAINI ILLU NOAU					1	
Towns Served: CANTERBURY						
N	Monitoring Requ	irement	ts			
Water System Facility: <b>DISTRIBUTION SYSTEM</b>						
Total Coliform (3100)	(			1	routine (RT)	per month
Sampling Point (Sampling Point ID)		Monitoring	Period C	ollection Perio		ince Status
Select from Inventory of Active Sampling Points		11/1/23 - 1				f Service
, , , , , , , , , , , , , , , , , , , ,		12/1/23 - 1				f Service
		4/1/24 - 4				
		5/1/24 - 5				
		6/1/24 - 6				
		7/1/24 - 7				
		8/1/24 - 8				
		9/1/24 - 9/				
	•	10/1/24 - 10	0/31/24			
Physical Parameters (PPS)				1	routine (RT)	per month
Sampling Point (Sampling Point ID)		Monitoring	Period C	Collection Perio	od Complia	ince Status
Select from Inventory of Active Sampling Points		11/1/23 - 1	1/30/23		Out o	f Service
		12/1/23 - 1	2/31/23		Out o	f Service
		4/1/24 - 4	/30/24			
		5/1/24 - 5,	/31/24			
		6/1/24 - 6	/30/24			
		7/1/24 - 7	/31/24			
		8/1/24 - 8,				
		9/1/24 - 9,				
		10/1/24 - 1	0/31/24			
Water System Facility: ENTRY POINT (WSF ID:	00700)					
Nitrate And Nitrite (NOX)					1 routine (R	
Sampling Point (Sampling Point ID)		Monitoring		Collection Perio		ince Status
ENTRY POINT (3)		1/1/23 - 12			Cor	nplete
		1/1/24 - 12				
		1/1/25 - 12				
Publ	ic Notification R	equiren	nents			
	Compliance	Notice	Public N	<u>otification</u>	PN Certi	<u>fication</u>
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received
REVISED TOTAL COLIFORM RULE (RTCR) TT Violation	4/2/23 - 9/16/23	2	9/30/2023		10/10/2023	
Water System	Facility and Sar	npling P	oint Inve	entory		
Water			T	otal Lead ar	nd	
	g Point Sampling Poi	nt		iform Coppe		Stage
. 46	D Description		Status F	Rule Rule Ti	er Asbestos	WQP 2 DBP
00600 DISTRIBUTION SYSTEM	DISTRIBUTION	I SYSTEM	Α			

WITHIN 5 SERVICE CON

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DOWNSTREAM WITHIN 5 SERVICE CON

**UPSTREAM** 

3

00700 ENTRY POINT

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source					
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source					
2116.15	· J	1	1		<b>D</b> : 0					
Water Quality Monitoring and Compliance Schedule										
	Connecticut Department of Public Health Drinking Water Section									

Connections

Service

Towns Served: CANTERBURY

7 PLAINFIELD ROAD

Local Address (where applicable)

Water System Facility and Sampling Point Inventory											
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description		0.1-	Lead and Copper		Stage WQP 2 DBF			
	WELL 1	2	WELL 1	<u>Status</u> A	Nuic	nuic riei	ASDESTOS	VVQI Z DDI			
62842	TREATMENT PLANT										

Residential Commercial

Industrial

Combined

1

Agricultural

Contact Information											
Name			Organization			Job Title					
Mr. Nicholas Grillo											
Mailing Address Line One Mailing Addr				ess Line Two		City		State	Zip Code		
141 Bethel Road						Griswold		СТ	06351		
Business Phone	Extension	Fax	Мо	obile Phone	Emergency Phone	Email Address					
860-917-4091						Nickg860	ckg860@gmail.com				
			·								

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

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