

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0340024	7-ELEVEN STORE	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
217-219 CLAPBOARD RIDGE ROAD	Connections		1		

Towns Served: DANBURY

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		Complete
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		
Total Coliform (3100)	3 repeat (RP) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/5/25 - 11/10/25		Complete
Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		Complete
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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		Complete
	1/1/27 - 12/31/27		

Water System Facility: **WELL** (WSF ID: 20622)

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
CT0340024	7-ELEVEN STORE	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
217-219 CLAPBOARD RIDGE ROAD	Connections		1		

Towns Served: DANBURY

Monitoring Requirements

Water System Facility: WELL (WSF ID: 20622)

E. Coli (3014)		1 triggered (TG) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL (2)	11/4/25 - 11/10/25		Complete	
E. Coli (3014)			1 routine (RT) per month	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL (2)	8/1/25 - 8/31/25		Complete	
	9/1/25 - 9/30/25		Complete	
	10/1/25 - 10/31/25		Complete	
	11/1/25 - 11/30/25		Complete	
	12/1/25 - 12/31/25		Complete	
	1/1/26 - 1/31/26		Complete	
	2/1/26 - 2/28/26			
	3/1/26 - 3/31/26			
	4/1/26 - 4/30/26			
	5/1/26 - 5/31/26			
	6/1/26 - 6/30/26			
	7/1/26 - 7/31/26			

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY		12/3/2021

Water System Facility and Sampling Point Inventory							
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Status	Lead and Coliform Rule	Copper Rule Tier	Asbestos WQP 2 DBPR Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		4-1	FRONT HAND SINK	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
20622	WELL	2	WELL	A			
62598	TREATMENT PLANT						

Contact Information

Name	Organization			Job Title		
Mr. Jack Mitchell	G M C Ltd Partnership			Owner		
Mailing Address Line One	Mailing Address Line Two			City	State	Zip Code
690 Ellington Road				South Windsor	CT	06074
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
772-332-3186					themitch@mac.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
CT0340024	7-ELEVEN STORE	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
217-219 CLAPBOARD RIDGE ROAD	Connections		1		

Towns Served: DANBURY

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
CT0340034	7-ELEVEN STORE	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
29 MILL PLAIN ROAD		1			

Towns Served: DANBURY

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 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
RESPOND TO SANITARY SURVEY	11/17/2021	

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification Required	PN Certification Due to DPH	Received
Total Coliform MCL Violation	7/1/15 - 9/30/15	2	12/9/2015	12/19/2015	

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	Stage
					Rule	Rule Tier	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		4-1	Store Counter Sink	A	Y		
		4-2	Store Counter Sink	A	Y		
		4-3	Store Counter Sink	A	Y		
		4-4	Store Counter Sink	A	Y		
		4-5	Store Sink	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
20623	WELL	2	WELL	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
CT0340034	7-ELEVEN STORE	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
29 MILL PLAIN ROAD			1		

Towns Served: DANBURY

Contact Information

Name		Organization			Job Title		
Mr. Richard Murray		Us Trust Co, Nat. Assoc.			Sr Vice President		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
515 South Flower Street		Suite 2700			Los Angles	CA	90071-2291
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
213-861-5065							

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

Name		Organization			Job Title		
Mr. Richard M. Warshany		7-Eleven Inc			Field Service Rep.		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
10 Columbus Blvd					Hartford	CT	06106
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
732-319-7897					Rich.Warshany@FmFacilityMaintenance.com		

Contact Role(s): **Administrative Contact**

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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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0340074	AMBER ROOM	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
STACY ROAD			1		

Towns Served: DANBURY

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		Lead and Copper Rule Tier	Asbestos	WQP 2 DBPR Stage
				Status	Rule			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		AR001	KIT SNK SINGLE FRONT	A	Y		Y	
		AR002	KIT HAND SNK FRONT	A	Y		Y	
		AR003	KIT SNK LARGE SINGLE	A	Y		Y	
		AR004	KIT SNK SMALL SINGLE	A	Y		Y	
		AR005	KIT HAND SNK BACK	A	Y		Y	
		AR006	KIT SNK BACK SINGLE	A	Y		Y	
		AR007	RR KITCHEN	A	Y		Y	
		AR008	RR MENS RR	A	Y		Y	
		AR009	RR LADY ROOM	A	Y		Y	
		AR010	SERVERS STATION	A	Y		Y	
		AR011	BAR SINK	A	Y		Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
22817	WELL1	2	WELL #1	A				
22887	WELL2	2	WELL2	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
CT0340074	AMBER ROOM	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
STACY ROAD			1		

Towns Served: DANBURY

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	Stage WQP 2	DBPR
54226	ATMOSPHERIC STORAGE TANK							

Contact Information

Name	Organization	Job Title		
Mr. Douglas Polistena	Amber Room	Director Operations		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
1 Stacey Road		Danbury	CT	06811
Business Phone	Extension	Fax	Mobile Phone	Email Address
203-748-3800	101	203-748-1472		doug@theamberroom.net

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

Name	Organization	Job Title		
Arc Properties LLC				
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
14 Plumtrees Road		Danbury	CT	06810
Business Phone	Extension	Fax	Mobile Phone	Email Address

Contact Role(s): **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.
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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
CT0340144	BUSINESS AIRCRAFT CENTER, INC.	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
81 KENOSIA AVENUE	Connections		1		

Towns Served: DANBURY

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		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	5/24/2018	
RESPOND TO SANITARY SURVEY	5/7/2025	

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule	Asbestos	WQP 2 DBPR	Stage
					Rule	Tier			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y				
		BA001	KIT SNK LOWER LEVEL	A	Y				Y
		BA002	SLOP SNK LL HANGER	A	Y				Y
		BA003	RR LOWER LEVEL 1	A	Y				Y
		BA004	RR LOWER LEVEL 2	A	Y				Y
		BA005	RR 2ND FLOOR R	A	Y				Y
		BA006	RR 2ND FLOOR L	A	Y				Y
		DOWNSTREAM	WITHIN 5 SERVICE CON	A					
		UPSTREAM	WITHIN 5 SERVICE CON	A					
00700	ENTRY POINT	3	ENTRY POINT	A					
20625	WELL	2	WELL	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
CT0340144	BUSINESS AIRCRAFT CENTER, INC.	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
81 KENOSIA AVENUE			1		

Towns Served: DANBURY

Contact Information

Name	Organization	Job Title		
Mr. Santo Silvestro				
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
81 Kenosia Ave.		Danbury	CT	06810
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-748-7000				
Email Address				

Contact Role(s): **Administrative 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.
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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
CT0340234	184 GREAT PLAIN ROAD	NC	36	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
184 GREAT PLAIN ROAD			1		

Towns Served: DANBURY

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Total Coliform (3100)	3 repeat (RP) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/28/25 - 9/2/25		Complete

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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

Nitrate And Nitrite (NOX)	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		

Water System Facility: WELL (WSF ID: 20628)

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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
CT0340234	184 GREAT PLAIN ROAD	NC	36	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
184 GREAT PLAIN ROAD			1		

Towns Served: DANBURY

Monitoring Requirements

Water System Facility: WELL (WSF ID: 20628)

E. Coli (3014)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	WELL (2)	8/27/25 - 9/2/25		Complete

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Status	Lead and Coliform Rule	Copper Rule Tier	Asbestos WQP 2	Stage DBPR
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				
20628	WELL	2	WELL	A				

Contact Information

Name	Organization	Job Title
Mr. Bruce Arnold	Ba Holdings LLC	President
Mailing Address Line One	Mailing Address Line Two	City
5 Cloverleaf Farm South		Sherman
Business Phone	Extension	Fax
917-681-0656		860-350-9213
Mobile Phone		Emergency Phone
		Email Address
		clarendon2200@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
CT0340304	DAIRY & ENERGY STOP	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
133 PADANARAM ROAD	Connections		1		

Towns Served: DANBURY

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 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: WELL (WSF ID: 20631)

1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	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
RESPOND TO SANITARY SURVEY	6/12/2016	
RESPOND TO SANITARY SURVEY		12/3/2021

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification Required	PN Certification Due to DPH	Received
Distribution Color MCL Violation	10/1/04 - 12/31/04	2	4/14/2005	4/24/2005	
Distribution Turbidity MCL Violation	7/1/04 - 9/30/04	2	4/22/2005	5/2/2005	
Distribution Color MCL Violation	7/1/04 - 9/30/04	2	4/22/2005	5/2/2005	

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	Stage WQP 2 DBPR

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
CT0340304	DAIRY & ENERGY STOP	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
133 PADANARAM ROAD			1		

Towns Served: DANBURY

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					
20631	WELL	2	WELL	A					
54203	TREATMENT PLANT								

Contact Information

Name	Organization	Job Title
Mr. Barry Connell		
Mailing Address Line One	Mailing Address Line Two	City
133 Padanaram Road		Danbury
Business Phone	Extension	State
203-798-0340		CT
		Zip Code
		06811

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

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
CT0340444	FEDERAL ROAD SUNOCO	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
7 FEDERAL ROAD	Connections		1		

Towns Served: DANBURY

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
Total Coliform MCL Violation	9/1/05 - 9/30/05	2	10/19/2005		10/29/2005	
Total Coliform MCL Violation	10/1/05 - 10/31/05	2	11/19/2005		11/29/2005	
Repeat Total Coliform M&R Violation	10/1/05 - 10/31/05	2	4/12/2006		4/22/2006	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform		Lead and Copper		Stage
				Status	Rule	Rule Tier	Asbestos	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		FRS001	RR LOWER LEVEL	A	Y		Y	
		FRS002	RR LADY RM MAIN FLR	A	Y		Y	
		FRS003	RR MENS RM MAIN FLR	A	Y		Y	
		FRS004	UNISEX RR MAIN FLR	A	Y		Y	
		FRS005	KIT SNK	A	Y		Y	
00700	ENTRY POINT	3	ENTRY POINT	A				
		2	WELL	A				

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
CT0340444	FEDERAL ROAD SUNOCO	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
7 FEDERAL ROAD			1		

Towns Served: DANBURY

Contact Information

Name	Organization	Job Title		
Mr. Norbert E Mitchell	Nemco Limited Partnership.	Vice-President		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
P.O. Box 186		Danbury	CT	06813
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone Email Address
203-744-0600		203-743-7978		203-948-8561 nm3@nemitchell.com

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

Name	Organization	Job Title		
Mr. Matthew J. Mitchell	Norbert E. Mitchell Co.	Management		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
PO Box 186		Danbury	CT	06813
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone Email Address
203-744-0600		203-743-7978	203-948-5788	
				mattm@nemitchell.com

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

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
CT0340614	KENTUCKY FRIED CHICKEN OF DANBURY, INC.	NC	25	P	GW
Local Address (where applicable)	1 FEDERAL ROAD	Service Connections	Residential	Commercial	Industrial
			1	Combined	Agricultural

Towns Served: DANBURY

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		
Total Coliform (3100)	3 repeat (RP) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	9/17/25 - 9/22/25		Complete
Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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: **WELL** (WSF ID: 20639)

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
CT0340614	KENTUCKY FRIED CHICKEN OF DANBURY, INC.	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
1 FEDERAL ROAD			1		

Towns Served: DANBURY

Monitoring Requirements

Water System Facility: WELL (WSF ID: 20639)

E. Coli (3014)		1 triggered (TG) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL (2)	9/16/25 - 9/22/25		Complete	
E. Coli (3014)			1 routine (RT) per month	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL (2)	8/1/25 - 8/31/25		Complete	
	9/1/25 - 9/30/25		Complete	
	10/1/25 - 10/31/25		Complete	
	11/1/25 - 11/30/25		Complete	
	12/1/25 - 12/31/25		Complete	
	1/1/26 - 1/31/26			
	2/1/26 - 2/28/26			
	3/1/26 - 3/31/26			
	4/1/26 - 4/30/26			
	5/1/26 - 5/31/26			
	6/1/26 - 6/30/26			
	7/1/26 - 7/31/26			

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification Required	PN Certification Due to DPH	Received
Total Coliform M&R Violation	1/1/10 - 3/31/10	2	6/9/2010		6/19/2010

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			
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
20639	WELL	2	WELL	A			
62270	TREATMENT						

Contact Information

Name	Organization				Job Title		
Kentucky Fried Chicken of Danbury, Inc.							
Mailing Address Line One	Mailing Address Line Two				City		State
P.O. Box 10150					Newburgh		NY
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
Contact Role(s):	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
CT0340614	KENTUCKY FRIED CHICKEN OF DANBURY, INC.				NC	25	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
1 FEDERAL ROAD				1				
Towns Served: DANBURY								
Name			Organization			Job Title		
Mr. Jessie Gupta			Jmvd Realty Partners LLC			Office Manager		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code	
1 Federal Road					Danbury	CT	06810	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
516-775-3347		516-775-3344		646-249-5007	kfcnyct@gmail.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

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
CT0340894	RICHTER PARK GOLF COURSE	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
100 AUNT HACK ROAD			1		

Towns Served: DANBURY

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	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			
20648	WELL	2	WELL	A			

Contact Information

Name	Organization	Job Title
Jonathan Pinto	Richter Park Golf Course	General Manager
Mailing Address Line One	Mailing Address Line Two	City
100 Aunt Hack Road		State
Business Phone	Extension	Zip Code
203-792-2550	110	Danbury
		CT
		06811
Email Address		
		Jonathan@RichterPark.com

Contact Role(s): Administrative Contact, Legal Contact

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
CT0340894	RICHTER PARK GOLF COURSE	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
100 AUNT HACK ROAD			1		

Towns Served: DANBURY

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
CT0341034	ACLS PROPERTIES INC.	NC	40	P	GW
Local Address (where applicable)	132 FEDERAL ROAD L07041	Service Connections	Residential	Commercial	Industrial
			3		Combined Agricultural

Towns Served: DANBURY

Monitoring Requirements

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

Chlorine Residual (1012)	1 routine (RT) per month		
<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
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		
Chlorine Residual (1012)	4 routine (RT) per month		
<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	9/1/25 - 9/30/25		
Total Coliform (3100)	1 routine (RT) per month		
<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
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		
Total Coliform (3100)	3 repeat (RP) per period		
<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	9/17/25 - 9/22/25		
Disinfectant Byproducts - TTHM & HAA5 (DBP)	1 routine (RT) per year		
<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	1/1/25 - 12/31/25	7/1-9/30	
	1/1/26 - 12/31/26	7/1-9/30	
	1/1/27 - 12/31/27	7/1-9/30	
Physical Parameters (PPS)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>

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
CT0341034	ACLS PROPERTIES INC.	NC	40	P	GW
Local Address (where applicable)	132 FEDERAL ROAD L07041	Service Connections	Residential	Commercial	Industrial
			3	Combined	Agricultural

Towns Served: DANBURY

Monitoring Requirements

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

Physical Parameters (PPS)	1 routine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25 Complete
	9/1/25 - 9/30/25 Complete
	10/1/25 - 10/31/25 Complete
	11/1/25 - 11/30/25 Complete
	12/1/25 - 12/31/25 Complete
	1/1/26 - 1/31/26
	2/1/26 - 2/28/26
	3/1/26 - 3/31/26
	4/1/26 - 4/30/26
	5/1/26 - 5/31/26
	6/1/26 - 6/30/26
	7/1/26 - 7/31/26

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
	1/1/26 - 12/31/26
	1/1/27 - 12/31/27

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month	
			Compliance History:	Monitoring
Chlorine	Entry Point RDC (EPRD)	Minimum: 1.0 MG/L		Daily
Start Date: 11/1/2023		Monitoring Period	Operating Limit	Compliance Status:
		8/1/2025 - 8/31/2025	Y	
		9/1/2025 - 9/30/2025	Y	
		10/1/2025 - 10/31/2025	Y	
		11/1/2025 - 11/30/2025	Y	
		12/1/2025 - 12/31/2025	Y	

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	8/15/2021	
SANITARY DEFECT CORRECTIVE ACTION	1/15/2026	

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

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
CT0341034	ACLS PROPERTIES INC.	NC	40	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
132 FEDERAL ROAD L07041	Connections		3		

Towns Served: DANBURY

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	Stage WQP 2 DBPR
					Y	Y	Y	Y
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		RRATT	RR AT AND T	A	Y			Y
		RRSUBWAY	RR SUBWAY	A	Y			Y
		SUBHAND	SUBWAY HAND SINK	A	Y			Y
		SUBSLOP	SUBWAY SLOP SINK	A	Y			Y
		SUBTRIPLE	SUBWAY TRIPLE SINK	A	Y			Y
00700	ENTRY POINT	4	UPSTREAM	A				
		3	WITHIN 5 SERVICE CON	A				
20654	WELL	2	ENTRY POINT	A				
59903	TREATMENT PLANT		WELL	A				

Contact Information

Name	Organization	Job Title		
Mr. Louis Sclafani	Acls Properties Inc	President		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
132 Federal Road	Suite 103	Danbury	CT	06811
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-778-2225			203-470-9156	Email Address sclafanilou57@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

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
CT0341064	TAORMINA RESTAURANT	NC	28	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
84 BALL POND ROAD			1		

Towns Served: DANBURY

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		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY		3/30/2025

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
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A		
		TR001	RR LADY ROOM	A	Y	Y
		TR002	RR MENS RR	A	Y	Y
		TR003	HAND SINK	A	Y	Y
		TR004	KIT SNK TRPL SNK	A	Y	Y
		UPSTREAM	WITHIN 5 SERVICE CON	A		
00700	ENTRY POINT	3	ENTRY POINT	A		
20656	WELL	2	WELL	A		
63226	SOFTENER					

Contact Information

Name	Organization	Job Title
Ms. Gina Clarizio	Taormina Restaurant	Owner
Mailing Address Line One	Mailing Address Line Two	City
		State Zip Code

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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
CT0341064	TAORMINA RESTAURANT	NC	28	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
84 BALL POND ROAD			1		

Towns Served: DANBURY

99 Hoyts Hill Road					Bethel	CT	06801
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-746-1040				203-792-4408			

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

Name	Organization	Job Title		
Mr. Jose Sari	Taormina Restaurant			
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
Taormina Restaurant	84 Ball Pond Road	New Fairfield	CT	06810

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

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<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
CT0341164	18 MILL PLAIN ROAD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
16, 18, 22 MILL PLAIN ROAD			1		

Towns Served: DANBURY

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	5/15/2016	
RESPOND TO SANITARY SURVEY	11/17/2021	

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
CT0341164	18 MILL PLAIN ROAD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
16, 18, 22 MILL PLAIN ROAD			1		

Towns Served: DANBURY

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
Physical Parameters M&R Violation	9/1/25 - 9/30/25	3	1/7/2027		1/17/2027	
Total Coliform M&R Violation	9/1/25 - 9/30/25	3	1/7/2027		1/17/2027	

Water System Facility and Sampling Point Inventory

Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and	Stage		
					Coliform	Copper			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A					
		MPD001	KIT HAND SNK 1	A	Y				
		MPD002	KIT HAND SNK 2	A	Y				
		MPD003	KIT SNK DOUBLE	A	Y				
		MPD004	RR LADY ROOM	A	Y				
		MPD005	RR MENS RR	A	Y				
		MPD006	KIT SNK SINGLE SNK 1	A	Y				
00700	ENTRY POINT	3	ENTRY POINT	A			Y		
		20661	WELL	A					
54199	TREATMENT PLANT								

Contact Information

Name	Organization				Job Title				
Emxm LLC									
Mailing Address Line One	Mailing Address Line Two		City		State	Zip Code			
16 Mill Plain Road			Danbury		CT	06811			
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
203-417-1269		203-426-8019		203-788-5153	gmarnelos@me.com				
Contact Role(s):	Owner								
Name	Organization				Job Title				
Mr. George Marnelakis									
Mailing Address Line One	Mailing Address Line Two		City		State	Zip Code			
108 Maple Tree Hill Rd			Southbury		CT	06488			
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
203-417-1269		203-426-8019		203-788-5153	gmarnelos@me.com				
Contact Role(s):	Administrative Contact, Legal Contact								

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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
CT0341164	18 MILL PLAIN ROAD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
16, 18, 22 MILL PLAIN ROAD			1		

Towns Served: DANBURY

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0341194	WOOSTER MOUNTAIN GUN CLUB	NC	25	S	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
DANBURY ROAD (RT 7), DANBURY, CT 06810	Connections		2		

Towns Served: DANBURY

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
	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
	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	Status	Total Coliform	Lead and Copper Rule	Asbestos	Stage WQP 2 DBPR
					Rule	Tier	WQD	DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
		WM001	KIT SNK	A	Y		Y	
		WM002	RR MENS RR	A	Y		Y	
00700	ENTRY POINT	3	ENTRY POINT	A				
		2	WELL	A				

Contact Information

Name	Organization				Job Title		
Mr. Dean A. Price	Danbury Shooting Sports Assn				Director		
Mailing Address Line One	Mailing Address Line Two		City		State	Zip Code	
P O Box 7145			Wilton		CT	06897-7154	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-762-5858		203-762-9909		203-762-5858	hopalongdingdong@aol.com		

Contact Role(s): **Administrative Contact**

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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
CT0341194	WOOSTER MOUNTAIN GUN CLUB				NC	25	S	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
DANBURY ROAD (RT 7), DANBURY, CT 06810				2				
Towns Served: DANBURY								
Name			Organization			Job Title		
Mr. David Cooley			Deep-Engineering Unit			Supv Civil Engineer		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code	
163 Great Hill Road					Portland	CT	06480	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-342-2215		860-344-2560	860-205-7552	860-424-3333	david.cooley@ct.gov			

Contact Role(s): **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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<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
CT0341244	REBELLION KITCHEN AND BAR	NC	0	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
129/131 PANDANRAM ROAD	Connections		1		

Towns Served: DANBURY

Monitoring Requirements

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

Total Coliform (3100)			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		
Total Coliform (3100)			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/26/25 - 7/31/25		Complete
Physical Parameters (PPS)			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		
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: WELL (WSF ID: 20664)			

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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
CT0341244	REBELLION KITCHEN AND BAR	NC	0	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
129/131 PANDANRAM ROAD			1		

Towns Served: DANBURY

Monitoring Requirements

Water System Facility: WELL (WSF ID: 20664)

E. Coli (3014)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	WELL (2)	7/25/25 - 7/31/25		1 triggered (TG) per period

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification Required	PN Certification Due to DPH	Public Notification Performed	Received
E. Coli	6/1/25 -	3	10/9/2026	10/19/2026		
E. Coli M&R Violation	8/1/25 -	3	12/31/2026	1/10/2027		

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Status	Lead and Coliform Rule	Copper Rule Tier	Asbestos	Stage WQP 2	DBPR
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					
20664	WELL	2	WELL	A					

Contact Information

Name	Organization				Job Title
Mr. Taranjit Randhawa	Rebellion Restaurant				Owner
Mailing Address Line One	Mailing Address Line Two		City	State	Zip Code
129 Padanaram Road		Danbury	CT	06811	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-240-6470					randhawats@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
CT0341294	CHUCKS STEAK HOUSE	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
20 SEGAR STREET			1		

Towns Served: DANBURY

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 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		Lead and Copper Rule Tier	Asbestos	WQP 2 DBPR Stage
				Status	Rule			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		CSH001	KIT SNK DOUBLE 1	A	Y		Y	
		CSH002	KIT SNK DOUBLE 2	A	Y		Y	
		CSH003	KIT HAND SNK	A	Y		Y	
		CSH004	SERVERS STAT H SNK	A	Y		Y	
		CSH005	BAR SINK	A	Y		Y	
		CSH006	RR LADY ROOM	A	Y		Y	
		CSH007	RR MENS RR	A	Y		Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
22832	WELL #1	2	WELL #1	A				
54195	TREATMENT PLANT							

Contact Information

Name	Organization	Job Title
Mr. Hank Zaccara	Chucks Steakhouse	Owner
Mailing Address Line One	Mailing Address Line Two	City
		State Zip Code

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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
CT0341294	CHUCKS STEAK HOUSE				NC	25	P	GW
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
20 SEGAR STREET					1			
Towns Served: DANBURY								
20 Segar Street			Danbury			C1	06810	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-792-5555		203-792-5246		860-210-1982				
Contact Role(s): Legal Contact, Owner								
Name			Organization			Job Title		
Mr. Edward Stock			Chuck's Steak House			General Manager		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
20 Segar St						Danbury	CT	06810
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-792-5555				203-470-8800	edstock@chucksdanbury.com			
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

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<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
CT0341314	120 CLAPBOARD RIDGE ROAD	NC	40	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: DANBURY

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 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: WELL #1 (WSF ID: 22958)

1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	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 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
					Rule	Tier		
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				
22958	WELL #1	2	WELL	A				
54189	TREATMENT PLANT							
54191	ATMOSPHERIC STORAGE TANK							

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
CT0341314	120 CLAPBOARD RIDGE ROAD	NC	40	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		4			

Towns Served: DANBURY

Contact Information

Name	Organization	Job Title		
Dr. Ralph Giuliano		Property Owner		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
120 Clapboard Ridge Road		Danbury	CT	06810
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-744-5941		230-797-0865	203-264-9628	203-744-5947
				giulianodds@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

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
CT0340013	UNITED METHODIST CHURCH OF DANBURY	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
5 CLAPBOARD RIDGE ROAD	Connections		1		

Towns Served: DANBURY

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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
Total Coliform M&R Violation	7/1/04 - 7/31/04	2	4/29/2005		5/9/2005
Monochlorobenzene M&R Violation	1/1/05 - 3/31/05	3	10/17/2006		10/27/2006

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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
CT0340013	UNITED METHODIST CHURCH OF DANBURY	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
5 CLAPBOARD RIDGE ROAD	Connections		1		

Towns Served: DANBURY

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
Chlorodibromomethane M&R Violation	1/1/05 - 3/31/05	3	10/17/2006		10/27/2006	
Total Coliform MCL Violation	10/1/06 - 12/31/06	2	11/25/2006		12/5/2006	

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	Stage	
					Rule	Rule Tier		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		KS	KIT SNK	A	Y			Y
		UM001	L RM BY OFF L SINK	P	Y	1		
		UM002	L RM BY OFF R SINK	P	Y	1		
		UM003	M RM BY OFF L SINK	P	Y	1		
		UM004	M RM BY OFF R SINK	P	Y	1		
		UM005	WF BY OFFICE	P	Y	1		
		UM006	L RM BY NURS L SINK	P	Y	1		
		UM007	L RM BY NURS R SINK	P	Y	1		
		UM008	M RM BY NURS SINK	P	Y	1		
		UM009	KITCHEN	P	Y	1		
		UM010	EASTSIDE M RM SINK	P	Y	1		
		UM011	EASTSIDE WM RM SINK	P	Y	1		
		UM012	WESTSIDE M RM SINK	P	Y	1		
		UM013	WESTSIDE WM RM SINK	P	Y	1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
11027	WELL	2	WELL	A				

Contact Information

Name	Organization			Job Title		
United Methodist Church of Danbury						
Mailing Address Line One	Mailing Address Line Two			City	State	Zip Code
5 Clapboard Ridge Rd				Danbury	CT	06811-4525
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	

Contact Role(s): **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
CT0340013	UNITED METHODIST CHURCH OF DANBURY				NC	25	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
5 CLAPBOARD RIDGE ROAD				1				
Towns Served: DANBURY								
Name			Organization			Job Title		
Ms. Sue Teer			United Methodist Church of Dan			Trustee		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code	
5 Clapboard Ridge Rd					Danbury	CT	06811	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-512-3288					eventlady@att.net			

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0341204	NORDAN LLC	NC	400	P	GW
Local Address (where applicable)	132 FEDERAL ROAD L08029	Service Connections	Residential	Commercial	Industrial
				Combined	Agricultural

Towns Served: DANBURY

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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		

Monthly Water System Facility (WSF) Level Monitoring Requirements

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
CT0341204	NORDAN LLC	NC	400	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
132 FEDERAL ROAD L08029				1	

Towns Served: DANBURY

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit		Samples Req/Month	
		Minimum:	0.7 MG/L	Daily	Compliance Status:
Chlorine	Entry Point RDC (EPRD)				
Start Date: 5/1/2025		Compliance History:	Operating Limit	Monitoring	Compliance Status:
		Monitoring Period	Compliance Status:	Compliance Status:	
		8/1/2025 - 8/31/2025	Y		
		9/1/2025 - 9/30/2025	Y		
		10/1/2025 - 10/31/2025	Y		
		11/1/2025 - 11/30/2025	Y		
		12/1/2025 - 12/31/2025	Y		

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total		Lead and Copper		Stage WQP 2 DBPR
				Status	Coliform Rule	Rule Tier	Asbestos	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		SINK1	SPACE A 1 REST RM	A	Y			
		SINK2	FAUCET UTILITY SINK	A	Y			
		SINK3	SPACE A 2 REST RM	A	Y			
		SINK4	SPACE B REST RM	A	Y			
		SINK5	SPACE C REST RM	A	Y			
		SINK6	SPACE D 3 BAY SINK	A	Y			
		SINK7	SPACE E REST RM	A	Y			
		TAP2	TAP UTILITY RM SINK	A	Y			
		TAP3	SPACE 1-A AFTER TREA	A	Y			
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
63153	WELL 1	2	WELL 1	A				
63209	STORAGE/CONTACT TANKS							
63210	BOOSTER PUMP							
63304	TREATMENT PLANT							

Contact Information

Name	Organization			Job Title		
Mr. Robert Benincasa	Nordan LLC			Building Manager		
Mailing Address Line One	Mailing Address Line Two			City	State	Zip Code
132 Federal Rd.	Lot 08029			Danbury	CT	06811
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-994-9161				203-994-9161	rbenincasabuilder@gmail.com	
Contact Role(s):	Administrative Contact					

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
CT0341204	NORDAN LLC	NC	400	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
132 FEDERAL ROAD L08029				1	

Towns Served: DANBURY

Name	Organization	Job Title		
Mr. Brett Cooper	132 Federal Rd LLC	Principal		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
1000 Woodbury Road	Suite 100	Woodbury	NY	11797
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
917-905-0013				Email Address info@cosmorepartners.com

Contact Role(s): Owner

Name	Organization	Job Title		
Mr. Andrew Smook	132 Federal Rd LLC			
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
1000 Woodbury Road	Suite 100	Woodbury	NY	11797
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
917-905-0014				Email Address asmook@cosmorepartners.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.
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
CT0340044	12 MILL PLAIN ROAD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
12 MILL PLAIN ROAD			1		

Towns Served: DANBURY

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		
	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		
	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 Required	Public Notification Performed	PN Certification Due to DPH	PN Certification Received
Total Coliform M&R Violation	4/1/25 - 6/30/25	3	10/9/2026		10/19/2026	
Physical Parameters M&R Violation	4/1/25 - 6/30/25	3	10/9/2026		10/19/2026	
Physical Parameters M&R Violation	7/1/25 - 9/30/25	3	1/7/2027		1/17/2027	
Total Coliform M&R Violation	7/1/25 - 9/30/25	3	1/7/2027		1/17/2027	

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	Stage
					Rule	Rule Tier	
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			
63281	WELL	2	WELL	A			

Contact Information

Name	Organization	Job Title
Mr. William Sabatini	Jmb Real Estate Co, LLC	
Mailing Address Line One	Mailing Address Line Two	City
12 Mill Plain Rd		State Zip Code
		CT 06810

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
CT0340044	12 MILL PLAIN ROAD				NC	25	P	GW
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
12 MILL PLAIN ROAD					1			
Towns Served: DANBURY								
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
914-490-7268					bsab75@yahoo.com			
Contact Role(s): Administrative Contact, Legal Contact								
Please note the following: <ol style="list-style-type: none"> 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 								
<i>If you have any questions, please contact the Drinking Water Section at (860) 509-7333.</i> 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
CT0341234	109 FEDERAL ROAD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
109 FEDERL ROAD					1

Towns Served: DANBURY

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		
	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			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
63300	WELL 1	2	WELL 1	A			

Contact Information

Name	Organization	Job Title
Ms. Andrea Scalzo	Scalzo Property Management	
Mailing Address Line One	Mailing Address Line Two	City
2 Stony Hill Rd	Suite 201	State
Business Phone	Extension	Zip Code
203-790-6888	691	06801
Fax	Mobile Phone	Email Address
203-790-9390		ascalzo@scalzoproperty.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
CT0341234	109 FEDERAL ROAD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
109 FEDERL ROAD					1

Towns Served: DANBURY

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