	Connecticut Department					0			ection		
	Water Quality Mon	intoring an	u con								_
PWS ID	PWS Name					n Po	-	Ow	ner Type	Prir	mary Source
CT0480062	CRYSTAL LAKE SCHOOL				NTNC		275		L		GW
	s (where applicable)	Service	Residen	itial	Comme	rcial	Industria	al	Combine	d	Agricultura
59 SOUTH RO		Connections			2						
Towns Served								_		_	
	Moi	nitoring Requ	ireme	nts							
Water Syste	m Facility: DISTRIBUTION SYSTEM (W	SF ID: 00600)									
Asbestos (1	1094)						1 ro	uti	ne (RT) p	er r	nine years
Samplin	g Point (Sampling Point ID)		Monitori	ing P	eriod	Coll	ection Pei	riod	Comp	olia	nce Status
Select fro	om Inventory of Active Sampling Points		1/1/20 -	12/3	81/28						
Total Alkali							2 roi	utir	• • •		ix months
	g Point (Sampling Point ID)		Monitori	ing P	Period	Coll	ection Per	riod	Comp	olia	nce Status
Select fro	om Inventory of Active Sampling Points		7/1/23 -	12/3	81/23				(	Com	plete
			1/1/24 -								
			7/1/24 -	12/3	81/24						
Total Colifo	• •								-		er quarter
	g Point (Sampling Point ID)		Monitori			Coll	ection Pei	riod			nce Status
Select fro	om Inventory of Active Sampling Points		10/1/23 -		-						plete
			1/1/24 -						(	Com	plete
			4/1/24 -								
			7/1/24 -	- 9/3	0/24						
	opper (PBCU)					_					ix months
	g Point (Sampling Point ID)						ection Pei	riod			nce Status
Select fro	om Inventory of Active Sampling Points		7/1/23 -						(	Com	plete
			1/1/24 -								
	(550)		7/1/24 -	12/3	31/24				/	••	
-	rameters (PPS)				a win al	<b>C</b> -11	1 ection Per		-		er quarter
	g Point (Sampling Point ID)		Monitori			Coll	ection Pel	r10a			nce Status
Select fro	om Inventory of Active Sampling Points		10/1/23 -		-						plete
			1/1/24 -						(	_or	plete
			4/1/24 -								
Motor Sucto	m Facility FNITRY DOINT WELLS 2.9	2 (14/55 10: 0070	7/1/24 -	- 9/3	0/24						
-	m Facility: ENTRY POINT - WELLS 2, &	3 (WSF ID: 0070	1)								
Total Alkali			Monitori	in - 0	loried	Cell					wo weeks
	g Point (Sampling Point ID)		Monitori	_		Coll	ection Pei	100	-		nce Status
EP - WEL	LLS 2 & 3 (3)		10/27/23								plete
			L1/10/23								plete
			11/24/23								plete
			12/8/23 - 12/22/23								plete
			1/5/24 -		-						plete plete
			1/J/Z4-	· T / T	0/24						•
			1/10/24	- 2/					(	ົດም	nloto
			1/19/24		1/24						plete
			2/2/24 -	- 2/1	1/24 5/24				(	Com	plete
			2/2/24 - 2/16/24	- 2/1 - 2/2	1/24 5/24 29/24				(	Com Com	plete plete
			2/2/24 -	- 2/1 - 2/2 - 3/1	1/24 5/24 29/24 4/24				( (	Com Com Com	plete

Connecticut Department of	of Public Health Drinki	ng Water Sec	ction
Water Ouality Mon	itoring and Complianc	e Schedule	
PWS ID PWS Name	Classificati		er Type Primary Source
CT0480062 CRYSTAL LAKE SCHOOL	NTNC	275	L GW
Local Address (where applicable)	Service Residential Comm	ercial Industrial (	Combined Agricultural
59 SOUTH ROAD	Connections 2		
Towns Served: ELLINGTON			
Moni	toring Requirements		
Water System Facility: ENTRY POINT - WELLS 2, & 3	(WSF ID: 00701)		
Total Alkalinity (1927)		1 routine	(RT) per two weeks
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	<b>Compliance Status</b>
	4/12/24 - 4/25/24		
	4/26/24 - 5/9/24		
	5/10/24 - 5/23/24		
	5/24/24 - 6/6/24		
Inorganic Chemicals (IOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	<b>Compliance Status</b>
EP - WELLS 2 & 3 (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Nitrate And Nitrite (NOX)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
EP - WELLS 2 & 3 (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		()
Pesticides, Herbicides and PCBs - Phase II & V (SOCS	•		(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELLS 2 & 3 (3)	1/1/23 - 12/31/25		
Organia Chamicala (VOCS)	1/1/26 - 12/31/28	1	
Organic Chemicals (VOCS) Sampling Point (Sampling Point ID)	Monitoring Period	L r Collection Period	outine (RT) per year <i>Compliance Status</i>
	1/1/23 - 12/31/23	conection Period	Complete
EP - WELLS 2 & 3 (3)	1/1/23 - 12/31/23		complete
	1 /1 /ว/ _ 1 / / 21 / 2/		
	1/1/24 - 12/31/24		
Monthly Water System Fac	1/1/25 - 12/31/25	ng Requiremen	ts
Monthly Water System Fac Water System Facility: ENTRY POINT - WELLS 2, & 3	1/1/25 - 12/31/25 ility (WSF) Level Monitori	ng Requiremen	ts
	1/1/25 - 12/31/25 ility (WSF) Level Monitori (WSFID: 00701)		ts amples Req/Month
Water System Facility: ENTRY POINT - WELLS 2, & 3	1/1/25 - 12/31/25 Eility (WSF) Level Monitori (WSFID: 00701) mary Type) Operating Limit	: S	
Water System Facility:ENTRY POINT - WELLS 2, & 3AnalyteMonitoring Requirement (Sum	1/1/25 - 12/31/25 Eility (WSF) Level Monitori (WSFID: 00701) mary Type) Operating Limit	s S MG/L	amples Req/Month Daily
Water System Facility:ENTRY POINT - WELLS 2, & 3AnalyteMonitoring Requirement (Sum Entry Point Chlorine Residual M	1/1/25 - 12/31/25Sility (WSF) Level Monitori(WSFID: 00701)mary Type)Operating LimitIonitoring (CHLR)Minimum: 0.2	: S MG/L Operating Limit	amples Req/Month
Water System Facility:ENTRY POINT - WELLS 2, & 3AnalyteMonitoring Requirement (SumChlorineEntry Point Chlorine Residual M	1/1/25 - 12/31/25 <b>Solution WSF) Level Monitori</b> (WSFID: 00701) mary Type) Operating Limit Ionitoring (CHLR) Minimum: 0.2 Compliance History:	s S MG/L	amples Req/Month Daily Monitoring
Water System Facility:ENTRY POINT - WELLS 2, & 3AnalyteMonitoring Requirement (Sum Entry Point Chlorine Residual M	1/1/25 - 12/31/25 ility (WSF) Level Monitori (WSFID: 00701) mary Type) Operating Limit onitoring (CHLR) Minimum: 0.2 Compliance History: Monitoring Period	: S MG/L Operating Limit Compliance Status:	amples Req/Month Daily Monitoring
Water System Facility:ENTRY POINT - WELLS 2, & 3AnalyteMonitoring Requirement (SumChlorineEntry Point Chlorine Residual M	1/1/25 - 12/31/25 ility (WSF) Level Monitori (WSFID: 00701) mary Type) Operating Limit Ionitoring (CHLR) Minimum: 0.2 Compliance History: Monitoring Period 11/1/2023 - 11/30/2023	: S MG/L Operating Limit Compliance Status: Y	amples Req/Month Daily Monitoring

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. Schedule Generation Date: 4/3/2024

3/1/2024 - 3/31/2024

## **Connecticut Department of Public Health Drinking Water Section** Water Quality Monitoring and Compliance Schedule PWS ID **PWS Name** Classification Population Owner Type Primary Source CT0480062 CRYSTAL LAKE SCHOOL NTNC 275 L GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 59 SOUTH ROAD 2 Towns Served: ELLINGTON Water System Facility: ENTRY POINT - WELLS 2, & 3 (WSFID: 00701) **Monitoring Requirement (Summary Type) Operating Limit** Samples Reg/Month Analyte Entry Point pH Monitoring (PHRD) Daily pН Minimum: 7.2 PH **Compliance History:** Start Date: 5/1/2023 Monitoring **Operating Limit Monitoring Period Compliance Status: Compliance Status:** 11/1/2023 - 11/30/2023 Υ 12/1/2023 - 12/31/2023 Y Υ 1/1/2024 - 1/31/2024 2/1/2024 - 2/29/2024 Y 3/1/2024 - 3/31/2024 Monitoring Requirement (Summary Type) Samples Reg/Month Analyte **Operating Limit** <spaces> ( ) Maximum: 7.8 PH Daily pН **Compliance History:** Start Date: 5/1/2023 Monitoring **Operating Limit Monitoring Period Compliance Status: Compliance Status:** 11/1/2023 - 11/30/2023 12/1/2023 - 12/31/2023 1/1/2024 - 1/31/2024 2/1/2024 - 2/29/2024 3/1/2024 - 3/31/2024 **Other Compliance Schedules** Compliance Schedule Activity Due Date **Achieved Date** CCTS 6: PWS MONITOR AFTER OCCT INSTALL SUBMIT LEAD SERVICE LINE INVENTORY 10/16/2024 COMPLETE INITIAL LSL INVENTORY 10/16/2024 CROSS CONNECTION SURVEY REPORT 3/1/2025 Water System Facility and Sampling Point Inventory Mator and and

Water					Total	Lead and			
System Water System Facility		Sampling Point	Sampling Point		Coliform			S	tage
Facility ID	)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2	DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	А	Y				
		CLS001	NURSE'S FRONT SINK	А	Y	Ν			
		CLS002	NURSE'S BACK SINK	А	Y	Ν			
		CLS003	KITCHEN PREP SINK L	А	Y	Ν			
		CLS004	FOUNTAIN NEAR CAFE	А		Ν			
		CLS005	STAFF LOUNGE	А	Y	Ν			
		CLS006	FOUNTAIN ROOM # 157	А	Y	Ν			
		CLS007	FOUNTAIN ROOM # 153	А	Y	Ν			
		CLS008	FOUNTAIN OUTSIDE 153	А		Ν			
		CLS009	CAFÉ WATER FOUNTAIN	А		Ν			
		CLS010	GYM WATER FOUNTAIN	А		Ν			
		CLS011	ROOM 168 FOUNTAIN	А		Ν			
		CLS012	ROOM 180 FOUNTAIN	А		Ν			

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

				0						
PWS ID	PWS Name					Cla	ssification	Population	Owner Type	Primary Source
СТ0480062	CRYSTAL LAKE SCHOO	OL					NTNC	275	L	GW
Local Address (	where applicable)	applicable)		Service	Residen	tial	Commerci	al Industri	al Combine	ed Agricultural
59 SOUTH ROA	D			Connections			2			
Towns Served:	ELLINGTON							·	·	

Water System Facility and Sampling Point Inventory											
Water	Total Lea										
System Water System Facility		Sampling Point		Coliform Rule	Copper		Stag				
Facility ID	ID	Description	Rule Tier	Asbestos	WQP 2 DB						
	CLS013	ROOM 160 FOUNTAIN	Α		Ν						
	CLS014	FOUNTAIN NEAR NURSE	Α		Ν						
	CLS015	FOUNTAIN ACROSS 157	Α		Ν						
	CLS120	ROOM 120	Α	Y	Ν						
	CLS125	ROOM 125	Α	Y	Ν						
	CLS136	FACULTY LOUNGE	Α	Y	Ν						
	CLS141	ART ROOM	Α	Y	Ν						
	CLS153	ROOM 153	Α	Y	Ν						
	CLS155	ROOM 155	Α	Y	Ν						
	CLS156	ROOM 156	Α	Y	Ν						
	CLS158	ROOM 158	Α	Y	Ν						
	CLS159	ROOM 159	Α	Y	Ν						
	CLS160	ROOM 160	Α	Y	Ν						
	CLS161	ROOM 161	Α	Y	Ν						
	CLS164	ROOM 164	Α	Y	Ν						
	CLS165	ROOM 165	Α	Y	Ν						
	CLS166	ROOM 166	Α	Y	Ν						
	CLS167	ROOM 167	Α	Y	Ν						
	CLS170	ROOM 170	Α	Y	Ν						
	CLS174	ROOM 174	Α	Y	Ν						
	CLS176	ROOM 176	Α	Y	Ν						
	CLS178	ROOM 178	Α	Y	Ν						
	DOWNSTREAM	WITHIN 5 SERVICE CON	Α								
	MW001	NURSES OFFICE	I	Y							
	MW002	KITCHEN	I	Y							
	MW003	BOYS LAV	I	Y							
	MW004	BOYS LOCKER RM	I	Y							
	MW005	GIRLS LOCKER RM	I	Y							
	MW006	CLASS ROOM #3	I	Y							
	MW007	CLASS ROOM #7	I	Y							
	MW008	CLASS ROOM #8	I	Y							
	MW009	CLASS ROOM #9	I	Y							
	MW010	CLASS ROOM #10	Ι	Y							
	UPSTREAM	WITHIN 5 SERVICE CON	А								
00701 ENTRY POINT - WELLS 2, & 3	3	EP - WELLS 2 & 3	А								
53968 WEST WELL 2	2	WEST WELL 2	А								
53970 EAST WELL 3	2	EAST WELL 3	А								
53972 TREATMENT PLANT - WELLS 2 &											

3

		•		ic Health Drin	U		ction		
	Water	Quality M	lonitoring	and Complia		L. L.			
	PWS Name			Classifi	ication Po	pulation Own	ner Type	Primary Source	
CT0480062	CRYSTAL LAKE SCHO	OL		NT	NC	275	L	GW	
Local Address (w	here applicable)		Service	Residential Co	mmercial	Industrial	Combined	d Agricultural	
59 SOUTH ROAD			Connec	tions	2				
Towns Served: El	LLINGTON								
	W	ater System	Facility and	Sampling Point	t Invent	ory			
Water System Water Facility ID	r System Facility		ng Point Samplin D Descript	-	Tota Colifor tus Rule	m Copper	Asbestos	Stage WQP 2 DBPR	
53975 ATMC	SPHERIC TANK								
53978 HYDR	OPNEUMATIC TANK								
53979 PUMP	STATION								
		Cer	tified Opera	tor Information	1				
Water System F	acility: TREATME	NT PLANT - W	ELLS 2 & 3 (WS	F ID: 53972)					
Facility Classifica	tion: CLASS 2 TREA	MENT PLANT						Certification	
<b>Operator Name</b>		Opera	ator Type	Certification(s)				Expiration	
NIGRO, JR., VICT	OR N.	CHIEF C	PERATOR	WATER TREATMEN	IT PLANT O	PERATOR - CL	ASS II	6/30/2024	
				DISTRIBUTION SYST	TEM OPERA	ATOR - CLASS		6/30/2026	
NIGRO, SCOTT A.		ASSIGN	ED OPERATOR	DISTRIBUTION SYST	TEM OPERA	ATOR - CLASS	I	6/30/2025	
				WATER TREATMEN	IT PLANT O	PERATOR - CL	ASS II	6/30/2026	
NIGRO, DAVID		ASSIGN	ED OPERATOR	WATER TREATMEN	IT PLANT O	PERATOR - CL	ASS I	3/31/2025	
			Contact In	formation					
Name			Organizatio	on	Job Title				
Dr. Scott Nicol			Ellington Public Schools Superintendent						
Mailing Address	Line One	Mailing	Address Line Tw	0		City	State	Zip Code	
47 Main Street		P.O. Bo	x 179		Ellington		СТ	06029	
Business Phone	e Extension	Fax	Mobile Phone	Emergency Phone	Email Add	ress			
860-896-2300	117 8	860-896-2312			snicol@el	ingtonschool	s.net		
Contact Role(s):	Legal Contact								
Name			Organizatio	on			Job Title		
Mr. Gregory Klin	nan		Ellington P	ublic Schools	C	Director of Fac	ility		
Mailing Address	Line One	Mailing	Address Line Tw	0		City	State	Zip Code	
		47 Maii	n Street		Ellington		СТ	06029	
Business Phone	e Extension	Fax	Mobile Phone	Emergency Phone	Email Add	ress			
860-324-5344					gkliman@	ellingtonscho	ols.net		
Contact Role(s):	Administrative Con	tact							
Please note the	following:								
1 The residual di	sinfectant concentration	on must he measu	red at the same loc	ation and time as each to	atal coliform	sample			

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 Publi Water Quality Monitoring		0	ection
PWS ID PWS Name	Classificatio		ner Type Primary Source
CT0481033 BOLLES MOTORS INC	NTNC	40	P GW
Local Address (where applicable) Service	Residential Comm		Combined Agricultura
84 WEST ROAD, ELLINGTON Connect			
Towns Served: ELLINGTON			
Monitoring R	equirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600	-		
Asbestos (1094)		1 routir	ne (RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	<b>Compliance Status</b>
DISTRIBUTION (4)	1/1/18 - 12/31/26		
Total Coliform (3100)		1 rou	itine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Lead And Copper (PBCU)			routine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/23	6/1-9/30	Complete
	1/1/24 - 12/31/24	6/1-9/30	
Discipal Development (DDC)	1/1/25 - 12/31/25	6/1-9/30	
Physical Parameters (PPS) Sampling Point (Sampling Point ID)	Monitoring Dariad	1 rou Collection Period	itine (RT) per quarter Compliance Status
Select from Inventory of Active Sampling Points	Monitoring Period 10/1/23 - 12/31/23	conection period	Complete
Select norm inventory of Active Sampling Points	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)	7,1,2,1 3,30,21		
Inorganic Chemicals (IOCS)		1 routin	e (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/21 - 12/31/23		Complete
	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		
Nitrate And Nitrite (NOX)		1	routine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	<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		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	e (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)			itine (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		
	4/1/24 - 6/30/24		

	VS Name							ficatio TNC	-	ulation 40	Owr	ner Type	Primary S GW
Local Address (when					Service	Residenti		omme		ndustri	ial	Combine	-
84 WEST ROAD, ELL					Connection	s		1					0
Towns Served: ELLI	NGTON												
			M	onito	oring Req	uiremen	nts						
Water System Fac	cility: ENTRY	POINT (V											
Organic Chemica	ls (VOCS)									1	L rou	tine (RT)	per qu
Sampling Poin	t (Sampling Po	oint ID)				Monitorin	g Pei	riod	Collec	tion Pe	riod	Сотр	liance St
						7/1/24 - 9	9/30/	24					
			Oth	er Co	omplianc	e Schedu	ules						
Compliance Schedu	le Activity				_	D	ue D	ate		Achie	eved	Date	
SUBMIT LEAD CONS	SUMER NOTICE	E CERTIFICAT	ГЕ			12,	/29/2	2023					
SUBMIT LEAD SERV	ICE LINE INVER	NTORY				10,	/16/2	2024					
COMPLETE INITIAL I	LSL INVENTOR	Y				10,	/16/2	2024					
CROSS CONNECTIO	N SURVEY REP	ORT				3,	/1/20	)29					
		Water Sy	ystem F	acili	ity and Sa	ampling I	Poir	nt Inv	vento	ory			
Water									Total	Lead	and		
System Water Sy Facility ID	ystem Facility		Sampling ID	Point	Sampling Po Description	oint	St	C atus	oliforn Rule			Asbesto	WQP 2
00600 DISTRIBL	JTION SYSTEM		004		MENS ROOM	M SHOW		A	Y	2	2		
			006		MENS ROOM	M SERVICE D	Ε	А		2	2		
			4		DISTRIBUTIO	ON		А	Y				
			DOWNST	REAM	5 SERVICE C	ONNECTION	I	А	Y				
			UPSTRE	AM	5 SERVICE C	ONNECTION		А	Y				
00700 ENTRY P	OINT		3		ENTRY POIN	IT		А					
61078 WELL			2		WELL			A					
			Certi	fied	Operato	r Informa	atio	n					
Water System Fac				NSF II	D: 00600)								
Facility Classificatio	on: SMALL WA	TER SYSTEM											Certific
Operator Name			Operato			Certification							Expir
MARTIN, VALARIE			CHIEF OPI	-		SMALL WATE	ER SY	STEIM	JPERA	IOR			9/30/
					tact Info	rmation							
Name					ganization							Job Title	
Mr. Brian E. Bolles					olles Motors	nc				eneral N	/lana	-	7: 0
Mailing Address Lin	e One		Mailing A	ddress	s Line Two			C II in a		City		State	Zip Co
84 West Road Business Phone	Extension	Fax		Mahi	le Phone	Emorgonoul	Dhan	Ellin	-			СТ	0602
860-306-2426	Extension	860-875-3			IC FIIUIIE	Emergency I	TUN				)Boll	esMotors.	com
Contact Role(s): Ac	dministrative			. 0.wn	er			DUILE	.5141010		- 5010	2314101013.	0011
All				., 3									

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

			mey r	101110	01 mg u				Jonedan					
PWS ID	PWS Name						Class	ification	Population	Owne	er Type	Primary Sourc		
СТ0481033	BOLLES MOTOR	S INC					N	TNC	40		Р	GW		
Local Address (wh	nere applicable				Service	Resider	ntial C	ommerci	al Industri	al C	ombine	ed Agricultura		
84 WEST ROAD, E	LLINGTON				Connection	IS		1						
Towns Served: EL	LINGTON											,		
Name		Or	ganization		Job Title									
Ms. Darlene Russ	ell			Во	lles Motors	Inc			Office Ma	Office Manager				
Mailing Address L	ine One		Mailing	Address	Line Two				City		State	Zip Code		
84 West Road								Ellingto	on		СТ	06029		
Business Phone	Extension	Fax		Mobile Phone E			y Phon	e Email A	Address	ldress				
860-875-2595	105	860-875-	3038			860-306	-2426	bollesr	ollesmotorsgm@bollesmotors.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 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