	Connections	on outmont o	f Dublic II	ool+h	Duir	alrin	~ 117	oton C	action	
	Connecticut D Water (epartment d Juality Moni				`	_		ection	
PWS ID	PWS Name	economic for the contract of t	8						vner Type	Primary Source
CT0590114	CHURCH OF LATTER DA	Y SAINTS				IC	2		Р	GW
	(where applicable)		Service	Resident		ommerc		dustrial	Combine	_
1244 FLANDEI	* * * * * * * * * * * * * * * * * * * *		Connections			1				- Greenen
Towns Served										
		Moni	toring Requ	ireme	nts					
Water Syster	m Facility: DISTRIBUTION									
Total Colifor	rm (3100)							1 rc	utine (RT)	per quarter
	g Point (Sampling Point ID)		Monitorii	ng Peri	iod (Collecti	ion Period		liance Status
Select fro	om Inventory of Active Sam	npling Points	:	10/1/23 -	12/31/	/23			C	omplete
				1/1/24 -						omplete
				4/1/24 -	6/30/2	24				
				7/1/24 -	9/30/2	24				
Physical Par	ameters (PPS)							1 rc	outine (RT)	per quarter
Sampling Point (Sampling Point ID) Monitoring Period Colle							Collecti	ion Period	d Comp	liance Status
Select fro	om Inventory of Active San	npling Points	-	LO/1/23 -	12/31/	/23			C	omplete
				1/1/24 -	3/31/2	24			С	omplete
				4/1/24 -	6/30/2	24				
				7/1/24 -	9/30/2	24				
Water Syster	m Facility: ENTRY POIN	NT (WSF ID: 00700))							
Nitrate And	Nitrite (NOX)							:	1 routine (RT) per year
Sampling	g Point (Sampling Point ID)		Monitorii	ng Peri	iod (Collecti	ion Period	d Comp	liance Status
ENTRY PO	OINT (3)			1/1/23 - :					C	omplete
				1/1/24 - :	12/31/	24				omplete
				1/1/25 - :	12/31/	25				
	Wat	er System Faci	lity and Sar	npling	Poin	t Inve	entor	у		
Water								Lead and		
-	ater System Facility		t Sampling Poi	nt			_	Copper		Stage
Facility ID		ID	Description			itus	Rule	Rule Tie	er Asbestos	s WQP 2 DBP
00600 DIS	STRIBUTION SYSTEM	4	DISTRIBUTION			A	Υ			
			/ WITHIN 5 SER			A				
		UPSTREAM	WITHIN 5 SER	VICE CON		A				
	TRY POINT	3	ENTRY POINT			A				
21000 WE		2	WELL		,	A				
58578 TRI	EATMENT PLANT									
		Co	ntact Inforr	nation						
Name			Organization						Job Title	
Mr. Roy B. Mo	cDaniel		Natural Resource	s-Special	Proj		Mai	nager		
Mailing Addre	ess Line One	Mailing Addre	ss Line Two				Ci	ty	State	Zip Code
		1				1			1	

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.

Mfd 12Th Floor

Mobile Phone

Fax

801-240-2913

50 East North Temple St

Extension

Contact Role(s): Legal Contact, Owner

Business Phone

801-240-4656

Schedule Generation Date: 4/3/2024 Page 1

Salt Lake City

Emergency Phone Email Address

UT

mcdanielrb@churchofjesuschrist.org

84150

C	Connectic	ut Depa	rtme	nt of	Public	Health	Dri	nking	Water	Section		
	Wat	ter Qua	lity M	onit	oring a	nd Con	nplia	nce S	chedul	le		
PWS ID P	WS Name						Classif	ication	Population	Owner Type	Primary Source	
CT0590114 C	HURCH OF LAT	TER DAY SAI	NTS				N	IC	25	Р	GW	
Local Address (who	ocal Address (where applicable)					Resider	ntial Co	mmercia	al Industri	al Combin	ed Agricultural	
1244 FLANDERS ROAD					Connection	S						
Towns Served: GR	OTON											
Name				Org	ganization			Job Title				
Ms. Christine Sper	ncer			Ch	urch of Jesu	s Christ of	Lds		Hartford /	Admin Asst		
Mailing Address Li	ne One		Mailing A	Address	Line Two				City	State	Zip Code	
130 South St	130 South St							Cromw	ell	СТ	06516	
Business Phone	Extension	Fax		Mobile	e Phone	Emergenc	y Phone	Email A	ddress	<u>'</u>		
860-635-4035		860-835-	4036					spence	rca@church	nofjesuschrist	.org	
Contact Role(s):	Administrative (Contact	"		1			1				

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

	Connectic	ut Departme	nt of	f Public	Health I	Orin	king	Water	Se	ction	
	Wat	ter Quality M	lonit	oring a	nd Comp	oliai	nce So	chedul	e		
PWS ID	PWS Name				С	lassifi	cation P	opulation	Owr	ner Type	Primary Source
СТ0590204	MYSTIC MEDICA	L GROUP				N	С	25		Р	GW
Local Address	(where applicable)			Service	Residentia	al Cor	nmercial	Industri	al	Combine	d Agricultural
200 SANDY HO	LLOW ROAD			Connection	ns		1				
Towns Served	GROTON			'	1						
		N	/lonit	oring Red	quiremen	ts					
Water Syster	n Facility: DISTR	IBUTION SYSTEM	(WSF I	D: 00600)							
Total Colifor	m (3100)							1	rou	itine (RT)	per quarter
	Point (Sampling Po	oint ID)			Monitoring	, Perio	d Col	lection Pe			liance Status
Select fro	m Inventory of Acti	ve Sampling Points			10/1/23 - 1	2/31/2	23			C	omplete
					1/1/24 - 3	/31/24	4			С	omplete
					4/1/24 - 6	/30/24	4				
					7/1/24 - 9	/30/24	4				
Physical Par	ameters (PPS)							1	rou	itine (RT)	per quarter
-	Point (Sampling Po	oint ID)			Monitoring	, Perio	od Col	lection Pe			liance Status
Select fro	m Inventory of Acti	ve Sampling Points			10/1/23 - 1	2/31/2	23			С	omplete
					1/1/24 - 3	/31/24	4			С	omplete
					4/1/24 - 6	/30/24	4				
					7/1/24 - 9	/30/24	4				
Water Syster	n Facility: ENTRY	POINT (WSF ID:	00700)								
Nitrate And	Nitrite (NOX)								1	routine (RT) per year
	Point (Sampling Po	oint ID)			Monitoring	, Perio	od Col	lection Pe		-	liance Status
ENTRY PO	DINT (3)	·			1/1/23 - 12	2/31/2	:3			C	omplete
					1/1/24 - 12	2/31/2	4			C	omplete
					1/1/25 - 12	2/31/2	.5				
		Water System	Facili	ity and Sa				tory			
Water		-					Tot	al Lead	and		
System Wo	ter System Facility	Samplin	g Point	Sampling P	oint		Colife	rm Cop _l	per		Stage
Facility ID		II)	Description	1	Stat	tus Ru	le Rule	Tier	Asbestos	WQP 2 DBPR
00600 DIS	TRIBUTION SYSTEM	4		DISTRIBUTION	ON SYSTEM	Α	. Y				
		DOWNS	TREAM	WITHIN 5 S	ERVICE CON	Α					
		UPSTF	REAM	WITHIN 5 S	ERVICE CON	А					
00700 EN	TRY POINT	3	}	ENTRY POIN	NT	А					
21004 WE	LL	2	<u>.</u>	WELL		Α					
			Con	tact Info	rmation						
Name			0	rganization						Job Title	
Dr. James Sca	rles				ional Associa	tes					
Mailing Addre	ss Line One	Mailing	Addres	s Line Two				City		State	Zip Code
200 Sandy Ho	low Road	_					Mystic			СТ	06355
Business Ph	one Extension	Fax	Mobi	ile Phone	Emergency P	hone	Email Ad	dress		+ +	

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.

jscarles@gmail.com

860-861-2185

860-572-7758

Contact Role(s): Administrative Contact, Legal Contact

860-572-8911

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

		9 8		-P	9 0 1 1 0 01 011		
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0590204	MYSTIC MEDICAL GROUP		NC	25	Р	GW	
Local Address (w	Service	Residen	tial Commerci	ial Industri	al Combine	ed Agricultural	
200 SANDY HOL	LOW ROAD	Connections		1			
Towns Served: G	GROTON						

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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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 Water Quality Mon				_			1		
PWS ID	PWS Name	PWS Name Classification Population Owner Type Primary Source								
CT0590214	CHRIST UNITED METHODIST CHURCH				NC	25	Р		GW	
Local Address	(where applicable)	Resider	itial	Commerci	al Industr	ial Combir	ned	Agricultural		
200 HAZELNU	T HILL ROAD	Connections			1					
T C	CROTON					,				

Towns Served: GROTON						
Monito	ring Requirements					
Water System Facility: DISTRIBUTION SYSTEM (WSF ID	: 00600)					
Total Coliform (3100)		1 rout	ine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status			
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					
Physical Parameters (PPS) 1 routine (RT) per c						
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status			
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					
Water System Facility: ENTRY POINT (WSF ID: 00700)						
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status			
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete			
	1/1/24 - 12/31/24					
	1/1/25 - 12/31/25					
Other Co	mpliance Schedules					

 Compliance Schedule Activity
 Due Date
 Achieved Date

 RESPOND TO SANITARY SURVEY
 12/21/2019

Public Notification Requirements										
	Compliance	Notice	ice <u>Public Notification</u> <u>PN Certificati</u>							
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received				
Total Coliform M&R Violation	10/1/19 - 12/31/19	3	3/12/2021		3/22/2021					
Physical Parameters M&R Violation	10/1/19 - 12/31/19	3	3/12/2021		3/22/2021					
Total Coliform M&R Violation	1/1/20 - 3/31/20	3	4/30/2021		5/10/2021					
Physical Parameters M&R Violation	1/1/20 - 3/31/20	3	4/30/2021		5/10/2021					

	Wa	ter System Facili	ity and Sampling P	oint Ir	nvento	У		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
21005	WELL	2	WELL	Α				

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	Connectic	ut Depa	rtment	of Public	Health	ı Dr	inking	g Water	Section	1	
	Wa	ter Qua	lity Mon	itoring a	nd Con	npli	iance S	Schedul	e		
PWS ID	PWS Name					Clas	sification	Population	Owner Type	e Pri	imary Source
CT0590214	CHRIST UNITED	METHODIST	CHURCH				NC	25	Р		GW
Local Address (w	nere applicable)			Service	Resider	ntial	Commerci	al Industri	al Combir	ned	Agricultural
200 HAZELNUT H	ILL ROAD			Connections 1							
Towns Served: GI	ROTON										
			Co	ontact Info	rmation	1					
Name				Organization					Job Tit	le	
Mr. Austin Alvar	ez										
Mailing Address I	ine One	Mailing Addr	ess Line Two				City	State	ة	Zip Code	
200 Hazelnut Hill	Rd						Grotor		СТ		06340
Business Phone	Extension	Fax	Mo	Mobile Phone Emergency Phone Email Address							
860-445-0088											
Contact Role(s):	Legal Contact										
Name				Organization					Job Tit	le	
Reverend Abiot I	Moyo			Christ United	Methodist (Churc	h	Pastor In	Charge		
Mailing Address I	Mailing Addr	ess Line Two				City	State	9	Zip Code		
200 Hazelnut Hill Rd							Grotor	n CT 063			06340
Business Phone	Extension	Fax	Mo	obile Phone	Emergency	y Pho	ne Email A	Address			
860-445-0088					978-332	-6817	7 Church	office@Chri	stUMCGroto	on.cc	omcastbiz.ne
Contact Role(s):	Legal Contact										
Name	Organization Job Title										

Contact Role(s): Administrative Contact

Extension

Please note the following:

Mr. Jonathan Cooke

200 Hazelnut Hill Rd

Business Phone

860-445-0088

Mailing Address Line One

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

Mailing Address Line Two

Mobile Phone

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

Fax

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.

Christ United Methodist Church

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

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

End of schedule

Zip Code

06340

B. of Trustees Chair

State

CT

Churchoffice@ChristUMCGroton.comcastbiz.ne

City

Groton

Emergency Phone Email Address

860-376-1415

	Co	onnectic	ut Departme	ent of	f Public	Health I	Orin	king	Wa	ter S	Section	n	
		Wat	ter Quality N	I onit	oring a	nd Com	olia	nce S	che	dule			
PWS ID	PW	/S Name				C	lassifi	cation [opula	ation O	wner Ty	pe P	rimary Source
CT059023	34!	5 GOLD STAR	HIGHWAY - GROTOI	N			N	С	25	;	Р		GW
Local Add	ress (whe	re applicable)			Service	Residentia	al Co	mmercia	Inc	lustrial	Comb	oined	Agricultural
WINDSOR	RMOTEL				Connection	ns		1					
Towns Sei	rved: GRO	TON											
			r	Monit	oring Red	quiremen	ts						
Water Sy	stem Fac	ility: DISTR	IBUTION SYSTEM	(WSF I	D: 00600)								
Total Co	liform (3	3100)								1 r	outine	(RT)	per quarter
Sam	pling Poin	t (Sampling P	oint ID)			Monitoring	, Perio	od Co	llectic	n Perio	od Co	ompli	ance Status
Selec	ct from Inv	entory of Acti	ive Sampling Points			10/1/23 - 1	2/31/	23				Co	mplete
						1/1/24 - 3	/31/2	4					
						4/1/24 - 6	/30/2	4					
						7/1/24 - 9	/30/2	4					
Physical	Paramet	ers (PPS)								1 r	outine	(RT)	per quarter
Sam	pling Poin	t (Sampling P	oint ID)			Monitoring	, Perio	od Co	llectic	n Perio	od Co	ompli	ance Status
Selec	ct from Inv	entory of Acti	ive Sampling Points			10/1/23 - 1	2/31/	23				Co	mplete
						1/1/24 - 3	/31/2	4					
						4/1/24 - 6	/30/2	4					
						7/1/24 - 9	/30/2	4					
Water Sy	stem Fac	cility: ENTRY	Y POINT (WSF ID:	00700)									
Nitrate A	And Nitri	te (NOX)									1 routi	ne (R	T) per year
Sam	pling Poin	t (Sampling P	oint ID)			Monitoring	, Perio	od Co	llectio	n Perio	od Co	ompli	ance Status
ENTF	RY POINT (3)				1/1/23 - 12	2/31/2	23				Co	mplete
						1/1/24 - 12	2/31/2	24					
						1/1/25 - 12	2/31/2	25					
			Water System	Facil	ity and Sa	ampling P	oint	Inver	ntory	/			
Water								To	tal	Lead ar	nd		
System	-	stem Facility		_	Sampling P			_		Coppe			Stage
Facility ID)			D	Description		Sta	tus Ru	ile	Rule Ti	er Asbe	estos	WQP 2 DBPR
00600	DISTRIBL	JTION SYSTEM		4	DISTRIBUTION		Α	١ ١	′				
			DOWNS	STREAM	WITHIN 5 S		A	١.					
			UPST	REAM	WITHIN 5 S	ERVICE CON	Α	١					
00700	ENTRY P	TNIC		3	ENTRY POIN	NT	Α	١					
21006	WELL			2	WELL		Α	١					
				Con	tact Info	rmation							
Name				0	rganization						Job ⁻	Title	
Mr. Nick I	Patel			W	insor Motel				Own	er			
Mailing A	ddress Lin	e One	Mailing	Addres	s Line Two				Cit	y	Sta	te	Zip Code
345 Gold	Star Highv	vay						Groton			C.	Т	06340
Busines	s Phone	Extension	Fax	Mobi	ile Phone	Emergency P	hone	Email A	ddress			-	
000.00													

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860-333-6486

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

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

	Water Quarrey From	91 1119 arr	u 0011	TP.	idii co c	onean	. —	
PWS ID	ID PWS Name C					Population	Owner Type	Primary Source
CT0590234	345 GOLD STAR HIGHWAY - GROTON		NC	25	Р	GW		
Local Address (Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural	
WINDSOR MOTEL		Connections			1			

Towns Served: GROTON

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

End of schedule

	Connecticut De	partment of	Public H	ealth D	rinki	ng W	ater S	Section	
	Water O	uality Monit	oring and	d Comp	lianc	e Sch	edule	<u>)</u>	
PWS ID	PWS Name	<u> </u>	0 -						rimary Source
CT0598023	GROTON NEW LONDON	CHURCH OF CHRIST			NC		25	Р	GW
Local Address	s (where applicable)		Service	Residential	Comm	ercial I	ndustrial	Combined	Agricultural
151 SHEWVIL	LE ROAD		Connections					1	
Towns Serve	d: GROTON					·			
		Monito	oring Requ	irements	5				
Water Syste	em Facility: DISTRIBUTIO	N SYSTEM (WSF I	D: 00600)						
Total Colifc	orm (3100)						1 :	outine (RT)	per quarter
Samplin	g Point (Sampling Point ID)			Monitoring I	Period	Collec	tion Peri	od Compl	iance Status
Select fr	om Inventory of Active Samp	ling Points		10/1/23 - 12,	/31/23			Co	mplete
				1/1/24 - 3/3					
				4/1/24 - 6/3	-				
				7/1/24 - 9/3	30/24				
-	rameters (PPS)							routine (RT)	•
	g Point (Sampling Point ID)			Monitoring I		Collec	tion Peri	-	iance Status
Select fr	om Inventory of Active Samp	ling Points		10/1/23 - 12/				Сс	mplete
				1/1/24 - 3/3					
				4/1/24 - 6/3 7/1/24 - 9/3					
Mater Syste	em Facility: ENTRY POINT	. (MCE ID: 00700)		7/1/24-3/5	00/24				
•	•	(VV3F ID. 00700)						1 routing /	OT) nor voor
	d Nitrite (NOX) g Point (Sampling Point ID)			Monitoring I	Derind	Collec	tion Peri	-	RT) per year iance Status
	POINT (3)			1/1/23 - 12/		Conec	tion Fern		mplete
LIVINI	0111 (3)			1/1/24 - 12/					mpiete .
				1/1/25 - 12/					-
	Wate	r System Facili				vento	ry		
Water		•	•			Total	Lead a	nd	
System W	ater System Facility	Sampling Point	Sampling Poin	nt		Coliform	Сорре	er	Stage
Facility ID		ID	Description		Status	Rule	Rule T	ier Asbestos	WQP 2 DBPR
00600 DI	STRIBUTION SYSTEM	4	DISTRIBUTION	I SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SER	VICE CON	Α				
		MW001	MENS ROOM		Р	Υ	N		
		MW002	WOMENS RO	MO	Р	Υ	N		
		MW003	KITCHEN		P	Y	N		
		MW003-DS	KITCHEN DEEL	-	Р	Y	N		
		MW039-W	OFFICE WING		P	Υ	N		
00700 51	ITDV DOINT	UPSTREAM	WITHIN 5 SER	VICE CON	Α .				
	TRY POINT	3	ENTRY POINT		A				
10836 W	ELL 1	2	WELL #1		Α				
		Con	tact Inforr	nation					
Name		Or	rganization					Job Title	

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.

Mailing Address Line Two

Mobile Phone

Fax

International Church of Christ

Evangelist

City

Mike@grotoncoc.com

Mystic

Emergency Phone Email Address

Zip Code

06355

State

CT

Mr. Michael Kwasniewski

Mailing Address Line One

Extension

193 Daniel Brown Drive

Business Phone

317-640-9883

Connecticut Department of Public Health Drinking Water Section										
	Water Quality Monitoring and Compliance Schedule									
	PWS Name	Classification	Population	Owner Type	Prima					

PWS ID	PWS Name C					Population	Owner Type	Primary Source
CT0598023	GROTON NEW LONDON CHURCH OF CHRIST		NC	25	Р	GW		
Local Address (where applicable)		Service	Resider	itial	Commerci	al Industri	al Combine	ed Agricultural
151 SHEWVILLE ROAD		Connections					1	

Towns Served: GROTON

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

End of schedule

	Connecticut Dep	partment of	Public Health	Drink	ing Wa	ater Se	ction						
	Water Qu	ality Monit	oring and Com	pliand	e Sche	edule							
PWS ID													
CT137808	4 3175 GOLDSTAR HIGHWA	Υ		NC	4	.3	P GW						
Local Add	ress (where applicable)		Service Residen	tial Comm	nercial In	dustrial	Combined Agricultural						
3175 GOL	DSTAR HIGHWAY		Connections				2						
Towns Ser	Towns Served: GROTON												
		Monito	oring Requireme	nts									
Water Sy	stem Facility: DISTRIBUTION	I SYSTEM (WSF II	D: 00600)										
Total Co	liform (3100)					1 rou	tine (RT) per quarter						
Samı	oling Point (Sampling Point ID)		Monitori	ng Period	Collecti	ion Period	Compliance Status						
Selec	t from Inventory of Active Sampl	ing Points	10/1/23 -	12/31/23			Complete						
			1/1/24 -	3/31/24			Complete						
			4/1/24 -	6/30/24									
			7/1/24 -	9/30/24									
Physical	Parameters (PPS)					1 rou	tine (RT) per quarter						
Samı	oling Point (Sampling Point ID)		Monitori	ng Period	Collecti	ion Period	Compliance Status						
Selec	t from Inventory of Active Sampl	ing Points	10/1/23 -	12/31/23			Complete						
			1/1/24 -	1/1/24 - 3/31/24 C									
			4/1/24 -	4/1/24 - 6/30/24									
			7/1/24 -	9/30/24									
Water Sy	stem Facility: ENTRY POINT	(WSF ID: 00700)											
Nitrate	(1040)					1 rou	tine (RT) per quarter						
Samı	oling Point (Sampling Point ID)		Monitori	ng Period	Collecti	ion Period	Compliance Status						
ENTR	RY POINT (3)		10/1/23 -	12/31/23			Complete						
			1/1/24 -	3/31/24			Complete						
			4/1/24 -	4/1/24 - 6/30/24									
			7/1/24 -	7/1/24 - 9/30/24									
Nitrite (1041)					1 ו	outine (RT) per year						
Sam	oling Point (Sampling Point ID)		Monitori	ng Period	Collecti	ion Period	Compliance Status						
ENTR	RY POINT (3)		1/1/23 -	12/31/23			Complete						
			1/1/24 -	12/31/24			Complete						
			1/1/25 -	12/31/25									
	Water	System Facili	ty and Sampling	Point Ir	nventor	У							
Water					Total	Lead and							
System	Water System Facility		Sampling Point		Coliform	Copper	Stage						
Facility ID		ID	Description	Status		Rule Tier	Asbestos WQP 2 DBPR						
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM		Υ								
			WITHIN 5 SERVICE CON										
		UPSTREAM	WITHIN 5 SERVICE CON										
00700	ENTRY POINT	3	ENTRY POINT	Α									
58123	WELL #1	2	WELL #1	Α									
Contact Information													

Job Title Name Organization Mr. John Zelepos President - Owner Zelepos Property Mgmt Co. Mailing Address Line Two Zip Code Mailing Address Line One City State 56 West Main Street 06355 Mystic CT **Business Phone** Extension Fax Mobile Phone Emergency Phone Email Address 860-536-7469 860-536-5463 860-885-9077 izelepos@aol.com

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 Fubilic Health Drinking Water Section											
Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source			
CT1378084	1378084 3175 GOLDSTAR HIGHWAY					43	Р	GW			
Local Address (where applicable)		Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural			
3175 GOLDSTAR	Connections					2					
Towns Served: 0	GROTON										

Connecticut Department of Public Health Drinking Water Section

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 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

	Co		ut Departme ter Quality N								ection	
			ter Quality N	101111	or mg a							
PWS ID		/S Name				С			-	n Ow		Primary Source
CT0598064		COMPANIES,	INC.				N	С	35		Р	GW
Local Addre	ess (whe	re applicable)			Service Connection	Residentia	al Cor	mmercial	Indust	rial	Combined 1	Agricultural
Towns Serv	ed: GRO	TON										'
			N	/lonit	oring Red	quiremen	ts					
Water Sys	tem Fac	ility: DISTR	IBUTION SYSTEM	(WSF I	D: 00600)							
Total Coli	form (3	3100)								1 rou	utine (RT)	per quarter
	-	t (Sampling Po	oint ID)			Monitoring	, Perio	od Coll	ection P			iance Status
			ve Sampling Points			10/1/23 - 1						omplete
		,	P			1/1/24 - 3						omplete
						4/1/24 - 6	•					
						7/1/24 - 9						
Physical F	Daramet	ars (DDC)				1112423	, 30, 2	7		1 ro	utine (DT)	per quarter
-		t (Sampling Po	oint ID)			Monitoring	. Doric	nd Call	ection P			iance Status
			ive Sampling Points			10/1/23 - 1			ection F	eriou		omplete
Select	II OIII IIIV	rentory of Acti	ive Sampling Points									
						1/1/24 - 3					C	omplete
						4/1/24 - 6						
						7/1/24 - 9	/30/24	4				
•		•	POINT (WSF ID:	00700)								
Nitrate A		• •									=	RT) per year
		t (Sampling P	oint ID)			Monitoring			ection P	eriod		iance Status
ENTR	POINT (3)				1/1/23 - 12	2/31/2	.3			Co	omplete
						1/1/24 - 12	2/31/2	.4				
						1/1/25 - 12	2/31/2	!5				
			Water System	Facili	ity and Sa	ampling P	oint	Inven	tory			
Water								Tota	al Lead	d and	1	
,	Water S _j	stem Facility	•	_	Sampling P			Colifo	rm Co _l	-		Stage
Facility ID				D	Description		Sta	tus Rul	e Rul	e Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBL	ITION SYSTEM	1	1	DISTRIBUTION	ON SYSTEM	А	Y				
			DOWNS	TREAM	WITHIN 5 S	ERVICE CON	А	. Υ				
			UPST	REAM	WITHIN 5 S	ERVICE CON	А	Υ				
00700	ENTRY P	TNIC	3	3	ENTRY POIN	NT	А	1				
61643	WELL		2	2	WELL		А	1				
61695	TREATM	ENT PLANT										
				Con	tact Info	rmation						
Name				0	rganization						Job Title	
Ms. Andrea	a Puritz				r Companies,	, Inc.			Property	/ Man		
Mailing Add		e One	Mailing		s Line Two	, ··· - ·			City		State	Zip Code
477 Elm Pla		c one	IVIGIIIIS	, riddi C3.	C LINE I WO			Highland			IL	60035
Business		Extension	Fax	Mohi	le Phone	Emergency P						00000
Dasiness	. Hone	ZACCIISIOI1	IUA	141001	ic i none	z.ner geney i		Email Au				

847-710-7055

apuritz@frontlinerepartners.com

847-919-4401

Contact Role(s): Administrative Contact, Legal Contact

847-780-8065

Connecticut Department of Public Health Drinking Water Section										
Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source					
CT0598064	GR COMPANIES, INC.	NC	35	Р	GW					

Connections

Residential Commercial

Industrial

Combined

1

Service

Towns Served: GROTON

Please note the following:

Local Address (where applicable)

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End of schedule

Agricultural