| | | | | | - | | | |
|-----------------------|-----------------------------------|--------------|--------------------------------|---|------------|-------------------|---------------|--------------|
| | Connecticut Depa | rtment | of Public H | ealth D | rinking | g Water S | Section | |
| | Water Qua | lity Mon | itoring and | d Comp | liance S | Schedule | | |
| PWS ID | PWS Name | | | | | Population O | | imary Source |
| СТ0600014 | ANTHONYS OF GUILFORD | | | | NC | 25 | Р | GW |
| Local Address | (where applicable) | | Service | Residentia | Commerc | al Industrial | Combined | Agricultural |
| 2392 BOSTON | POST ROAD | | Connections | | 1 | | | |
| Towns Served | : GUILFORD | | | | | | | |
| | | Mon | itoring Requ | irement | s | | | |
| Water Syster | m Facility: DISTRIBUTION S | YSTEM (WSI | F ID: 00600) | | | | | |
| Total Colifo | rm (3100) | | | | | 1 r | outine (RT) j | per quarter |
| Sampling | Point (Sampling Point ID) | | | Monitoring | Period C | ollection Perio | | ance Status |
| Select fro | om Inventory of Active Sampling | Points | 1 | 10/1/23 - 12 | /31/23 | | Со | mplete |
| | | | | 1/1/24 - 3/ | 31/24 | | | |
| | | | | 4/1/24 - 6/ | | | | |
| | | | | 7/1/24 - 9/ | 30/24 | | | |
| - | ameters (PPS) | | | | | | outine (RT) | - |
| | Point (Sampling Point ID) | . | | Monitoring | | ollection Perio | | ance Status |
| Select fro | om Inventory of Active Sampling | Points |] | 1/1/23 - 12 | | | Co | mplete |
| | | | | 1/1/24 - 3/ 4/1/24 - 6/ | | | | |
| | | | | 4/1/24 - 8/ 7/1/24 - 9/ | | | | |
| Water Syster | m Facility: ENTRY POINT (V | VSE ID: 0070 | 0) | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 50724 | | | |
| - | Nitrite (NOX) | | •, | | | | 1 routine (R | T) ner vear |
| | Point (Sampling Point ID) | | | Monitoring | Period C | ollection Perio | | ance Status |
| ENTRY PO | | | | 1/1/23 - 12/ | | | | mplete |
| | | | | 1/1/24 - 12, | /31/24 | | | |
| | | | | 1/1/25 - 12, | /31/25 | | | |
| | | Public N | otification R | equirem | ents | | | |
| | | | Compliance | Notice | | otification | PN Cert | ification |
| Violation/Situ | ation | | Period | Tier | Required | Performed | Due to DPH | Received |
| Total Coliform | M&R Violation | 7, | /1/04 - 9/30/04 | 2 | 2/9/2005 | | 2/19/2005 | |
| | M&R Violation | | /1/04 - 12/31/04 | 2 | 6/23/2005 | | 7/3/2005 | |
| | M&R Violation | | /1/05 - 6/30/05 | 2 | 11/17/2005 | | 11/27/2005 | |
| Physical Parar | neters M&R Violation | | /1/04 - 12/31/04 | 3 | 5/24/2006 | | 6/3/2006 | |
| | Water S | ystem Fac | ility and San | npling Po | oint Inve | ntory | | |
| Water | | | | | | otal Lead ar | | |
| | iter System Facility | | nt Sampling Poir | nt | , | iform Coppe | | Stage |
| | | 1D 4 | DISTRIBUTION | | Status | Rule Rule Ti Y | er Asbestos | WQP Z DBPI |
| 00600 DIS | TRIBUTION SYSTEM | - | DISTRIBUTION M WITHIN 5 SER | | A A | Ŷ | | |
| | | UPSTREAM | | | A | | | |
| 00700 EN | TRY POINT | 3 | ENTRY POINT | | A | | | |
| 21007 WE | | 2 | WELL | | A | | | |
| | EATMENT PLANT | - | | | | | | |
| | | 6 | ontact Inform | nation | | | | |
| Name | | | | | | | Joh Title | |
| Name Mr. Potor Cio | | | Organization | ford | | Ownor | Job Title | |
| Mr. Peter Cio | | Mailing Adds | Anthonys of Guil | loiu | | Owner | Ctata | Zip Codo |
| Mailing Addre | SS LINE ONE | Mailing Addr | ESS LINE I WO | | | City | State | Zip Code |

| | | | | 0 | / | | | | | | | | |
|------------------|------------------|--------------|---------------|-------------|-------|----------|-------|------------|------|-----------|-------|--------|----------------|
| PWS ID | PWS Name | | | | | | Clas | sification | Рор | ulation | Owne | r Type | Primary Source |
| СТ0600014 | ANTHONYS OF G | UILFORD | | | | | | NC | | 25 | F | o | GW |
| Local Address (w | here applicable) | | | Service | | Residen | tial | Commerc | ial | Industria | al Co | ombine | d Agricultural |
| 2392 BOSTON PC | OST ROAD | | | Connec | tions | | | 1 | | | | | |
| Towns Served: G | | | | ÷ | | · | | | | | | | |
| ZODZ DUSLUH PUS | i Rudu. | | | | | | | Guino | ru | | | CI | 00457 |
| Business Phone | e Extension | Fax | М | obile Phone | Er | mergency | / Pho | ne Email | Addr | ess | | | |
| 203-453-4121 | | | | | | | | | | | | | |
| Contact Role(s): | Administrative | Contact, Leg | al Contact, C | wner | | | | | | | | | |
| Please note the | following: | | | | - | | | | | | | | |

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

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

| | Connecticut Departme | | | | 0 | | | |
|----------------------|---------------------------------------|--------------------|--------------|----------|-------|-----------------|--------------|-------------------|
| | Water Quality M | onitoring an | . | | | | | |
| PWS ID | PWS Name | | С | | n Po | | wner Type Pi | |
| CT0600064 | 2311 BOSTON POST ROAD - GUILFOR | | | NC | | 33 | P | GW |
| | (where applicable) | Service | Residentia | | cial | Industrial | Combined | Agricultural |
| WESTWOODS | | Connections | | 1 | | | | |
| Towns Served: | | | | | | | | |
| | N | Ionitoring Requ | irement | ts | | | | |
| Water Systen | n Facility: DISTRIBUTION SYSTEM | (WSF ID: 00600) | | | | | | |
| Total Colifor | m (3100) | | | | | 1 r | outine (RT) | per quarter |
| Sampling | Point (Sampling Point ID) | | Monitoring | Period | Colle | ection Perio | od Compli | ance Status |
| Select fro | m Inventory of Active Sampling Points | | 10/1/23 - 12 | 2/31/23 | | | Со | mplete |
| | | | 1/1/24 - 3, | /31/24 | | | | |
| | | | 4/1/24 - 6, | /30/24 | | | | |
| | | | 7/1/24 - 9, | /30/24 | | | | |
| - | ameters (PPS) | | | | | | outine (RT) | - |
| | Point (Sampling Point ID) | | Monitoring | | Colle | ection Perio | | ance Status |
| Select fro | m Inventory of Active Sampling Points | | 10/1/23 - 12 | | | | Со | mplete |
| | | | 1/1/24 - 3, | | | | | |
| | | | 4/1/24 - 6, | | | | | |
| | | | 7/1/24 - 9/ | /30/24 | | | | |
| Water Systen | n Facility: ENTRY POINT (WSF ID: C | 0700) | | | | | | |
| Nitrate (104 | 10) | | | | | 1 r | outine (RT) | per quarter |
| Sampling | Point (Sampling Point ID) | | Monitoring | Period | Colle | ection Perio | od Compli | ance Status |
| ENTRY PC | DINT (3) | | 10/1/23 - 12 | | | | Со | mplete |
| | | | 1/1/24 - 3, | /31/24 | | | | |
| | | | 4/1/24 - 6, | /30/24 | | | | |
| | | | 7/1/24 - 9/ | /30/24 | | | | |
| | Nitrite (NOX) | | | | | | 1 routine (R | T) per year |
| Sampling | Point (Sampling Point ID) | | Monitoring | Period | Coll | ection Perio | od Compli | ance Status |
| ENTRY PC | DINT (3) | | 1/1/23 - 12 | | | | Со | mplete |
| | | | 1/1/24 - 12 | | | | | |
| | | | 1/1/25 - 12 | 2/31/25 | | | | |
| | Publi | c Notification R | equiren | nents | | | | |
| | | Compliance | Notice | Public | Noti | <u>fication</u> | PN Cert | i <u>fication</u> |
| Violation/Situ | | Period | Tier | Require | d | Performed | Due to DPH | Received |
| | M&R Violation | 7/1/09 - 9/30/09 | 2 | 1/7/201 | | | 1/17/2010 | |
| | neters M&R Violation | 7/1/09 - 9/30/09 | 3 | 12/14/20 | 10 | | 12/24/2010 | |
| Total Coliform | M&R Violation | 7/1/10 - 9/30/10 | 2 | 2/10/201 | .1 | | 2/20/2011 | |
| | M&R Violation | 4/1/10 - 6/30/10 | 2 | 2/10/201 | | | 2/20/2011 | |
| | M&R Violation | 1/1/10 - 3/31/10 | 2 | 2/10/201 | | | 2/20/2011 | |
| | M&R Violation | 10/1/10 - 12/31/10 | - | 4/16/201 | | | 4/26/2011 | |
| | trite M&R Violation | 1/1/10 - 12/31/10 | 2 | 4/16/201 | | | 4/26/2011 | |
| | neters M&R Violation | 7/1/10 - 9/30/10 | 3 | 1/11/201 | | | 1/21/2012 | |
| | neters M&R Violation | 4/1/10 - 6/30/10 | 3 | 1/11/201 | | | 1/21/2012 | |
| | neters M&R Violation | 1/1/10 - 3/31/10 | 3 | 1/11/201 | .2 | | 1/21/2012 | |
| Physical Param | neters M&R Violation | 10/1/10 - 12/31/10 | 3 | 3/16/201 | .2 | | 3/26/2012 | |

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule PWS ID **PWS Name** Classification Population Owner Type Primary Source 2311 BOSTON POST ROAD - GUILFORD Ρ CT0600064 NC 33 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections WESTWOODS PLAZA 1 Towns Served: GUILFORD Water System Facility and Sampling Point Inventory **Total** Lead and Water Sampling Point Sampling Point Water System Facility System Coliform Copper Staae ID Description Facility ID Rule Rule Tier Asbestos WQP 2 DBPR Status 00600 DISTRIBUTION SYSTEM 4 DISTRIBUTION SYSTEM γ Δ DOWNSTREAM WITHIN 5 SERVICE CON A UPSTREAM WITHIN 5 SERVICE CON Α 00700 ENTRY POINT 3 ENTRY POINT Α WELL 2 WELL 21012 A **Contact Information** Name Organization Job Title Mr. Allen D'antonio W. W. Post LLC Owner Mailing Address Line One Mailing Address Line Two Citv State Zip Code 2028 Boston Post Road P. O. Box 361 Guilford 06437 CT **Business Phone** Emergency Phone Email Address Extension Fax Mobile Phone 203-453-6500 203-458-7632 203-458-8065 mei2028@comcast.net Contact Role(s): Administrative Contact, Legal Contact Name Job Title Organization W W Post LLC Mailing Address Line One Mailing Address Line Two Zip Code City State 2028 Boston Post Rd Guilford CT 06437 **Business Phone Mobile Phone** Emergency Phone Email Address Extension Fax Contact Role(s): Owner Please note the following:

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

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

3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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

| | Commontion | | | Dublic | |): | 1 | Matar | | |
|------------------|---------------------|---------------------|--------|--------------|----------------------------|---------|----------|----------------|-------------|----------------|
| | | ut Departme | | | | | 0 | | | |
| | Wat | ter Quality M | onit | oring a | nd Comp | olia | nce S | chedule |)) | |
| PWS ID | PWS Name | | | | C | lassifi | cation F | Population C | Owner Type | Primary Source |
| СТ0600124 | ST JOHNS EPISCO | OPAL CHURCH | | | | N | с | 25 | Р | GW |
| Local Address (| where applicable) | | | Service | Residentia | al Co | mmercia | I Industrial | Combine | d Agricultural |
| 129 LEDGE HILI | L ROAD | | | Connectio | ns | | 1 | | | |
| Towns Served: | GUILFORD | | | | | | | | | |
| | | N | lonit | oring Re | quirement | ts | | | | |
| Water System | n Facility: DISTR | IBUTION SYSTEM | (WSF I | D: 00600) | | | | | | |
| Total Colifor | • • | | | | | | | | - |) per quarter |
| | Point (Sampling Po | | | | Monitoring | | | llection Perio | | oliance Status |
| Select from | m inventory of Acti | ve Sampling Points | | | 10/1/23 - 1 | | | | | Complete |
| | | | | | 1/1/24 - 3, 4/1/24 - 6, | | | | (| Complete |
| | | | | | | - | | | | |
| Physical Para | ameters (PPS) | | | | //1/24-9/ | , 50/2 | + | 1 - | outing (PT |) per quarter |
| - | Point (Sampling Po | oint ID) | | | Monitoring | Perio | nd Co | Ilection Perio | - | liance Status |
| | | ive Sampling Points | | | 10/1/23 - 12 | | | | | Complete |
| Sciectifor | | | | | 1/1/24 - 3 | | | | | Complete |
| | | | | | 4/1/24 - 6, | | | | | |
| | | | | | 7/1/24 - 9 | | | | | |
| Water System | n Facility: ENTRY | POINT (WSFID: 0 | 0700) | | | | | | | |
| - | Nitrite (NOX) | • | | | | | | | 1 routine | (RT) per year |
| | Point (Sampling Po | oint ID) | | | Monitoring | Perio | od Co | llection Perio | | oliance Status |
| ENTRY PO | | | | | 1/1/23 - 12 | | | | - | Complete |
| | | | | | 1/1/24 - 12 | 2/31/2 | 24 | | | - |
| | | | | | 1/1/25 - 12 | 2/31/2 | 25 | | | |
| | | Publi | c Not | tification | Requiren | nent | ts | | | |
| | | | C | ompliance | Notice | P | ublic No | tification | PN Ce | ertification |
| Violation/Situa | ation | | | Period | Tier | Re | quired | Performed | Due to DP | H Received |
| Distribution Co | lor MCL Violation | | 7/1, | /05 - 9/30/0 | 5 2 | 11/1 | 17/2005 | | 11/27/200 | 5 |
| | | Water System | Facili | ity and S | ampling P | oint | t Inver | ntory | | |
| Water | | | | | | | Tot | tal Lead a | nd | |
| | ter System Facility | | | Sampling I | | | Colif | | | Stage |
| Facility ID | | ID | | Description | | Sta | | | ier Asbesto | s WQP 2 DBPR |
| 00600 DIST | TRIBUTION SYSTEM | | | | ION SYSTEM | A | | (| | |
| | | | | | SERVICE CON | A | | | | |
| 00700 517 | | UPSTR | | | SERVICE CON | A | | | | |
| | RY POINT | 3 | | ENTRY POI | IN I | A | | | | |
| 21016 WEL | | 2 | | WELL | | A | 1 | | | |
| | | | | | ormation | | | | | |
| Name | No. 1 D. 1 | | | rganization | | | | | Job Title | |
| | ne Neel-Richard | N A - 11* | | | copal Church | | | Interim Vica | | 7:0 0!- |
| Mailing Addres | | Mailing | Addres | s Line Two | | | C.,:If | City | State | Zip Code |
| 129 Ledge Hill I | | | Male | lo Dharr - | Emeran | h a = - | Guilford | | СТ | 06437 |
| Business Pho | | Fax | IODIVI | ile Phone | Emergency P | | | Juress | | |
| 203-457-109 | | Jwper | | | 203-453-89 | JOÖ | | | | |
| | Eegal Contact, C | JWIIEI | | | | | | | | |

| | | ~ | | 0 | | 1 | | | | |
|-------------------|------------------|-----------|--------------|---------------|--------------|-------|------------|--------------|--------------|-----------------|
| PWS ID | PWS Name | | | | | Clas | sification | Population | Owner Type | Primary Source |
| СТ0600124 | ST JOHNS EPISCO | PAL CHURC | CH | | | | NC | 25 | Р | GW |
| Local Address (w | here applicable) | | | Service | Resider | ntial | Commerc | ial Industri | al Combine | ed Agricultural |
| 129 LEDGE HILL F | ROAD | | | Connecti | ons | | 1 | | | |
| Towns Served: G | UILFORD | | | ÷ | | · | | | | |
| Name | | | | Organizatior | I | | | | Job Titl | e |
| Reverend Maure | en Lederman | | | St. John's Ep | iscopal Chur | ch | | | | |
| Mailing Address I | ine One | | Mailing Addr | ess Line Two | | | | City | State | Zip Code |
| 129 Ledge Hill Ro | ad | | | | | | Guilfo | rd | СТ | 06437 |
| Business Phone | e Extension | Fax | M | obile Phone | Emergenc | y Pho | ne Email | Address | | |
| 203-457-1094 | | | | | | | stjohn | snorthguilfo | rd@gmail.cor | n |
| Contact Role(s): | Administrative (| Contact | | | | | | | | |
| Please note the f | ollowing: | | | | | | | | | |

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

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

Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related 3. 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

| | Connecticut Dep Water Ou | artment of ality Monit | | | | <u> </u> | | | cuon | |
|---------------|-----------------------------|------------------------|-------------|--------------|---------|----------|----------|------|------------|--------------|
| PWS ID | PWS Name | | or mg an | | | | | - | ner Type P | rimary Sourc |
| СТ0609074 | THE LITTLE STORE | | | | NC | | 31 | | P | GW |
| | (where applicable) | | Service | Residential | Comm | ercial | Industri | ial | Combined | Agricultura |
| 2802 DURHAM | | | Connections | | 1 | | | | | |
| Towns Served: | GUILFORD | | | | | | | | | |
| | | Monit | oring Requ | uirement | s | | | | | |
| Water Systen | n Facility: DISTRIBUTION | | | | | | | _ | | |
| Total Colifor | m (3100) | | | | | | | 1 ro | utine (RT |) per month |
| | Point (Sampling Point ID) | | | Monitoring | Period | Colle | ction Pe | | | iance Status |
| Select fro | m Inventory of Active Sampl | ing Points | | 11/1/23 - 11 | /30/23 | | | | Co | omplete |
| | · · · | - | | 12/1/23 - 12 | /31/23 | | | | | omplete |
| | | | | 1/1/24 - 1/ | | | | | | mplete |
| | | | | 2/1/24 - 2/ | | | | | | omplete |
| | | | | 3/1/24 - 3/ | - | | | | | omplete |
| | | | | 4/1/24 - 4/ | | | | | | • |
| | | | | 5/1/24 - 5/ | | | | | | |
| | | | | 6/1/24 - 6/ | | | | | | |
| | | | | 7/1/24 - 7/ | | | | | | |
| | | | | 8/1/24 - 8/ | | | | | | |
| | | | | 9/1/24 - 9/ | | | | | | |
| | | | | 10/1/24 - 10 | | | | | | |
| Physical Para | ameters (PPS) | | | -, , - | , - , | | | 1 ro | utine (RT |) per month |
| - | Point (Sampling Point ID) | | | Monitoring | Period | Colle | ction Pe | | | iance Status |
| | m Inventory of Active Sampl | ing Points | | 11/1/23 - 11 | | | | | | omplete |
| | , | 0 | | 12/1/23 - 12 | | | | | | omplete |
| | | | | 1/1/24 - 1/ | | | | | | omplete |
| | | | | 2/1/24 - 2/ | | | | | | omplete |
| | | | | 3/1/24 - 3/ | | | | | | omplete |
| | | | | 4/1/24 - 4/ | | | | | | mpiece |
| | | | | 5/1/24 - 5/ | | | | | | |
| | | | | 6/1/24 - 6/ | | | | | | |
| | | | | 7/1/24 - 7/ | | | | | | |
| | | | | 8/1/24 - 8/ | | | | | | |
| | | | | 9/1/24 - 9/ | | | | | | |
| | | | | 10/1/24 - 10 | | | | | | |
| Water System | n Facility: ENTRY POINT | (WSF ID: 00700) | | | | | | | | |
| Nitrate And | Nitrite (NOX) | | | | | | | 1 | routine (I | RT) per year |
| Sampling | Point (Sampling Point ID) | | | Monitoring | Period | Colle | ction Pe | | - | iance Status |
| ENTRY PO | DINT (3) | | | 1/1/23 - 12/ | /31/23 | | | | Co | omplete |
| | | | | 1/1/24 - 12/ | /31/24 | | | | | |
| | | | | 1/1/25 - 12/ | | | | | | |
| | Water | System Facili | ity and Sai | npling Po | oint In | vent | ory | | | |
| Water | | | | | | Total | - | and | | |
| System Wat | ter System Facility | Sampling Point | | nt | | Colifor | | - | | Stage |
| Facility ID | | ID | Description | | Status | Rule | Rule | Tier | Asbestos | WQP 2 DBP |
| 00600 DIST | TRIBUTION SYSTEM | 4 | DISTRIBUTIO | N | А | | | | | |
| 00000 010 | | | | • | | | | | | |

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule PWS ID PWS Name Classification Population Owner Type Primary Source Ρ CT0609074 THE LITTLE STORE NC 31 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 2802 DURHAM ROAD 1 Towns Served: GUILFORD Water System Facility and Sampling Point Inventory **Total** Lead and Water Sampling Point Sampling Point Water System Facility System Coliform Copper Staae ID Description Facilitv ID Rule Rule Tier Asbestos WQP 2 DBPR Status UPSTREAM WITHIN 5 SERVICE CON Δ 00700 ENTRY POINT 3 ENTRY POINT A 2 WELL 1 Α 52194 WELL 1 **Contact Information** Job Title Organization Name Mr. Joseph Depoto Depoto Family, LLC Owner State Mailing Address Line One Mailing Address Line Two Zip Code City 2802 Durham Road Guilford СТ 06437 **Business Phone** Extension Fax **Mobile Phone** Emergency Phone Email Address 203-457-0009 203-915-7039 ten4joed@gmail.com Contact Role(s): Administrative Contact, Legal Contact, Owner Please note the following:

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

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

| | cticut Depart | | | | | | <u> </u> | | ection | |
|---------------------------------------|------------------------|----------------|------------|---------------|---------|-------------------|----------|--------------|------------|---------------------|
| 1 | Water Qualit | y Monit | oring a | nd Com | plia | ince | Sch | edule | | |
| PWS ID PWS Name | | | | (| Classif | fication | Popu | Ilation Ow | ner Type F | rimary Source |
| CT0609084 LAKE QUON | NNIPAUG | | | | N | IC | 2 | 25 | L | GW |
| Local Address (where application | able) | | Service | Residenti | al Co | ommer | cial Ir | ndustrial | Combined | Agricultural |
| 3910 DURHAM ROAD | | | Connectio | ns | | 1 | | | | |
| Towns Served: GUILFORD | | | | | | | | | | |
| | | | | quiremen | ts | | | | | |
| Water System Facility: | DISTRIBUTION SYST | TEM (WSF II | D: 00600) | | | | | | | |
| Total Coliform (3100) | | | | | | | | | | per quarter |
| Sampling Point (Sampl | | | | Monitoring | | | Collect | ion Period | Compl | iance Status |
| Select from Inventory of | of Active Sampling Po | oints | | 4/1/24 - 6 | | | | | | |
| | -• | | | 7/1/24 - 9 |)/30/2 | 24 | | | | |
| Physical Parameters (PP | - | | | | | | | | | per quarter |
| Sampling Point (Sampl | | · . | | Monitoring | - | | Collect | ion Period | Compl | iance Status |
| Select from Inventory o | of Active Sampling Po | oints | | 4/1/24 - 6 | | | | | | |
| | | | | 7/1/24 - 9 | 0/30/2 | 24 | | | | |
| Water System Facility: E | • | - ID: 00700) | | | | | | | | |
| Nitrate And Nitrite (NO) | • | | | | | | | | - | RT) per year |
| Sampling Point (Sampl | ing Point ID) | | | Monitoring | - | | Collect | ion Period | | iance Status |
| ENTRY POINT (3) | | | | 1/1/23 - 12 | | | | | | omplete |
| | | | | 1/1/24 - 12 | | | | | C | omplete |
| | | | | 1/1/25 - 12 | | 25 | | | | |
| | | Other Co | omplian | ce Schedu | les | | | | | |
| Compliance Schedule Activit | ty | | | D | ue Da | ite | | Achieved | Date | |
| SEASONAL START UP COMP | LETION | | | 4/ | /1/202 | 24 | | | | |
| | Water Syst | tem Facili | ity and S | ampling F | Point | t Inv | ento | ry | | |
| Water | - allita . Carr | mulium Daint | Concelling | Delint | | | Total | Lead and | 1 | <i>c</i> : |
| System Water System Fa Facility ID | icility Sar | mpling Point | | | _ | | liform | | Ashestas | Stage WQP 2 DBPR |
| 00600 DISTRIBUTION SY | | 4 | DISTRIBUTI | | | a <u>tus</u> A | nule | Kule Hel | ASDESIUS | WQF 2 DDFK |
| | | 4 WNSTREAM | | - | | A | | | | |
| | | JPSTREAM | | SERVICE CON | | A | | | | |
| 00700 ENTRY POINT | | 3 | ENTRY POI | | | A | | | | |
| 52198 WELL 1 | | 2 | WELL 1 | | | A | | | | |
| | | | | rmation | - | | | | | |
| Name | | | ganization | | | | | | Job Title | |
| Mr. Rick Maynard | | | - | ord Parks & R | ec | | Dir | ector | | |
| Mailing Address Line One | Ma | ailing Address | | | | | C | ity | State | Zip Code |
| 32 Church St | | - | | | | Guilfo | | | СТ | 06437 |
| Business Phone Extens | sion Fax | Mobi | le Phone | Emergency P | hone | Email | Addre | SS | | |
| 203-453-8068 | 203-453-845 | 56 | | 203-453-8 | | | | ci.guilford. | ct.us | |
| Contact Role(s): Administra | ative Contact, Legal (| Contact | | | | | | | | |

| PWS ID | PWS Name | | | Classification | Population | Owner Type | Primary Source |
|------------------|-------------------|-------------|---------|----------------|--------------|------------|-----------------|
| СТ0609084 | LAKE QUONNIPAUG | | | NC | 25 | L | GW |
| Local Address (v | where applicable) | Service | Residen | tial Commerc | ial Industri | al Combine | ed Agricultural |
| 3910 DURHAM | ROAD | Connections | | 1 | | | |
| Towns Served: | GUILFORD | | | · · | | | |

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

| (| Connectic Wa | ut Depar ter Quali | | | | | | <u> </u> | | | ction | |
|-----------------------|------------------------------|-----------------------|---------------|---------------|-----------|---------|-----------|------------------|------------|-------|-----------|----------------------------|
| PWS ID | PWS Name | | | | | Cla | ssificati | on Po | pulation | Owr | ner Type | Primary Source |
| СТ0609094 | BITTNER PARK | | | | | | NC | | 25 | | L | GW |
| Local Address (wi | here applicable) | | | Service | Resid | ential | Comm | ercial | Industria | al | Combined | d Agricultural |
| 1400 DURHAM R | | | | Connectio | ons | | 1 | | | | | |
| Towns Served: GI | UILFORD | | | | | | | | | | | |
| | | | Moni | toring Re | quirem | ents | 5 | | | | | |
| Water System F | acility: DISTR | RIBUTION SYS | STEM (WSF | ID: 00600) | | | | | | | | |
| Total Coliform | • • | | | | | | | | 1 | rou | | per quarter |
| | oint (Sampling P | | | | Monito | | | Colle | ection Per | riod | | liance Status |
| Select from | Inventory of Act | ive Sampling F | Points | | 10/1/2 | | | | | | C | omplete |
| | | | | | 4/1/2 | - | | | | | | |
| | | | | | 7/1/2 | 4 - 9/3 | 0/24 | | | | | |
| Physical Param | | | | | | | | | | | | per quarter |
| | oint (Sampling P | - | . | | Monito | | | Colle | ection Per | riod | | liance Status |
| Select from | Inventory of Act | ive sampling F | POINTS | | 10/1/2 | | | | | | C | omplete |
| | | | | | 4/1/2 | | | | | | | |
| Water System F | acility: ENTD | | | 1 | //1/2 | 4 - 9/3 | 0/24 | | | | | |
| Nitrate And Nit | • | | SF ID. 00700 | ') | | | | | | 1 | routino (| |
| | oint (Sampling P | oint ID) | | | Monito | orina P | Period | Colle | ction Pe | | - | RT) per year liance Status |
| ENTRY POIN | | onnenby | | | 1/1/23 | - | | conc | | nou | | omplete |
| | 1 (3) | | | | 1/1/24 | | | | | | | ompiete |
| | | | | | 1/1/25 | | | | | | | |
| | | | Other (| Complian | | | | | | | | |
| Compliance Sche | dule Activity | | | | | Due | Date | | Achie | ved I | Date | |
| CROSS CONNECT | ION SURVEY REF | PORT | | | | 3/1/ | /2022 | | | | | |
| CROSS CONNECT | ION SURVEY REP | PORT | | | | 3/1/ | /2023 | | | | | |
| CROSS CONNECT | ION SURVEY REP | PORT | | | | 3/1/ | /2024 | | | | | |
| SEASONAL START | UP COMPLETIO | N | | | | 4/1/ | /2024 | | | | | |
| | | Water Sy | stem Faci | lity and S | Samplin | ig Po | oint In | vent | ory | | | |
| Water System Water | ⁻ System Facility | S | ampling Poin | t Sampling | Point | | | Total Colifor | | | | Stage |
| Facility ID | | | ID | Descriptio | n | | Status | Rule | Rule | Tier | Asbestos | WQP 2 DBPI |
| 00600 DISTRI | BUTION SYSTEM | 1 | 4 | DISTRIBUT | ION | | А | | | | | |
| | | C | OWNSTREAM | | | | А | | | | | |
| | | | UPSTREAM | WITHIN 5 | | ON | А | | | | | |
| | ' POINT | | 3 | ENTRY PO | INT | | Α | | | | | |
| 52202 WELL | 1 | | 2 | WELL 1 | | | Α | | | | | |
| | | | Со | ntact Info | ormatio | n | | | | | | |
| Name | | | (| Organization | | | | | | | Job Title | |
| Mr. Rick Maynar | d | | 1 | Town of Guilf | ord Parks | & Rec | | C | irector | | | |
| Mailing Address L | ine One | ٦ | Mailing Addre | ss Line Two | | | | | City | | State | Zip Code |
| 32 Church St | | | | | | | Gui | ilford | | | СТ | 06437 |
| Business Phone | e Extension | Fax | Mol | bile Phone | Emergen | icy Pho | | | | | | |
| 203-453-8068 | , <u> </u> | 203-453-84 | | | 203-45 | 3-806 | 8 ma | ynardr | @ci.guilfo | ord.c | t.us | |
| Contact Role(s): | Administrative | Contact, Lega | l Contact | | | | | | | | | |

| PWS ID | PWS Name | | | Classi | fication | Population | Owner Type | Primary Sourc |
|-----------------|-------------------|-------------|---------|---------|----------|-------------|------------|----------------|
| СТ0609094 | BITTNER PARK | | | 1 | NC | 25 | L | GW |
| Local Address (| where applicable) | Service | Residen | tial Co | ommercia | al Industri | al Combine | ed Agricultura |
| 1400 DURHAM | ROAD | Connections | | | 1 | | | |
| Towns Served: | GUILFORD | | | | | 1 | · | |

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| | Connecticut Dep | | | | | <u> </u> | | | ction | |
|---------------------|------------------------------|-----------------|--------------|------------------------|---------|-------------|----------|-------|------------|---------------------|
| PWS ID | PWS Name | ality Monit | oring an | | | | | | | ino ru Couro |
| CT0609114 | NEW HAVEN SPORTSMAN | | | | NC | | 50 | Owi | P | rimary Source GW |
| | (where applicable) | I S CLUB INC. | Service | Residentia | - | orcial | Industri | 2 | Combined | Agricultura |
| 4158 DURHAI | | | Connections | Residentia | | lercial | muustri | aı | 1 | Agricultura |
| Towns Served | | | | | | | | | 1 | |
| | | Monit | oring Requ | iromont | ۲c | | | | | |
| Water Syste | m Facility: DISTRIBUTION | | • • | | | _ | _ | - | _ | |
| Total Colifo | orm (3100) | | | | | | 1 | . rou | tine (RT) | per quarter |
| | g Point (Sampling Point ID) | | | Monitoring | Period | Colle | ction Pe | | | ance Status |
| Select fr | om Inventory of Active Sampl | ing Points | | 10/1/23 - 12 | 2/31/23 | | | | Со | mplete |
| | | | | 4/1/24 - 6/ | /30/24 | | | | | |
| | | | | 7/1/24 - 9/ | /30/24 | | | | | |
| Total Colifo | orm (3100) | | | | | | | 3 re | epeat (RP) | per period |
| Samplin | g Point (Sampling Point ID) | | | Monitoring | Period | Colle | ction Pe | riod | Compli | ance Status |
| Select fr | om Inventory of Active Sampl | ing Points | | 12/28/23 - | 1/2/24 | | | | | |
| Total Colifo | orm (3100) | | | | | 3 te | mporar | y ro | utine (TR) | per month |
| Samplin | g Point (Sampling Point ID) | | | Monitoring | Period | Colle | ction Pe | riod | Compli | ance Status |
| Select fr | om Inventory of Active Sampl | ing Points | | 1/1/24 - 1/ | /31/24 | | | | | |
| Physical Pa | rameters (PPS) | | | | | | 1 | l rou | tine (RT) | per quarter |
| | g Point (Sampling Point ID) | | | Monitoring | Period | Colle | ction Pe | riod | Compli | ance Status |
| Select fr | om Inventory of Active Sampl | ing Points | | 10/1/23 - 12 | | | | | | mplete |
| | | | | 1/1/24 - 3/ | | | | | Со | mplete |
| | | | | 4/1/24 - 6/ | | | | | | |
| | | | | 7/1/24 - 9/ | /30/24 | | | | | |
| | m Facility: ENTRY POINT | (WSF ID: 00700) | | | | | | | | |
| | Nitrite (NOX) | | | | | | | | - | T) per year |
| | g Point (Sampling Point ID) | | | Monitoring | | Colle | ction Pe | riod | | ance Status |
| ENTRY P | OINT (3) | | | 1/1/23 - 12 | | | | | | mplete |
| | | | | 1/1/24 - 12 | | | | | Со | mplete |
| | | | • | 1/1/25 - 12 | /31/25 | | | | | |
| | m Facility: DRILLED WELL | (WSF ID: 59870 |) | | | | - | | . () | |
| E. Coli (301 | • | | | | | C 11 | | | | per period |
| | g Point (Sampling Point ID) | | | Monitoring | | Colle | ction Pe | riod | Compli | ance Status |
| DRILLED | WELL (2) | System Facil | ity and Sar | 12/27/23 - nnling P | | wont | orv | | | |
| Water | Water | eystern r den | | | Sint II | Total | - | and | | |
| | ater System Facility | Sampling Point | Sampling Poi | nt | | Colifor | | | | Stage |
| Facility ID | | ID | Description | | Status | Rule | Rule | Tier | Asbestos | WQP 2 DBP |
| 00600 DI | STRIBUTION SYSTEM | 2 | GENERATED E | ВҮ ВАТСН | А | Y | | | | |
| | | 3 | GENERATED E | ВҮ ВАТСН | А | Y | | | | |
| | | 4 | DISTRIBUTION | N SYSTEM | А | | | | | |
| | | 4-1 | UTILITY SINK | | А | Y | | | | |
| | | 4-2 | MEN'S ROOM | | А | Y | | | | |
| | | 4-3 | LADIES ROON | 1 | А | Y | | | | |
| | | 4-4 | KITCHEN | | А | Y | | | | |
| | | 4-5 | | 5 | A | Y | | | | |

BATHROOM

| | | - 0- | | <u>I</u> | | | - | |
|------------------|---------------------------------|-------------|---------|----------|-------------|-----------|------------|-----------------|
| PWS ID | PWS Name | | | Classi | ification P | opulation | Owner Type | Primary Source |
| СТ0609114 | NEW HAVEN SPORTSMAN'S CLUB INC. | | | 1 | NC | 50 | Р | GW |
| Local Address (v | where applicable) | Service | Residen | tial Co | ommercial | Industria | al Combine | ed Agricultural |
| 4158 DURHAM | ROAD | Connections | | | | | 1 | |
| Towns Served: (| GUILFORD | | | | | · | | |

| Water | | | | Total | Lead and | | | |
|------------------------------|----------------|----------------------|--------|----------|-----------|----------|-----|--------|
| System Water System Facility | Sampling Point | Sampling Point | | Coliform | Copper | | | Stage |
| Facility ID | ID | Description | Status | Rule | Rule Tier | Asbestos | WQP | 2 DBPF |
| | DOWNSTREAM | WITHIN 5 SERVICE CON | А | | | | | |
| | SP11 | 4-2 | А | Y | | | | |
| | UPSTREAM | WITHIN 5 SERVICE CON | А | | | | | |
| 00700 ENTRY POINT | 3 | ENTRY POINT | А | | | | | |
| 59870 DRILLED WELL | 2 | DRILLED WELL | А | | | | | |
| 61896 TREAMENT PLANT | | | | | | | | |
| | Con | tact Information | | | | | | |

| | | | U | ontact mit | ormation | | | | |
|-------------------------------------|---------------|--------------|--------------|---------------|-----------------|-------------------------|-------|----------|--|
| Name | | | Organization | l | | Job Title | | | |
| Mr. Wolfgang Hinz | | | | New Haven S | Sportsman'S Clu | Member | | | |
| Mailing Address Line One Mailing Ad | | | Mailing Add | ress Line Two | | City | State | Zip Code | |
| 4158 Durham Road | | | | Guilford | СТ | 06437 | | | |
| Business Phone | Extension | Fax | М | obile Phone | Emergency Phone | Email Address | | | |
| 203-988-0266 | | | | | | wolfgang.hinz@gmail.com | | | |
| Contact Role(s): A | dministrative | Contact. Lea | al Contact | | | | | | |

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