	Connecticut D	epartment of	Public F	Health	Drink	ing W	ater	Sec	ction	
	Water (Quality Monit	oring an	d Com	plianc	e Sch	edul	e		
PWS ID	PWS Name	<u>C</u>	0		<u>Classificat</u>				er Type P	rimary Source
CT0630024	GOODWIN CONSERVAT	TION CENTER			NC	-	25		S	GW
Local Addres	ss (where applicable)		Service	Resident	ial Comm	nercial I	ndustria	al C	Combined	Agricultura
23 POTTER F	ROAD		Connections		1	L				
Towns Serve	ed: HAMPTON									
		Monito	oring Requ	uiremer	nts					
Water Syst	em Facility: DISTRIBUTIO	ON SYSTEM (WSF II	D: 00600)							
Total Colif	orm (3100)						1	rout	ine (RT)	per quarter
Sampli	ng Point (Sampling Point ID)		Monitorin	g Period	Collec	tion Pei	riod	Compli	iance Status
Select f	rom Inventory of Active Sam	npling Points		10/1/23 - 3	12/31/23				Co	mplete
				1/1/24 - 3	3/31/24				Co	mplete
				4/1/24 - 6	6/30/24					
				7/1/24 - 9	9/30/24					
Physical Pa	arameters (PPS)						1	rout	ine (RT)	per quarter
Sampli	ng Point (Sampling Point ID)		Monitorin	g Period	Collec	tion Pei	riod	Compli	iance Status
Select f	rom Inventory of Active San	npling Points		10/1/23 - 3	12/31/23				Co	mplete
				1/1/24 - 3	3/31/24				Co	mplete
				4/1/24 - (-					
				7/1/24 - 9	9/30/24					
Water Syst	em Facility: ENTRY POIN	IT (WSF ID: 00700)								
	d Nitrite (NOX)							1 r		RT) per year
	ng Point (Sampling Point ID)		Monitorin		Collec	tion Pei	riod	Compli	iance Status
ENTRY	POINT (3)			1/1/23 - 1						mplete
				1/1/24 - 1					Co	mplete
				1/1/25 - 1						
	Wate	er System Facili	ity and Sa	mpling I	Point Ir	nvento	ry			
Water						Total	Lead	and		
	Vater System Facility	Sampling Point		int		Coliform				Stage
Facility ID		ID	Description		Status		Rule	Tier .	Asbestos	WQP 2 DBPI
00600 D	ISTRIBUTION SYSTEM	101	KITCHEN SINI		Α	Y				
		102	BATHROOM		Α	Υ				
		4	DISTRIBUTIO		Α	Y				
		DOWNSTREAM			Α					
		UPSTREAM	WITHIN 5 SEF							
	NTRY POINT	3	ENTRY POINT		Α					
	VELL	2	WELL		Α					
60759 T	REATMENT PLANT									

				Contact Inf	ormation				
Name				Organization	1			Job Title	
Mr. David Cooley				Deep-Engine	neering Unit Supv Civil Engineer				
Mailing Address Lin	e One		Mailing A	ddress Line Two		City State Z			Zip Code
163 Great Hill Road						Portland	ł	СТ	06480
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	e Email Address			
860-342-2215		860-344-2	2560	860-205-7552	860-424-3333	david.cooley@ct.gov			

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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

		21000 200000 100000	9 8			-011100			
	PWS ID PWS Name					ssification	Population	Owner Type	Primary Source
Local Address (where applicable) Service Residential Commercial Industrial Combined Agricu	CT0630024	GOODWIN CONSERVATION CENTER				NC	25	S	GW
	Local Address (w	here applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultur
23 POTTER ROAD Connections 1	23 POTTER ROAD		Connections			1			

Towns Served: HAMPTON

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

	Conne	cticut Dep	artment of	Public F	lealth D	rinki	ng W	ater	Se	ction	
		Water Qu	ality Monit	oring an							
PWS ID	PWS Nam				Cl	assificati	on Pop		Owr	ner Type Pri	mary Source
CT0630064			ATHOLIC CHURCH			NC		25		Р	GW
	ess (where appli	cable)		Service	Residentia			Industria	al	Combined	Agricultural
	SWAMP ROAD			Connections		2					
Towns Serv	ed: HAMPTON										
				oring Requ	uirement	:S					
	•	DISTRIBUTION	SYSTEM (WSF II	D: 00600)							
	form (3100)									tine (RT) p	-
_	ing Point (Sam				Monitoring		Collec	tion Per	iod		nce Status
Select	from Inventory	of Active Sampli	ng Points		10/1/23 - 12					Con	nplete
					1/1/24 - 3/						
					4/1/24 - 6/						
					7/1/24 - 9/	30/24					
_	Parameters (P										er quarter
	ing Point (Samp				Monitoring		Collec	tion Per	iod		nce Status
Select	from Inventory	of Active Sampli	ng Points		10/1/23 - 12					Con	nplete
					1/1/24 - 3/						
					4/1/24 - 6/						
					7/1/24 - 9/	30/24					
•			(WSF ID: 00700)								
	nd Nitrite (NC	•								routine (R1	
-	ing Point (Sam	oling Point ID)			Monitoring		Collec	tion Per	iod		nce Status
ENTRY	POINT (3)				1/1/23 - 12					Con	nplete
					1/1/24 - 12						_
		.1.1. 104 .		. /	1/1/25 - 12						
	Mor	ithly Water	System Facil	ity (WSF)	Level Mo	nitorii	ng Re	quirer	nei	nts	
Water Sys	tem Facility: I	ENTRY POINT (WSFID: 00700)								
Analyte	•	Monitoring Red	quirement (Summa	ary Type)	Operat	ing Limit				Samples Re	q/Month
рН		Entry Point pH	Monitoring (PHRD)	Minimu	um: 7 PH	l			4	
Start Da	ate: 3/1/2018			Complia	ance History	:	Operat	ing Limit	t	Monitori	ng
				Monito	ring Period		-	ance Sta		Complian	ce Status:
				11/1/20	23 - 11/30/2	2023					
				12/1/20	23 - 12/31/2	2023					
				1/1/202	4 - 1/31/202	24					
				2/1/202	4 - 2/29/202	24					
				3/1/202	4 - 3/31/202	24					
		Water	System Facili	ty and Sai	mpling P	oint In	vento	ory			
Water							Total	Lead o			
-	Water System F	acility	Sampling Point		nt		Coliforn			Achaetas !	Stage
Facility ID	DICTRIBUTE OF	VCTEN 4	ID	Description	N CVCTTA A	Status	Rule	Kule	ııer	ASDESTOS I	NQP 2 DBPR
00600 1	DISTRIBUTION S	YSTEIVI	4	DISTRIBUTION		A	Υ				
			DOWNSTREAM			A					
00700	ENITOV BODIT		UPSTREAM	WITHIN 5 SEF		A					
	ENTRY POINT		3	ENTRY POINT		Α .					
21084 \	WELL		2	WELL		Α					

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55159 TREATMENT PLANT

	Water Quality Monit				C	,	e	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0630064 OUR LADY OF LOURDES CATHOLIC CHURCH					NC	25	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
41 CEDAR SWAMP ROAD		Connections			2			

Connecticut Department of Public Health Drinking Water Section

Towns Served: HAMPTON

			Contact Inf	ormation					
			Organization	1		Job Title			
njoe			Our Lady of	Lasalette					
e One		Mailing A	Address Line Two	ess Line Two City				Zip Code	
					Brooklyn CT		06234		
Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	dress			
	860-774-0	0679			ourladybrooklyn@gmail.com				
	e One	e One Extension Fax	e One Mailing	Organization njoe Our Lady of e One Mailing Address Line Two Extension Fax Mobile Phone	e One Mailing Address Line Two Extension Fax Mobile Phone Emergency Phone	Organization njoe Our Lady of Lasalette e One Mailing Address Line Two Brooklyn Extension Fax Mobile Phone Emergency Phone Email Address Line Two	Organization njoe Our Lady of Lasalette e One Mailing Address Line Two City Brooklyn Extension Fax Mobile Phone Emergency Phone Email Address	Organization Job Title njoe Our Lady of Lasalette e One Mailing Address Line Two City State Brooklyn CT Extension Fax Mobile Phone Emergency Phone Email Address	

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

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End of schedule

	Connecticut De	partment of	Public H	[ealth]	Drir	nking	Wa	ater Se	ction		
		uality Monit									
PWS ID	PWS Name	dancy 1.10111c	or mg am						ner Tyne F	rimary Source	
CT063123		ON VALLEY – INN			N		2		P	GW	
	ress (where applicable)	OH VALLET INTO	Service	Residenti		mmercial	_	-	Combined	_	
	STREET AND ROUTE 6		Connections	resident	u. 00			aastriai	1	, ignouncer an	
	rved: HAMPTON										
		Monito	oring Requ	iremen	its						
Water Sy	stem Facility: DISTRIBUTIO										
Total Co	oliform (3100)							1 rou	tine (RT)	per quarter	
	pling Point (Sampling Point ID)			Monitorin	g Perio	od Col	lecti	on Period		iance Status	
	ct from Inventory of Active Samp	ling Points		10/1/23 - 1	- L2/31/	23			Co	omplete	
				1/1/24 - 3	3/31/2	4				· ·	
				4/1/24 - 6							
				7/1/24 - 9	9/30/2	4					
Physical	Parameters (PPS)							1 rou	tine (RT)	per quarter	
-	pling Point (Sampling Point ID)			Monitorin	g Perio	od Col	Collection Period Compliance Status				
Selec	ct from Inventory of Active Samp	ling Points	:	10/1/23 - 1	- L2/31/	'23			Co	omplete	
	· · · · · · · · · · · · · · · · · · ·			1/1/24 - 3	3/31/2	4				-	
				4/1/24 - 6							
				7/1/24 - 9							
Water Sy	stem Facility: ENTRY POINT	(WSF ID: 00700)									
Nitrate A	And Nitrite (NOX)							1	routine (I	RT) per year	
	pling Point (Sampling Point ID)			Monitorin	g Perio	od Col	lecti	on Period	=	iance Status	
ENT	RY POINT (3)			1/1/23 - 1	2/31/2	23			Co	omplete	
				1/1/24 - 1	2/31/2	24					
			_	1/1/25 - 1	2/31/2	25					
		Other C	ompliance	Schedu	ıles						
Complian	ce Schedule Activity			D	ue Dat	te		Achieved I	Date		
RESPOND	OND TO SANITARY SURVEY 1/11/2024										
	Wate	r System Facili	ity and Sar	npling I	Point	t Inven	tor	У			
Water						Tot	al	Lead and			
System	Water System Facility	Sampling Point		nt		Colife	orm	Copper		Stage	
Facility II	O	ID	Description		Sta	tus Ru	le	Rule Tier	Asbestos	WQP 2 DBPR	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	I SYSTEM	P	Y A					
		DOWNSTREAM	WITHIN 5 SER	VICE CON	P	A					
		UPSTREAM	WITHIN 5 SER	VICE CON	P	4					
00700	ENTRY POINT	3	ENTRY POINT		P	4					
61067	WELL 1	2	WELL 1		F	4					
		Con	tact Inforr	nation							
Name		Oı	rganization						Job Title		
Mr. Craig	Gates		olumbia Ford								
	ddress Line One	Mailing Address	s Line Two				Cit	ty	State	Zip Code	
PO Box 13		_				North W		•	СТ	06256	
		'				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.

Mobile Phone

Business Phone

860-228-2883

Extension

Contact Role(s): Administrative Contact

Fax

Emergency Phone Email Address

cgates@columbiaford.com

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

		<u> </u>		1			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0631234	STONEHURST AT HAMPTON VALLEY – INN			NC	25	Р	GW
Local Address (v	vhere applicable)	Service	Residen	tial Commerci	al Industri	al Combine	ed Agricultural
39 DRAIN STREET AND ROUTE 6		Connections				1	
T	LANADTONI						

Towns Served: HAMPTON

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

End of schedule

	Connecticut De	•				_			
	Water Qı	iality Monit	oring and	Comp	olianc	ce Scl	hedule		
PWS ID	PWS Name			Cl	assificat	ion Po	pulation O	wner Type P	rimary Source
CT0631244	STONEHURST AT HAMPT	ON VALLEY – BARN			NC		25	Р	GW
Local Addre	ess (where applicable)		Service F	Residentia	I Comm	nercial	Industrial	Combined	Agricultural
39 DRAIN S	TREET AND ROUTE 6		Connections					1	
Towns Serv	ed: HAMPTON								
		Monito	oring Requi	rement	:S				
Water Syst	tem Facility: DISTRIBUTION	N SYSTEM (WSF II	D: 00600)						
Total Coli	form (3100)						1 r	outine (RT)	per quarter
Sampl	ling Point (Sampling Point ID)		M	onitoring	Period	Colle	ction Perio	d Compli	iance Status
Select	from Inventory of Active Samp	ling Points	10	/1/23 - 12	2/31/23			Co	mplete
			1	./1/24 - 3/	31/24				
			4	/1/24 - 6/	/30/24				
			7	//1/24 - 9/	'30/24				
Physical P	Parameters (PPS)						1 r	outine (RT)	per quarter
Sampl	ing Point (Sampling Point ID)		M	onitoring	Period	Colle	ection Perio	d Compli	ance Status
Select	from Inventory of Active Samp	ling Points	10	/1/23 - 12	2/31/23			Co	mplete
			1	/1/24 - 3/	31/24				
				/1/24 - 6/					
			7	//1/24 - 9/	30/24				
Water Syst	tem Facility: ENTRY POINT	(WSF ID: 00700)							
Nitrate A	nd Nitrite (NOX)							1 routine (F	RT) per year
Sampl	ing Point (Sampling Point ID)		M	onitoring	Period	Colle	ection Perio	d Compli	ance Status
ENTRY	POINT (3)		1,	/1/23 - 12	/31/23			Со	mplete
			1,	/1/24 - 12	/31/24				
			1,	/1/25 - 12	/31/25				
		Other Co	ompliance S	Schedu	les				
Compliance	Schedule Activity			Du	e Date		Achieve	d Date	
SUBMIT LEA	AD SERVICE LINE INVENTORY			10/1	16/2024				
COMPLETE	INITIAL LSL INVENTORY			10/1	16/2024				
	Water	System Facili	ity and Sam	pling P	oint Ir	nvent	ory		
Water						Total	Lead ar	nd	
	Water System Facility		Sampling Point			Colifor			Stage
Facility ID		ID	Description		Status	Rule	Rule Ti	er Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION S	SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVI	ICE CON	Α				
		UPSTREAM	WITHIN 5 SERVI	ICE CON	Α				
00700 E	ENTRY POINT	3	ENTRY POINT		Α				
61076	WELL 1	2	WELL 1		Α				
		Con	tact Inform	ation					
Name		Or	rganization					Job Title	
Mr. Craig G	iates	Co	olumbia Ford						

Mr. Craig Gates Columbia Ford Mailing Address Line One Mailing Address Line Two City State Zip Code PO Box 130 06256 North Windham CT **Business Phone** Extension Fax Mobile Phone Emergency Phone Email Address 860-228-2883 cgates@columbiaford.com Contact Role(s): Administrative Contact

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

				1			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0631244	STONEHURST AT HAMPTON VALLEY – BARN			NC	25	Р	GW
Local Address (where applicable)		Service	Residential Commerci		al Industri	al Combine	ed Agricultural
39 DRAIN STREET AND ROUTE 6		Connections				1	
	IAAADTON						

Towns Served: HAMPTON

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End of schedule