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

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PWS ID	PWS Name			Classi	ification	Population	Owner Type	Primary Source
CT0730021	JEWETT CITY WATER CO-HILL-N-DALE				С	146	Р	GW
Local Address (where applicable)		Service	Resider	ntial C	Commercia	al Industri	al Combine	ed Agricultural
		Connections	24					

Towns Served: LISBON			
Monitor	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Chlorine Residual (1012)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/21 - 12/31/29		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Disinfectant Byproducts - TTHM & HAA5 (DBP)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
3 STRNAD ROAD (JCWC002)	1/1/23 - 12/31/23	7/1-7/31	Complete
	1/1/24 - 12/31/24	7/1-7/31	
	1/1/25 - 12/31/25	7/1-7/31	
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/21 - 12/31/23	6/1-9/30	Complete
	1/1/24 - 12/31/26	6/1-9/30	
	1/1/27 - 12/31/29	6/1-9/30	
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete

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	t of Public H	lealth	Dı	rinking	Water	Section	l	
	Water Quality Mo	nitoring and	d Con	npl	iance S	Schedul	e		
PWS ID	ID PWS Name Classification Population Owner Type Primary Sour								mary Source
CT0730021	JEWETT CITY WATER CO-HILL-N-DALE			С	146	Р		GW	
Local Address	(where applicable)	Residential		Commerci	al Industri	al Combin	ed	Agricultural	
		Connections	24						

Towns Served: LISBON			
Monitorin	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	0600)		
Physical Parameters (PPS)		1 rou	itine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Net Gross Alpha (4000)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Uranium (4006)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Combined Radium-226/228 (4010)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Inorganic Chemicals (IOCS)		1 routine	(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 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		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/22 - 12/31/24		

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	vvaler Quarity MC	mitoring am	a Compi	lance	: 30	neau	ie		
PWS ID	PWS Name		Cla	ssificatio	n Po	pulation	Ow	ner Type P	rimary Sour
CT0730021	JEWETT CITY WATER CO-HILL-N-DALE			С		146		Р	GW
Local Address	(where applicable)	Service Connections	Residential 24	Comme	rcial	Industr	ial	Combined	Agricultur
Towns Served	: LISBON	Service Connections 24							
	Mo	onitoring Requ	irements	;					
Water Syste	m Facility: ENTRY POINT (WSF ID: 00	700)							
Organic Che	emicals (VOCS)					1 ro	utin	e (RT) per	three year
Samplin	g Point (Sampling Point ID)		Monitoring F	Period	Colle	ection Pe	riod	Compl	iance Status
			1/1/25 - 12/3	31/27					
Water Syste	m Facility: WELL #2 (WSF ID: 515)								
E. Coli (301	•						1 ro		•
Samplin	g Point (Sampling Point ID)				Colle	ection Pe	riod	Compl	iance Status
WELL #2	(2)								•
		:							<u> </u>
				-					
								Co	mplete
				-					
				-					
				-					
					-				
Mator Systo	m Facility: WELL #1 (WSEID: E16)		10/1/24 - 10/	31/24					
-	m Facility: WELL #1 (WSF ID: 516)						1	utine (DT	\
E. Coli (301	4) g Point (Sampling Point ID)		Monitorina F	Period	Colle	oction De			· ·
WELL #1					Conc		iiou		
VV L L L π 1	(2)								-
		<u> </u>							
			10/1/24 10/	21/24					

	Conne	ecticut De	partment of	Public H	ealth	Drink	ing W	ater :	Section	
		Water Qu	uality Monit	oring and	d Com	plian	ce Sch	edule	<u>, </u>	
PWS ID	PWS Nam			<u> </u>						Primary Source
CT0730021	JEWETT C	ITY WATER CO-	HILL-N-DALE			С		146	Р	GW
Local Address (where appli	icable)		Service	Resident	ial Comr	mercial	Industria	Combine	d Agricultura
				Connections	24					
Towns Served:	LISBON									
Water System	Facility: I	ENTRY POINT	(WSFID: 00700)							
Analyte		Monitoring Re	equirement (Summa	ary Type)	Oper	ating Lim	it		Samples	Req/Month
Chlorine		Entry Point Ch	lorine Residual Mor	nitoring (CHLR)	Mini	mum: 0.2	MG/L		[Daily
Start Date:	7/1/2003			Complia	nce Histo	ry:	Operat	ing Limit	Monit	oring
					ng Perio		Compli	ance Sta	tus: Comp	iance Status:
					23 - 11/30					
					23 - 12/31					
					l - 1/31/2					
					l - 2/29/2					
					l - 3/31/2					
Analyte		_	equirement (Summ		-	ating Lim				Req/Month
рН	_ /. /	Entry Point ph	Monitoring (PHRD			mum: 7.0	PH			Daily
Start Date:	7/1/2003			-	nce Histo	-		ing Limit		_
					ng Period		Compli	ance Sta	tus: Comp	iance Status:
					23 - 11/30					
					23 - 12/31 I - 1/31/2	-				
					l - 2/29/2					
					l - 3/31/2					
			Othor C	ompliance						
		•	Other C	omphance						
Compliance Sci						Due Date	_	Achiev	ed Date	
SUBMIT CCR TO						/30/2024				
SUBMIT CCR CE						3/9/2024				
SUBMIT LEAD S)/16/2024				
COMPLETE INIT)/16/2024 3/1/2025	•			
CROSS CONNEC	ZHON JOKV	-	· Custom Fosili	turned Con						
		watei	System Facili	ity and San	ipiing	Point I				
Water System Wat	er System F	acility	Campling Point	Camplina Dei	n#		Total	Lead a		Charac
System Wat Facility ID	er system F	чини	Sampling Point ID	Description	ıı	· ·	Coliforn Rule			Stage s WQP 2 DBP
	RIBUTION S	SYSTEM	3	H-N-D		Status A	Y	naie i	ici Assesto	5 HQ. 2001
00000 0131	MECHONS	, 1 0 1 L IVI	4	GENERIC DIST	RIBUTION		Y			
			-	SEIVERIC DIST			'			

Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPF
00600	DISTRIBUTION SYSTEM	3	H-N-D	Α	Υ			
		4	GENERIC DISTRIBUTION	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		JCW001	33 STRNAD RD.	Α	Υ			
		JCWC001	33 STRNAD ROAD	Α	Υ			
		JCWC002	3 STRNAD ROAD	Α				Υ
		JCWC003	23 KENYON ROAD	Α		1		
		JCWC004	3 KENYON ROAD	Α		1		
		JCWC005	13 KENYON ROAD	Α		1		
		JCWC006	10 KENYON ROAD	Α		3		
		JCWC007	20 KENYON ROAD	Α		3		
		JCWC008	10 STRNAD ROAD	Α		3		

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 Departm Water Quality				U			l	
PWS ID	PWS Name			-				Pri	imary Source
CT0730021	JEWETT CITY WATER CO-HILL-N-DA	ALE			С	146	Р		GW
Local Address	(where applicable)	Service	Residen	ntial	Commercial Industr		ial Combine		Agricultural
		Connections	24						
		<u>'</u>				'			

	Wa	ter System Facili	ity and Sampling	Point In	vento	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 2 DBPR
		JCWC009	11 STRNAD ROAD	Α		3		
		JCWC010	14 STRNAD ROAD	Α		3		
		JCWC011	15 STRNAD ROAD	Α		3		
		JCWC012	18 STRNAD ROAD	Α		3		
		JCWC013	20 STRNAD ROAD	Α		3		
		JCWC014	21 STRNAD ROAD	Α		3		
		JCWC015	25 STRNAD ROAD	Α		3		
		JCWC016	30 STRNAD ROAD	Α		3		
		JCWC017	32 STRNAD ROAD	Α		3		
		JCWC018	9 STRNAD ROAD	Α			Υ	
		UPSTREAM	WITHIN 5 SERVICE CON	I A				
00700	ENTRY POINT	3	ENTRY POINT	Α				
132	HILL-N-DALE TREATMENT STATION							
51177	ATMOSPHERIC TANK							
515	WELL #2	2	WELL #2	А				
516	WELL #1	2	WELL #1	Α				

Certified Operator Information

Water System Facility: HILL-N-DALE TREATMENT STATION (WSF ID: 132)

Facility Classification: CLASS 1 TREA	ATMENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
VIOLETTE, JOHN	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	12/31/2026
SHERWOOD, ROBERT	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2026
		WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2026
FILLION, DAVID	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	12/31/2024
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	3/31/2025
LEVASSEUR, NICHOLAS P.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	9/30/2024
MANGERI, JOSEPH	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	9/30/2025
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2025

				Contact Inf	formation					
Name				Organization	า		Job Title			
Mr. Jonathan S. Av	ery			The Hazardville Water Company President						
Mailing Address Line One Mailing Addr			ddress Line Two		City		State	Zip Code		
481 Taylor Road			P.O. Box 1	248		Enfield		СТ	06083	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email A	mail Address			
860-749-0779		860-749-5	5381		860-376-2963	javery@hazardvillewater.com				
Contact Role(s): Le	gal Contact C	lwnor								

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.

	Connectic	ut Depart	ment of Public	Health	n Dri	nking	g Wate	er	Section	
	Wat	ter Qualit	y Monitoring a	nd Cor	nplia	ance S	Sched	ule	е	
PWS ID P	WS Name				Class	ification	Populati	on (Owner Type	Primary Source
CT0730021 J	EWETT CITY WA	TER CO-HILL-N-	-DALE			С	146		Р	GW
Local Address (wh	ere applicable)		Service	Reside	ntial C	ommerci	ial Indus	tria	l Combine	ed Agricultura
			Connection	ns 24						
Towns Served: LIS	BON		-							
Name			Organization						Job Title	9
Mr. Robert Sherw	ood		Hazardville W	ater Comp	any					
Mailing Address Li	ine One	Ma	ailing Address Line Two				City		State	Zip Code
481 Taylor Road						Enfield			СТ	06082
Business Phone	Extension	Fax	Mobile Phone	Emergeno	y Phon	e Email A	Address			
860-749-0779		860-749-538	1	860-460	0-0632	bsherv	vood@ha	zard	lvillewater.c	om
Contact Role(s):	Administrative	Contact	1			1				

Please note the following:

- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 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 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 Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0730031	LISBON MOBILE HOMES				С	155	Р	GW
Local Address (w	here applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
210 BUNDY HILL	RD	Connections	63					

Towns Served: LISBON			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/22 - 12/31/30		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/22 - 12/31/24	6/1-9/30	
	1/1/25 - 12/31/27	6/1-9/30	
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Net Gross Alpha (4000)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		

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

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0730031	LISBON MOBILE HOMES				С	155	Р	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
210 BUNDY HILL	RD	Connections	63					

210 BONDT HILL ND	05		
Towns Served: LISBON			
Monitoring	Requirements		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Uranium (4006)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		·
	1/1/26 - 12/31/28		
Combined Radium-226/228 (4010)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		·
	1/1/26 - 12/31/28		
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
- 1-7	1/1/24 - 12/31/24		P
	1/1/25 - 12/31/25		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)	,, - ,- ,-	1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		,
- 107	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	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		
Water System Facility: WELL #1 (WSF ID: 521)			
E. Coli (3014)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL #1 (2)	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		

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 Departr	nent of Public H	lealth	Di	rinking	, Water	Section	L
	Water Quality	Monitoring and	d Con	npl	liance S	Schedul	le	
PWS ID PWS Name				Cla	Classification Population Owner Type Primar			Primary Sour
CT0730031	LISBON MOBILE HOMES				С	155	Р	GW
Local Address (where applicable) Service Residential Commercial Industrial Combin						ed Agricultui		
210 BUNDY HILL RD Connections 63								

TOWIS Served. LISBON				
	Monitoring F	Requirements		
Water System Facility:	WELL #1 (WSF ID: 521)			
E. Coli (3014)			1 rou	utine (RT) per month
Sampling Point (San	npling Point ID)	Monitoring Period	Collection Period	Compliance Status
		10/1/24 - 10/31/24		
Mo	onthly Water System Facility (W	SF) Level Monitorii	ng Requiremer	nts
Water System Facility:	ENTRY POINT (WSFID: 00700)			
Analyte	Monitoring Requirement (Summary Type)	Operating Limit		Samples Req/Month
рН	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 F	PH	4
Start Date: 7/1/2003	S Co	mpliance History:	Operating Limit	Monitoring
	Mo	onitoring Period	Compliance Status:	Compliance Status:
	11,	/1/2023 - 11/30/2023		
	12,	/1/2023 - 12/31/2023		
	1/1	/2024 - 1/31/2024		
		/2024 - 2/29/2024		
	3/1	/2024 - 3/31/2024		
	Other Complia	ince Schedules		
Compliance Schedule Act	tivity	Due Date	Achieved L	Date
CROSS CONNECTION EXE	MPTION	3/1/2024		
SUBMIT LEAD SERVICE LII	NE INVENTORY	10/16/2024		
COMPLETE INITIAL LSL IN	VENTORY	10/16/2024		

			-1	,					
		Water System Facili	ity and Sampling P	oint Ir	vento	ry			
Water	Water System Easility	Campling Point	Campling Doint		Total	Lead and			Charac
System	Water System Facility		Sampling Point		Coliform	Copper			Stage
Facility IE		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP .	2 DBPR
00600	DISTRIBUTION SYSTEM	1 4	GENERIC DISTRIBUTION	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		LT1	LOT 1	Α	Υ	3	Υ		
		LT1/2	LOT 1/2	Α	Υ	3			
		LT2	LOT2	Α	Υ	3			
		LT64	LOT64	Α	Υ	3			
		LT66	LOT 66	Α	Υ	3			
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
521	WELL #1	2	WELL #1	Α					
535	TREATMENT PLANT								
62213	(4) BLADDER TANKS								

Certified Operator Information

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.

	Water Quality Mor	nitoring and	d Con	npl	iance S	, Schedul	e	
PWS ID	PWS ID PWS Name				ssification	Population	Owner Type	Primary Source
CT0730031	LISBON MOBILE HOMES				C 155 P			GW
Local Address (where applicable) Service Resid				ntial	Commerci	al Industri	al Combine	ed Agricultural
210 BUNDY HILL	Connections	63						

Connecticut Department of Public Health Drinking Water Section

Towns Served: LISBON			
	Certified Opera	tor Information	
Water System Facility: TREAT	MENT PLANT (WSF ID: 535)		
Facility Classification: CLASS 1 TRI	EATMENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2024
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2024
LAFRAMBOISE, ERIC	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	9/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2026
STARK, TYLER	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	3/31/2025
		WATER TREATMENT PLANT OPERATOR - CLASS I	3/31/2025
	Contact Ir	formation	
Name	Organizațio	on Job T	itle

			Organization		Job Title Manager				
			Crystal View	Capital					
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
9515 Hillwood Dr.						Las Vega	S	NV	89134
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	dress		
702-541-6379					959-207-8240	jenniferr	n@crystalvi	ewcapital.co	m
Contact Role(s): O	wner		,						
Name				Organization				Job Title	
Ms. Shawn Rexford	1			Osprev Mana	gement		Regional M	anager	

Ms. Shawn Rexford			Osprey Mana	Osprey Management			Regional Manager		
Mailing Address Line	e One		Mailing Add	dress Line Two			City	State	Zip Code
PO Box 189						Taftville		CT	06380
Business Phone	Extension	Fax	N	Nobile Phone	Emergency Phone	Email Ad	dress		
702-843-3187						Shawnct	mhc@gmail.com	1	

Contact Role(s): Administrative Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this 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

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Schedule Generation Date: 4/3/2024

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

PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
CT0731011	TUNNEL HILL MOBILE HOME PARK				С	40	Р	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
		Connections	29					

Towns Served: LISBON			
Monitoring F	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	0)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/22 - 12/31/30		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/22 - 12/31/24	6/1-9/30	
	1/1/25 - 12/31/27	6/1-9/30	
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Net Gross Alpha (4000)		1 routir	ne (RT) per six years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)			

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

				<u> </u>			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0731011	TUNNEL HILL MOBILE HOME PARK			С	40	Р	GW
Local Address (v	here applicable)	Service	Resider	itial Commer	cial Industri	al Combine	ed Agricultural
		Connections	29				

Towns Served: LISBON			
Monitoring	Requirements		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Uranium (4006)		1 routi	ne (RT) per six years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/20 - 12/31/25		
Combined Radium-226/228 (4010)		1 routi	ne (RT) per six years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/20 - 12/31/25		
Gross Beta Particle Activity (4100)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Man-Made Beta Particle & Photon Emitters (4101)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Tritium (4102)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Strontium-90 (4174)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
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		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		

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. Page 12

Schedule Generation Date: 4/3/2024

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

				<u> </u>			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0731011	TUNNEL HILL MOBILE HOME PARK			С	40	Р	GW
Local Address (v	here applicable)	Service	Resider	itial Commer	cial Industri	al Combine	ed Agricultural
		Connections	29				

Towns Served: LISBON

Other Compliance Schedules							
Compliance Schedule Activity	Due Date	Achieved Date					
SUBMIT CCR TO THE DEPARTMENT	6/30/2024						
SUBMIT CCR CERTIFICATION FORM	8/9/2024						
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024						
COMPLETE INITIAL LSL INVENTORY	10/16/2024						
CROSS CONNECTION EXEMPTION	3/1/2027						

Water System Facility and Sampling Point Inventory								
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	age DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	А	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		THC10	KITCHEN TAP	Α	Υ	3		
		THC13	KITCHEN TAP	Α	Υ	3		
		THC18	KITCHEN TAP	Α	Υ	3		
		THLOT	LOT #THC13 KITCHEN	Α	Υ			
		THLOT10	LOT #THC10 KITCHEN S	Α	Υ			
		THLOT11	KITCHEN TAP	Α	Υ	3		
		THLOT12	LOT #12 KITCHEN	Α	Υ	3		
		THLOT14	KITCHEN TAP	Α	Υ	3		
		THLOT16	KITCHEN TAP	Α	Υ	3		
		THLOT17	KITCHEN TAP	Α	Υ	3		
		THLOT18	LOT 18 KITCHEN	Α	Υ	3		
		THLOT20	LOT 20	Α	Υ	3		
		THLOT21	LOT 21	Α	Υ	3		
		THLOT22	KITCHEN TAP	Α	Υ	3		
		THLOT23	LOT # 23 KITCHEN	Α	Υ	3		
		THLOT25	LOT 25	Α	Υ	3		
		THLOT26	KITCHEN TAP	Α	Υ	3		
		THLOT6	KITCHEN TAP	Α	Υ	3		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
528	WELL #1	2	WELL #1	Α				

Certified Operator	Information
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Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WAT	ER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2024
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2024
NAPIERATA, KYLE	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2024

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.

Water Quality Monitoring and Compliance Schedule								
PWS ID PWS Name				Cla	ssification	Population	Owner Type	Primary Source
CT0731011	TUNNEL HILL MOBILE HOME PARK				С	40	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combin	ed Agricultural
		Connections	29					

Connecticut Department of Public Health Drinking Water Costion

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Certifie	d Opera	tor Information	1				
YSTEM (WSI	F ID: 00600)					
Л						Certification	
Operator T	уре	Certification(s)		Expiration			
		WATER TREATMEN	IT PLANT	OPERATOR -	CLASS II	9/30/2024	
ASSIGNED OF	PERATOR	WATER TREATMEN	CLASS II	6/30/2023			
		DISTRIBUTION SYSTEM OPERATOR - CLASS II				6/30/2023	
ASSIGNED OF	PERATOR	R WATER TREATMENT PLANT OPERATOR - CLASS III				9/30/2026	
		DISTRIBUTION SYS	TEM OPE	RATOR - CLAS	SS III	9/30/2026	
ASSIGNED OF	PERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS II				SS II	3/31/2025	
			WATER TREATMENT PLANT OPERATOR - CLASS I				
Co	ontact In	formation					
Name			Organization Job				
Mr. Matthew J Ricciardella			tal View Capital Manager				
Mailing Addr	ress Line Two City St				State	Zip Code	
			Las Vega	ıs	NV	89134	
	ASSIGNED OF ASSIGNED OF CO	ASSIGNED OPERATOR ASSIGNED OPERATOR ASSIGNED OPERATOR ASSIGNED OPERATOR Contact In Organizatio Crystal View	ASSIGNED OPERATOR WATER TREATMEN DISTRIBUTION SYST ASSIGNED OPERATOR WATER TREATMEN DISTRIBUTION SYST ASSIGNED OPERATOR WATER TREATMEN DISTRIBUTION SYST ASSIGNED OPERATOR DISTRIBUTION SYST WATER TREATMEN Contact Information	Operator Type Certification(s) WATER TREATMENT PLANT ASSIGNED OPERATOR WATER TREATMENT PLANT DISTRIBUTION SYSTEM OPE ASSIGNED OPERATOR WATER TREATMENT PLANT DISTRIBUTION SYSTEM OPE WASSIGNED OPERATOR DISTRIBUTION SYSTEM OPE WATER TREATMENT PLANT Contact Information Organization Crystal View Capital Mailing Address Line Two	VSTEM (WSF ID: 00600) A Operator Type Certification(s) WATER TREATMENT PLANT OPERATOR - DISTRIBUTION SYSTEM OPERATOR - CLA ASSIGNED OPERATOR WATER TREATMENT PLANT OPERATOR - CLA ASSIGNED OPERATOR WATER TREATMENT PLANT OPERATOR - DISTRIBUTION SYSTEM OPERATOR - CLA WATER TREATMENT PLANT OPERATOR - CLA WATER TREATMENT PLANT OPERATOR - Contact Information Organization Crystal View Capital Manager	WATER TREATMENT PLANT OPERATOR - CLASS II ASSIGNED OPERATOR WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS III ASSIGNED OPERATOR WATER TREATMENT PLANT OPERATOR - CLASS III DISTRIBUTION SYSTEM OPERATOR - CLASS III DISTRIBUTION SYSTEM OPERATOR - CLASS III ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III WATER TREATMENT PLANT OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS I Contact Information Organization Job Title Crystal View Capital Manager Mailing Address Line Two City State	

Contact Role(s): Administrative Contact, Owner

Extension

Please note the following:

Business Phone

702-541-6379

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

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.

Emergency Phone Email Address

jenniferm@crystalviewcapital.com

959-207-8240

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

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

End of schedule

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Schedule Generation Date: 4/3/2024

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0731021	ROUND HILL LLC - WELL# 1&2				С	72	Р	GW
Local Address (v	where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
329 RIVER RD - I	BOTH BUILDINGS	Connections	12					

Towns Served: LISBON			
Monitor	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/31		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Lead And Copper (PBCU)		5 r	outine (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	
	1/1/25 - 12/31/25	6/1-9/30	
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Water System Facility: ENTRY POINT - WELL #1 (NORTH)	(WSF ID: 00700)		
Net Gross Alpha (4000)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELL #1 (NORTH) (3)	1/1/23 - 12/31/25		
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.

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

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT0731021	ROUND HILL LLC - WELL# 1&2				С	72	Р	GW
Local Address (w	here applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
329 RIVER RD - E	BOTH BUILDINGS	Connections	12					

Towns Served: LISBON					
Monitoring	Requirements				
Water System Facility: ENTRY POINT - WELL #1 (NORTH) (W	SF ID: 00700)				
Net Gross Alpha (4000)		1 routine (RT) per three year			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
	1/1/26 - 12/31/28				
Uranium (4006)		1 routine	(RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
EP - WELL #1 (NORTH) (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Combined Radium-226/228 (4010)		1 routine	(RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
EP - WELL #1 (NORTH) (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
EP - WELL #1 (NORTH) (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
EP - WELL #1 (NORTH) (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	(RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
EP - WELL #1 (NORTH) (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Organic Chemicals (VOCS)		1 r	outine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
EP - WELL #1 (NORTH) (3)	1/1/23 - 12/31/23	_	Complete		
	1/1/24 - 12/31/24				
	1/1/25 - 12/31/25				
Water System Facility: ENTRY POINT - WELL #2 (WEST) (WS	F ID: 00701)				
Inorganic Chemicals (IOCS)	·	1 routine	(RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
EP - WELL #2 (WEST) (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
EP - WELL #2 (WEST) (3)	1/1/23 - 12/31/23		Complete		
	1/1/24 - 12/31/24		·		
	1/1/25 - 12/31/25				

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

	Connecticut Department of Public Health Drinking Water Section							
	Water Quality Monitoring and Compliance Schedule							
PWS ID PWS Name				Classification		Population	Owner Type	Primary Source
CT0731021 ROUND HILL LLC - WELL# 1&2					С	72	Р	GW
Local Address (where applicable)		Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural
329 RIVER RD -	BOTH BUILDINGS	Connections	12					

Towns Served: LISBON			
Monito	ring Requirements		
Water System Facility: ENTRY POINT - WELL #2 (WEST)	(WSF ID: 00701)		
Radionuclides - Gross Alpha, Combined Radium & Uran	ium (RADA)	1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELL #2 (WEST) (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELL #2 (WEST) (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELL #2 (WEST) (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	Due Date Achieved Date	
CROSS CONNECTION SURVEY REPORT	3/1/2020		
DISTRIBUTION SYSTEM MATERIALS EVALUATION	6/15/2020		
SUBMIT FISCAL AND ASSET MANAGEMENT CERT	1/1/2021		

Other Comphanic Schedules							
Due Date	Achieved Date						
3/1/2020							
6/15/2020							
1/1/2021							
3/1/2021							
8/6/2021							
3/1/2022							
3/1/2023							
3/1/2024							
6/30/2024	3/22/2024						
8/9/2024	·						
10/16/2024	·						
10/16/2024	·						
	3/1/2020 6/15/2020 1/1/2021 3/1/2021 8/6/2021 3/1/2022 3/1/2023 3/1/2024 6/30/2024 8/9/2024 10/16/2024	Due Date Achieved Date 3/1/2020 6/15/2020 1/1/2021 3/1/2021 8/6/2021 3/1/2022 3/1/2023 3/1/2024 6/30/2024 8/9/2024 10/16/2024					

COIVII LL I	L HATTIME ESE HAVEIATORY		10/.	10, 202					
Water System Facility and Sampling Point Inventory									
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	APT. #11 BATHROOM SI	Α	Υ				
		4-1	DISTRIBUTION SYSTEM	Α	Υ				
		4-2	OUTSIDE TAP	Α	Υ				
		4-3	Apt. #4	Α	Υ				
		4-4	Apt. #9	Α	Υ				
		4-5	Apt #2	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT - WELL #1 (NORTH)	3	EP - WELL #1 (NORTH)	Α					

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 Departin	ent of I ublic I	leartii	וש ו	ı ınıkınıg	vvater	Section	L	
	Water Quality I	Monitoring and	d Con	npl	liance S	Schedul	e		
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Pri	mary Source
CT0731021	ROUND HILL LLC - WELL# 1&2				С	72	Р		GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combin	ed	Agricultural
329 RIVER RD	- BOTH BUILDINGS	Connections	12						

Connecticut Department of Public Health Drinking Water Section

	Water	System Facili	ity and Samplin	g Point Ir	vento	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 2 DBPR
00701	ENTRY POINT - WELL #2 (WEST)	3	EP - WELL #2 (WEST)	Α				
1847	WELL #2	2	WELL #2	Α				
520	WELL #1	2	WELL #1	Α				
59693	WELL #2 TREATMENT PLANT (WEST)							

Water System Facility: WELL #	‡2 TREATMENT PLANT (WEST) (\	NSF ID: 59693)	
Facility Classification: CLASS 1 TR	EATMENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
NAPIERATA, KYLE	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2024
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2024
LAFRAMBOISE, PAUL F.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2024
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2024

Contact Information

Certified Operator Information

Name Organization							Job Title			
Mr. Kyle Napierata Laframboise Water Services						Certified Operator				
Mailing Address Line One Mailing Address Line Two					City	State	Zip Code			
647 Thompson Road P.C			P.O. Bo	2.O. Box 303			Thompson		06277	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	ency Phone Email Address				
860-624-2327		860-923-9	0-923-9971 860-508-1330 kyle@				le@thewaterexperts.com			
Contact Role(s): Ac	dministrative	Contact								
Name Organization						Job Title				
Mr. Andrew Soulor				329 River LLC	•		Owner			
Mailing Address Line One			Mailing Address Line Two		City		State	Zip Code		
130 Mackin Drive						Griswold		СТ	06351	
Business Phone	Business Phone Extension Fax Mobile Phone Emergency Phone Email Addres				ldress	·				
860-705-2388						acsoulor@yahoo.com				

Please note the following:

Contact Role(s): Legal Contact, Owner

Towns Served: LISBON

- 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