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
CT0750062	LYME CONSOLIDATED SCHOOL				NTNC	205	L	GW
Local Address (w	here applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
478 HAMBURG I	ROAD	Connections	3					

Monitoring Period 11/1/23 - 11/30/23 12/1/23 - 12/31/23 1/1/24 - 1/31/24 2/1/24 - 2/29/24	1 rou Collection Period	tine (RT) per month Compliance Status Complete
Monitoring Period 11/1/23 - 11/30/23 12/1/23 - 12/31/23 1/1/24 - 1/31/24		Compliance Status
Monitoring Period 11/1/23 - 11/30/23 12/1/23 - 12/31/23 1/1/24 - 1/31/24		Compliance Status
11/1/23 - 11/30/23 12/1/23 - 12/31/23 1/1/24 - 1/31/24		Compliance Status
11/1/23 - 11/30/23 12/1/23 - 12/31/23 1/1/24 - 1/31/24		Compliance Status
11/1/23 - 11/30/23 12/1/23 - 12/31/23 1/1/24 - 1/31/24	Conection Feriou	
12/1/23 - 12/31/23 1/1/24 - 1/31/24		Complete
1/1/24 - 1/31/24		Complete
		Complete
2/1/24 - 2/23/24		Complete
	1 routine	e (RT) per nine years
Monitoring Period	Collection Period	Compliance Status
1/1/20 - 12/31/28	Conection Feriod	Compliance Status
1/1/20 - 12/31/20	1 1	outine (RT) per year
Monitoring Period		Compliance Status
		Complete
		Complete
1/1/23 - 12/31/23		outing (DT) par year
Monitoring Pariod		outine (RT) per year Compliance Status
		Complete
		Complete
1/1/25 - 12/51/25		tine (RT) per month
Monitoring Period		Compliance Status
	Concetion remod	Complete
	<u>-</u>	
-, ,,-,-	10 routine	(RT) per six months
Monitoring Period	Collection Period	Compliance Status
		Complete
, ,,, - 1	1 rou	tine (RT) per month
Monitoring Period	Collection Period	Compliance Status
	Monitoring Period 1/1/23 - 12/31/24 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monitoring Period 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monitoring Period 11/1/25 - 12/31/25 Monitoring Period 11/1/23 - 11/30/23 12/1/23 - 12/31/23 1/1/24 - 1/31/24 2/1/24 - 2/29/24 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 Monitoring Period 7/1/23 - 12/31/23 1/1/24 - 6/30/24 7/1/24 - 6/30/24 7/1/24 - 12/31/23	Monitoring Period Collection Period

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 H	lealth	D	rinking	Water	Section	L	
	Water Quality Monito	oring and	d Con	npl	liance S	Schedu	le		
PWS ID	WS ID PWS Name					Classification Population		Prin	nary Source
CT0750062	LYME CONSOLIDATED SCHOOL				NTNC	205	L		GW
Local Address (ocal Address (where applicable) Service Re					al Industr	ial Combin	ed	Agricultural
478 HAMBURG	ROAD	3							

Towns Served: LYME

Towns Served: LYME			
Monitor	ring Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID	: 00600)		
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)			
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 (SOC2)		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		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		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)	1/1/21 - 12/31/23		Complete
	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		
Water System Facility: WELL #1 (WEST WELL)	(WSF ID: 10352)		
E. Coli (3014)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

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 Departme	nt of Public Health	Drinki	ng W	Vater S	ection	
	Water Ouality M	onitoring and Com	plianc	e Sch	nedule		
PWS ID	PWS Name		1			vner Type Pr	imary Sour
CT0750062	LYME CONSOLIDATED SCHOOL		NTNC		205	L	GW
ocal Address	s (where applicable)	Service Resident	ial Comm		Industrial	Combined	Agricultur
178 HAMBUF		Connections 3					
Towns Served	d: LYME						
	N	Ionitoring Requiremer	nts				
Vater Syste	m Facility: WELL #1 (WEST WELL)	(WSF ID: 10352)					
E. Coli (301	14)				1 r	outine (RT)	per month
Samplin	g Point (Sampling Point ID)	Monitorin	g Period	Colle	ction Period	d Compli	ance Status
WELL (2		11/1/23 -	11/30/23			Со	mplete
		12/1/23 -	12/31/23			Со	mplete
		1/1/24 -	1/31/24			Со	mplete
		2/1/24 -	2/29/24			Со	mplete
		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				
Vater Syste	m Facility: WELL #2 (EAST WELL)	(WSF ID: 53614)					
E. Coli (301	14)				1 r	outine (RT)	per month
Samplin	g Point (Sampling Point ID)	Monitorin	g Period	Colle	ction Period	d Compli	ance Status
WELL 2	(2)	11/1/23 -	11/30/23			Co	mplete
		12/1/23 -	12/31/23			Co	mplete
		1/1/24 -	1/31/24			Co	mplete
		2/1/24 -	2/29/24			Со	mplete
		3/1/24 -	3/31/24				
		4/1/24 -	4/30/24				
		5/1/24 -	5/31/24				
		6/1/24 -					
		7/1/24 -	7/31/24				
		8/1/24 -	8/31/24				
		9/1/24 -	9/30/24				
		10/1/24 -	10/31/24				
	Monthly Water System	<u> </u>	onitori	ng Re	quireme	ents	
Nater Syste	m Facility: ENTRY POINT (WSFID: 00	0700)					
Analyte	Monitoring Requirement	(Summary Type) Oper	ating Limit	t		Samples Re	eq/Month
Chlorine	Entry Point Chlorine Resid	ual Monitoring (CHLR) Minir	num: 0.2	MG/L		Dai	ly

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.

Start Date: 4/1/2021

Compliance History:

11/1/2023 - 11/30/2023 12/1/2023 - 12/31/2023 1/1/2024 - 1/31/2024 2/1/2024 - 2/29/2024

Monitoring Period

Monitoring

Compliance Status:

Operating Limit

Compliance Status:

	Conne	cticut Dep	artmer	nt of	f Public H	lealth	Dı	inkin	g W	ater	Section	on	
		Water Qu	ality M	onit	oring and	d Con	lar	iance	Sch	edule	و		
PWS ID	PWS Nam		J		8 -		_	sification	_			/pe Pri	imary Source
CT0750062	LYME COI	NSOLIDATED SCH	OOL					NTNC	-	205	L		GW
Local Address	(where appli	icable)			Service	Resider	itial	Commerc	ial	Industria	l Com	bined	Agricultural
478 HAMBURG	G ROAD	•			Connections	3							
Towns Served:	LYME					1					-		-
Water Systen	n Facility: I	ENTRY POINT (WSFID: 00	700)									
Analyte		Monitoring Req	uirement (Summ	ary Type)	Ope	ratir	ng Limit			Samp	oles Re	q/Month
Chlorine		Entry Point Chlo	rine Residu	al Moi	nitoring (CHLR) Min	imur	n: 0.2 MG	i/L			Dai	ly
Start Date:	4/1/2021				Complia	nce Hist	ory:	0	perat	ing Limit	M	onitori	ng
					Monitor				ompli	iance Sta	tus: Co	mpliar	nce Status:
					3/1/202								
Analyte		Monitoring Req				_		ng Limit			Samp	oles Re	q/Month
рН		Entry Point pH N	Monitoring	(PHRC				n: 7 PH				4	
Start Date:	1/1/2002				-	nce Hist			-	ing Limit		onitori 	_
					Monitor				ompli	iance Sta	tus: Co	mpliar	nce Status:
					11/1/20								
					12/1/202 1/1/202								
					2/1/202								
					3/1/202								
			Oth	er C	ompliance								
Compliance Sc	hedule Activ	vity						Date		Achiev	ed Date		
SUBMIT LEAD						1	0/16	/2024					
COMPLETE INI	TIAL LSL INV	ENTORY				1	0/16	/2024					
CROSS CONNE	CTION SURV	'EY REPORT					3/1/	2025					
			Public	Not	tification R	equire	eme	ents					
					Compliance	Notice		Public I	Votifi	cation	P	N Certi	fication
Violation/Situ	ation				Period	Tier		Required	_	erformed			Received
REVISED TOTA	L COLIFORM	RULE (RTCR) TT \	/iolation	10/11	1/20 - 11/17/20	2		8/13/2021	L		8/23/	2021	
		Water	System I	acil	ity and Sar	npling	Po	int Inve	ento	ory			
Water			•		•				otal		ınd		
	ter System F	acility	Sampling	Point	Sampling Poi	nt			liforn				Stage
Facility ID			ID		Description			Status	Rule	Rule T	ier Asb	estos	WQP 2 DBPR
00600 DIS	TRIBUTION S	SYSTEM	4		DISTRIBUTION	I SYSTEM	1	Α	Υ				
			DOWNST	REAM	WITHIN 5 SER	VICE CO	N	Α					
					TOWN OFFICE			Α	Υ	N		Y	
			LCS-482		LYME LIBRAR			Α	Υ	N		Y	Υ
			LCS-C		CAFETERIA SII			Α	Υ	N		Υ	
			LCS-MC	втн	BTHRM NEAR MEDIACNTR			Α	Υ	N		Y	
			LCS-RN	115	ROOM 15 SIN	K		Α	Υ	N		Υ	
			LCS-RN	116	ROOM 16 SIN	K		Α	Υ	N		Υ	
			LCS-RN	119	ROOM 19 SIN	K		Α	Υ	N		Υ	

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ROOM 2 SINK

ROOM 4 SINK

OFFICE SINK

ART ROOM 8 SINK

Υ

Υ

Υ

Υ

Ν

Ν

Α

Α

Α

Υ

Υ

Υ

LCS-RM2

LCS-RM4

LCS-RM8

MW004-0

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

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0750062	LYME CONSOLIDATED SCHOOL			NTNC	205	L	GW
Local Address (w	here applicable)	Service	Resider	ntial Commerci	al Industri	al Combine	ed Agricultural
478 HAMBURG F	ROAD	Connections	3				

Towns Served: LYME

		Water System Facili	ity and Sampling P	oint Ir	nvento	ry		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
		MW004-0	OFFICE SINK	А	Υ	N	Υ	
		MW006	COPY ROOM	Α	Υ	N	Υ	
		MW027-12	ROOM 12	Α	Υ	N	Υ	
		MW027-21	ROOM 21	Α	Υ	N	Υ	
		MW027-21A	ROOM 21A	Α	Υ	N	Υ	
		MW029-NR	MW 029-NR NURSE SINK	Α	Υ	N	Υ	
		MW039-NR	NURSES OFFICE	Α	Υ	N	Υ	Υ
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10352	WELL #1 (WEST WELL)	2	WELL	Α				
46405	TREATMENT PLANT							
53614	WELL #2 (EAST WELL)	2	WELL 2	Α				
53616	ATMOSPHERIC STORAG	GE						

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 46405)

Facility Classification: CLASS 1 TREA	ATMENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
HARKINS, STUART A.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2025
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2025
WITTENZELLNER, ROBERT	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2025
		WATER TREATMENT PLANT OPERATOR - CLASS III	9/30/2024

				Contact Inf	ormation				
Name				Organization	1	Job Title			
Mr. Ronald Turner				Regional Sch	ool District 18		Dir of Facilities		
Mailing Address Line One Mailing Addr			Address Line Two		City		State	Zip Code	
49 Lyme St						Old Lym	e	СТ	06371
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	Email Address		
860-434-8182		860-434-	4413		860-334-3889	turnerr@region18.org			

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

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

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

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

End of schedule

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

PWS ID PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT0750123	REYNOLDS SUBARU				NTNC	70	Р	GW
Local Address (w	ress (where applicable) Service		Resider	ntial Commerc		al Industri	al Combine	ed Agricultural
272 HAMBURG F	ROAD	Connections			1			

Towns Served: LYME			1
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	500)		
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	1/1/18 - 12/31/26		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
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	1/1/24 - 12/31/24	6/1-9/30	
	1/1/25 - 12/31/25	6/1-9/30	
Lead And Copper (PBCU)		5 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/23 - 12/31/23		Complete
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
·	1/1/24 - 3/31/24		·
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
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)	1/1/22 - 12/31/24		Complete
	1/1/25 - 12/31/27		·
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		·

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Schedule Generation Date: 4/3/2024

Connecticut Department of Public Health Drinking Water Section										
	Water Quality N	Monitoring and	d Con	npl	iance S	chedul	e			
PWS ID	S ID PWS Name					Population	Owner Type	Primary Source		
CT0750123	REYNOLDS SUBARU				NTNC	70	Р	GW		
Local Address	(where applicable)	Service	Residen	tial	Commercia	l Industri	al Combine	ed Agricultural		
272 HAMBURO	G ROAD	Connections			1					

Towns Served: LYME

Monitoring Requirements								
Water System Facility: ENTRY POINT (WSF ID: 00700)								
Organic Chemicals (VOCS)		1 routine (RT) per yea						
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status					
	1/1/25 - 12/31/25							

Monthly Water System Facility (WSF) Level Monitoring Requirements

	-	•			
Vater System Facility:	ENTRY POINT (WSFID: 00700)				
Analyte	Monitoring Requirement (Summary T	Type) Operating Limit			Samples Req/Month
рН	Entry Point pH Monitoring (PHRD)		Minimum: 7.0 PH		4
Start Date: 10/1/201	7	Compliance	History:	Operating Limit	Monitoring
		Monitoring	Period	Compliance Status	: Compliance Status:
		11/1/2023 -	11/30/2023		
		12/1/2023 -	12/31/2023		
		1/1/2024 - 1	/31/2024		
		2/1/2024 - 2	/29/2024		
		3/1/2024 - 3	/31/2024		

Other Compliance Schedules								
Compliance Schedule Activity	Due Date	Achieved Date						
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024							
COMPLETE INITIAL LSL INVENTORY	10/16/2024							
CROSS CONNECTION SURVEY REPORT	3/1/2025							

	Water System Facility and Sampling Point Inventory									
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPR		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ					
		BASEBREAKRM	BASEMENT BREAK ROOM	Α	Υ	N	Υ			
		BASELADYRM	BASEMENT LADIES ROOM	Α	Υ	N	Υ			
		BASEMENSRM	BASEMENT MENS ROOM	Α	Υ	N	Υ			
		FIRSTLADYRM	FIRST FL LADIES ROOM	Α	Υ	N	Υ			
		FIRSTMENRM	FIRST FL MENS ROOM	Α	Υ	N	Υ			
		MAINLADYRM	MAIN FL LADIES ROOM	Α	Υ	N				
		MAINMENRM	MAIN FL MENS ROOM	Α	Υ	N	Υ			
		MAINMOPSINK	MAIN FLOOR MOP SINK	Α	Υ		Υ			
		RGM-EP	BASEMENT ENTRY POINT	Α						
00700	ENTRY POINT	3	ENTRY POINT	Α						
60681	WELL 1	2	WELL 1	Α						
60686	TREATMENT PLANT									

Certified Operator Information

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	Water Quality Monitoring and Compliance Schedule									
PWS ID PWS Name				Cla	ssification	Population	Owner Type	Primary Source		
CT0750123 REYNOLDS SUBARU					NTNC	70	Р	GW		
Local Address (v	vhere applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural		
272 HAMBURG	ROAD	Connections			1					

Connecticut Department of Public Health Drinking Water Section

Towns Served: LYME

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 60686)

Facility Classification:CLASS 1 TREATMENT PLANTCertificationOperator NameOperator TypeCertification(s)ExpirationNAVICKIS, THOMAS L.CHIEF OPERATORWATER TREATMENT PLANT OPERATOR - CLASS I6/30/2024

NAVICKIS, THOMAS	5 L.		CHIEF OPERA	TOR	R WATER TREATMENT PLANT OPERATOR - CLASS I				6/30/2024
			Co	ntact Inf	ormation				
Name				Organization	ı			Job Title	
Mr. G. Hayden Rey	nolds								
Mailing Address Lin	Mailing Address Line One Mailing Addre			ress Line Two			City	State	Zip Code
268 Hamburg Rd						Lyme		СТ	06371
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Address			
860-434-0023						hayden@	reynolds18	359.com	
Contact Dolo/s).	dunimintuntiva Ca	wheet les	ol Contoct						

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

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

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End of schedule