

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0780122	MOUNT HOPE MONTESSORI SCHOOL	NTNC	88	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
48 BASSETTS BRIDGE ROAD			1				

Towns Served: MANSFIELD

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		Complete		
Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
Lead And Copper (PBCU)		5 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/25	6/1-9/30			
	1/1/26 - 12/31/28	6/1-9/30			
Physical Parameters (PPS)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Nitrate And Nitrite (NOX)		1 routine (RT) per year			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Organic Chemicals (VOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
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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		
CT0780122	MOUNT HOPE MONTESSORI SCHOOL	NTNC	88	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
48 BASSETTS BRIDGE ROAD		1					
Towns Served: MANSFIELD							

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 EXEMPTION	3/1/2026	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MW003	KITCHEN SINK	A	Y			
		MW003-S	KITCHEN SINK	A	Y	1	Y	
		MW004-DB	DOWNSTAIRS BATHROOM	A	Y	1		
		MW005-FCB	FRONT CHILD'S BATHRO	A	Y	1		
		MW006-S	REAR CLASSROOM SINK	A	Y	1		
		MW027-AB	ADULT BATHROOM	A	Y	1		
		MW027-DCH	DOWNSTAIRS CHILD	A	Y	1		
		MW027-DCL	DOWNSTAIRS CLASS	A	Y	1	Y	
		MW027-R	RESOURCE ROOM	A	Y	1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10371	WELL	2	WELL	A				

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
Facility Classification: SMALL WATER SYSTEM			
Operator Name	Operator Type	Certification(s)	Certification Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2024
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2024

Contact Information

Name			Organization			Job Title		
Ms. Erin Clark			Mount Hope Montessori School			Office Administrator		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
P.O. Box 267						Mansfield Center	CT	06250
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-423-1070					mthopemontessori@snet.net			
Contact Role(s): Administrative Contact, Legal Contact								

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		
CT0780122	MOUNT HOPE MONTESSORI SCHOOL	NTNC	88	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
48 BASSETTS BRIDGE ROAD			1				

Towns Served: MANSFIELD

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

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		
CT0780752	MANSFIELD PROFESSIONAL PARK	NTNC	100	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
11, 22, 28, & 34 EAST PARK ROAD			4				

Towns Served: MANSFIELD

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28				
Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
Lead And Copper (PBCU)		5 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Nitrate And Nitrite (NOX)		1 routine (RT) per year			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Organic Chemicals (VOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0780752	MANSFIELD PROFESSIONAL PARK	NTNC	100	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
11, 22, 28, & 34 EAST PARK ROAD		4					

Towns Served: MANSFIELD

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Organic Chemicals (VOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/26 - 12/31/28		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	2/2/2024	
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024	
COMPLETE INITIAL LSL INVENTORY	10/16/2024	
CROSS CONNECTION EXEMPTION	3/1/2026	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MPP001	B1 DS LADIES ROOM	A	Y	1	Y	Y
		MPP002	B1 DS MENS ROOM	A	Y	1		Y
		MPP003	B1 US LADIES ROOM	A	Y	1		Y
		MPP004	B1 US MENS ROOM	A	Y	1		Y
		MPP005	MED BLDG STAFF BATH	A	Y	1	Y	Y
		MPP006	MED BLDG WAIT RM	A	Y	1	Y	Y
		MPP007	B3 DS LADIES ROOM	A	Y	1	Y	Y
		MPP008	B3 DS MENS ROOM	A		1		Y
		MPP009	B3 US LADIES ROOM	A	Y	1		Y
		MPP010	B3 US LADIES ROOM	A	Y	1		Y
		MPP011	B3 DS UNISEX BR	A	Y	1	Y	Y
		MPP012	B3 US UNISEX BR	A	Y	1	Y	Y
		MPP015 A	B3 HANDICAP BR	I	Y			
		MPP016	B3 OUTSIDE FAUCET	I	Y			
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10372	WELL	2	WELL	A				

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
COSSETTE, EVAN J	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2024
		DISTRIBUTION SYSTEM OPERATOR IN TRAINING	6/30/2024
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	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.

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0780752	MANSFIELD PROFESSIONAL PARK	NTNC	100	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
11, 22, 28, & 34 EAST PARK ROAD		4					
Towns Served: MANSFIELD							

Contact Information

Name			Organization			Job Title			
Mr. E. Barry Smith			M P Park LLC						
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
P.O. Box 476						Storrs		CT	06268
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-429-8891		860-429-6857		860-420-9053	tmcorp@tmcorp.info				

Contact Role(s): **Administrative Contact**

Name			Organization			Job Title			
Mr. Michael M. Taylor			M P Park LLC			Owner			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
12 Stonemill Road						Storrs		CT	06268
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-429-8891									

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

Please note the following:

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

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End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0781192	PERKINS CORNER	NTNC	45	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
10 HIGGINS HWY (JCT RT 31 & RT 32)			1				

Towns Served: MANSFIELD

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28				
Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
Lead And Copper (PBCU)		5 routine (RT) per year			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Nitrate And Nitrite (NOX)		1 routine (RT) per year			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Organic Chemicals (VOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0781192	PERKINS CORNER	NTNC	45	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
10 HIGGINS HWY (JCT RT 31 & RT 32)			1				

Towns Served: MANSFIELD

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Organic Chemicals (VOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
DISTRIBUTION SYSTEM MATERIALS EVALUATION	6/15/2020	
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024	
COMPLETE INITIAL LSL INVENTORY	10/16/2024	
CROSS CONNECTION EXEMPTION	3/1/2026	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		PBR001	SUITE 8 LAV	A	Y	1		
		PBR002	SUITE 8 BATHROOM	A	Y	1		
		PBR003	SUITE 8 KITCHENETTE	A	Y	1		
		PBR004	SUITE 9 KITCHENETTE	A	Y	1		
		PBR005	SUITE 9 LAV	A	Y	1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10373	WELL	2	WELL	A				

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
COSSETTE, EVAN J	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2024
		DISTRIBUTION SYSTEM OPERATOR IN TRAINING	6/30/2024
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2024

Contact Information

Name		Organization			Job Title		
Joshua Rich		Pbr Investments Lp			General Partner		
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
327 Back Rd					Windham	CT	06280
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
508-292-2917					dearmer@mail.com		

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

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CT0781192	PERKINS CORNER	NTNC	45	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
10 HIGGINS HWY (JCT RT 31 & RT 32)			1				

Towns Served: MANSFIELD

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

Please note the following:

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

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

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

End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0781233	MANSFIELD ELEMENTARY SCHOOL	NTNC	688	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
134 WARRENVILLE ROAD			1				

Towns Served: MANSFIELD

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28				
Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	10/1/23 - 10/31/23		Complete		
	1/1/24 - 3/31/24		Complete		
	4/1/24 - 6/30/24				
	7/1/24 - 9/30/24				
Total Coliform (3100)		3 repeat (RP) per period			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	10/24/23 - 10/28/23		Complete		
	11/15/23 - 11/20/23		Complete		
Total Coliform (3100)		3 temporary routine (TR) per month			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete		
	12/1/23 - 12/31/23		Complete		
Lead And Copper (PBCU)		20 routine (RT) per six months			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/23 - 12/31/23		Complete		
	1/1/24 - 6/30/24				
	7/1/24 - 12/31/24				
Physical Parameters (PPS)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
Water Quality Parameters (WQPD)		4 routine (RT) per six months			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/23 - 12/31/23		Complete		

Water System Facility: **ENTRY POINT WELLS A & B (WSF ID: 00701)**

Inorganic Chemicals (IOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT WELLS A & B (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Nitrate And Nitrite (NOX)		1 routine (RT) per year			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT WELLS A & B (3)	1/1/23 - 12/31/23		Complete		
	1/1/24 - 12/31/24		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 of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0781233	MANSFIELD ELEMENTARY SCHOOL	NTNC	688	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
134 WARRENVILLE ROAD			1				

Towns Served: MANSFIELD

Monitoring Requirements

Water System Facility: ENTRY POINT WELLS A & B (WSF ID: 00701)

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/25 - 12/31/25		
Lead And Copper (PBCU)	1 routine (RT) per six months		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT WELLS A & B (3)	7/1/23 - 12/31/23	12/21-12/31	Complete
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT WELLS A & B (3)	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		
Organic Chemicals (VOCS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT WELLS A & B (3)	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		
Water Quality Parameters - Basic (WQP1)	2 routine (RT) per six months		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT WELLS A & B (3)	7/1/23 - 12/31/23		Complete

Water System Facility: WELL A (WSF ID: 62314)

E. Coli (3014)	1 triggered (TG) per period		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL A (2)	10/23/23 - 10/28/23		Complete
	11/14/23 - 11/20/23		Complete

Water System Facility: WELL B (WSF ID: 62316)

E. Coli (3014)	1 triggered (TG) per period		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL B (2)	10/23/23 - 10/28/23		Complete
	11/14/23 - 11/20/23		Complete

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
L1 ASSESSMENT (MULTIPLE TC+)	11/27/2023	
SWTS 1: PWS TO RECOMMEND SOWT	12/27/2023	11/22/2023
CCTS 1: PWS TO RECOMMEND OCCT	12/31/2023	11/22/2023
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	6/27/2024	
SWTS 1: PWS TO RECOMMEND SOWT	6/28/2024	11/22/2023
CCTS 1: PWS TO RECOMMEND OCCT	6/30/2024	11/22/2023

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0781233	MANSFIELD ELEMENTARY SCHOOL	NTNC	688	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
134 WARRENVILLE ROAD			1				
Towns Served: MANSFIELD							

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	6/30/2024	
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	12/28/2024	
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	12/31/2024	
CROSS CONNECTION SURVEY REPORT	3/1/2025	
CCTS 5: PWS OCCT INSTALLATION	6/30/2025	
CCTS 5: PWS OCCT INSTALLATION	12/31/2025	

Public Notification Requirements

<i>Violation/Situation</i>	<i>Compliance Period</i>	<i>Notice Tier</i>	<i>Public Notification</i>		<i>PN Certification</i>	
			<i>Required</i>	<i>Performed</i>	<i>Due to DPH</i>	<i>Received</i>
Temperature (C) M&R Violation	7/1/23 - 12/31/23	3	2/6/2025		2/16/2025	

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	125	125 CLASSROOM 16	A				
		127	127 CLASSROOM 15	A				
		131	131 CLASSROOM 8	A				
		133	133 CLASSROOM 7	A				
		4	DISTRIBUTION SYSTEM	A	Y			
		4-1	BOYS ROOM	I	Y	2		
		4-10	ROOM 9	I	Y	N		
		4-14	ROOM 16	I	Y	2		
		4-15	ROOM 17	I	Y	2		
		4-16	ROOM 19	I	Y	N		
		4-17	ROOM 20	I	Y	N		
		4-18	ROOM 21	I	Y	N		
		4-19	DRINKING FOUNTAIN	I	Y	2		
		4-2	GIRLS ROOM	I	Y	2		
		4-20	CONCESSION STAND	A	Y	N		
		4-3	ROOM #18	I	Y	N		
		4-4	TEACHER S LOUNGE	I	Y	2		
		4-5	KITCHEN HAND SINK	I		2		
		4-6	NURSE'S OFFICE	I	Y	2	Y	Y
		4-7	ROOM 6	I	Y	2		
		4-8	ROOM 7	I	Y	2		
		4-9	ROOM 8	I	Y	N		
			DOWNSTREAM WITHIN 5 SERVICE CON			A	Y	
	MES011	011 CLASSROOM 48	A			N		
	MES025	025 CLASSROOM 42	A			N		
	MES026	026 CUSTODIAL	A			N		

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0781233	MANSFIELD ELEMENTARY SCHOOL	NTNC	688	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
134 WARRENVILLE ROAD			1				

Towns Served: MANSFIELD

Water System Facility and Sampling Point Inventory

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
		MES027	027 CLASSROOM 41	A		N		
		MES029	029 ART ROOM SINK 1	A		N	Y	Y
		MES029-2	029 ART ROOM SINK 2	A		N		
		MES036	036 STAFF LUNCH	A	Y	N	Y	Y
		MES107	107 CLASSROOM 24	A		N		
		MES108	108 CLASSROOM 28	A		N		
		MES109	109 CLASSROOM 23	A		N		
		MES111	111 CLASSROOM 22	A		N		
		MES115	115 CLASSROOM 21	A		N		
		MES123	123 CLASSROOM 17	A		N		
		MES126	126 CUSTODIAL	A		N		
		MES132A	132A CUSTODIAL	A		N		
		MES135	135 CLASSROOM 6	A		N		Y
		MES137	137 CLASSROOM 5	A		N		
		MES141	141 CLASSROOM 3	A		N		
		MES143	143 CLASSROOM 2	A		N		
		MES147	147 HEALTH	A	Y	N	Y	Y
		MESK001	KITCHEN SINK 1	A	Y	N		Y
		MESK002	KITCHEN SINK 2	A	Y	N		
		MESK003	KITCHEN SINK 3	A	Y	N		
		MESK004	KITCHEN SINK 4	A	Y	N		
		MESK005	KITCHEN SINK 5	A	Y	N		
		MESK006	KITCHEN SINK 6	A	Y	N		
		MESK007	KITCHEN SLOP SINK	A		N		
		UPSTREAM	WITHIN 5 SERVICE CON	A	Y			
00701	ENTRY POINT WELLS A & B	3	ENTRY POINT WELLS A	A				
62314	WELL A	2	WELL A	A				
62316	WELL B	2	WELL B	A				
62735	ATM STORAGE TANK							
62737	PUMPS							
62739	BLADDER TANK							

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification:

Operator Name	Operator Type	Certification(s)	Certification Expiration
WILCOX, MELISSA	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	9/30/2025
SWEET, BRYAN S	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2026

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		
CT0781233	MANSFIELD ELEMENTARY SCHOOL	NTNC	688	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
134 WARRENVILLE ROAD			1				
Towns Served: MANSFIELD							

Contact Information

Name			Organization			Job Title		
Mr. Ryan J. Aylesworth			Town of Mansfield			Town Manager		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
4 S Eagleville Road			Town Managers Office			Mansfield	CT	06268
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-429-3337		860-429-6863			TownMngr@MANSFIELDCT.ORG			

Contact Role(s): **Legal Contact**

Name			Organization			Job Title		
Mr. Peter Dart			Mansfield Public Schools			Superintendent		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
4 South Eagleville Rd.						Mansfield	CT	06268
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-429-3350					MBOESupt@mansfieldct.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	Classification	Population	Owner Type	Primary Source		
CT0781243	MANSFIELD MIDDLE SCHOOL	NTNC	715	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
205 SPRING HILL ROAD			1				

Towns Served: MANSFIELD

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28				
Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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)		10 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
Water System Facility: ENTRY POINT (WSF ID: 00701)					
Nitrite (1041)		1 routine (RT) per year			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
EP - 1, 3, 4 (3)	1/1/23 - 12/31/23		Complete		
Inorganic Chemicals (IOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
EP - 1, 3, 4 (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Nitrate And Nitrite (NOX)		1 routine (RT) per year			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
EP - 1, 3, 4 (3)	1/1/24 - 12/31/24		Complete		
	1/1/25 - 12/31/25				
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
EP - 1, 3, 4 (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Organic Chemicals (VOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
EP - 1, 3, 4 (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0781243	MANSFIELD MIDDLE SCHOOL	NTNC	715	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
205 SPRING HILL ROAD			1				
Towns Served: MANSFIELD							

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	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MMS03	LADIES ROOM SINK 2F	A	Y	2		
		MMS04	MEN'S ROOM SINK 2F	A	Y	2		
		MMS104	ROOM 104	A		2		
		MMS120	LIBRARY WORKROOM OFC	A	Y	2		
		MMS121	MENS ROOM SINK OFC	A	Y	2	Y	Y
		MMS122	WOMENS ROOM SINK OFC	A	Y	2	Y	Y
		MMS14	CLASSROOM SINK 208	A	Y	2		
		MMS206	ROOM 206	A		2		
		MMS207	ROOM 207	A		2		
		MMS209	ROOM 209	A		2		
		MMS214	ROOM 214	A		2		
		MMS34	LAB SINK 1F	A	Y	2		
		MMS35	MENS BEFORE LIBRARY	A	Y	2		
		MMS36	NURSES OFFICE	A	Y	2	Y	Y
		MMS57	PREP SINK	A	Y	2		
		MMS62	KITCHEN HAND WASH SI	A	Y	2		
		MMS64	POT WASH SINK	A	Y	2		
		MMS96	MENS SINK 3F	A	Y	2		
		MMS97	LADIES SINK 3F	A	Y	2		
		ROOM 102	ROOM 102	A		2		
		ROOM 103	MMS 103	A		2		
		ROOM 210	ROOM 210	A		2		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00701	ENTRY POINT	3	EP - 1, 3, 4	A				
10377	WELL	2	WELL	A				
53984	WELL 3	2	WELL 3	A				
53989	ATMOSPHERIC TANK							
53993	PUMP STATION							

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0781243	MANSFIELD MIDDLE SCHOOL	NTNC	715	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
205 SPRING HILL ROAD			1				

Towns Served: MANSFIELD

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
WILCOX, MELISSA	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	9/30/2025
CORSON, ALLEN	ASSIGNED OPERATOR	SMALL WATER SYSTEM OPERATOR	6/30/2024

Contact Information

Name		Organization			Job Title		
Mr. Frederick A. Baruzzi		Mansfield Public Schools			Superintendent		
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
4 South Eagleville Road					Storrs Mansfield	CT	06268
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-429-3350		860-429-3379		860-429-3350	baruzzifa@mansfieldct.org		

Contact Role(s): **Owner**

Name		Organization			Job Title		
Mr. Derrik M. Kennedy		Town of Mansfield			Town Manager		
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
4 S. Eagleville Rd					Storrs	CT	06268
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-429-3336					kennedydm@mansfieldct.org		

Contact Role(s): **Legal Contact**

Name		Organization			Job Title		
Mr. Peter Dart		Mansfield Public Schools			Superintendent		
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
4 South Eagleville Rd.					Mansfield	CT	06268
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-429-3350					MBOESupt@mansfieldct.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.

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End of schedule

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0781263	OAK GROVE MONTESSORI SCHOOL	NTNC	77	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
132 PLEASANT VALLEY			1				

Towns Served: MANSFIELD

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094) 1 routine (RT) per nine years

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		

Total Coliform (3100) 1 routine (RT) per quarter

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
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 routine (RT) per year

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
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 routine (RT) per quarter

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
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		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Inorganic Chemicals (IOCS) 1 routine (RT) per three years

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		

Nitrate And Nitrite (NOX) 1 routine (RT) per year

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		

Pesticides, Herbicides and PCBs-Phase II (SOC2) 1 routine (RT) per three years

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
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

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		

Organic Chemicals (VOCS) 1 routine (RT) per three years

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>

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		
CT0781263	OAK GROVE MONTESSORI SCHOOL	NTNC	77	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
132 PLEASANT VALLEY			1				

Towns Served: MANSFIELD

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Organic Chemicals (VOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION EXEMPTION	3/1/2024	
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024	
COMPLETE INITIAL LSL INVENTORY	10/16/2024	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	2	DRINKING FOUNTAIN	P	Y	2		
		4	DISTRIBUTION	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MSP0001	NURSE'S SINK	P	Y	3		
		MSP0002	6-9 CLASSROOM	A	Y	3		
		MSP0003	KITCHEN	A	Y	3		
		MSP0004	SINK 3-6	A	Y	3	Y	
		MSP0005	STAFF BATHROOM	A	Y	3		
		MSP0006	BOYS BATHROOM	A	Y	3		
		MSP0007	GIRLS BATHROOM	A	Y	3		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10379	WELL	2	WELL	A				

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
STAVENS, JOEL	CHIEF OPERATOR	SMALL WATER SYSTEM OPERATOR	6/30/2026

Contact Information

Name	Organization	Job Title				
Ms. Cindy Henry	Oak Grove Montessori School	Administrative Assis				
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
132 Pleasant Valley Road				Mansfield	CT	06250
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-456-1031		860-456-2907			cindy@ogms.org	

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	
CT0781263	OAK GROVE MONTESSORI SCHOOL			NTNC	77	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
132 PLEASANT VALLEY				1				
Towns Served: MANSFIELD								
Contact Role(s): Legal Contact								
Name			Organization			Job Title		
Ms. Sherrie Clune			Oak Grove Montessori School			Head of School		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
1320 Pleasant Valley Road						Mansfield Center	CT	06250
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-456-1031		860-456-2907		860-235-7096	sherrie@ogms.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	Classification	Population	Owner Type	Primary Source		
CT0787023	COMMUNITY CHILDRENS CENTER INC.	NTNC	52	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
797 MANSFIELD CITY ROAD				1			

Towns Served: MANSFIELD

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
DISTRIBUTION SYSTEM (4)	1/1/23 - 12/31/31				
Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/25	6/1-9/30			
	1/1/26 - 12/31/28	6/1-9/30			
Physical Parameters (PPS)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
Water System Facility: ENTRY POINT (WSF ID: 00700)					
Inorganic Chemicals (IOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Nitrate And Nitrite (NOX)		1 routine (RT) per year			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
Organic Chemicals (VOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/21 - 12/31/23		Complete		
	1/1/24 - 12/31/26				
	1/1/27 - 12/31/29				

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0787023	COMMUNITY CHILDRENS CENTER INC.	NTNC	52	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
797 MANSFIELD CITY ROAD				1			
Towns Served: MANSFIELD							

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	4/20/2005	
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024	
COMPLETE INITIAL LSL INVENTORY	10/16/2024	
CROSS CONNECTION EXEMPTION	3/1/2028	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		CCC001	TODDLER ROOM FRONT	A	Y	N		
		CCC002	KITCHEN SINK	A	Y	N		
		CCC003	STAFF BATH	A	Y	N		
		CCC004	PRESCHOOL SINK	A	Y	N		
		CCC005	BACK TODDLER LEFT	A	Y	N		
		CCC006	BACK TODDLER RIGHT	A	Y	N		
		CCC007	PRESCHOOL BATH	A	Y	N		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
48709	WELL #1	2	WELL #1	A				

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2024
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2026
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2025
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026
NIGRO, DAVID	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	3/31/2025

Contact Information

Name			Organization			Job Title		
Ms. Lisa Dahn			Community Children Center			Director		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
797 Mansfield City Rd						Storrs	CT	06268
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-456-7171				860-933-8900	director@communitychildrenscenter.org			
Contact Role(s): Administrative Contact, Legal Contact								

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			
CT0787023	COMMUNITY CHILDRENS CENTER INC.	NTNC	52	P	GW			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
797 MANSFIELD CITY ROAD				1				
Towns Served: MANSFIELD								
Name			Organization			Job Title		
Community Childrens Center Inc								
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
797 Mansfield City Rd P. O. Box 108						Mansfield	CT	06268
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-456-7171					comm.childrens.ctrsnet.net			
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.
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End of schedule