Connecticut Department of Public Health Drinking Water Section									
Water Quality Monitoring and Compliance Schedule									
PWS ID	D PWS Name					Population	Owner Type	Pri	mary Source
CT0820051	POWDER RIDGE SKI LODGE-MAIN BLDG				NTNC	100	Р		GW
Local Address	(where applicable)	Service	ce Resider		Commercia	al Industri	al Combin	ed	Agricultural
99 POWDER H	Connections			2					

2

99 POWDER HILL ROAD

Towns Served: MIDDLEFIELD			
Monitoring R	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600	0)		
Asbestos (1094)		1 routine	e (RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	tine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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 rout	tine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
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 & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (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)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		Complete
	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			Cla	ssification	Population	Owner Type	Primary Source
CT0820051	POWDER RIDGE SKI LODGE-MAIN BLDG				NTNC	100	Р	GW
Local Address (	where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
99 POWDER HI	II ROAD	Connections			2			

Towns Served: MIDDLEFIELD

Other Co	ompliance 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 S	ystem Facili	ity and Sampling Po	oint In	ventor	У		
Water					Total	Lead and		
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper		Stage
Facility ID	)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		PR-2FHS1	2ND FL HAND SINK 1	Α	Υ	N		
		PR-2FHS2	2ND FL HAND SINK 2	Α	Υ	N		
		PR-2FM	2ND FLOOR MENS RM	Α	Υ	N		
		PR-2FW	2ND FLOOR WOMENS RM	Α	Υ	N		
		PR-BHS1	BAR HAND SINK 1	Α	Υ	N		
		PR-HS1	HAND SINK #1	Α	Υ	N	Υ	
		PR-HS2	HAND SINK #2	Α	Υ	N	Υ	
		PR-HS3	HAND SINK #3	Α	Υ	N	Υ	
		PR-MRL	MENS ROOM LEFT SINK	Α	Υ	N		
		PR-MRR	MENS ROOM RIGHT SINK	Α	Υ	N		
		PR-POTS	POT SINK	Α	Υ	N		
		PR-PROD	PRODUCE SINK	Α	Υ	N		
		PR-WRC	WOMENS ROOM CENTER	Α	Υ	N		
			S					
		PR-WRL	WOMENS ROOM LEFT SIN	Α	Υ	N		
		PR-WRR	WOMENS ROOM RIGHT SI	Α	Υ	N		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
22989	MAIN LODGE ARTESIAN WELL	2	WELL 1	Α				

## **Certified Operator Information**

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

Facility Classification: SMALL W	ATER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
RADICCHI, PAUL J.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2024
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2024

				<b>Contact Inf</b>	ormation				
Name				Organization	1			Job Title	
Mr. Sean Hayes				Powdr Ridge	Mtn Prk&Resort,LLC	,	Owner		
Mailing Address Lin	ie One		Mailing A	ddress Line Two			City	State	Zip Code
161 Brownstone Av	venue					Portland		СТ	06480
Rusiness Phone	Extension	Fax		Mohile Phone	Emergency Phone	Fmail Ad	dress		

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									
	Wa	ter Quality N	<b>Jonit</b>	oring an	d Con	npli	iance S	Schedul	e	
PWS ID	PWS ID PWS Name					Clas	sification	Population	Owner Type	Primary Source
CT0820051 POWDER RIDGE SKI LODGE-MAIN BLDG						١	NTNC	100	Р	GW
Local Address (v	where applicable)			Service	Residen	itial	tial Commercial Industrial Combined Agric			ed Agricultural
99 POWDER HIL	L ROAD			Connections		2				
Towns Served: I	MIDDLEFIELD					,		,		
860-918-309	2	860-342-5017					shayes	@brownsto	nepark.com	
Contact Role(s):	Administrative	Contact, Legal Conta	act, Own	er						

Connecticut Department of Public Health Drinking Water Costion

#### 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	g Water	Section	
	Water Quality Monitoring and Con	npliance S	Schedul	e	
ID	PWS Name	Classification	Population	Owner Type	Primary

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0820072	THE ROGERS MANUFACTURING COMPANY				NTNC	100	Р	GW
Local Address (w	here applicable)	Service	Resider	ntial	Commerci	al Industr	ial Combin	ed Agricultural
72 MAIN STREET	-	Connections	1					

72 IVIAIN STREET	Т		
Towns Served: MIDDLEFIELD			
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate (1040)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (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		
Nitrite (1041)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/21 - 12/31/23		Complete
	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		

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
CT0820072	THE ROGERS MANUFACTURING COMPANY				NTNC	100	Р	GW
Local Address (v	here applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
72 MAIN STREET	T	Connections	1					

Monitoring Requirements									
Water System Facility: ENTRY POINT (WSF ID: 00700)									
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years						
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>						
	1/1/26 - 12/31/28								
Organic Chemicals (VOCS)		1 routine	(RT) per three years						
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	Collection Period Compliance Status							
ENTRY POINT (3)	1/1/23 - 12/31/25	-							

water System Facility: WELL (WSF ID: 10393)			
E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
WELL (2)	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		

1/1/26 - 12/31/28

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							

	W	ater System Facili	ity and Sampling P	oint Ir	iventoi	ſy		
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPI
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		5	OFF WR SINK	Α	Υ	2	Υ	Υ
		6	OFF MR SINK	Α	Υ	2	Υ	Υ
		7	PLANT MR SINK	Α	Υ	2	Υ	Υ
		8	PLANT LMR SINK	Α	Υ	2		
		9	PLANT RWR SINK	Α	Υ	2	Υ	Υ
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10393	WELL	2	WELL	Α				
47792	UV TREATMENT	·				·		

Water System Facility: <b>DISTRIBUTIO</b>	N SYSTEM (WSF ID: 0060	00)	
Facility Classification: SMALL WATER SYS	TEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
HELMING, TRAVIS	CHIFF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	9/30/2025

**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 M				C	<b>,</b>				
PWS ID	WS ID PWS Name Classification Population Owner Type Primary Sou								mary Source	
СТ0820072	THE ROGERS MANUFACTURING COM	1PANY			NTNC	100		Р		GW
Local Address (where applicable) Service Residential Comm							ial	Combine	ed	Agricultural
72 MAIN STRE	2 MAIN STREET Connections 1									

Connecticut Department of Public Health Drinking Water Section

Towns Served: MIDDLEFIELD

## **Certified Operator Information**

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

Facility Classification: SMALL WATER SYSTEM

Operator Name

Operator Type

Certification(s)

DISTRIBUTION SYSTEM OPERATOR - CLASS III

9/30/2025

DISTRIBUTION SYSTEM OPERATOR - CLASS III						9/30/2025			
			Co	ontact Inf	ormation				
Name				Organization	ı			Job Title	
Ms. Elizabeth Bitel				The Rogers I	Manufacturing Co.		Hr Manager		
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
72 Main St			PO Box 155			Rockfall		СТ	06481
<b>Business Phone</b>	Extension	Fax	Мо	bile Phone	Emergency Phone	Email Ad	ddress		
860-346-8648						ebitel@	rmc1891.com		

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

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
CT0820362	MIDDLEFIELD FEDERATED CHURCH				NTNC	53	Р	GW
Local Address (v	where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
390 MAIN STREE	ΞΤ	Connections			1			

Towns Served: MIDDLEFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
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 six months
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
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 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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		
Water Quality Parameters (WQPD)		2 routine	(RT) per six months
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	7/1/23 - 12/31/23		Complete
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		·
Lead And Copper (PBCU)		1 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	7/1/23 - 12/31/23		Complete
Lead And Copper (PBCU)		1 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/24 - 6/30/24		•

Page 7

Schedule Generation Date: 4/3/2024

Conne	ecticut Department of	Public Health Drinl	king Water Se	ection
	Water Quality Monito	ring and Complian	ce Schedule	
PWS ID PWS Nam				ner Type Primary Source
CT0820362 MIDDLEFI	ELD FEDERATED CHURCH	NTN	C 53	P GW
Local Address (where appli	-		mercial Industrial	Combined Agricultura
390 MAIN STREET		Connections	1	
Towns Served: MIDDLEFIEI	_D			
	Monito	ring Requirements		
	ENTRY POINT (WSF ID: 00700)			(==\)
<u>-</u>	and PCBs-Phase II (SOC2)	Manitovica Povice		e (RT) per three years
Sampling Point (Samp	oling Point ID)	Monitoring Period		Compliance Status
ENTRY POINT (3)		1/1/23 - 12/31/25 1/1/26 - 12/31/28		
Posticidos Horbicidos	and PCBs-Phase V (SOC5)	1/1/20 - 12/31/20		e (RT) per three years
Sampling Point (Sam)	• •	Monitoring Period		• • •
ENTRY POINT (3)	<u> </u>	1/1/23 - 12/31/25		
		1/1/26 - 12/31/28		
Organic Chemicals (VO	CS)	· · · · ·		e (RT) per three years
Sampling Point (Sam	-	Monitoring Period		
ENTRY POINT (3)		1/1/22 - 12/31/24		
		1/1/25 - 12/31/27	,	
<b>Water Quality Paramet</b>	ers - Basic (WQP1)		2 routir	ne (RT) per six months
Sampling Point (Samp	oling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)		7/1/23 - 12/31/23	}	Complete
Water System Facility:	WELL #1 (WSF ID: 10762)			
E. Coli (3014)			1 ro	utine (RT) per quarter
Sampling Point (Sam	oling Point ID)	Monitoring Period		•
WELL #1 (2)		10/1/23 - 12/31/23	3	Complete
		1/1/24 - 3/31/24		
		4/1/24 - 6/30/24		
		7/1/24 - 9/30/24		
	nthly Water System Facilit	y (WSF) Level Monito	ring Requireme	ents
	ENTRY POINT (WSFID: 00700)		•-	
Analyte	Monitoring Requirement (Summar			Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.		4
<b>Start Date</b> : 10/1/2016	)	Compliance History: Monitoring Period	Operating Limit Compliance Statu	Monitoring 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		
Analyte	Monitoring Requirement (Summar			Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Maximum: 7		4
<b>Start Date:</b> 10/1/2016		Compliance History: Monitoring Period	Operating Limit	Monitoring Status:
		11/1/2023 - 11/20/2023	Compliance Statu	s: comphance status:

11/1/2023 - 11/30/2023 12/1/2023 - 12/31/2023

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Pri	mary Source
СТ0820362	MIDDLEFIELD FEDERATED CHURCH				NTNC	53	Р		GW
Local Address (w	here applicable)	Service	Resider	ntial	Commercia	al Industri	al Combin	ed	Agricultural
390 MAIN STREE	T	Connections			1				

Towns Served: MIDDLEFIELD

Water System Facility	: ENTRY POINT (WSFID: 00700)				
Analyte	Monitoring Requirement (Summary 1	Туре)	<b>Operating Limi</b>	t	Samples Req/Month
рH	Entry Point pH Monitoring (PHRD)		Maximum: 7.4	PH	4
<b>Start Date:</b> 10/1/20	016	Compliance	History:	<b>Operating Limit</b>	Monitoring
		Monitoring I	Period	Compliance Status	: Compliance Status:
		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							
CROSS CONNECTION EXEMPTION	3/1/2015								
DISTRIBUTION SYSTEM MATERIALS EVALUATION	6/15/2020								
CCTS 1: PWS TO RECOMMEND OCCT	3/31/2023								
SWTS 1: PWS TO RECOMMEND SOWT	3/31/2023								
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	9/30/2023								
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	9/30/2023								
CCTS 1: PWS TO RECOMMEND OCCT	12/31/2023								
SWTS 1: PWS TO RECOMMEND SOWT	12/31/2023								
SWTS 1: PWS TO RECOMMEND SOWT	6/30/2024								
CCTS 1: PWS TO RECOMMEND OCCT	6/30/2024								
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	6/30/2024								
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	6/30/2024								
CCTS 5: PWS OCCT INSTALLATION	9/30/2024								
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024								
COMPLETE INITIAL LSL INVENTORY	10/16/2024								
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	12/31/2024								
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	12/31/2024								
CCTS 5: PWS OCCT INSTALLATION	12/31/2025								

	Water System Facility and Sampling Point Inventory										
Water					Total	Lead and					
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper			Stage		
Facility ID	)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP .	2 DBPR		
00600	DISTRIBUTION SYSTEM	10002	WS2720-10	Α	Υ						
		10003	GENERATED BY BATCH	Α	Υ						
		10004	GENERATED BY BATCH	Α	Υ						
		10012	GENERATED BY BATCH	Α	Υ						
		10013	GENERATED BY BATCH	Α	Υ						
		20007	WS2720-33	Α	Υ						
		20008	GENERATED BY BATCH	Α	Υ						
		20010	GENERATED BY BATCH	Α	Υ						
		20011	DISTRIBUTION SYSTEM	Α	Υ						
		4	DISTRIBUTION SYSTEM	Α	Υ						

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.

	C 1' -	4 D	-1 1 -1	CD LIL	II lul. D	1	1 *	<b>TA7</b> -		2 1		
	Connectic	•	rtment of lity Monit				_					
DIA/C ID		ter Qua	iity Moiiit	Joi mg ai							Duineau	
PWS ID	PWS Name	DED 4 TED 61			Clas					Owner Type		
CT0820362	MIDDLEFIELD FE	DEKATED CH	IURCH	c ·	5 .1	NTN	_	5		Р		· I.
	vhere applicable)			Service Connection		Con	nmercia	I In	dustrial	Combin	ed Agr	icultur
390 MAIN STRE				Connection	13		1					
Towns Served: I												
		Water Sy	stem Facil	ity and Sa	ampling Po	oint	Inver	ntor	у			
Water System Wate Facility ID	er System Facility	:	Sampling Point ID	Sampling P		Stati	Tot Colife us Ru	orm	Lead a Coppe Rule T		os WQF	Stage 2 DBI
			DOWNSTREAM	WITHIN 5 S		Α						
			UPSTREAM	WITHIN 5 S	ERVICE CON	Α						
00700 ENT	Y POINT		3	ENTRY POIN	NT	Α						
10762 WEL	_#1		2	WELL #1		Α						
	DLEFIELD FEDERAT	ΓED										
			Certified	Operato	r Informati	ion						
Mater System	Facility: DISTR	IRLITION SV										
•	ation: SMALL WA			<i>D.</i> 00000 <sub>1</sub>							C =1	· C' ' -
Operator Name		TIEN SISIEIVI	Operator Typ	ne.	Certification(s)	)						ificatio iratior
D'SHAUGHNESS			CHIEF OPERATO		WATER TREATN		ΟΙ ΔΝΙΤ	ODE	RATOR.	. CI ASS II		0/202
J STIAOGITIVESS	i, vvictimivi J.			ntact Info		VILIVI	LAN	01 21	<del>trion</del>	CLASS II	0/3	0,202
Name				rganization	illation					Job Tit	0	
	erated Church Inc	•	U	Igailization						100 110	e	
Mailing Address			Mailing Addres	s Line Two				Cit		State	Zin	Code
390 Main St & F			Ivialilig Addres	3 LITTE TWO			Middlef		. у	CT	-	455
Business Phor		Fax	Moh	ile Phone	Emergency Pho		Email A		c	Ci	00	433
860-349-988		Гах	IVIOD	lie Filone	Lineigency File		church.r			om		
	Legal Contact, C	)wner	l l									
Name	,		0	rganization						Job Tit	e	
Vir. Paul Bergei	nholtz				derated Church	1		Buil	ding An	d Grounds		
Mailing Address			Mailing Addres	s Line Two				Cit		State	Zip	Code
102 Main Street						1	Middlef		,	СТ	-	455
Business Phor	e Extension	Fax	Mob	ile Phone	Emergency Pho				S		l .	
860-349-988					860-510-919					bal.net		
	Administrative	Contact							<u> </u>			
Name	1		О	rganization						Job Tit	е	
Mr. John Lymar	ı III				derated Church	)		Chu	rch Mo	derator		
	0		0.0.11: 0.1.1							C	7:	0 1

City

church.mfc@gmail.com

Middlefield

Emergency Phone Email Address

860-510-9198

State

 $\mathsf{CT}$ 

Zip Code

06455

Mailing Address Line Two

Mobile Phone

Mailing Address Line One

Contact Role(s): Legal Contact

Extension

Fax

402 Main Street

**Business Phone** 

860-349-9881

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

				0						
PWS ID	PWS Name					Cla	ssification	Population	Owner Type	Primary Source
СТ0820362	MIDDLEFIELD FEDERA	TED CH	URCH				NTNC	53	Р	GW
Local Address (v	where applicable)			Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
390 MAIN STRE	ET			Connections			1			

#### 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
CT0820382	THE INDEPENDENT DAY SCHOOL				NTNC	199	Р	GW
Local Address (w	here applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
115 LAUREL BRO	OOK ROAD	Connections	1					

Towns Served: MIDDLEFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	0)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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)		10 routine	(RT) per six months
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
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 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
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)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/23 - 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.

(	Conne	cticut Departmen	t of Public H	lealth Dr	inkin	g W	ater S	Secti	on	
		Water Quality Mo	onitoring an	d Compli	ance	Sch	edule	)		
PWS ID	PWS Nam	e		Class	sification	Popu	lation C	)wner T	ype Pı	imary Source
СТ0820382	THE INDE	PENDENT DAY SCHOOL		l l	NTNC	1	99	Р		GW
Local Address (wi	here appli	cable)	Service	Residential (	Commer	cial Ir	ndustrial	Com	bined	Agricultura
115 LAUREL BRO	OK ROAD		Connections	1						
Towns Served: M	11DDLEFIEL	.D								
		Mo	onitoring Requ	uirements						
Water System F	Facility:	ENTRY POINT (WSF ID: 00	700)							
Inorganic Chen	nicals (IC	OCS)					1 rout	ine (RT	) per	three years
Sampling Po	oint (Sam <sub>l</sub>	oling Point ID)		Monitoring Pe	eriod	Collect	ion Peri	od (	Compli	ance Status
				1/1/26 - 12/31	1/28					
Nitrate And Ni	trite (NC	OX)						1 rout	ine (R	T) per year
Sampling Po	oint (Sam <sub>l</sub>	oling Point ID)		Monitoring Pe	eriod	Collect	ion Peri	od (	Compli	ance Status
ENTRY POIN	IT (3)			1/1/23 - 12/31	1/23				Co	mplete
				1/1/24 - 12/31	1/24				Co	mplete
				1/1/25 - 12/31	1/25					
		nd PCBs-Phase II (SOC2)					1 rout	-		three years
		oling Point ID)		Monitoring Pe		Collect	ion Peri	od (	Compli	ance Status
ENTRY POIN	IT (3)			1/1/23 - 12/31						
				1/1/26 - 12/31	1/28					
		nd PCBs-Phase V (SOC5)					1 rout			three years
Sampling Po	oint (Sam <sub>l</sub>	oling Point ID)		Monitoring Pe		Collect	ion Peri	od (	Compli	ance Status
ENTRY POIN	IT (3)			1/1/23 - 12/31	1/25					
				1/1/26 - 12/31	1/28					
Organic Chemi	=						1 ו			per quarter
		oling Point ID)		Monitoring Pe		Collect	ion Peri	od (		ance Status
ENTRY POIN	IT (3)			10/1/23 - 12/3						mplete
				1/1/24 - 3/31					Со	mplete
				4/1/24 - 6/30	-					
				7/1/24 - 9/30	/24					
	Mor	nthly Water System F	Facility (WSF)	Level Mon	itoring	g Req	uiren	nents		
Water System F	Facility: I	ENTRY POINT (WSFID: 007	700)							
Analyte		Monitoring Requirement (S	ummary Type)	Operating	g Limit			Sam	ples Re	eq/Month
Orthophosph		Entry Point Phosphate Moni	<b>O (</b> )	Minimum	: 1.0 M	G/L			2	
Start Date: 9	9/1/2022			ance History:	0	perati	ng Limit		lonitor	_
				ring Period		omplia	nce Stat	us: Co	omplia	nce Status:
				23 - 11/30/202			Υ			
				23 - 12/31/202	23		Υ			
				4 - 1/31/2024			Υ			
				4 - 2/29/2024			Υ			
				4 - 3/31/2024						
Analyte		Monitoring Requirement (S	ummary Type)	Operating	_			Sam	-	eq/Month
Orthophosph		<spaces> ( )</spaces>		Maximum	n: 3.0 M	G/L			2	
Start Date: 9	9/1/2022		•	ance History:		-	ng Limit		lonitor	_
				ring Period		omplia	nce Stat	tus: Co	omplia	nce Status:

11/1/2023 - 11/30/2023 12/1/2023 - 12/31/2023

Connecticut Department of Public Health Drinking Water Section									
Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS ID PWS Name Classification Population Owner Type Primary Source								
CT0820382	THE INDEPENDENT DAY SCHOOL			NTNC	199	Р	GW		
Local Address (v	vhere applicable)	Service	Resident	tial Commerc	ial Industri	al Combine	ed Agricultural		
115 LAUREL BROOK ROAD Connections 1									
Towns Served: N	MIDDLEFIELD								

Water System Facility:	ENTRY POINT (WSFID: 00700)			
Analyte	Monitoring Requirement (Summary Ty	pe) Operating Limit	:	Samples Req/Month
Orthophosphate	<spaces> ( )</spaces>	Maximum: 3.0		2
<b>Start Date:</b> 9/1/2022		Compliance History: Operating L		Monitoring
		Monitoring Period	Compliance Status	
		1/1/2024 - 1/31/2024		
		2/1/2024 - 2/29/2024		
		3/1/2024 - 3/31/2024		
Analyte	Monitoring Requirement (Summary Ty	pe) Operating Limit	:	Samples Req/Month
рН	Entry Point pH Monitoring (PHRD)	Minimum: 7.0	PH	4
<b>Start Date:</b> 9/1/2022		<b>Compliance History:</b>	Operating Limit	Monitoring
		Monitoring Period	Compliance Status	Compliance Status:
		11/1/2023 - 11/30/2023	Υ	
		12/1/2023 - 12/31/2023	Υ	
		1/1/2024 - 1/31/2024	Υ	
		2/1/2024 - 2/29/2024	Υ	
		3/1/2024 - 3/31/2024		
	Other Comp	liance Schedules		
Compliance Schedule Activ	vitv	Due Date	Achieved	Date

Compliance Schedule Activity  Due Date  Achieved Date									
Compliance Schedule Activity	Due Date	Achieved Date							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2011								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/30/2024								
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024								
COMPLETE INITIAL LSL INVENTORY	10/16/2024								
CROSS CONNECTION SURVEY REPORT	3/1/2025	·							

	Wat	er System Facili	ity and Sampling P	oint 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 WQP 2 DBP
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		A-11	A-11 FACULTY RM	Α	Υ	2	Υ	Υ
		A-18	A-18 SCIENCE RM	Α	Υ	2	Υ	Υ
		A-28	A-28 BOYS RM	Α	Υ	2	Υ	Υ
		A-32	A-32 PHYS ED BOYS	Α	Υ	2	Υ	Υ
		A-3B	A-3B BATHROOM	Α	Υ	N	Υ	Υ
		B-2	B-2 BOYS RM	Α	Υ	N	Υ	Υ
		B-22	B-22 HAND SINK	Α	Υ	N	Υ	Υ
		B-8	B-8 ART RM	Α	Υ	N	Υ	Υ
		C-1	C-1 STAGE SINK	Α		N	Υ	Υ
		C-6	C-6 JANITOR SINK	Α		N	Υ	Υ
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
		WF-1	WATER FOUNTAIN 1	Α		2		

	Connecticut Department of Public Health Drinking Water Section										
	Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name			Classification		Population	Owner Type	Primary Source			
CT0820382	CT0820382 THE INDEPENDENT DAY SCHOOL				NTNC	199	Р	GW			
Local Address (	where applicable)	Service Resid		tial	Commerci	al Industri	al Combine	ed Agricultural			
115 LAUREL BROOK ROAD		Connections	1								
Towns Served:	owns Served: MIDDLEFIELD										

	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	WQP	Stage 2 DBPR	
		WFS-1	WATER FILL STATION 1	Α		2				
		WFS-2	WATER FILL STATION 2	Α	Υ					
		WFS-3	WATER FILL STATION 3	Α		N				
		WFS-4	WATER FILL STATION 4	Α	Υ	N				
00700	ENTRY POINT	3	ENTRY POINT	Α						
10395	WELL	2	WELL	А						
62556	TREATMENT PLANT									

62556 TREATM	ENT PLANT									
			Cert	ified Opera	tor Information	1				
Water System Fac	ility: DISTRI	BUTION SY	STEM (	(WSF ID: 00600	0)					
Facility Classification	n:								Certification	
Operator Name			Opera	tor Type	Certification(s)				Expiration	
ROWLEY, BRENDAN			CHIEF OI	PERATOR	DISTRIBUTION SYS	TEM OPE	RATOR - CLA	SS I	12/31/2025	
					WATER TREATMEN	WATER TREATMENT PLANT OPERATOR - CLASS II				
Water System Fac	ility: TREAT	MENT PLA	NT (WS	F ID: 62556)						
Facility Classification	n: CLASS 1 TR	EATMENT PI	_ANT						Certification	
Operator Name Operator Type			Certification(s)				Expiration			
ROWLEY, BRENDAN	ROWLEY, BRENDAN CHIEF OPERATOR			PERATOR	DISTRIBUTION SYS	DISTRIBUTION SYSTEM OPERATOR - CLASS I				
WATER TREATMENT PLANT OPERATOR - CLASS II					· CLASS II	12/31/2025				
				Contact In	formation					
Name				Organizatio	on			Job Title		
Mr. James Rumberg	ger			The Indepe	endent Day School	Dir of Facilit	Dir of Facilities			
Mailing Address Lin	e One		Mailing	Address Line Tw	0		City	State	Zip Code	
115 Laurel Brook Ro	oad					Middlefi	ield	СТ	06455	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress			
860-347-7235		860-347-8	8852			rumberg	gerj@indepe	ndentdaysch	ool.org	
Contact Role(s): Ac	dministrative (	Contact								
Name				Organizatio	on			Job Title		
Dr. Rochelle Reodic	a			The Indepe	endent Day School		Head of Sch	nool		
Mailing Address Line	e One		Mailing Address Line Two			City	State	Zip Code		
115 Laurel Brook Ro	l					Middlefi		СТ	06455	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ac	ddress			
860-347-7235						reodicar	@independe	entdayschoo	l.org	
Contact Role(s): Le	gal Contact									

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

	water quanty monitoring and domphance beneaute									
PWS ID	PWS Name			Cla	ssification	ification Population		Primary Source		
CT0820382	THE INDEPENDENT DAY SCHOOL				NTNC	NTNC 199		GW		
Local Address	Local Address (where applicable)		ce Residen		Commerci	al Industri	al Combine	ed Agricultural		
115 LAUREL BROOK ROAD		Connections	1							
		•			•	•	•	· · · · · · · · · · · · · · · · · · ·		

#### 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 C			Cla	ssification	Population	Owner Type	Primary Source	
CT0820392	MEMORIAL MIDDLE SCHOOL				NTNC	359	L	GW
Local Address (v	here applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
124 HUBBARD S	TREET	Connections	1					

Towns Served: MIDDLEFIELD	-		
	ng Requirements		
	<u> </u>		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	0600)	4	(DT)
Asbestos (1094)	Manitonian David		(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28	4 1	· /DT\
Total Coliform (3100)	Manitonian Davied		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		
Lood And Conney (DDCU)	7/1/24 - 9/30/24	F	(DT) th
Lead And Copper (PBCU)	Monitoring Pariod	Collection Period	(RT) per three years
Sampling Point (Sampling Point ID)  Select from Inventory of Active Sampling Points	Monitoring Period		Compliance Status
Select from inventory of Active Sampling Points	1/1/21 - 12/31/23 1/1/24 - 12/31/26	6/1-9/30 6/1-9/30	Complete
Dharical Dagaratana (DDC)	1/1/27 - 12/31/29	6/1-9/30	: /DT\
Physical Parameters (PPS)	Manitonian David		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		
Mater Creters Facility FAITRY POINT (MCF ID. 00700)	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)		4	(D=)
Inorganic Chemicals (IOCS)	Manitonian David		(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/22 - 12/31/24		
atte e a latte te (arast)	1/1/25 - 12/31/27		.: />=\
Nitrate And Nitrite (NOX)	Adamitanton Daviad		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		
Destruction of the second page o	1/1/25 - 12/31/25	4	(DT)
Pesticides, Herbicides and PCBs-Phase II (SOC2)	Manitarian Daviad		(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
D WILL WILL LOOP DI W (COOP)	1/1/26 - 12/31/28		(n=)
Pesticides, Herbicides and PCBs-Phase V (SOC5)	Manifestus Decision		(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	-	(57)
Organic Chemicals (VOCS)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

	Connecticut Dep	partment of	Public Health	n Drinki	ng W	ater Se	ction	
	Water Ou	ialitv Monit	oring and Con	npliand	e Sch	edule		
PWS ID	PWS Name		011118 011101 0011				ner Type P	rimary Sourc
СТ082039	2 MEMORIAL MIDDLE SCHO	OOL		NTNC		59	L	GW
ocal Addı	ress (where applicable)		Service Resider	ntial Comm	ercial Ir	ndustrial	Combined	Agricultur
	SARD STREET		Connections 1					
owns Ser	rved: MIDDLEFIELD							
		Monito	oring Requireme	ents				
Vater Sy	stem Facility: ENTRY POINT	(WSF ID: 00700)						
Organic	Chemicals (VOCS)					1	routine (F	RT) per yea
Samp	pling Point (Sampling Point ID)		Monitor	ing Period	Collect	ion Period	Compli	iance Status
ENTR	RY POINT (3)		1/1/23 -	12/31/23			Co	mplete
			1/1/24 -	12/31/24				
			1/1/25 -	12/31/25				
		Other Co	ompliance Sched	dules				
omplian	ce Schedule Activity			Due Date		Achieved	Date	
ROSS CO	NNECTION SURVEY REPORT			3/1/2024				
JBMIT LI	EAD SERVICE LINE INVENTORY			10/16/2024	-			
OMPLET	E INITIAL LSL INVENTORY		1	10/16/2024				
	Water	System Facili	ty and Sampling	g Point Ir	vento	ry		
Water		•			Total	Lead and		
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper		Stag
acility ID	)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2 DBI
00201	ATM STORAGE #1							
00202	ATM STORAGE #2							
00302	TRANSFER PUMPS							
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTIO	N A	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CO	N A				
		MEMSCH001	KITCHEN SINK 1	Α	Υ	2	Υ	
		MEMSCH002	KITCHEN SINK 2	Α	Υ	2	Υ	
		MEMSCH003	KITCHEN SINK 3	Α	Υ	2	Υ	
		MEMSCH004	KITCHEN SINK 4	Α	Υ	2	Υ	
		MEMSCH005	BOYS BATHROOM	Α	Υ	2	Υ	
		MEMSCH006	GIRLS BATHROOM	Α	Υ	2	Υ	
		MEMSCH007	LOCKER RM	Α	Υ	2	Υ	
		MEMSCH008	TEACHER LOUNGE	Α	Υ	2	Υ	
		MEMSCH009	SCIENCE ROOM	Α	Υ	2	Y	
		MEMSCH010		Α	Υ	2	Υ	
		MEMSCH011	ART ROOM	Α	Y	2	Υ	
		UPSTREAM	WITHIN 5 SERVICE CO		-	_	•	
00700	ENTRY POINT	3	ENTRY POINT	A				
10403	WELL #3	2	WELL #3	A				
10403	VV LLL #3	۷	VV ELL #3	A				

# Certified Operator Information

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

10405 WELL #5

Facility Classification:SMALL WATER SYSTEMCertificationOperator NameOperator TypeCertification(s)ExpirationKORNATZ, CHRISTOPHERCHIEF OPERATORWATER TREATMENT PLANT OPERATOR - CLASS II3/31/2024

WELL #5

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	Dr	in	king	z W	'ater	Sec	ction		
Water Quality Monitoring and Compliance Schedule									
DIAGON.	-01				1.00				

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0820392	MEMORIAL MIDDLE SCHOOL				NTNC	359	L	GW
Local Address (w	here applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
124 HUBBARD S	TREET	Connections	1					

			C	ontact Inf	ormation				
Name		Organization	ı	Job Title					
Mrs. Patricia Smith		Regional Sch	nool District 13	Operations Manager					
Mailing Address Line One Mailing Addr				ress Line Two			City Stat		Zip Code
135A Pickett Lane					Durham		СТ	06422	
Business Phone	Extension	Fax	N	lobile Phone	Emergency Phone	Email Address			
860-349-7238						psmith@rsd13.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 Water Quality Mon				Č			
PWS ID	PWS Name Classification Population Owner T						Owner Type	Primary Source
СТ0829013	JOHN LYMAN SCHOOL				NTNC	285	L	GW
Local Address	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural	
106 WAY ROAD Connections								

Towns Served: MIDDLEFIELD			'
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	500)		
Asbestos (1094)		1 routine	e (RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	tine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
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)	<b>Monitoring Period</b>	<b>Collection Period</b>	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 rout	tine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	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		
Water System Facility: ENTRY POINT - WELLS 1 & 3 (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
- 1-7	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		,
	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
- 1-7	1/1/24 - 12/31/24	<u> </u>	p
	1/1/25 - 12/31/25		
	_, _,		

# 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
CT0829013	JOHN LYMAN SCHOOL				NTNC	285	L	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
106 WAY ROAD		Connections	1					

Towns Served: MIDDLEFIELD

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

	Water	System Facili	ty and Sampling P	oint Ir	ventor	У		
Water System Facility IE	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		JOHNLY001	KITCHEN SINK	Α	Υ	2	Υ	
		JOHNLY002	BOYS BATHROOM	Α	Υ	2	Υ	
		JOHNLY003	GIRLS BATHROOM	Α	Υ	2	Υ	
		JOHNLY004	ART ROOM	Α	Υ	2	Υ	
		JOHNLY005	NURSES OFFICE	Α	Υ	2	Υ	
		JOHNLY006	MEDIA HALLWAY	Α	Υ			
		JOHNLY007	ROOM 2B	Α	Υ			
		JOHNLY008	MEDIA BOYS	Α	Υ			
		JOHNLY009	PORTABLE #1	Α	Υ			
		JOHNLY010	PORTABLE #4	Α	Υ			
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT - WELLS 1 & 3	3	ENTRY POINT	Α				
10397	WELL #1	2	WELL 1	Α				
58015	WELL #3	2	WELL 3	Α				
58022	PUMP STATION							
ST01	ATMOSPHERIC TANK 1							
ST02	ATMOSPHERIC TANK 2							

### **Certified Operator Information**

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

 Facility Classification:
 SMALL WATER SYSTEM
 Certification

 Operator Name
 Operator Type
 Certification(s)
 Expiration

 KORNATZ, CHRISTOPHER
 CHIEF OPERATOR
 WATER TREATMENT PLANT OPERATOR - CLASS II
 3/31/2024

	nation

			C	ontact ini	ormation				
Name		Organization			Job Title				
Mrs. Patricia Smith				Regional Sch	ool District 13		Operations Manager		
Mailing Address Line One Mailing Add				ess Line Two			City	Zip Code	
135A Pickett Lane						Durham		СТ	06422
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	ne Email Address			
860-349-7238						psmith@rsd13.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	on
Water Quality Monitoring and Compliance Schedule	

			0						
PWS ID	PWS Name				Cla	ssification	Population	Owner Type	Primary Source
СТ0829013	JOHN LYMAN SCHOO	L				NTNC	285	L	GW
Local Address (v	where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
106 WAY ROAD			Connections	1					

#### 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 C			Cla	ssification	Population	Owner Type	Primary Source	
CT0829023 LYMAN ORCHARD COUNTRY FARMS COMPLEX				NTNC	84	Р	GW	
Local Address (v	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural	
32 REEDS GAP R	OAD	Connections	6					4

Towns Served: MIDDLEFIELD	-		·
	ng Requirements		
	· ·		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: C	10600)	1	(DT) nor ning year
Asbestos (1094) Sampling Point (Sampling Point ID)	Monitoring Period	1 routine	e (RT) per nine year Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28	Collection Period	Compliance Status
	1/1/20 - 12/31/20	1 rout	ino (DT) nor quarto
Total Coliform (3100) Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	ine (RT) per quarte  Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23	Collection Period	Complete
Select from inventory of Active Sampling Folits	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		Complete
	7/1/24 - 9/30/24		
Lead And Copper (PBCU)	7/1/24 - 3/30/24	Ev	outine (RT) per yea
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
Sciect from inventory of Active Sampling Forits	1/1/24 - 12/31/24	6/1-9/30	complete
	1/1/25 - 12/31/25	6/1-9/30	
Physical Parameters (PPS)	1/1/25 - 12/51/25		ine (RT) per quarte
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23	Conection Feriod	Complete
Select from inventory of Active Sampling Folits	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		Complete
	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)	7/1/24 - 3/30/24		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/22 - 12/31/24	Conection remod	Compliance Status
LIVINI I OIIVI (3)	1/1/25 - 12/31/27		
Nitrate And Nitrite (NOX)	1/1/25 12/51/27	1 r	outine (RT) per yea
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23	Concession remod	Complete
ENTITY ONLY (5)	1/1/24 - 12/31/24		complete
	1/1/25 - 12/31/25		
Pesticides, Herbicides and PCBs-Phase II (SOC2)	1,1,23 12,31,23	1 routine	(RT) per three year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		Compilario Status
Livini i Gilvi (3)	1/1/26 - 12/31/28		
Pesticides, Herbicides and PCBs-Phase V (SOC5)	1/1/20 12/01/20	1 routine	(RT) per three year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25	2023	January Status
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)	1,1,20 12,31,20	1 r	outine (RT) per yea
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
NOTE: This information has been provided to help owners and operators of public			

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

PWS ID PWS Name C			Cla	ssification	Population	Owner Type	Primary Source	
CT0829023 LYMAN ORCHARD COUNTRY FARMS COMPLEX				NTNC	84	Р	GW	
Local Address (v	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural	
32 REEDS GAP R	OAD	Connections	6					4

Towns Served: MIDDLEFIELD

## **Monitoring Requirements**

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

,			
Organic Chemicals (VOCS)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		

### **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	3/1/2028		

Water Sy	ystem Facility	and Sampling	Point Inventory
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	Trate. s	yotem raem	ty and bamping i	J		7		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	tage DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		MW001	MENS ROOM	Α	Υ			
		MW002	LADIES ROOM	Α	Υ	2		
		MW004	PRODUCE SINK	Α	Υ			
		MW004-B	BAKERY SINK	Α	Υ	2		
		MW004-D	DELI SINK	Α	Υ	2		
		MW004-PRO	PRODUCE SINK	Α	Υ	2		
		MW01	MENS ROOM	Α	Υ	2	Υ	
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10398	WELL #4 (GOLF MAINTENANCE BLDG)	2	WELL #4	Α				
10399	WELL #3 (SOUTH WELL)	2	WELL #3	Α				
10763	WELL #5 (CLUB HOUSE)	2	WELL #5	Α				
59360	HYDROPNEUMATIC TANK (SOUTH WELL)							
59362	HYDROPNEUMATIC TANK (GOLF MAINTENANCE)							

### **Certified Operator Information**

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

water system racinty. District	DOTION STSTEIN (WST ID. 000	00)	
Facility Classification: SMALL WA	TER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
BRAIG, ALLEN L.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2025
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	12/31/2024

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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
СТ0829023	LYMAN ORCHARD COUNTRY FARMS COMPL	EX			NTNC	84	Р	GW
Local Address (v	where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
32 REEDS GAP F	ROAD	Connections	6					4

			Organization	າ			Laboration	
						Job Title		
			Lyman Orcha	ards Country Farms	owner Owner			
ne		Mailing A	Mailing Address Line Two			City	State	Zip Code
					Middlefie	eld	СТ	06455
Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	dress		
6001	203-349-2	1424			JLYMAN3@LYMANORCHARDS.COM			
X	tension	tension Fax	tension Fax	tension Fax Mobile Phone	tension Fax Mobile Phone Emergency Phone	Middlefie tension Fax Mobile Phone Emergency Phone Email Ad	Middlefield tension Fax Mobile Phone Emergency Phone Email Address	Middlefield CT tension Fax Mobile Phone Emergency Phone Email Address

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

Connecticut Department of Public Health Drinking Water Section									
	Water Quality Monit	oring and	d Con	npl	iance S	chedul	e		
PWS ID	PWS Name		Clas	ssification	Population	Owner Type	Primary Source		
СТ0829084	6 WAY ROAD				NTNC	78	Р	GW	
Local Address	(where applicable)	Service	Residen	itial	Commercia	l Industri	al Combine	ed Agricultural	
6 WAY ROAD Connections					1				

6 WAY ROAD

Towns Served: MIDDLEFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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)	<b>Monitoring Period</b>	<b>Collection Period</b>	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 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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)	<b>Monitoring Period</b>	<b>Collection Period</b>	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	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25	1/1-12/31	Waiver
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		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.

	Co		•	artment o							ection	
			ter Qua	lity Moni	itoring a	ind Con	_					
PWS ID		/S Name								on Ow		rimary Source
CT082908		VAY ROAD					NT		78		Р	GW
		re applicable)			Service	Residen	tial Co	mmercial	Indus	strial	Combined	Agricultural
6 WAY RO					Connectio	ns 1		1				
Towns Ser	ved: MIDI	DLEFIELD										
				Moni	toring Re	quireme	nts					
Water Sy	stem Fac	ility: ENTR	Y POINT (V	WSF ID: 00700	0)							
Organic	Chemica	ls (VOCS)								1	routine (	RT) per year
Samp	oling Poin	t (Sampling P	oint ID)			Monitori	ing Peri	od Col	lection	Period	Compl	iance Status
						1/1/24 -	12/31/2	24				
						1/1/25 -	12/31/2	25				
				Other (	Complian	ce Sched	lules					
Compliand	e Schedu	le Activity				ı	Due Da	te	Ac	hieved	Date	
SUBMIT LE	AD SERVI	CE LINE INVE	NTORY			1	0/16/20	)24				
COMPLETE	E INITIAL L	SL INVENTOR	Υ			1	0/16/20	)24				
CROSS CO	NNECTIO	N EXEMPTION					3/1/202	25				
			Water S	ystem Faci	ility and S	Sampling	Poin	t Inven	tory			
Water								Tot	al Le	ad and	1	
System	_	stem Facility		Sampling Poin				Colife		opper		Stage
Facility ID	1			ID	Descriptio	n	Sta	tus Ru	le Ri	ule Tiei	Asbestos	WQP 2 DBPR
00600	DISTRIBL	ITION SYSTEM	1	4	DISTRIBUT	ION SYSTEM	1 /	A				
				4-1	BATHROO	M	,	A		1		
				4-2	LAUNDRY		,	Ą		1		
				4-3	OUTSIDE_	SOUTH	,	Ą		1		
				4-4	ENTRANCE		,	Ą		1		
				4-5 KITCHEN_SINK			,	A		1		
				DOWNSTREAM	M WITHIN 5	SERVICE CO	N A	A				
				UPSTREAM	WITHIN 5	SERVICE CO	N A	4				
00700	ENTRY P	TNIC		3	ENTRY PO	INT	,	A				
59452	WELL 1			2	WELL 1		,	A				
				Certified	d Operato	or Inform	ation	1				
Water Sy	stem Fac	ility: DISTR	IBUTION S	YSTEM (WSF	ID: 00600)							
Facility Cla	assificatio	n: SMALL WA	ATER SYSTEM	1								Certification
Operator I	Name			Operator Ty	ре	Certification	n(s)					Expiration
COSSETTE	, EVAN J			CHIEF OPERAT	ΓOR	WATER TRE	ATMEN	IT PLANT	OPERAT	ΓOR - C	LASS IV	6/30/2024
			DISTRIBUTION SYSTEM OPERATOR IN TRAINING						6/30/2024			
						DISTRIBUTI	ON SYS	TEM OPER	RATOR -	- CLASS	II	9/30/2024
				Co	ntact Info	ormation						
Name					Organization						Job Title	
Mr. Samu	el Eddinge	er			6 Way Road L	.LC			Owner			
Mailing Ad	ldress Lin	e One		Mailing Addre	ess Line Two				City		State	Zip Code
17 Louis R	oad							Middlefi	eld		СТ	06455
Business	Phone	Extension	Fax	Mo	bile Phone	Emergency	/ Phone	Email Ad	dress			

sam@ironcladpm.com

860-254-7343

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

860-254-7343

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

				0		<u> </u>			
PWS ID	PWS Name					Classification	Population	Owner Type	Primary Source
CT0829084	6 WAY ROAD					NTNC	78	Р	GW
Local Address (where applicable)		Service	Resider	ntial Commerc	ial Industri	al Combine	ed Agricultural		
6 WAY ROAD		Connections	1	1 1					

#### 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