PWS ID PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT0910502	T0910502 AQUARION WATER CO OF CT – NEW FAIRFIELD				NTNC	275	L	GW
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
4 BRUSH HILL RO	OAD (ROUTE 39)	Connections	3					

- SHOOT THEE HOTE (HOOTE 03)	3		
Towns Served: NEW FAIRFIELD			
Monitor	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Haloacetic Acids (2456)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
96RT37 DRS REST RM (03936)	1/1/23 - 12/31/23	9/1-9/30	
	1/1/24 - 12/31/24	9/1-9/30	
	1/1/25 - 12/31/25	9/1-9/30	
Total Trihalomethanes (2950)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
SHAWS BREAK RM SINK (03937)	1/1/23 - 12/31/23	9/1-9/30	Complete
	1/1/24 - 12/31/24	9/1-9/30	•
	1/1/25 - 12/31/25	9/1-9/30	
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23	_	Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		•
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/23	6/1-9/30	Complete
, , ,	1/1/24 - 12/31/24		· ·
	1/1/25 - 12/31/25		
Physical Parameters (PPS)			tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	1/24 1/24 1/24 1/24 1/24 1/24 31/24 5 reeriod Collection Period 1/23 6/1-9/30 1/24 6/1-9/30 1/25 6/1-9/30 1 rou 1 rou 1 collection Period 30/23 31/23	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		r
	4/1/24 - 4/30/24	<u> </u>	

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

Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT0910502 AQUARION WATER CO OF CT – NEW FAIRFIELD					NTNC	275	L	GW	
Local Address (where applicable)		Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural	
4 BRUSH HILL RO	Connections	3							

Connecticut Department of Public Health Drinking Water Section

Towns Served: NEW FAIRFIELD **Monitoring Requirements** Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) **Physical Parameters (PPS)** 1 routine (RT) per month Sampling Point (Sampling Point ID) **Monitorina Period Collection Period Compliance Status** 5/1/24 - 5/31/24 6/1/24 - 6/30/24 7/1/24 - 7/31/24 8/1/24 - 8/31/24 9/1/24 - 9/30/24 10/1/24 - 10/31/24 Water System Facility: ENTRY POINT (WSF ID: 00700) **Inorganic Chemicals (IOCS)** 1 routine (RT) per three years Sampling Point (Sampling Point ID) **Monitoring Period Collection Period Compliance Status** 1/1/22 - 12/31/24 **ENTRY POINT (3)** 1/1/25 - 12/31/27 **Nitrate And Nitrite (NOX)** 1 routine (RT) per year Sampling Point (Sampling Point ID) **Monitoring Period Collection Period Compliance Status ENTRY POINT (3)** 1/1/23 - 12/31/23 Complete 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Pesticides, Herbicides and PCBs-Phase II (SOC2) 1 routine (RT) per three years Sampling Point (Sampling Point ID) **Monitoring Period Collection Period Compliance Status ENTRY POINT (3)** 1/1/23 - 12/31/25 1/1/26 - 12/31/28 Pesticides, Herbicides and PCBs-Phase V (SOC5) 1 routine (RT) per three years Sampling Point (Sampling Point ID) **Monitoring Period Collection Period Compliance Status ENTRY POINT (3)** 1/1/23 - 12/31/25 1/1/26 - 12/31/28 **Organic Chemicals (VOCS)** 1 routine (RT) per year Sampling Point (Sampling Point ID) **Collection Period Compliance Status Monitoring Period ENTRY POINT (3)** 1/1/23 - 12/31/23 Complete 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Water System Facility: WELL 1 (WSF ID: 10430) 1 routine (RT) per quarter E. Coli (3014) Sampling Point (Sampling Point ID) **Monitoring Period Collection Period Compliance Status** 10/1/23 - 12/31/23 WELL (2) Complete 1/1/24 - 3/31/24 Complete 4/1/24 - 6/30/24 7/1/24 - 9/30/24

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

Water System Facility: WELL 2 (WSF ID: 48685)

	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								
CT0910502	AQUARION WATER CO OF CT – NEW FAIRFIELD	NTNC	275	L	GW				

Connections

Residential Commercial

3

7/1/24 - 9/30/24

Industrial

Combined

Agricultural

Service

4 BRUSH HILL ROAD (ROUTE 39) Towns Served: NEW FAIRFIELD

Local Address (where applicable)

Monitoring Requirements							
Water System Facility: WELL 2 (WSF ID: 48685)							
E. Coli (3014)	1 routine (RT) per quart						
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
WELL 2 (2)	10/1/23 - 12/31/23		Out of Service				
	1/1/24 - 3/31/24						
	4/1/24 - 6/30/24						
	7/1/24 - 9/30/24						
Water System Facility: WELL 3 (WSF ID: 48687)							
E. Coli (3014)		1 rout	ine (RT) per quarter				
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
WELL 3 (2)	10/1/23 - 12/31/23		Complete				
	1/1/24 - 3/31/24		Complete				
	4/1/24 - 6/30/24						

Other Compliance Schedules								
Compliance Schedule Activity	Due Date	Achieved Date						
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2010							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2011							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2011							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/30/2012							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2012							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2013							
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2020							
CROSS CONNECTION SURVEY REPORT	3/1/2022							
CROSS CONNECTION SURVEY REPORT	3/1/2023							
CROSS CONNECTION SURVEY REPORT	3/1/2024	<u> </u>						
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024							
COMPLETE INITIAL LSL INVENTORY	10/16/2024							

	Water System Facility and Sampling Point Inventory									
Vater System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR			
DISTRIBUTION SYSTEM	03935	NF WPCA DISTRIBUTION	Α	Υ						
	03936	96RT37 DRS REST RM	Α	Υ	1		Υ			
	03937	SHAWS BREAK RM SINK	Α	Υ	1		Υ			
	4	DISTRIBUTION SYSTEM	Α	Υ						
	DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
	NFDR020	96RT37 THERAP R RM	Α	Υ	1					
	NFLIB017	LIBRARY REST RM	Α	Υ	1					
		DISTRIBUTION SYSTEM 03935 03936 03937 4 DOWNSTREAM NFDR020	ID Description DISTRIBUTION SYSTEM 03935 03936 03937 03937 SHAWS BREAK RM SINK 4 DISTRIBUTION SYSTEM DOWNSTREAM DOWNSTREAM NFDR020 96RT37 THERAP R RM	ID Description Status DISTRIBUTION SYSTEM 03935 NF WPCA DISTRIBUTION A 03936 96RT37 DRS REST RM A 03937 SHAWS BREAK RM SINK A 4 DISTRIBUTION SYSTEM A DOWNSTREAM WITHIN 5 SERVICE CON A NFDR020 96RT37 THERAP R RM A	Vater System Facility Sampling Point Description Status OSTRIBUTION SYSTEM O3935 NF WPCA DISTRIBUTION A Y O3936 96RT37 DRS REST RM A Y O3937 SHAWS BREAK RM SINK A Y DOWNSTREAM WITHIN 5 SERVICE CON NFDR020 96RT37 THERAP R RM A Y	Vater System Facility Sampling Point Description Status OSPER OSTRIBUTION SYSTEM OSPER OSPER	Vater System Facility Sampling Point ID Description Status OSPER Rule Tier Asbestos OSTRIBUTION SYSTEM OSPER OSPER OSPER OSPER OSPER ASPESTOR OSPER O			

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.

PWS ID PWS Name		Classification	Population	Owner Type	Primary Source		
CT0910502	0910502 AQUARION WATER CO OF CT – NEW FAIRFIELD			NTNC	275	L	GW
Local Address (where applicable)		Service	Resider	ntial Commerc	ial Industri	al Combine	ed Agricultural
4 BRUSH HILL R	OAD (ROUTE 39)	Connections	3				

Towns Served: NEW FAIRFIELD			1	,	'		'
Wa	ater System Facil	ity and Sampling P	oint Ir	vento	γ		
Water System Water System Facility Facility ID		Sampling Point Description	Status	Total Coliform Rule	Lead and Copper	Asbestos	Stag WQP 2 DB
	NFPL021	STARBUCKS REST RM	A	Υ	1		
	NFPL022	NAIL SALON REST RM	Α	Υ	1		
	NFPL023	LIQUOR STORE REST R	Α	Υ	1		
	NFSH006	SHAWS FLORIST	Α	Υ	1		
	NFSH007	SHAWS PROD H SINK	Α	Υ	1		
	NFSH008	SHAWS MENS RM SINK	Α	Υ	1		
	NFSH009	SHAWS LADIES RM SINK	Α	Υ	1		
	NFSH011	SHAWS BAKERY H SINK	Α	Υ	1		
	NFSH012	SHAWS GROCERY H SIN	Α	Υ	1		
	NFSH013	SHAWS MEAT H SINK	Α	Υ	1		
	NFSH014	SHAWS SEAFOOD H SIN	Α	Υ	1		
	NFSH015	SHAWS DELI H SINK	Α	Υ	1		
	NFSH016	SHAWS TRPL SINK	Α	Υ	1		
	NFTH001	KITCHEN	Α	Υ	1	Υ	
	NFTH002	LWR LVL R RM	Α	Υ	1		
	NFTH003	LADIES RM	Α	Υ	1		
	NFTH004	MENS RM	Α	Υ	1		
	NFTH005	FIN DEPT KITCHEN	Α	Υ	1		
	NFTH018	TOWN HALL ANNEX	Α	Υ	1		
	PB8959	35 PAGE RD STAFF BAT	Α		1		
	PB8960	35 PAGE RD I T KITCH	Α		1		
	PB8961	35 PAGE RD PRESCHOOL	Α		1		
	PB8962	35 PAGE RD CHILD BAT	Α		1		
	PB8963	35 PAGE RD ART SINK	Α		1		
	PB8964	50 BEEBE HILL RD	Α		3		
	PB8965	100 BEEBE HILL RD	Α		3		
	PB8966	114 BEEBE HILL RD	Α		3		
	PB8967	17 FACCHIN ST	Α		3		
	PB8968	21 FACCHIN ST	Α		3		
	PB8969	22 FACCHIN ST	Α		3		
	PB8970	32 MAIN ST	Α		3		
	PB8971	38 MAIN ST	Α		3		
	PB8972	93 MAIN ST	Α		3		
	PB8973	104 MAIN ST	Α		3		
	PB8974	19 PROSPECT ST	Α		3		
	PB8975	40 PROSPECT ST	Α		3		
	PB8976	55 PROSPECT ST	Α		3		
	PB8977	45 RAILROAD ST	Α		3		
	PB8978	92 RAILROAD ST	Α		3		

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

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

PWS ID PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT0910502	T0910502 AQUARION WATER CO OF CT – NEW FAIRFIELD				NTNC	275	L	GW
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
4 BRUSH HILL RO	DAD (ROUTE 39)	Connections	3					

Towns Served: NEW FAIRFIELD

Wat	er System Facil	ity and Sampling P	oint Ir	vento	ry		
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	tage DBPR
	PB8979	5 CT 39 STARBUCKS	Α		N		
	PB8980	1 BRUSH HILL RD FOOD	Α		N		
	PB8981	2 BRUSH HILL RD PUBL	Α		N		
	PB8982	4 BRUSH HILL RD TOWN	Α		N		
	PB8983	1 BRUSH HILL RD LIQU	Α		N		
	UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700 ENTRY POINT	3	ENTRY POINT	Α				
10430 WELL 1	2	WELL	Α				
48685 WELL 2	2	WELL 2	Α				
48687 WELL 3	2	WELL 3	Α				
48694 TREATMENT PLANT							
55715 ATMOSPHERIC STORAGE							-

Certified C	Operator	Information
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Water System Facility: TREATMENT PLANT (WSF ID: 48694)

Facility Classification: CLASS 1 TF	REATMENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
PASSECK, PETER	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2025
		WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2024
LAGO, ANTHONY V.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2025
		WATER TREATMENT PLANT OPERATOR - CLASS III	6/30/2025
COYLE, BRIAN	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	12/31/2025
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2024
OSBORN, BRADLEY E.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2026
		WATER TREATMENT PLANT OPERATOR IN TRAINING	9/30/2026

				Contact Inf	formation				
Name				Organization	า			Job Title	
Mr. John P. Walsh				Aquarion W	ater Company		Vice President		
Mailing Address Lin	e One		Mailing Ad	dress Line Two		City		State	Zip Code
835 Main Street			Mail Stop	700		Bridgepo	ort	CT	06604
Business Phone	Extension	Fax		Mobile Phone	obile Phone Emergency Phone		dress		
203-337-5852		203-337-5	5938		781-413-6175	jwalsh@aquarionwater.com			
					·				

Contact Role(s): Legal Contact, Owner

C	lonnectic	ut Departme	ent of	Public :	Health	Drir	ıking	Water	Section	
	Wat	ter Quality N	Monito	oring ar	nd Con	nplia	nce S	chedul	e	
PWS ID P	WS Name					Classif	ication	Population	Owner Type	Primary Source
CT0910502 A	QUARION WAT	QUARION WATER CO OF CT – NEW FAIRFIELD					NC	275	L	GW
Local Address (who	ere applicable)			Service	Residen	itial Co	mmercia	al Industri	al Combin	ed Agricultural
4 BRUSH HILL ROA	D (ROUTE 39)			Connection	S 3					
Towns Served: NE	W FAIRFIELD			,	,					
Name			Org	ganization					Job Titl	е
Mr. Robert J. Ulric	:h		Aqı	uarion Wate	er Compan	y of Ct		Vp-Supply	/ & Utility	
Mailing Address Li	ne One	Mailing	g Address	Line Two				City	State	Zip Code
Aquarion Water Co	ompany of Ct	505 Hu	untington	St.			Shelton	1	СТ	06484
Business Phone	Extension	Fax	Mobile	e Phone	Emergency	/ Phone	Email A	ddress	,	
203-926-4320		203-929-5297			203-395	-3205	rulrich(@aquarionw	vater.com	
Contact Role(s):	Administrative (Contact	1	·			1			

Contact Role(s): Administrative Contact

Please note the following:

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

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

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

End of schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0910532	NEW FAIRFIELD HIGH/MIDDLE SCHOOL				NTNC	1,791	L	GW
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
54 GILLOTTI RO	AD	Connections	1					

Towns Served: NEW FAIRFIELD			
Monito	ring Requirements		
Vater System Facility: DISTRIBUTION SYSTEM (WSF ID	: 00600)		
Chlorine Residual (1012)		2 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
Asbestos (1094)		1 routine	e (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		
Total Haloacetic Acids (2456)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
K DBL SINK L (NFHS004)	1/1/23 - 12/31/23	9/1-9/30	Complete
	1/1/24 - 12/31/24	9/1-9/30	
	1/1/25 - 12/31/25	9/1-9/30	
Total Trihalomethanes (2950)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
SCIENCE ROOM 202 (NFMS003)	1/1/23 - 12/31/23	9/1-9/30	Complete
	1/1/24 - 12/31/24	9/1-9/30	
	1/1/25 - 12/31/25	9/1-9/30	
Total Coliform (3100)		2 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Lead And Copper (PBCU)		20 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/23 - 12/31/23		Complete
	1/1/24 - 6/30/24		
	7/1/24 - 12/31/24		

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

	Connecticut Department	of Public H	lealth D	rinkin	ıg V	<i>N</i> ater :	Sect	tion	
	Water Quality Mo								
PWS ID	PWS Name	<u> </u>						Type Pri	imary Sourc
CT0910532	NEW FAIRFIELD HIGH/MIDDLE SCHOOL			NTNC		1,791	L		GW
Local Address	(where applicable)	Service	Residential	Commer	cial	Industria	l Co	mbined	Agricultura
54 GILLOTTI R	ROAD	Connections	1						
Towns Served	: NEW FAIRFIELD	1		1	,		1		1
	Мо	nitoring Requ	irement	S					
Water Syster	m Facility: DISTRIBUTION SYSTEM (W	SF ID: 00600)							
Physical Par	ameters (PPS)					2	rout	ine (RT)	per month
Sampling	Point (Sampling Point ID)		Monitoring	Period	Coll	ection Peri	od	Complia	ince Status
Select from Inventory of Active Sampling Points			11/1/23 - 11	/30/23				Cor	nplete
			12/1/23 - 12	/31/23				Cor	nplete
		1/1/24 - 1/31/24						Complete	
		2/1/24 - 2/29/24						Cor	nplete
			3/1/24 - 3/3	31/24				Cor	nplete
			4/1/24 - 4/3	30/24					
			5/1/24 - 5/3	31/24					
			6/1/24 - 6/3						
			7/1/24 - 7/3	31/24					
			8/1/24 - 8/3	31/24					
			9/1/24 - 9/3						
			10/1/24 - 10	/31/24					
Water Syster	m Facility: ENTRY POINT (WSF ID: 007	'00)							
_	nemicals (IOCS)					1 rout	ine (I	-	hree years
	Point (Sampling Point ID)		Monitoring		Coll	ection Peri	od	Complia	ince Status
ENTRY PO	DINT (3)		1/1/23 - 12/	/31/25					
			1/1/26 - 12/	/31/28					
	Nitrite (NOX)						1 ro	=	T) per year
	Point (Sampling Point ID)		Monitoring		Coll	ection Peri	od		ince Status
ENTRY PO	DINT (3)		1/1/23 - 12/						nplete
			1/1/24 - 12/	/31/24				Cor	nplete
			1/1/25 - 12/	/31/25					

			•
	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 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	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		
Monthly Water System Facility (\	WSF) Level Monitorii	ng Requiremen	ts

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

PWS ID	PWS Name			Cla	ssification	Population	Ow	vner Type	Prim	nary Source
CT0910532	NEW FAIRFIELD HIGH/MIDDLE SCHOOL				NTNC	1,791		L		GW
Local Address (w	here applicable)	Service	Resider	ntial	Commerci	al Indust	ial	Combine	ed A	Agricultural
54 GILLOTTI RO	AD	Connections	1							

Towns Served: NEW FAIRFIELD

Water System Facility:	ENTRY POINT (WSFID: 00700)				
Analyte	Monitoring Requirement (Summary Type)		Operating Limit	t	Samples Req/Month
Chlorine	Entry Point RDC (EPRD)		Minimum: 0.25 MG/L		Continuous
Start Date: 12/1/202	3	Compliance	History:	Operating Limit	Monitoring
		Monitoring	Period	Compliance Status	: Compliance Status:
		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 Compliance Schedules							
Compliance Schedule Activity	Due Date	Achieved Date					
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019						
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2019						
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						

Public Notification Requirements										
	Compliance	Notice	Public No	tification	PN Certij	fication				
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received				
Total Coliform M&R Violation	3/1/23 - 3/31/23	3	8/22/2024		9/1/2024					
Chlorine M&R Violation	4/1/23 - 6/30/23	3	8/22/2024		9/1/2024					
Chlorine M&R Violation	4/1/23 - 6/30/23	3	8/22/2024		9/1/2024					
Physical Parameters M&R Violation	3/1/23 - 3/31/23	3	9/5/2024		9/15/2024					
Chlorine M&R Violation	1/1/23 - 3/31/23	3	9/5/2024		9/15/2024					
E. Coli M&R Violation	2/1/23 - 2/28/23	3	9/5/2024		9/15/2024					
Physical Parameters M&R Violation	2/1/23 - 2/28/23	3	9/5/2024		9/15/2024					

·	Wat	ter System Facili	ity and Sampling P	oint Ir	ventor	'V	<u> </u>	
Water			,		Total	Lead and		
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper		Stage
Facility ID)	ID Description Status Rule		Rule	Rule Tier	Asbestos	WQP 2 DBPR	
00600	DISTRIBUTION SYSTEM	4	NFHS004 - KITCHEN DI	1				
		4 - NFHS	HIGH SCHOOL DISTRIBU	Α				
		4 - NFMS	MIDDLE SCHOOL DISTRI	Α				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		NFHS001	NURSES SINK	1	Υ	1		
		NFHS002	WF NURSES SINK	1	Υ	1	Υ	
		NFHS003	K HAND SINK	1	Υ	1		
		NFHS004	K DBL SINK L	1	Υ	1		Υ
		NFHS005	K DBL SINK R	1	Υ	1		
		NFHS006	WF NEAR GYM	1	Υ	1		
		NFHS007	L RM BY RM 209	1	Υ	1		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source	
CT0910532	NEW FAIRFIELD HIGH/MIDDLE SCHOOL	NTNC	1,791	L	GW	
Local Address (Service	Resider	ntial Commerci	al Industri	al Combine	ed Agricultural
54 GILLOTTI RO	Connections	1				

Towns Served: NEW FAIRFIELD							
Wat	ter System Facil	ity and Sampling F	oint Ir	vento	У		
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPF
	NFHS008	L RM OFFICE	I	Υ	1		
	NFHS009	ART RM R SINK	I	Υ	1		
	NFHS010	ART RM L SINK	I	Υ	1		
	NFHS011	WF RM 109	I	Υ	1		
	NFHS012	WF RM 223	1	Υ	1		
	NFHS013	MAIN OFF R RM	I	Υ	1		
	NFHS014	WM RM STAFF	1	Υ	1		
	NFHS015	WM RM NEAR RM 210	I	Υ	1		
	NFHS016	L RM STAFF ENT	I	Υ	1		
	NFHS017	KITCHEN DI	I	Υ	1		
	NFHS018	1ST FLR RM 115	Α	Υ	N		
	NFHS019	1ST FLR RM 126A	Α	Υ	N		
	NFHS020	1ST FLR RM 150	Α	Υ	N		
	NFHS021	1ST FLR RM 146	Α	Υ	N		
	NFHS022	1ST FLR RM 107	Α	Υ	N		
	NFHS023	1ST FLR RM 145	Α	Υ	N		
	NFHS024	1ST FLR RM 139	Α	Υ	N		
	NFHS025	2ND FLR RM 232A	Α	Υ	N		
	NFHS026	2ND FLR RM 232	Α	Υ	N		
	NFHS027	2ND FLR RM 202	Α	Υ	N		
	NFHS028	2ND FLR RM 204	Α	Υ	N		
	NFHS029	2ND FLR RM 213	Α	Y	N		
	NFHS030	2ND FLR RM 215	Α	Υ	N		
	NFHS031	2ND FLR RM 229B	Α	Y	N		
	NFHS032	3RD FLR RM 316	Α	Υ	N		
	NFHS033	3RD FLR RM 312	Α	Y	N		
	NFHS034	3RD FLR RM 302	Α	Υ	N		
	NFHS035	3RD FLR RM 304	Α	Y	N		
	NFMS001	NURSES SINK	Α	Y	1		
	NFMS002	STAFF LOUNGE	Α	Y	1		
	NFMS003	SCIENCE ROOM 202	Α		1	Υ	Υ
	NFMS018	GIRL LKR COACH BA	A	Υ	1	•	•
	NFMS019	2ND FL 6GD BOYS	A	Υ	1		
	NFMS020	2ND FL 6GD GIRLS	A	Ϋ́	1		
	NFMS021	7GD GIRLS	A	Υ	1		
	NFMS022	7GD BOYS	A	Ϋ́	1		
	NFMS023	8GD BOYS	A	Ϋ́	1		
	NFMS024	8GD GIRLS	A	Ϋ́	1		
	NFMS025	GROUND FLR GIRLS BA	A	Ϋ́			
	INFINIOUZO	GUOOND LIK GIKIS BA	А	Y	1		

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PWS ID PWS Name C						Population	Owner Type	Primary Source
СТ0910532	NEW FAIRFIELD HIGH/MIDDLE SCHOOL		NTNC	1,791	L	GW		
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combin	ed Agricultural
54 GILLOTTI RO	AD	Connections	1					

Towns Served: NEW FAIRFIELD

	Water System Facility and Sampling Point Inventory										
Water System Wo Facility ID	ater System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPI			
		NFMS026	GROUND FLR BOYS BA	Α	Υ	1					
		NFMS027	BOYS LKR COACH BA	Α	Υ	1					
		NFMS028	WOMENS BA ACRS RM125	Α	Υ	1					
		NFMS029	MENS BA ACRS RM125	Α	Υ	1					
		NFMS030	CYBERSPACE RM 120	Α	Υ	1					
		NFMS031	ART RM 122	Α	Υ	1					
		NFMS032	KIT HANDWASHING SINK	Α	Υ	1					
		NFMS033	KIT PREP SINK	Α	Υ	1					
		NFMS034	KIT LADIES RM	Α	Υ	1					
		NFMS035	KIT MENS RM	Α	Υ	1					
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700 EN	ITRY POINT	3	ENTRY POINT	Α							
10434 W	ELL #3	2	WELL #3	Α							
10435 W	ELL #2	2	WELL #2	Α							
47804 AT	MOSPHERIC STORAGE										
52293 W	ELL #4	2	WELL 4	Α							
52976 TR	EATMENT PLANT										
57826 PU	JMP FACILITY										

	Certified O	perator intori	mation

water system Facility: DIS	IKIBUTION SYSTEM (WSF ID: 006	00)	
Facility Classification: CLASS 1	DISTRIBUTION SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
GRANT, SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2026

		٠
water system Facility.	TREATMENT PLANT (WSF ID: 5297	h)

Facility Classification: CLASS 1 TREATMENT PLANT								
Operator Name	Operator Type	Certification(s)	Expiration					
GRANT, SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2026					
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2026					

DISTRIBUTION SYSTEM OPERATOR - CLASS II									
			Contact Inf	formation					
	Organization	า	Job Title						
Mr. Philip A. Ross New Fair					irfield Public Schools Director B&Grounds				
e One		Mailing Ad	dress Line Two		City State Zip Co				
					New Fair	rfield	СТ	06812	
Extension	Fax		Mobile Phone	Emergency Phone	Email Ac	nail Address			
	203-312-	5780	203-994-0091		ross.phil@newfairfieldschools.org			S	
		Extension Fax	e One Mailing Ac	Organization New Fairfiel e One Mailing Address Line Two Extension Fax Mobile Phone	Contact Information Organization New Fairfield Public Schools e One Mailing Address Line Two Extension Fax Mobile Phone Emergency Phone	Contact Information Organization New Fairfield Public Schools e One Mailing Address Line Two New Fair Extension Fax Mobile Phone Emergency Phone Email Ac	Contact Information Organization New Fairfield Public Schools Poirector B8 One Mailing Address Line Two City New Fairfield Extension Fax Mobile Phone Emergency Phone Email Address	Contact Information Organization New Fairfield Public Schools Pone Mailing Address Line Two Mew Fairfield New Fairfield New Fairfield CT Extension Fax Mobile Phone Emergency Phone Email Address	

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

	Connectic	ut Depa	rtme	nt of	Public	Health	Drir	ıking	Water	Sec	ction		
	Wat	ter Qua	lity M	onite	oring ar	nd Com	iplia	nce S	chedu	le			
PWS ID	PWS Name		-				Classifi	cation	Population	Owne	er Type Pr	imary Source	
CT0910532	NEW FAIRFIELD	HIGH/MIDD	LE SCHO	DL			NT	NC	1,791		L	GW	
Local Address (w	here applicable)				Service	Residen	tial Co	mmercia	al Industr	ial (Combined	Agricultural	
54 GILLOTTI ROA	ND				Connection	s 1							
Γowns Served: N	EW FAIRFIELD												
Contact Role(s):	Administrative	Contact											
Name O					ganization				Job Title				
New Fairfield													
Mailing Address	Line One		Mailing A	Address	Line Two				City		State	Zip Code	
4 Brush Hill Rd								New Fairfield CT 06			06812		
Business Phone	e Extension	Fax		Mobil	bile Phone Emergency Phone			Email A	ddress				
Contact Role(s):	Owner												
Name				Or	ganization						Job Title		
Ms. Patricia Del	Monaco			To	wn of New F	airfield			First Sele	ctman			
Mailing Address	Line One		Mailing A	Address	Line Two				City		State	Zip Code	
4 Brush Hill Rd								New Fa	irfield		СТ	06812	
Business Phone	e Extension	Fax		Mobil	e Phone	Emergency	Phone	Email A	ddress				
203-312-5600		203-312-	5612			203-240-	0143	pdelmonaco@newfairfield.org					
Contact Role(s)	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

PWS ID PWS Name C				Cla	ssification	Population	Owner Type	Primary Source
CT0915053 CONSOLIDATED & MEETING HOUSE HILL SCHOOL					NTNC	1,425	L	GW
Local Address (v	where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
12 - 24 GILLOTT	ROAD	Connections	3					

Towns Served: NEW FAIRFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Lead And Copper (PBCU)		20 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/23 - 12/31/23		Complete
	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)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
CONSOLIDATED SCHOOL 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.

	Connecticut Department o Water Quality Moni				_	,		
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0915053	CONSOLIDATED & MEETING HOUSE HILL SO	CHOOL			NTNC	1,425	L	GW
Local Address (where applicable)		Service	Residen	itial	Commerci	al Industri	al Combin	ed Agricultural
12 - 24 GILLOTT	TROAD	Connections	3					

Towns Served: NFW FAIRFIFI D

Towns Served: NEW FAIRFIELD							
Monito	ring Requirements						
Water System Facility: ENTRY POINT (WSF ID: 00700)							
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years				
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
	1/1/26 - 12/31/28						
Nitrate And Nitrite (NOX)		1 routine (RT) per					
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
CONSOLIDATED SCHOOL ENTRY POINT (3)	1/1/23 - 12/31/23		Complete				
	1/1/24 - 12/31/24						
	1/1/25 - 12/31/25						
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years				
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
CONSOLIDATED SCHOOL ENTRY POINT (3)	1/1/23 - 12/31/25						
	1/1/26 - 12/31/28						
Organic Chemicals (VOCS)		1 routine	(RT) per three years				
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
CONSOLIDATED SCHOOL ENTRY POINT (3)	1/1/23 - 12/31/25						
	1/1/26 - 12/31/28						
Other Co	mpliance Schedules						
Compliance Schedule Activity	Due Date	Achieved D	ate				
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012						

Other Compliance Schedules										
Compliance Schedule Activity	Due Date	Achieved Date								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012									
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013									
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019		_							
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	12/31/2023									
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	12/31/2023									
CCTS 5: PWS OCCT INSTALLATION	6/30/2024									
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024									
COMPLETE INITIAL LSL INVENTORY	10/16/2024									
CROSS CONNECTION SURVEY REPORT	3/1/2025									

0.1000 00	WINDERTON SORVET REFORM		5/	1/2023				
	Wat	ter System Facil	ity and Sampling P	oint In	vento	у		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		CS001	WF OS RM 622	Α	Υ	N	Υ	
		CS002	NURSE SINK	Α	Υ	N		
		CS003	BTHRM SINK MO	Α	Υ	N		
		CS004	CUST CLST OS RM 622	Α	Υ	N		
		CS005	ROOM 632	Α	Υ	N		
		CS006	ROOM 633	Α	Υ	N		
		CS007	ROOM 634	Α	Υ	N		
		CS008	ROOM 635	Α	Υ	N		

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PWS ID PWS Name (Classification	Population	Owner Type	Primary Source
CT0915053	5053 CONSOLIDATED & MEETING HOUSE HILL SCHOOL				1,425	L	GW
Local Address (v	vhere applicable)	Service	Resider	tial Commerci	al Industri	al Combine	ed Agricultural
12 - 24 GILLOTT	I ROAD	Connections	3				

Towns Ser	rved: NEW FAIRFIELD							
	Water S	ystem Facili	ty and Sampling Po	oint In	ventor	у		
Water System Facility ID	Water System Facility	-	Sampling Point Description		Total Coliform Rule	Lead and Copper	Asbestos	Stage WQP 2 DBP
		CS009	ROOM 637	A	Υ	N		
		CS010	ROOM 622	Α	Υ	N		
		CS011	ROOM 623	Α	Υ	N		
		CS012	ROOM 621	Α	Υ	N		
		CS013	ROOM 619	Α	Υ	N		
		CS014	ROOM 715	Α	Υ	N		
		CS015	ROOM 716	Α	Υ	N		
		CS016	ROOM 717	Α	Υ	N		
		CS017	WF OS RM 717	Α	Υ	N		
		CS019	ROOM 722	Α	Υ	N		
		CS020	ROOM 720	Α	Υ	N		
		CS021	ROOM 719	Α	Υ	N		
		CS022	BTHRM SNK RHT RM 600	Α	Υ	N		
		CS023	ROOM 603	Α	Υ	N		
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		MHS001	NURSE ROOM SINK	Α	Υ	1		
		MHS002	NURSE EXAM RM SINK	Α	Υ	1		
		MHS003	FACULTY RM SINK	Α	Υ	1		
		MHS004	ROOM 405	Α	Υ	1		
		MHS005	ROOM 211	Α	Υ	1		
		MHS006	ROOM 513	Α	Υ	1		
		MHS007	ROOM 304	Α	Υ	1		
		MHS008	CAFE KIT DBL SINK	Α	Υ	1		
		MHS009	100 GRLS BTHRM SNK	Α	Υ	1		
		MHS010	100 WING WF	Α	Υ	1		
		MHS011	GYM OFFICE SNK	Α	Υ	1		
		MHS012	WF RM 407	Α	Υ	1		
		MHS013	CRS RM 501	Α	Υ	1		
		MHS014	ROOM 502 WRK ROOM	Α	Υ	1		
		MHS015	ROOM 202	Α	Υ	1		
		MHS016	KIT HAND SINK	Α	Υ	1		
		MHS017	200 WF ELEVATOR	Α	Υ	1		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	CONSOLIDATED SCHOOL	Α				
10440	CONSOLIDATED SCHOOL WELL 1	2	CONSOLIDATED SCHOOL	Α				
52295	CONSOLIDATED SCHOOL WELL 2	2	CONSOLIDATED SCHOOL	Α				
58609	MHHS TANK							
58611	CS TANK							

	Water Quality Monitoring and Compliance Schedule									
PWS ID PWS Name				Clas	ssification	Population	Owner Type	Primary Source		
CT0915053	CONSOLIDATED & MEETING HOUSE HILL SCH	IOOL			NTNC	1,425	L	GW		
Local Address (w	ddress (where applicable) Service Residential Commercial Industrial Com		al Combine	ed Agricultural						
12 - 24 GILLOTTI	ROAD	Connections	3							

Connecticut Department of Public Health Drinking Water Section

Towns Served: NEW FAIRFIELD

TOWIS Served. NEW	/ I AINI ILLD								
			Cert	tified Operate	or Information)			
Water System Fac	cility: DISTRI	IBUTION SY	STEM	(WSF ID: 00600)					
Facility Classification	n: SMALL WA	TER SYSTEM							Certification
Operator Name			Opera	tor Type	Certification(s)				Expiration
GRANT, SHANE			CHIEF O	PERATOR	WATER TREATMEN	T PLANT	OPERATOR	- CLASS II	9/30/2026
					DISTRIBUTION SYSTEM OPERATOR - CLASS II				9/30/2026
				Contact Inf	ormation				
Name				Organization				Job Title	
Mr. Philip A. Ross New Fairfield Public Schools Director B&Grou						&Grounds			
Mailing Address Lin	e One		Mailing Address Line Two City				City	State	Zip Code
56 Gillotti Road						New Fai	rfield	СТ	06812
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress		
203-312-5779		203-312-5	780	203-994-0091	ross.phil@newfairfieldschools.org				
Contact Role(s): Ac	dministrative (Contact							
Name				Organization				Job Title	
Ms. Patricia Del Mo	naco			Town of New	/ Fairfield		First Select	man	
Mailing Address Lin	e One		Mailing	Mailing Address Line Two				State	Zip Code
4 Brush Hill Rd				New Fairfield				CT	06812
Business Phone	Extension	Fax		Mobile Phone Emergency Phone Email Address					
203-312-5600		203-312-5	612		203-240-0143	pdelmor	naco@newfa	airfield.org	
Contact Role(s): Le	gal 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

PWS ID	PWS Name				Clas	ssification	Population	Owner Type	Primary Source
CT0915103	HERITAGE PLAZA					NTNC	54	Р	GW
Local Address (v	vhere applicable)		Service	Resident	tial	Commerci	al Industri	al Combine	ed Agricultural
28 ROUTE 39			Connections	21					

Towns Served: NEW FAIRFIELD				
Monitoring	Requirements			
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	00)			
Asbestos (1094)		1 routine	(RT) per nine years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		Complete	
Total Coliform (3100)		1 rou	tine (RT) per month	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete	
	12/1/23 - 12/31/23		Complete	
	1/1/24 - 1/31/24		Complete	
	2/1/24 - 2/29/24		Complete	
	3/1/24 - 3/31/24		Complete	
	4/1/24 - 4/30/24			
	5/1/24 - 5/31/24			
	6/1/24 - 6/30/24			
	7/1/24 - 7/31/24			
	8/1/24 - 8/31/24			
	9/1/24 - 9/30/24			
	10/1/24 - 10/31/24			
Total Coliform (3100)		3 re	peat (RP) per period	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
Select from Inventory of Active Sampling Points	10/19/23 - 10/24/23		Complete	
Lead And Copper (PBCU)		5 routine	(RT) per six months	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
Select from Inventory of Active Sampling Points	7/1/23 - 12/31/23		Complete	
	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)	Monitoring Period	Collection Period	Compliance Status	
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete	
	12/1/23 - 12/31/23		Complete	
	1/1/24 - 1/31/24		Complete	
	2/1/24 - 2/29/24		Complete	
	3/1/24 - 3/31/24		Complete	
	4/1/24 - 4/30/24			
	5/1/24 - 5/31/24			
	6/1/24 - 6/30/24			
	7/1/24 - 7/31/24			
	8/1/24 - 8/31/24			
	9/1/24 - 9/30/24			
	3/ 1/ 2 : 3/ 30/ 2 :			

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
CT0915103	HERITAGE PLAZA				NTNC	54	Р	GW
Local Address (v	here applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
28 ROUTE 39		Connections	21					

Towns Served: NEW FAIRFIELD

Water

Towns Served: NEW FAIRFIELD			
Monitoring	Requirements		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Nitrate And Nitrite (NOX)		1 rc	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	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: WELL 2 (WSF ID: 11012)			
E. Coli (3014)		1 trigge	red (TG) per period
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL 2 (2)	10/18/23 - 10/24/23		Complete
Water System Facility: WELL 3 (WSF ID: 11013)			
E. Coli (3014)		1 trigge	red (TG) per period
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL 3 (2)	10/18/23 - 10/24/23		Complete
Other Compl	iance Schedules		
Compliance Schedule Activity	Due Date	Achieved De	ate
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019		
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024		
COMPLETE INITIAL LSL INVENTORY	10/16/2024		
CROSS CONNECTION SURVEY REPORT	3/1/2025		
		vontory	
Water System Facility an	iu Samping Point in	ventory	

Sustem Water Sustem Facility Sampling Point Sampling Point Coliform Conner Stage
NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements.

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Lead and

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Total

T0915103 ocal Addres 8 ROUTE 39	HERITAGE PLAZA				J.a.J.J.I.ICatil	11 1 0	pulation	When Type I	rimary Sourc
					NTNC		54	Р	GW
0 DOLITE 20	ss (where applicable)		Service	Residenti	al Comme	rcial	Industrial	Combined	Agricultura
O KOUTE 3:	9		Connections	21					
owns Serve	ed: NEW FAIRFIELD								
acility ID	,	ID	Description		Status	Rule	Rule T	ier Asbestos	WQP 2 DBP
00500 B	ETWEEN GAC FILTERS								
00600 D	ISTRIBUTION SYSTEM	4	GENERIC DIST	RIBUTION	А	Υ			
		DOWNSTREAM	WITHIN 5 SER	VICE CON	Α				
		HP1	OFFICE SINK		Α	Υ	1	Υ	
		HP2	KITCHEN DOL	BLE SINK	Α	Υ	1		
		HP3	KITCHEN SING	SLE SINK	Α	Υ	1		
		HP4	LADIES ROOM	I SINK	Α	Υ	1		
		HP5	NURSERY RES	T ROOM	Α	Υ	1		
		HP6	NURSERY KITO	CHEN	Α	Υ	1		
		UPSTREAM	WITHIN 5 SER	VICE CON	Α				
00700 E	NTRY POINT	3	ENTRY POINT		Α				
11012 V	VELL 2	2	WELL 2		Α				
11013 V	VELL 3	2	WELL 3		Α				
	IERITAGE PLAZA TREATMENT TATION								
60876 A	TMOSPHERIC TANK 1								
60878 A	TMOSPHERIC TANK 2								
		Certified	Operator	Informa	ition				

Connecticut Department of Public Health Drinking Water Section

 Facility Classification:
 CLASS 1 TREATMENT PLANT
 Certification

 Operator Name
 Operator Type
 Certification(s)
 Expiration

 LEMKE, BRIAN
 CHIEF OPERATOR
 WATER TREATMENT PLANT OPERATOR - CLASS I
 3/31/2024

			Co	ntact Inf	ormation				
				Organization				Job Title	
nero				Lordae Prope	erty Management		Manager		
e One		Mailing	Addre	ess Line Two			City	State	Zip Code
		Suite 20	1			West Ha	rrison	NY	10604
Extension	Fax		Мо	bile Phone	Emergency Phone	Email Ac	ldress	,	
	914-762-2	1730				office@l	ordae.com		
	e One	e One Extension Fax	e One Mailing Suite 20	nero e One Mailing Addre Suite 201 Extension Fax Mo	Organization Lordae Prope e One Mailing Address Line Two Suite 201 Extension Fax Mobile Phone	e One Mailing Address Line Two Suite 201 Extension Fax Mobile Phone Emergency Phone	Organization Lordae Property Management e One Mailing Address Line Two Suite 201 West Ha Extension Fax Mobile Phone Emergency Phone Email Ac	Organization Lordae Property Management Manager e One Mailing Address Line Two City Suite 201 West Harrison Extension Fax Mobile Phone Emergency Phone Email Address	Organization Job Title Lordae Property Management Manager e One Mailing Address Line Two City State Suite 201 West Harrison NY Extension 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	g Water	Section	
Water Quality Monitoring and Con	npliance S	Schedul	e	
PWS Name	Classification	Population	Owner Type	Primary

PWS ID PWS Name		Cla	ssification	Population	Owner Type	Primary Source		
CT0915203	74 ROUTE 37, LLC				NTNC	130	Р	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
74 ROUTE 37		Connections			1			

741001237			
Towns Served: NEW FAIRFIELD		1	1
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006)	•		
Asbestos (1094)	•	1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		,
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		•
	7/1/24 - 9/30/24		
Lead And Copper (PBCU)	., , ,	10 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/23 - 12/31/23		Complete
, , ,	1/1/24 - 6/30/24		Complete
	7/1/24 - 12/31/24		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
, 1 0	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)	<u> </u>		
Chloride (1017)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	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		
Inorganic Chemicals (IOCS)	, , , , , , , , , , , , , , , , ,	1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/21 - 12/31/23		Complete
. ,	1/1/24 - 12/31/26		•
	1/1/27 - 12/31/29		
Nitrate And Nitrite (NOX)	., , ,	1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
• •	1/1/24 - 12/31/24		•
	1/1/25 - 12/31/25		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		

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	Connecticut Department	t of Public H	ealth	Drinkin	g Water	Section	
	Water Quality Mo	nitoring and	d Con	npliance	Schedul	le	
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
СТ0915203	74 ROUTE 37, LLC			NTNC	130	Р	GW
Local Address (where applicable)	Service	Residen	tial Commerc	cial Industri	al Combine	ed Agricultural
74 ROUTE 37			1				
Towns Served:	NEW FAIRFIELD	,			,		

TOWIS SERVEU. INEW PAINFIELD			
Monito	oring 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)	Monitoring Period	Collection Period	Compliance Status
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		
Water System Facility: WELL #1 (WSF ID: 10769)			
E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL #1 (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		
Other Co	ompliance Schedules		

Other Compliance Schedules									
Compliance Schedule Activity	Due Date	Achieved Date							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/30/2024								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2024								
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	ivento	ſy		
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPR
00600 DISTRIBUTION SYSTEM	001	NAIL SALON RR SK	Α	Υ	N		
	002	BRT BEG RM 5 L RR SK	Α	Υ	N		
	003	BRT BEG RM 5 M RR SK	Α	Υ	N		
	004	BRT BEG RM 5 R RR SK	Α	Υ	N		
	005	BRT BEG RM 6 L RR SK	Α	Υ	N		
	006	BRT BEG RM 6 M RR SK	Α	Υ	Ν		
	007	BRT BEG RM 6 R RR SK	Α	Υ	Ν		
	008	BRT BEG RM 7 L RR SK	Α	Υ	Ν		
	009	BRT BEG RM 7 M RR SK	Α	Υ	Ν		
	010	BRT BEG RM 7 R RR SK	Α	Υ	Ν		
	011	UNIT 8 REST RM SNK	Α	Υ	Ν		
	012	UNIT 9 REST RM SNK	Α	Υ	N		
	013	UNIT 10 REST RM SNK	Α	Υ	N		
	4	DISTRIBUTION SYSTEM	Α	Υ			

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dominous a open unions of radio from 2 minutes valor southern										
Water Quality Monitoring and Compliance Schedule										
PWS ID PWS Name				Classification		Population	Owner Type	Primary Source		
CT0915203	70915203 74 ROUTE 37, LLC				NTNC	130	Р	GW		
Local Address (where applicable)		Service	Residentia		Commerci	al Industri	al Combin	ed Agricultural		
74 ROUTE 37		Connections			1					

Connecticut Department of Public Health Drinking Water Section

Towns Served: NEW FAIRFIELD

Water System Facility and Sampling Point Inventory										
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBP			
	DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
	UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700 ENTRY POINT	3	ENTRY POINT	Α							
10769 WELL #1	2	WELL #1	Α							
45698 TREATMENT PLANT										

45698 TREATIVI	ENT PLANT								
			Certifie	d Operat	or Information	1			
Water System Fac	cility: TREA	MENT PLA	NT (WSF ID	: 45698)					
Facility Classification	on: CLASS 2 TI	REATMENT P	LANT						Certification
Operator Name Operator			Operator T	уре		Expiration			
RINALDI, EVELYN CHII			CHIEF OPERA	ATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III				6/30/2025
					WATER TREATMEN	6/30/2025			
					WATER TREATMEN	6/30/2024			
LEMKE, BRIAN ASSIGNED O			PERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I			3/31/2024		
			Co	ontact Inf	formation				
Name Organ				Organization	nization Job Titl				
Andreia Pereira				Aep Investments LLC			President		
Mailing Address Line One Mailing Add				ress Line Two		City State		State	Zip Code
74 Rt 37						New Fai	rfield	СТ	06812
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone Email Address				
203-746-5994					203-617-5776	aepinve	stments@gm	ail.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.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.
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End of schedule

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