

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0999043	TILCON CONNECTICUT INC. - NORTH BRANFORD	NTNC	38	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
ROUTE 22 & 80			1				

Towns Served: NORTH BRANFORD

Monitoring Requirements

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

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

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

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

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		

Lead And Copper (PBCU) 5 routine (RT) per three years

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/22 - 12/31/24	6/1-9/30	
	1/1/25 - 12/31/27	6/1-9/30	

Physical Parameters (PPS) 1 routine (RT) per quarter

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		

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

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

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

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

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

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

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

Organic Chemicals (VOCS) 1 routine (RT) per year

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

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.

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CT0999043	TILCON CONNECTICUT INC. - NORTH BRANFORD	NTNC	38	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
ROUTE 22 & 80			1				

Towns Served: NORTH BRANFORD

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION SURVEY REPORT	3/1/2019	
CROSS CONNECTION SURVEY REPORT	3/1/2020	
CROSS CONNECTION SURVEY REPORT	3/1/2021	
CROSS CONNECTION SURVEY REPORT	3/1/2022	
CROSS CONNECTION SURVEY REPORT	3/1/2023	
RESPOND TO SANITARY SURVEY	2/9/2024	
CROSS CONNECTION SURVEY REPORT	3/1/2024	
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN	5/9/2024	
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024	
COMPLETE INITIAL LSL INVENTORY	10/16/2024	

Public Notification Requirements

<i>Violation/Situation</i>	<i>Compliance Period</i>	<i>Notice Tier</i>	<i>Public Notification</i>		<i>PN Certification</i>	
			<i>Required</i>	<i>Performed</i>	<i>Due to DPH</i>	<i>Received</i>
Total Coliform M&R Violation	10/1/22 - 10/31/22	3	9/10/2024		9/20/2024	

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
			DOWNSTREAM WITHIN 5 SERVICE CON	A				
		MW001	SHOP MENS ROOM	A	Y	2	Y	
		MW002	SHOP WOMANS ROOM	A	Y	2		
		MW003	LUBE AREA SINK	A	Y	2		
		MW004	FAUCET #1	A	Y	2		
		MW005	FAUCET #2	A	Y	2		
			UPSTREAM WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10481	WELL #1	2	WELL	A				
50190	PRESSURE TANK							

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

<i>Operator Name</i>	<i>Operator Type</i>	<i>Certification(s)</i>	<i>Certification Expiration</i>
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2024
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2024

Contact Information

Name	Organization	Job Title		
Mr. Thomas W. Drennen	Tilcon Connecticut, Inc.	Cfo And Secretary		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0999043	TILCON CONNECTICUT INC. - NORTH BRANFORD	NTNC	38	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
ROUTE 22 & 80		1					

Towns Served: NORTH BRANFORD

642 Black Rock Avenue			New Britain		CT	06052
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	

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

Name	Organization	Job Title
Mr. Chris Costello	Tilcon Connecticut Inc	Env Mngr

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code	
642 Blackrock Ave		New Britain	CT	06050	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-224-6048			203-214-9092		ccostello@tilcon-inc.com

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0990713	5 ARDSLEY AVENUE	NTNC	50	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
5 ARDSLEY AVENUE			2				
Towns Served: NORTH BRANFORD							

Monitoring Requirements

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

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

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

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

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		

Lead And Copper (PBCU) 5 routine (RT) per three years

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/21 - 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 routine (RT) per quarter

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		

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

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

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

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

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

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

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

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

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/21 - 12/31/23		Complete
	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		

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.

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Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
5 ARDSLEY AVENUE			2				
Towns Served: NORTH BRANFORD							

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	3/1/2029	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		AP-01	DR. OFFICE SINK #1	I		2		
		AP-02	FRONT TODLER SINK	A	Y	2	Y	
		AP-03	STAFF KITCHEN SINK	A	Y	2	Y	
		AP-04	DAYCARE BOYS LAV	A	Y	2	Y	
		AP-05	DAYCARE GIRLS LAV	A	Y	2	Y	
		AP-06	BACK TODLER SINK	A	Y	2	Y	
		AP-08	PRE SCH CLASS SINK	A	Y	2	Y	
		AP-09	INF BABY RM SINK	A	Y	2	Y	
		AP-10	STAFF BATH SINK	A	Y	2	Y	
		AP-11	CLUB NAP KIT SINK 1	A	Y	2	Y	
		AP-12	CLUB NAP KIT SINK 2	A	Y	2	Y	
		AP-13	CLUB NAP BATH 1	A	Y	2	Y	
		AP-14	CLUB NAP HAND SINK	A	Y	2	Y	
		AP-15	CLUB NAP BATH 2	A	Y	2	Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10774	WELL 1	2	WELL 1	A				
48750	TREATMENT PLANT							

Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 48750)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
ROWLEY, BRENDAN	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2025
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2025

Contact Information

Name		Organization			Job Title			
Mr. Mario Simoni		Alm Realty Group			Member			
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
199 White Birch Road						East Hampton	CT	06424
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-267-7325				860-267-1106				

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5 ARDSLEY AVENUE			2					
Towns Served: NORTH BRANFORD								
860-267-7335		860-267-1100						
Contact Role(s):	Legal Contact							
Name			Organization			Job Title		
Ms. Lisa Simoni			5 Ardsley Ave, LLC			Property Manager		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
56 Spellman Point Rd						East Hampton	CT	06424
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-267-7335		860-267-7867		860-716-0141	lisam9876@yahoo.com			
Contact Role(s):	Administrative Contact, Owner							

Please note the following:

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