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

PWS ID PWS Name Cla			Cla	ssification	Population	Owner Type	Primary Source	
CT1140471	STRAWBERRY PARK				NTNC	1,047	Р	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
42 PIERCE RD		Connections	380					

Towns Served: PRESTON			1
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	500)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/25		
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	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 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/25	6/1-9/30	
	1/1/26 - 12/31/28	6/1-9/30	
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	4/1/24 - 4/30/24		·
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		•
	1/1/25 - 12/31/25		
Pesticides, Herbicides and PCBs - Phase II & 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		

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
CT1140471 STRAWBERRY PARK			NTNC	1,047	Р	GW	
Local Address (v	where applicable)	Service	Residen	itial Commerci	al Industri	al Combine	ed Agricultural
42 PIERCE RD		Connections	380				

Towns Served: PRESTON

Monitoring Requirements									
Water System Facility: ENTRY POINT (WSF ID: 00700)									
Organic Chemicals (VOCS)	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								

Other Compliance Schedules								
Compliance Schedule Activity	Due Date	Achieved Date						
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							
CROSS CONNECTION SURVEY REPORT	3/1/2024							
SEASONAL START UP COMPLETION	4/1/2024							
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024							
COMPLETE INITIAL LSL INVENTORY	10/16/2024							

COIVII LL I	L INTIAL LIST INVENTORT		10/	10/2024				
	Water	System Facili	ity and Sampling P	oint Ir	vento	ſy		
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	А	Υ			
		4-1	Site #65	Α	Υ			
		4-2	Site #160B	Α	Υ			
		4-3	Site #328C	Α	Υ			
		4-4	Site #Stage 1	Α	Υ			
		4-5	Site #338	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		MW021-160B	SITE 160B	Р	Υ	N		
		MW021-328C	SITE 328C	Р	Υ	Ν		
		MW021-338	SITE 338	Р	Υ	Ν		
		MW021-65	SITE 65	Р	Υ	N		
		MW021-S1	SITE STAGE 1	Р	Υ	Ν		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
1778	WELL #2	2	WELL #2	Α				
1779	WELL #3	2	WELL #3	Α				
50961	ATMOSPHERIC STORAGE TANK							
50967	HYDROPNEUMATIC STORAGE TANK							

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	Water Quality Monitoring and Compliance Schedule											
PWS ID PWS Name					ssification	Population	Owner Type	Primary Source				
CT1140471 STRAWBERRY PARK					NTNC	1,047	Р	GW				
Local Address (\	where applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural				
42 PIERCE RD Connections 38												

Connecticut Department of Public Health Drinking Water Section

Towns Served: PRESTON

			Certifie	d Operate	or Information	1		
Water System Fac	cility: DISTRIBI	JTION SY	STEM (WSI	ID: 00600)				
Facility Classification	n: SMALL WATE	R SYSTEM						Certification
Operator Name			Operator T	уре	Certification(s)			Expiration
LAFRAMBOISE, PAU	L F.		CHIEF OPERA	TOR	DISTRIBUTION SYS	TEM OPERATOR - CLA	SS I	9/30/2024
					WATER TREATMEN	T PLANT OPERATOR	- CLASS II	9/30/2024
			Co	ntact Inf	ormation			
Name				Organization		Job Title		
Strawberry Park Pr	operties LLC							
Mailing Address Lin	e One		Mailing Addr	ess Line Two		City	State	Zip Code
P. O. Box 5489						Salt Springs	FL	32134
Business Phone	Extension	Fax	Мс	bile Phone	Emergency Phone	Email Address		
860-334-9953								
Contact Role(s): O	wner							
Name				Organization			Job Title	
Mr. Eduard Mayer				Strawberry P	ark	Manager		
Mailing Address Lin	e One		Mailing Addr	ess Line Two		City	State	Zip Code
P.O. Box 5489						Salt Springs	FL	32134
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Address		
813-335-5119						emayer@eliteresort	s.com	

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 Water Quality Monitoring and Con		,					
PWS ID	PWS ID PWS Name Classification Population Owner Type Primary Source							
CT1149033								

Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections PRESTON PREK-5 1

Towns Served: PRESTON			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	600)		
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)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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 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		
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)	1/1/21 - 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		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)	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
	1/1/24 - 12/31/24		<u> </u>
	1/1/25 - 12/31/25		

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

PWS ID PWS Name Cla			Cla	ssification	Population	Owner Type	Primary Source	
CT1149033	PRESTON VETERANS MEMORIAL SCHOOL				NTNC	500	L	GW
Local Address (where applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
PRESTON PREK	5	Connections			1			

Towns Served: PRESTON

Other Compliance Schedules								
Compliance Schedule Activity	Due Date	Achieved Date						
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012							
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024							
COMPLETE INITIAL LSL INVENTORY	10/16/2024							
CROSS CONNECTION SURVEY REPORT	3/1/2025							

1033 00	NNECTION SURVEY REPORT		3/	1/2025				
	Wat	er System Facili	ty and Sampling P	oint In	ventor	у		
Water System acility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stag WQP 2 DBI
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	А	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		PVM-1	ROOM 1	Α	Υ	2		
		PVM-10	ROOM 10	Α	Υ	2		
		PVM-11	CUSTODIANS ROOM	Α	Υ	2		
		PVM-12	MENS ROOM	Α	Υ	2		
		PVM-13	WOMENS ROOM	Α	Υ	2		
		PVM-14	MECHANICAL ROOM	Α	Υ	2		
		PVM-15	ROOM 15	Α	Υ	2		
		PVM-16	BOY/GIRL TEAM LAV	Α	Υ	2		
		PVM-17	NURSES ROOM	Α	Υ	2		
		PVM-18	ART ROOM	Α	Υ	2		
		PVM-19	MUSIC ROOM	Α	Υ	2		
		PVM-2	ROOM 2	Α	Υ	2		
		PVM-20	ROOM 20	Α	Υ	2		
		PVM-21	ROOM 21	Α		2		
		PVM-22	ROOM 22	Α	Υ	2		
		PVM-23	ROOM 23	Α	Υ	2		
		PVM-24	ROOM 24	Α	Υ	2		
		PVM-25	KITCHEN	Α	Υ	2	Υ	
		PVM-26	ROOM 26	Α	Υ	2		
		PVM-27	ROOM 27	Α	Υ	2		
		PVM-28	ROOM 28	Α	Υ	2		
		PVM-29	ROOM 29	Α	Υ	2		
		PVM-3	ROOM 3	Α	Υ	2		
		PVM-30	ROOM 30	Α	Y	2		
		PVM-31	ROOM 31	Α	Υ	2		
		PVM-32	CUSTODIANS ROOM	Α	Y	2		
		PVM-33	CUSTODIANS ROOM	A	Y	2		
		PVM-34	CUSTODIANS ROOM	A	Ϋ́	2		
		PVM-35	BOYS AND GIRLS LAV	A	Y	2		
		PVM-36	ROOM 36	A	Y	2		

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

PWS ID PWS Name C				Clas	ssification	Population	Owner Type	Primary Source
CT1149033	CT1149033 PRESTON VETERANS MEMORIAL SCHOOL					500	L	GW
Local Address (where applicable)		Service	Resider	itial	Commercia	al Industri	al Combine	ed Agricultural
PRESTON PREK-	5	Connections			1			

Towns Served: PRESTON

	Water System Facility and Sampling Point Inventory									
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR		
		PVM-37	ROOM 37	A	Υ	2				
		PVM-38	ROOM 38	Α	Y	2				
		PVM-39	ROOM 39	Α	Y	2				
		PVM-4	ROOM 4	Α	Υ	2				
		PVM-40	ROOM 40	Α	Υ	2				
		PVM-41	TEACHERS ROOM	Α	Υ	2				
		PVM-42	MEN AND WOMENS LAV	Α	Υ	2				
		PVM-43	BOYS AND GIRLS LAV	Α	Υ	2				
		PVM-44	OFFICE BATHROOMS	Α	Υ	2				
		PVM-45	OFFICE KITCHEN	Α	Υ	2				
		PVM-46	CUSTODIANS CLOSET	Α	Υ	2				
		PVM-5	ROOM 5	Α	Υ	2				
		PVM-6	ROOM 6	Α	Υ	2				
		PVM-7	ROOM 7	Α	Υ	2				
		PVM-8	ROOM 8	Α	Υ	2				
		PVM-9	ROOM 9	Α	Υ	2				
		UPSTREAM	WITHIN 5 SERVICE CON	Α						
00700	ENTRY POINT	3	ENTRY POINT	Α						
11009	WELL #1	2	WELL #1	Α						
11010	WELL #2	2	WELL #2	Α						
1697	PRESTON VETERANS MEMORI PUMPHOUSE	AL								
53763	ATMOSPHERIC STORAGE									

Certified	Operator	Information
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Water System Facility: PRESTON VETERANS MEMORIAL PUMPHOUSE (WSF ID: 1697)

 Facility Classification:
 CLASS 1 TREATMENT PLANT
 Certification

 Operator Name
 Operator Type
 Certification(s)
 Expiration

 HOUSE, MICHAEL D.
 CHIEF OPERATOR
 WATER TREATMENT PLANT OPERATOR - CLASS II
 3/31/2026

HOUSE, MICHAEL D).		CHIEF OPERA	ATOR	WATER TREATMEN	II PLANT	3/31/2026			
			C	ontact Inf	ormation					
Name				Organization	า			Job Title		
Mr. Jack Welch				Preston Boa	Preston Board of Education			Superintendent		
Mailing Address Line One Mailing Add			ress Line Two			City	State	Zip Code		
325 Shetucket Turn	pike					Preston		СТ	06365	
Business Phone	Extension	Fax	М	obile Phone	Emergency Phone	Email Address				
860-889-6098	420	860-889-8	8685		860-885-9248	welchj@prestonschools.org				
Contact Role(s): A	dministrative	Contact, Leg	al Contact							

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

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PWS ID PWS Name			Classification	Population	Owner Type	Primary Source		
CT1149033	PRESTON VETERANS MEMORIAL SCHOOL	NTNC	500	L	GW			
Local Address (where applicable)		Service	Resider	ntial Commerc	ial Industri	al Combine	ed Agricultural	
PRESTON PREK-5		Connections		1				
1								

Towns Served: PRESTON

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End of schedule