

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1189033	RIDGEBURY CONGREGATIONAL CHURCH	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
605 RIDGEBURY ROAD	Connections	1			

Towns Served: RIDGEFIELD

Monitoring Requirements

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

1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

1 routine (RT) per year			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Water System Facility: WELL (WSF ID: 10553)

1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION EXEMPTION	3/1/2030	

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform		Lead and Copper Rule		Stage WQP 2 DBPR
				Status	Rule	Rule Tier	Asbestos	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		RCC001	CC HAND SINK	A	Y	1	Y	
		RCC002	CC KITCHEN SINK	A	Y	1	Y	
		RCC003	TERRIFIC TODDLERS RM	A	Y	1	Y	
		RCC004	INFANTS ISLAND	A	Y	1	Y	
		RCC005	STAFF REST RM	A	Y	1	Y	

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1189033	RIDGEBURY CONGREGATIONAL CHURCH	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
605 RIDGEBURY ROAD	Connections	1			

Towns Served: RIDGEFIELD

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule	Asbestos	Stage WQP 2 DBPR
					Rule Tier	WQD	DBPR	
		RCC006	CHILDREN R RM	A	Y	1	Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10553	WELL	2	WELL	A				
53524	TREATMENT PLANT							

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 53524)

Facility Classification: CLASS 1 TREATMENT PLANT			Certification Expiration
Operator Name	Operator Type	Certification(s)	
KILBOURN, ERIC M.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2028
HURLBUT, PAUL	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2028
KILBOURN, JORDAN H	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2026 9/30/2027

Contact Information

Name	Organization	Job Title		
Ms. Carole Bishop	Ridgebury Cong. Church	Operations Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
605 Ridgebury Road		Ridgefield	CT	06877
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-748-2806				203-685-7247
				Email Address
				CAROLE@MEETINGHOUSE.LIFE

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

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

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

End of schedule

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180014	871 ETHAN ALLEN HWY BUILDING	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
871 ETHAN ALLEN HIGHWAY	Connections		1		

Towns Served: RIDGEFIELD

Monitoring Requirements

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

1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

1 routine (RT) per year			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Water System Facility: WELL (WSF ID: 22044)

1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule	Asbestos	Stage WQP 2 DBPR
					Rule	Tier		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			Stage WQP 2 DBPR
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		EAH001	CHIRO UTILITY SNK	A	Y		Y	
		EAH002	MED SKIN CARE OFF RR	A	Y		Y	
		EAH003	MED SKN TREAT RM 01	A	Y		Y	
		EAH004	MED SKN TREAT RM 02	A	Y		Y	
		EAH005	RR MENS RM 2F	A	Y		Y	
		EAH006	RR LADY RM 2F	A	Y		Y	
		EAH007	RR LADY ROOM 1F L	A	Y		Y	
		EAH008	RR LADY ROOM 1F R	A	Y		Y	

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180014	871 ETHAN ALLEN HWY BUILDING	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
871 ETHAN ALLEN HIGHWAY		1			

Towns Served: RIDGEFIELD

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
00700	ENTRY POINT	EAH009	RR MENS RM 1F L	A	Y		Y	
		EAH010	RR MENS RM 1F R	A	Y		Y	
		EAH011	MAUER ASSOC KTCHETTE	A	Y		Y	
		EAH012	IMPACT SERV GRP HS	A	Y		Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
22044	WELL	3	ENTRY POINT	A				
61202	TREATMENT PLANT	2	WELL	A				

Contact Information

Name		Organization			Job Title		
Mr. Jeff Ryer		Ryer Assoc. Comm Real Estate			President		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
103 Mill Plain Road					Danbury	CT	06811
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-797-0200	103		203-470-6169		mjryer@ryer.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

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

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

End of schedule

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180024	ALDRIDGE PARK	NC	25	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
NEW ROAD			1		

Towns Served: RIDGEFIELD

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25	4/1-9/30	Complete
	1/1/26 - 12/31/26	4/1-9/30	
	1/1/27 - 12/31/27	4/1-9/30	

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification Required	PN Certification Due to DPH	Received
Total Coliform M&R Violation	4/1/23 - 4/30/23	3	6/11/2025		6/21/2025

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule Status	Asbestos Rule Tier	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		AP001	CONCESSION STNAD	A	Y		Y
		AP002	RR GENERIC RR	A	Y		Y
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
22045	WELL	2	WELL	A			

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180024	ALDRIDGE PARK	NC	25	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
NEW ROAD			1		

Towns Served: RIDGEFIELD

Contact Information

Name		Organization			Job Title		
Mr. Rudy Marconi		Town of Ridgefield			First Selectman		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
400 Main Street					Ridgefield	CT	06877
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-431-2774		203-431-2722			torfirstselectperson@ridgefieldct.gov		

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

Name		Organization			Job Title		
Mr. Dennis Dipinto		Town of Ridgefield Parks & Rec			Director		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
195 Danbury Rd					Ridgefield	CT	06877
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-431-2755					recdirector@ridgefieldct.gov		

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

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End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180154	CASA LU	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
896 ETHAN ALLEN HIGHWAY			1		

Towns Served: RIDGEFIELD

Monitoring Requirements

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

Total Coliform (3100) 1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Physical Parameters (PPS) 1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

Nitrate And Nitrite (NOX) 1 routine (RT) per year			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	1/10/2026	
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN	4/10/2026	
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN	4/11/2026	

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
E. Coli	4/1/25 -	3	11/12/2026		11/22/2026	
Physical Parameters M&R Violation	7/1/25 - 9/30/25	3	1/2/2027		1/12/2027	
Total Coliform M&R Violation	7/1/25 - 9/30/25	3	1/2/2027		1/12/2027	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper	Stage Rule Tier	Asbestos WQP 2 DBPR
					Rule	Rule Tier		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
00700	ENTRY POINT	3	ENTRY POINT	A				
22052	WELL	2	WELL	A				

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180154	CASA LU	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
896 ETHAN ALLEN HIGHWAY	Connections		1		

Towns Served: RIDGEFIELD

Contact Information

Name	Organization	Job Title		
Ms. Victoria Lira	Barking LLC	Owner		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
23 Fairview Rd		Brookfield	CT	06804
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
914-727-0397				914-584-5538
				Email Address
				casalurestaurant@gmail.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

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End of schedule

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180204	MARTIN PARK	NC	25	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
GREAT POND ROAD			1		

Towns Served: RIDGEFIELD

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification Required	PN Certification Due to DPH	Received
Physical Parameters M&R Violation	9/1/25 - 9/30/25	3	1/2/2027	1/12/2027	
Total Coliform M&R Violation	9/1/25 - 9/30/25	3	1/2/2027	1/12/2027	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper	Stage WQP 2 DBPR
					Rule	Rule Tier	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		MP001	RR LADY ROOM L	A	Y		Y
		MP002	RR LADY ROOM R	A	Y		Y
		MP003	RR MENS RR - R	A	Y		Y
		MP004	RR MENS RR L	A	Y		Y
		MP005	WATER FOUNTAIN	A	Y		Y
00700	ENTRY POINT	3	ENTRY POINT	A			
		2	WELL	A			

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180204	MARTIN PARK	NC	25	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
GREAT POND ROAD			1		

Towns Served: RIDGEFIELD

Contact Information

Name	Organization	Job Title		
Mr. Rudy Marconi	Town of Ridgefield	First Selectman		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
400 Main Street		Ridgefield	CT	06877
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone Email Address
203-431-2774		203-431-2722		torfirstselectperson@ridgefieldct.gov

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

Name	Organization	Job Title		
Mr. Dennis Dipinto	Town of Ridgefield Parks & Rec	Director		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
195 Danbury Rd		Ridgefield	CT	06877
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone Email Address
203-431-2755				recdirector@ridgefieldct.gov

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

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End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180254	RIDGEFIELD BAPTIST CHURCH	NC	25	P	GW
Local Address (where applicable)	325 DANBURY ROAD	Service Connections	Residential	Commercial	Industrial
			1		Combined Agricultural

Towns Served: RIDGEFIELD

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	12/21/2025	

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
CT1180254	RIDGEFIELD BAPTIST CHURCH	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
325 DANBURY ROAD			1		

Towns Served: RIDGEFIELD

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
					Y	Y	Y	Y
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		RBC001	RR MAIN FL LOBBY	A	Y			Y
		RBC002	RR CHURCH OFFICE	A	Y			Y
		RBC003	NURSERY SNK	A	Y			Y
		RBC004	KIT SNK LOWER LEVEL	A	Y			Y
		RBC005	RR MENS LOWER LEVEL	A	Y			Y
		RBC006	RR LADIES LOWER LVL	A	Y			Y
		RBC007	RR HANDICAP LWR LEV	A	Y			Y
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
22060	WELL	2	WELL	A				
61204	TREATMENT PLANT							

Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM <th>Certification Expiration</th>	Certification Expiration	
Operator Name	Operator Type	Certification(s)	Certification Expiration
HURLBUT, PAUL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2028

Contact Information

Name	Organization	Job Title			
Mr. Keith Russell	Ridgefield Baptist Church	Board of Trustees			
Mailing Address Line One	Mailing Address Line Two	City State Zip Code			
Ridgefield Baptist Board of Trustees	325 Danbury Road	Ridgefield CT 06877			
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-438-5751			860-538-2731		khrussell@sbcglobal.net

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

Name	Organization	Job Title			
Mr. Robert Clark	Ridgefield Baptist Church	Trustee			
Mailing Address Line One	Mailing Address Line Two	City State Zip Code			
325 Danbury Road		Ridgefield CT 06877			
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-885-3508				203-438-5865	clarkrobert22@yahoo.com

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

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180254	RIDGEFIELD BAPTIST CHURCH	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
325 DANBURY ROAD	Connections		1		

Towns Served: RIDGEFIELD

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

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
CT1180264	RIDGEFIELD GOLF COURSE(PUBLIC FOUNTAIN)	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
545 RIDGEBURY ROAD	Connections		1		

Towns Served: RIDGEFIELD

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Total Coliform (3100)	3 repeat (RP) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/7/25 - 10/12/25		Complete
	11/4/25 - 11/9/25		Complete

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Water System Facility: WELL (WSF ID: 22061)

E. Coli (3014)	1 triggered (TG) per period		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	10/6/25 - 10/12/25		Complete
	11/3/25 - 11/9/25		Complete

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	11/29/2020	
L2 ASSESSMENT (MULTIPLE TC+, 2ND IN 12M)	11/9/2025	

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180264	RIDGEFIELD GOLF COURSE(PUBLIC FOUNTAIN)	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
545 RIDGEBURY ROAD	Connections		1		

Towns Served: RIDGEFIELD

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
L2 ASSESSMENT (MULTIPLE TC+, 2ND IN 12M)		12/7/2025

Water System Facility and Sampling Point Inventory										
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP 2	DBPR	Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y					
		DOWNTREAM	WITHIN 5 SERVICE CON	A						
		RPF001	RR GENERIC RR	A	Y					Y
		RPF002	WATER FOUNTAIN	A	Y					Y
		UPSTREAM	WITHIN 5 SERVICE CON	A						
00700	ENTRY POINT	3	ENTRY POINT	A						
22061	WELL	2	WELL	A						

Contact Information

Name	Organization	Job Title
Mr. Frank Sergiovanni	Ridgefield Golf Course	General Manager
Mailing Address Line One	Mailing Address Line Two	City
545 Ridgebury Rd		State
Business Phone	Extension	Zip Code
203-748-7008		Ridgefield
		CT
		06877
Emergency Phone	Email Address	
203-748-6157	golfdirector@ridgefieldct.gov	

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

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

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

End of schedule

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180274	THE GOLF PERFORMANCE CENTER, INC.	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
824 ETHAN ALLAN HIGHWAY (ROUTE 7)	Connections		1		

Towns Served: RIDGEFIELD

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Physical Parameters (PPS)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
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	3/1/2024	
CROSS CONNECTION SURVEY REPORT	3/1/2025	
CROSS CONNECTION SURVEY REPORT	3/1/2026	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule Status	Asbestos Rule Tier	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
22062	WELL	2	WELL	A			
61210	TREATMENT PLANT						

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180274	THE GOLF PERFORMANCE CENTER, INC.	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
824 ETHAN ALLAN HIGHWAY (ROUTE 7)	Connections		1		

Towns Served: RIDGEFIELD

Contact Information

Name	Organization	Job Title		
Mr. Roger Knick	The Golf Performance Ctr, Inc.	Owner		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
824 Ethan Allen Highway		Ridgefield	CT	06877
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone Email Address
203-241-6902		203-403-3231		203-790-4653 Roger@golfperformancecenter.com

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

Name	Organization	Job Title		
Mr. Edward Murphy	The Golf Performance Center	Facilities Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
824 Ethan Allen Highway		Ridgefield	CT	06877
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone Email Address
203-790-4653				edward.murphy@golfperformancecenter.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

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

End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180284	FLOBEE'S LLC	NC	25	P	GW
Local Address (where applicable)	680 DANBURY ROAD	Service Connections	Residential	Commercial	Industrial
			1		Combined Agricultural

Towns Served: RIDGEFIELD

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY		5/19/2022

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
CT1180284	FLOBEE'S LLC	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
680 DANBURY ROAD			1		

Towns Served: RIDGEFIELD

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule	Asbestos	Stage WQP 2 DBPR
					Y	Y	Y	Y
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
22063	WELL	2	WELL	A				
63170	TREATMENT PLANT							

Contact Information

Name	Organization	Job Title		
Ms. Nadia Blair	Flobee's LLC	Owner/Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
680 Danbury Road		Ridgefield	CT	06877
Business Phone	Extension	Fax	Mobile Phone	Email Address
914-772-1565				info@flobees.com

Contact Role(s): **Administrative 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

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

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

End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180364	ST ELIZABETH SETON CHURCH	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
520 RIDGEBURY ROAD			1		

Towns Served: RIDGEFIELD

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Physical Parameters (PPS)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT		3/1/2025

Water System Facility and Sampling Point Inventory							
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Asbestos WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		SE001	RR PARISH CTR 1ST F	A	Y		Y
		SE002	RR PARISH CTR 2ND F	A	Y		Y
		SE003	RR REVEREND HOUSE	A	Y		Y
		SE004	KIT SNK REVEREND HSE	A	Y		Y
		SE005	KIT SNK PARISH CTR	A	Y		Y
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
63219	WELL #2	2	WELL #2	A			

Contact Information

Name	Organization	Job Title
Father Alphonse Arokiam	St Elizabeth Seton Church	Parochial Admin
Mailing Address Line One	Mailing Address Line Two	City State Zip Code

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180364	ST ELIZABETH SETON CHURCH	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
520 RIDGEBURY ROAD			1		

Towns Served: RIDGEFIELD

520 Ridgebury Rd					Ridgebury	CT	06877
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-438-7292					parishoffice@sesparish.org		

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

Name	Organization	Job Title		
Mr. Christopher L. Ruggiero	St. Elizabeth Ann Seton Parish	Business Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
520 Ridgebury Rd.		Ridgefield	CT	06877
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-438-7292	111	203-438-0600	203-470-9611	
				cruggiero@sesparish.org

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

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

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

End of schedule

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180374	ST IGNATIUS RETREAT HOUSE	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
209 TACKORA TRAIL	Connections	1	2		

Towns Served: RIDGEFIELD

Monitoring Requirements

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

1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

1 routine (RT) per year			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Water System Facility: WELL (WSF ID: 22068)

1 routine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	10/24/2008	
CROSS CONNECTION SURVEY REPORT	3/1/2025	
RESPOND TO SANITARY SURVEY	12/21/2025	12/5/2025
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN	3/21/2026	12/5/2025

Water System Facility and Sampling Point Inventory						
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier
Stage Asbestos WQP 2 DBPR						
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A		
		UPSTREAM	WITHIN 5 SERVICE CON	A		
00700	ENTRY POINT	3	ENTRY POINT	A		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180374	ST IGNATIUS RETREAT HOUSE	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
209 TACKORA TRAIL		1	2		

Towns Served: RIDGEFIELD

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total	Lead and Coliform	Copper Rule	Asbestos Rule Tier	Stage WQP 2	DBPR
				Status	Rule	Tier	WQP 2	DBPR	
22068	WELL	2	WELL	A					
61216	TREATMENT PLANT								
61218	BOOSTER PUMP-RETREAT HOUSE								

Contact Information

Name	Organization	Job Title			
Father Jean Violette	St Ignatius Retreat House	Prior			
Mailing Address Line One	Mailing Address Line Two	City State Zip Code			
209 Tackora Trail		Ridgefield CT 06877			
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-431-0201	12				jlviolette@hotmail.com

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

Name	Organization	Job Title			
Mr. Brother Dismas	St. Ignatius Retreat House				
Mailing Address Line One	Mailing Address Line Two	City State Zip Code			
209 Tackora Trail		Ridgefield CT 06877			
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-431-0201			203-300-4557		br.dismas@fsspx.email

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

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

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

End of schedule

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180604	659 DANBURY ROAD - RIDGEFIELD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: RIDGEFIELD

Monitoring Requirements

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

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	7/1/25 - 7/31/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Total Coliform (3100)	3 repeat (RP) per period		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/23/25 - 7/28/25		Complete
Total Coliform (3100)	3 temporary routine (TR) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
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	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

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)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Water System Facility: WELL #1 (WSF ID: 22860)

E. Coli (3014)	1 triggered (TG) per period		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
(2)	7/22/25 - 7/28/25		Complete

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	12/24/2020	
RESPOND TO SANITARY SURVEY	1/10/2026	1/9/2026
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN	4/10/2026	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule	Asbestos Rule Tier	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM DOWNSTREAM WITHIN 5 SERVICE CON	A	Y			

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
CT1180604	659 DANBURY ROAD - RIDGEFIELD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		1			

Towns Served: RIDGEFIELD

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
					Rule			
	UPSTREAM	WITHIN 5 SERVICE CON		A				
	WHD001	KIT SNK TRPL SNK		A	Y		Y	
	WHD002	KIT SNK SINGLE		A	Y		Y	
	WHD003	KIT HAND SNK		A	Y		Y	
	WHD004	RR MENS RR		A	Y		Y	
	WHD005	RR LADY ROOM		A	Y		Y	
00700	ENTRY POINT	3	ENTRY POINT	A				
22860	WELL #1	2		A				
57433	TREATMENT PLANT							

Contact Information

Name	Organization	Job Title		
Mr. Ronald Herman Jr.	Wooster Hollow Cafe	Owner/Member		
Mailing Address Line One 659 Danbury Rd	Mailing Address Line Two	City Ridgefield	State CT	Zip Code 06877
Business Phone 203-438-2845	Extension	Fax	Mobile Phone 203-451-4959	Email Address woosterhollow@gmail.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

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

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

End of schedule

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1180554	632 DANBURY ROAD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined

Towns Served: RIDGEFIELD

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Physical Parameters (PPS)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

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

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	12/24/2025	
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN	3/24/2026	

Water System Facility and Sampling Point Inventory							
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier Asbestos WQP 2 DBPR	Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
23067	WELL #1	2	WELL #1	A			
61664	TREATMENT PLANT						

Contact Information

Name	Organization			Job Title		
Mr. George Mulvaney	Mulvaney Properties, LLC			Owner		
Mailing Address Line One	Mailing Address Line Two		City	State	Zip Code	
4 Christopher Columbus Avenue			Danbury	CT	06810	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-797-8005						

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
CT1180554	632 DANBURY ROAD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
		1			

Towns Served: RIDGEFIELD

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

Name	Organization	Job Title		
Ms. Janette Blackstock	Mulvaney Properties	Property Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
4 Christopher Columbus Avenue		Danbury	CT	06810
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
203-797-8005		203-794-1786		203-948-8482 janette@mulvaneyinc.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

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
CT1180644	RIDGEFIELD GOLF COURSE(PRO SHOP & REST.)	NC	25	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
545 RIDGEBURY ROAD	Connections				1

Towns Served: RIDGEFIELD

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	4/1/26 - 6/30/26		

Physical Parameters (PPS)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	4/1/26 - 6/30/26		

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

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	11/29/2020	

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification Required	PN Certification Due to DPH	Received
Physical Parameters M&R Violation	1/1/24 - 3/31/24	3	6/10/2025	6/20/2025	
Total Coliform M&R Violation	1/1/24 - 3/31/24	3	6/10/2025	6/20/2025	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule	Asbestos	Stage WQP 2 DBPR
					Coliform Rule	Lead Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		RPS001	KIT HAND SNK	A	Y		Y	
		RPS002	KIT SNK SINGLE	A	Y		Y	
		RPS003	KIT SNK TRPL SNK	A	Y		Y	
		RPS004	BAR SINK	A	Y		Y	
		RPS005	RR MENS RR	A	Y		Y	
		RPS006	RR LADY ROOM	A	Y		Y	
		RPS007	RR PRO SHOP	A	Y		Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				

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
CT1180644	RIDGEFIELD GOLF COURSE(PRO SHOP & REST.)	NC	25	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
545 RIDGEBURY ROAD					1

Towns Served: RIDGEFIELD

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule	Asbestos	Stage WQP 2 DBPR
47817	PRO SHOP/RESTAURANT WELL	2	WELL	A				
59791	TREATMENT PLANT							

Contact Information

Name	Organization	Job Title
Mr. Frank Sergiovanni	Ridgefield Golf Course	General Manager
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
545 Ridgebury Rd		Ridgefield CT 06877
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address
203-748-7008		203-748-6157 golfdirector@ridgefieldct.gov

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

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
CT1189513	590 DANBURY ROAD LLC	NC	42	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
590 DANBURY ROAD		4			

Towns Served: RIDGEFIELD

Monitoring Requirements

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

Total Coliform (3100)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION EXEMPTION	3/1/2028	

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
CT1189513	590 DANBURY ROAD LLC	NC	42	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
590 DANBURY ROAD			4		

Towns Served: RIDGEFIELD

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
					Rule			
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Y			
		A0001	ROCHE KITCHEN	A	Y	1		
		A0002	2ND FLOOR MEN SINK	A	Y	1		
		A0003	2ND FL WOMEN SINK	A	Y	1		
		A0004	DELI KITCHEN SINK	A	Y	1		
		A0005	CLEANER BATH SINK	A	Y	1		
		A0006	FLORIST BATH SINK	A	Y	1		
		A0007	PROF WATER BATH	A	Y	1		
		A0008	PROF WATER SINK	A	Y	1		
		A0009	THE CATCH - WOMENS	A	Y	1		
		A0010	THE CATCH - MENS	A	Y	1		
		A0011	KILOMETERS BATH SINK	A	Y	1		
		A0012	NAIL SALON HS	A	Y		Y	Y
		A0013	DELI BATHROOM	I	Y			
00700	ENTRY POINT	DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
52993	WELL 1	3	ENTRY POINT	A				
53560	TREATMENT PLANT	2	WELL 1	A				

Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM <th>Certification Expiration</th> <th></th>	Certification Expiration	
Operator Name	Operator Type	Certification(s)	
HURLBUT, PAUL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2028
HURLBUT, ANDREW	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026

Contact Information

Name	Organization			Job Title		
Ms. Maria Sheehan	590 Ridgefield Road, LLC			List Services		
Mailing Address Line One	Mailing Address Line Two			City	State	Zip Code
6 Trowbridge Drive	PO Box 516			Bethel	CT	06801
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-743-2600					msheehan@listservices.com	

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

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
CT1189513	590 DANBURY ROAD LLC	NC	42	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
590 DANBURY ROAD			4		

Towns Served: RIDGEFIELD

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

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<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
CT1189524	RIDGEFIELD LITTLE LEAGUE – JENSEN FIELD	NC	25	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
2 SANFORD STATION RD	Connections		1		

Towns Served: RIDGEFIELD

Monitoring Requirements

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

1 routine (RT) per month			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

1 routine (RT) per month			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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

1 routine (RT) per year			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
REVISED TOTAL COLIFORM RULE (RTCR)	5/1/25 - 8/5/25	3	12/9/2026		12/19/2026	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule	Asbestos	Stage WQP 2 DBPR
					A	Y	Y	Y
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		JF001	CONCESSION	A	Y			
		JF002	MENS RR	A	Y			
		JF003	LADIES RR	A	Y			
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				

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
CT1189524	RIDGEFIELD LITTLE LEAGUE – JENSEN FIELD	NC	25	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
2 SANFORD STATION RD			1		

Towns Served: RIDGEFIELD

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total	Lead and Coliform	Copper	Stage	
				Status	Rule	Rule Tier		
61440	WELL 1	2	WELL 1	A				

Contact Information

Name	Organization	Job Title
Mr. Rudy Marconi	Town of Ridgefield	First Selectman
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
400 Main Street		Ridgefield CT 06877
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address
203-431-2774		203-431-2722

Contact Role(s): Legal Contact

Name	Organization	Job Title
Mr. Michael A. West	Ridgefield Parks & Recreation	Assistant Director
Mailing Address Line One	Mailing Address Line Two	City State Zip Code
195 Danbury Road		Ridgefield CT 06877
Business Phone	Extension	Fax Mobile Phone Emergency Phone Email Address
203-917-5417		

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

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

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

End of schedule

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