Connecticut Depa	artment of	Public H	lealth D	rinki	ng W	ater Se	ection	
Water Qua	ality Monit	oring an	d Comp	lianc	e Sch	edule		
PWS ID PWS Name			Cla	assificati	on Pop	ulation Ow	ner Type Pi	imary Source
CT1189033 RIDGEBURY CONGREGATIO	NAL CHURCH			NC		25	Р	GW
Local Address (where applicable)		Service	Residential	Comm	ercial	Industrial	Combined	Agricultural
605 RIDGEBURY ROAD		Connections	1					
Towns Served: RIDGEFIELD					I			
	Monito	oring Requ	uirements	S				
Water System Facility: DISTRIBUTION S								
Total Coliform (3100)						1 ro	utine (RT)	per quarter
Sampling Point (Sampling Point ID)			Monitoring I	Period	Collec	ction Period		ance Status
Select from Inventory of Active Samplin	g Points		10/1/23 - 12	/31/23			Со	mplete
			1/1/24 - 3/3	31/24			Со	mplete
			4/1/24 - 6/3					•
			7/1/24 - 9/3					
Physical Parameters (PPS)				•		1 ro	utine (RT)	per quarter
Sampling Point (Sampling Point ID)			Monitoring I	Period	Collec	ction Period		ance Status
Select from Inventory of Active Samplin	g Points		10/1/23 - 12					mplete
,	<u> </u>		1/1/24 - 3/3					mplete
			4/1/24 - 6/3					<u>'</u>
			7/1/24 - 9/3					
Water System Facility: ENTRY POINT (WSF ID: 00700)							
Nitrate And Nitrite (NOX)	•					1	routine (R	T) per year
Sampling Point (Sampling Point ID)			Monitoring I	Period	Collec	tion Period	-	ance Status
ENTRY POINT (3)			1/1/23 - 12/					mplete
			1/1/24 - 12/					mplete
			1/1/25 - 12/					
Water System Facility: WELL (WSF ID:	10553)		,,-,					
E. Coli (3014)						1 ro	utine (RT)	per quarter
Sampling Point (Sampling Point ID)			Monitoring I	Period	Collec	ction Period		ance Status
WELL (2)			10/1/23 - 12		Conce	cion i ciioa		mplete
VV LLL (2)			1/1/24 - 3/3					mplete
			4/1/24 - 6/3					Прісс
			7/1/24 - 9/3					
	Othor C							
	Other C	ompliance						
Compliance Schedule Activity				Date		Achieved	Date	
CROSS CONNECTION EXEMPTION			3/1	/2025				
Water S	System Facili	ty and Sar	mpling Po	oint Ir	vento	ory		
Water					Total	Lead and		
System Water System Facility	Sampling Point		nt		Coliforn			Stage
Facility ID	ID	Description		Status	Rule	Rule Tie	Asbestos	WQP 2 DBPR
00600 DISTRIBUTION SYSTEM	4	DISTRIBUTION	N SYSTEM	Α	Υ			
	DOWNSTREAM	WITHIN 5 SER	RVICE CON	Α				
	RCC001	CC HAND SIN	K	Α	Υ	1	Υ	
	RCC002	CC KITCHEN S	SINK	Α	Υ	1	Υ	
	RCC003	TERRIFIC TOD	DLERS RM	Α	Υ	1	Υ	
	RCC004	INFANTS ISLA	ND	Α	Υ	1	Υ	
	RCC005	STAFF REST R	M	Α	Υ	1	Υ	

	Water Quality Monit	oring and	d Con	npl	iance S	Schedul	e		
PWS ID	WS ID PWS Name				ssification	Population	Owner Type	Primary S	ource
CT1189033	RIDGEBURY CONGREGATIONAL CHURCH				NC	25	Р	GW	
Local Address (v	Service	Residen	tial Commerci		al Industri	al Combine	ed Agricu	ıltural	
605 RIDGEBURY	Connections	1							

Towns Served: RIDGEFIELD

Wa	ter System Facil	ity and Sampling P	oint Ir	nvento	ry		
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPR
	RCC006	CHILDREN R RM	Α	Υ	1	Υ	
	UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700 ENTRY POINT	3	ENTRY POINT	Α				
10553 WELL	2	WELL	Α				
53524 TREATMENT PLANT							

	Certified Opera	tor information									
Water System Facility: TREAT	Water System Facility: TREATMENT PLANT (WSF ID: 53524)										
Facility Classification: CLASS 1 TR	EATMENT PLANT		Certification								
Operator Name	Operator Type	Certification(s)	Expiration								
KILBOURN, ERIC M.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2025								
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2025								
HURLBUT, PAUL	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2025								
KILBOURN, JORDAN H	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026								
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2024								

			Co	ontact Inf	ormation				
Name		Organization	1		Job Title				
Ms. Carole Bishop				Ridgebury Co	ong. Church	Operations Manager			
Mailing Address Lin	ailing Address Line One Mailing Addr			ess Line Two		City		State	Zip Code
605 Ridgebury Road	t					Ridgefie	d	СТ	06877
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Address			
203-748-2806					203-685-7247	CAROLE@MEETINGHOUSE.LIFE			
Contact Role(s).	dministrativa	Contact Leg	al Contact						

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

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

End of schedule

	Connecticut Department	of Public H	lealth	Drinkin	ig V	<i>N</i> ater :	Section		
	Water Quality Mon	nitoring an	d Com	pliance	Sc	hedule	9		
PWS ID	PWS Name			Classification	n Po	pulation (n Owner Type Primary		
CT1180014	871 ETHAN ALLEN HWY BUILDING			NC		25	Р	GW	
Local Address (where applicable)	Service	Resident	tial Commer	cial	Industria	Combined	l Agricultura	
871 ETHAN ALL	EN HIGHWAY	Connections	ions 1						
Towns Served:	RIDGEFIELD								
	Moi	nitoring Requ	iireme	nts					
Water System	Facility: DISTRIBUTION SYSTEM (W	SF ID: 00600)							
Total Coliforn	n (3100)					1	routine (RT)	per quarter	
Sampling	Point (Sampling Point ID)		Monitorii	ng Period	Coll	ection Peri	od Comp	iance Status	
Select fror	m Inventory of Active Sampling Points		10/1/23 - 12/31/23				C	omplete	
			1/1/24 - 3/31/24				C	omplete	
			4/1/24 - 6/30/24						
			7/1/24 -	9/30/24					
Physical Para	meters (PPS)					1	routine (RT)	per quarter	
Sampling	Point (Sampling Point ID)		Monitorii	ng Period	Coll	ection Peri	od Comp	iance Status	
Select fror	n Inventory of Active Sampling Points			12/31/23			C	omplete	
			1/1/24 -	3/31/24			C	omplete	
			4/1/24 -	* *					
			7/1/24 -	9/30/24					
Water System	Facility: ENTRY POINT (WSF ID: 007	'00)							
Nitrate And I	Nitrite (NOX)						1 routine (RT) per year	
Sampling	Point (Sampling Point ID)		Monitorii	ng Period	Coll	ection Peri	od Comp	iance Status	
ENTRY PO	INT (3)		1/1/23 - :				C	omplete	
			1/1/24 - :	12/31/24			C	omplete	

	1/1/25 - 12/31/25	_	_
Water System Facility: WELL (WSF ID: 22044)			
E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		

			7/1/24 - 9/	30/24			
	Wa	ter System Facili	ity and Sampling P	oint Ir	nventor	ry	
Water	Water System Facility	Sampling Point	Samplina Boint		Total	Lead and	Chara
System Water System Facility Facility ID		Sumpling Point ID	Sampling Point		Coliform	**	Stage
		ID .	Description	Status	Rule	Rule Tier Asbestos	WQP Z DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ		
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α			
		EAH001	CHIRO UTILITY SNK	Α	Υ	Υ	
		EAH002	MED SKIN CARE OFF RR	Α	Υ	Υ	
		EAH003	MED SKN TREAT RM 01	Α	Υ	Υ	
		EAH004	MED SKN TREAT RM 02	Α	Υ	Υ	
		EAH005	RR MENS RM 2F	Α	Υ	Υ	
		EAH006	RR LADY RM 2F	Α	Υ	Υ	
		EAH007	RR LADY ROOM 1F L	Α	Υ	Υ	
		EAH008	RR LADY ROOM 1F R	Α	Υ	Υ	
		EAH009	RR MENS RM 1F L	Α	Υ	Υ	

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

	<u> </u>	<u> </u>					
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1180014	871 ETHAN ALLEN HWY BUILDING			NC	25	Р	GW
Local Address (v	where applicable)	Service	Residen	tial Commerci	al Industri	al Combine	ed Agricultural
871 ETHAN ALL	N HIGHWAY	Connections		1			

Towns Served: RIDGEFIELD

V	Vater System Facili	ity and Sampling Po	oint Ir	nvento	ry
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Stage Rule Tier Asbestos WQP 2 DBPR
	EAH010	RR MENS RM 1F R	Α	Υ	Υ
	EAH011	MAUER ASSOC KTCHETTE	Α	Υ	Υ
	EAH012	IMPACT SERV GRP HS	Α	Υ	Υ
	UPSTREAM	WITHIN 5 SERVICE CON	Α		
00700 ENTRY POINT	3	ENTRY POINT	Α		
22044 WELL	2	WELL	Α		
61202 TREATMENT DIANT					

61202 TREATMENT PLANT

			Co	ontact Inf	ormation					
Name				Organization			Job Title			
Mr. Jeff Ryer				Ryer Assocs.	Comm Real Estate		President			
Mailing Address Line One Mailing Addr			ress Line Two			City	State	Zip Code		
103 Mill Plain Road						Danbury	1	СТ	06811	
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ac	mail Address			
203-797-0200	103		20	3-470-6169		mjryer@	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.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Schedule Generation Date: 4/3/2024

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	Connecticut De	epartment of	Public H	ealth	Drin	king	Wa	ater S	ection	
	Water Q	uality Monit	oring and	d Com	pliar	nce S	che	edule		
PWS ID	PWS Name				Classific	cation P	opul	ation Ov	vner Type F	rimary Source
CT1180024	ALDRIDGE PARK				NO		2.		L	GW
Local Address (where applicable)		Service	Resident	ial Cor	nmercial	In	dustrial	Combined	Agricultural
NEW ROAD	, ,		Connections			1				
Towns Served:	RIDGEFIELD									
		Monito	oring Requ	iremer	nts					
Water System	Facility: DISTRIBUTIO	N SYSTEM (WSF II	D: 00600)							
Total Coliforn	n (3100)							1 r	outine (RT) per month
Sampling	Point (Sampling Point ID)			Monitorin	ng Perio	d Col	llecti	on Perio	d Compl	iance Status
Select fror	n Inventory of Active Sam	pling Points		4/1/24 -	4/30/24	4				
				5/1/24 -	5/31/24	1				
				6/1/24 -	6/30/24	4				
				7/1/24 -	7/31/24	1				
				8/1/24 -	8/31/24	1				
				9/1/24 -	9/30/24	1				
Physical Para	meters (PPS)							1 r	outine (RT	per month
Sampling	Point (Sampling Point ID)			Monitorin	ng Perio	d Col	llecti	on Perio	d Compl	iance Status
Select fror	n Inventory of Active Sam	pling Points		4/1/24 -	4/30/24	1				
				5/1/24 -	5/31/24	4				
				6/1/24 -	6/30/24	1				
				7/1/24 -	7/31/24	1				
				8/1/24 -	8/31/24	1				
				9/1/24 -	9/30/24	1				
Water System	Facility: ENTRY POIN	T (WSF ID: 00700)								
Nitrate And N	litrite (NOX)							:	L routine (RT) per year
Sampling	Point (Sampling Point ID)			Monitorin	ng Perio	d Col	llecti	on Perio	d Compl	iance Status
ENTRY PO	NT (3)			1/1/23 - 1	2/31/2	3	4/1	-9/30	Co	omplete
				1/1/24 - 1	2/31/2	4	4/1	-9/30		
				1/1/25 - 1	2/31/2	5	4/1	-9/30		
		Other Co	ompliance	Sched	ules					
Compliance Sch	nedule Activity			E	ue Dat	е		Achieve	d Date	
SEASONAL STAI	RT UP COMPLETION			4	/1/2024	4				
	Wate	r System Facili	ty and Sar	npling	Point	Inven	tor	У		
Water						Tot	al	Lead an	d	
	er System Facility	Sampling Point		nt		Colife		Copper		Stage
Facility ID		ID	Description		Stat	tus Ru	le	Rule Tie	r Asbestos	WQP 2 DBPR
00600 DIST	RIBUTION SYSTEM	4	DISTRIBUTION	I SYSTEM	Α	, Y	,			
		AP001	CONCESSION	STNAD	Α	. Y	,		Υ	
		AP002	RR GENERIC R	R	Α	. Y	,		Υ	
		DOWNSTREAM	WITHIN 5 SER	VICE CON	Α					
		LIDCEDEANA	VAUTUUNI E CED	VICE CON						

ENTRY POINT

WELL

WITHIN 5 SERVICE CON

Α

Α

Α

UPSTREAM

3

2

00700 ENTRY POINT

22045 WELL

	Water Qualit	y Monitoring and	d Con	npl	iance S	Schedul	e	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1180024	CT1180024 ALDRIDGE PARK					25	L	GW
Local Address	(where applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
NEW ROAD	EW ROAD Connections				1			

				Contact Inf	ormation				
Name				Organization	1			Job Title	
Mr. Rudy Marconi				Town of Ridg	gefield		First Selectn	nan	
Mailing Address Lin	e One		Mailing A	ddress Line Two			City	State	Zip Code
400 Main Street						Ridgefie	field CT		06877
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email A	ddress		
203-431-2774		203-431-	2722			selectm	an@ridgefield	dct.org	
Contact Role(s): Le	gal Contact								
contact noic(s).	Bai Contact								
	.gar contact			Organization	1			Job Title	
Name				Organization Ridgefield Pa			Assistant of		
Name Mr. Robert Schneic	ler		Mailing A		arks And Rec		Assistant of City		Zip Code
	ler e One			Ridgefield Pa	arks And Rec	Ridgefie	City	Parks	Zip Code
Name Mr. Robert Schneic Mailing Address Lin	ler e One	Fax	195 Danb	Ridgefield Pa	arks And Rec		City	Parks State	· · · · · · · · · · · · · · · · · · ·

Please note the following:

Towns Served: RIDGEFIELD

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End of schedule

	dominocticat Departmen	ic of i abile if	Carcin		31111111	,acci	Decement		
	Water Quality M	onitoring and	d Con	npl	iance S	Schedul	e		
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source	
CT1180154 CASA LU NC 25 P									
Local Address (v	vhere applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural	
896 ETHAN ALLI	96 ETHAN ALLEN HIGHWAY Connections 1								
Towns Served: F	owns Served: RIDGEFIELD								

Monitorin	g Requirements							
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	(600)							
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	4/1/24 - 6/30/24							
	7/1/24 - 9/30/24							
Physical Parameters (PPS) 1 routine (RT) per quarte								
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status					
Select from Inventory of Active Sampling Points	4/1/24 - 6/30/24							
	7/1/24 - 9/30/24							
Water System Facility: ENTRY POINT (WSF ID: 00700)								
Nitrate And Nitrite (NOX)		1 rc	outine (RT) per year					
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status					
ENTRY POINT (3)	1/1/24 - 12/31/24							
	1/1/25 - 12/31/25							
Water System Facility a	nd Sampling Point In	ventory						

	W	ater System Facili	ity and Sampling P	oint Ir	nventoi	ry		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	age DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
00700	ENTRY POINT	3	ENTRY POINT	Α				
22052	WELL	2	WELL	Α				

		Contact Info	ormation							
		Organization	Organization				Job Title			
		Barking LLC			Owner					
g Address Line One Mailing Address Line Two Cit				City	State	Zip Code				
				Brookfiel	d	СТ	06804			
Extension	Fax	Mobile Phone	Emergency Phone	Email Ad	dress					
			914-584-5538	lufeijoo@yahoo.com						
			Organization Barking LLC e One Mailing Address Line Two	Barking LLC e One Mailing Address Line Two Extension Fax Mobile Phone Emergency Phone	Organization Barking LLC e One Mailing Address Line Two Brookfiel Extension Fax Mobile Phone Emergency Phone Email Ad	Organization Barking LLC Owner e One Mailing Address Line Two City Brookfield Extension Fax Mobile Phone Emergency Phone Email Address	Organization Job Title Barking LLC Owner e One Mailing Address Line Two City State Brookfield CT Extension Fax Mobile Phone Emergency Phone Email Address			

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

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End of schedule

	Connecticut Dep	artment of	Public F	Iealth	Drinki	ing W	ater Se	ction	
	•	ality Monit							
PWS ID	PWS Name		011118 0111	0. 0011				ner Type Pr	imary Source
CT1180204	MARTIN PARK				NC		25	L	GW
Local Address (where applicable)		Service	Residen	tial Comm	nercial I	ndustrial	Combined	Agricultural
GREAT POND F			Connections		1	L			
Towns Served:	RIDGEFIELD		-	1	1	1			
		Monito	oring Requ	uireme	nts				
Water Systen	r Facility: DISTRIBUTION	SYSTEM (WSF II	D: 00600)						
Total Colifor	m (3100)						1 ro	utine (RT)	per month
Sampling	Point (Sampling Point ID)			Monitori	ng Period	Collec	tion Period	Compli	ance Status
Select fro	m Inventory of Active Samplir	ng Points		5/1/24 -	5/31/24				
				6/1/24 -	6/30/24				
				7/1/24 -					
					8/31/24				
				9/1/24 -	9/30/24				
-	ameters (PPS)								per month
	Point (Sampling Point ID)				ng Period	Collec	tion Period	Compli	ance Status
Select fro	m Inventory of Active Samplir	ng Points			5/31/24				
					6/30/24				
					7/31/24				
				8/1/24 -					
_				9/1/24 -	9/30/24				
	n Facility: ENTRY POINT (WSF ID: 00700)							_
	Nitrite (NOX)							=	T) per year
	Point (Sampling Point ID)				ng Period	Collec	tion Period	Compli	ance Status
ENTRY PO	INT (3)				12/31/23				
					12/31/24				
					12/31/25				
		Other Co	ompliance	Sched	ules				
_	hedule Activity				Due Date		Achieved	Date	
SEASONAL STA	RT UP COMPLETION				5/1/2024				
	Water :	System Facili	ty and Sai	mpling	Point Ir	rvento	ry		
Water		-				Total	Lead and		_
•	ter System Facility	Sampling Point		nt		Coliform			Stage
Facility ID		ID	Description		Status	Rule	Kule Tier	Asbestos	WQP 2 DBPR
00600 DIS	TRIBUTION SYSTEM	4	DISTRIBUTION			Υ			
		DOWNSTREAM				.,			
		MP001	RR LADY ROC		A	Y		Y	

RR LADY ROOM R

WATER FOUNTAIN

WITHIN 5 SERVICE CON

RR MENS RR - R

RR MENS RR L

ENTRY POINT

WELL

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Υ

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MP002

MP003

MP004

MP005

UPSTREAM

3

2

00700

22056 WELL

ENTRY POINT

	Water Quality Monit	oring and	d Con	npl	iance S	Schedul	e	
PWS ID					ssification	Population	Owner Type	Primary Source
CT1180204	MARTIN PARK				NC	25	L	GW
Local Address (w	vhere applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
GREAT POND RO	REAT POND ROAD Connections				1			

			(Contact Inf	ormation				
Name				Organization	1			Job Title	
Mr. Rudy Marconi				Town of Ridg	gefield		First Select	man	
Mailing Address Lin	e One		Mailing Ad	dress Line Two			City	State	Zip Code
400 Main Street						Ridgefie	ield CT		06877
Business Phone	Extension	Fax	ľ	Mobile Phone	Emergency Phone	Email Ad	ddress		
203-431-2774		203-431-	2722			selectm	an@ridgefie	ldct.org	
Contact Role(s): Le	gal Contact		,						
Name				Organization	1			Job Title	
Mr. Robert Schneid	ler			Ridgefield Pa	arks And Rec		Assistant of	f Parks	
Mailing Address Lin	e One		Mailing Ad	dress Line Two			City	State	Zip Code
Ridgefield Parks An	d Rec.		195 Danbu	ry Road		Ridgefie	ld	СТ	06877
Business Phone	Extension	Fax	N	Mobile Phone	Emergency Phone	Email Ad	ddress		
203-431-2755						recoutm	naint@ridgef	eldct.org	
Contact Role(s): A	dministrative	Contact	'						

Please note the following:

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End of schedule

	Connecticut Department of				C				
	Water Quality Monitoring and Compliance Schedule								
PWS ID	WS ID PWS Name Classification Population Owner Type Primary Source								
CT1180254									
Local Address	cal Address (where applicable) Service Residential Commercial Industrial Combined Agricultural						ed Agricultural		

1

Connections

Towns Served: RIDGFFIFI D

325 DANBURY ROAD

Monitoring	Requirements		
	•		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006)	00)	1	tine (DT) was seenth
Total Coliform (3100) Sampling Point (Sampling Point ID)	Monitoring Pariod	1 rou Collection Period	tine (RT) per month Compliance Status
	Monitoring Period	Conection Period	
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Physical Parameters (PPS)			tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
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		

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 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					

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 C					Population	Owner Type	Primary Source
CT1180254 RIDGEFIELD BAPTIST CHURCH				NC	25	Р	GW
Local Address (v	Service	Residen	tial Commerci	al Industri	al Combine	ed Agricultural	
325 DANBURY R	Connections		1				

Towns Served: RIDGEFIELD

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

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTE	M		Certification
Operator Name	Operator Type	Certification(s)	Expiration
HURLBUT, PAUL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2025

				Contact Info	ormation					
Name			Organization			Job Title				
Mr. Keith Russell				Ridgefield Ba	ptist Church		Board of Tr	ustees		
Mailing Address Line One			Mailing	Address Line Two			City	State	Zip Code	
Ridgefield Baptist Board of Trustees			325 Danbury Road			Ridgefie	ld	СТ	06877	
Business Phone	Extension	Fax	•	Mobile Phone	Emergency Phone	Email Address				
203-438-5751				860-538-2731 khrussell@sbcglobal.net						
Contact Role(s): Le	gal Contact									
Name				Organization			Job Title			
Robert Clark				Ridgefield Ba	ptist Church	Trustee				
Mailing Address Lin	e One		Mailing	Address Line Two		City		State	Zip Code	
325 Danbury Road						Ridgefie	ld	СТ	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

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

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 F	[ealth	Dr	inking	g Wate	r S	ection		
	Water Quality Monit				•	_		CCCIOII		
PWS ID	PWS Name	oring an	u don	_		Populatio		vner Tyne	Primary	Source
CT1180264	RIDGEFIELD GOLF COURSE(PUBLIC FOUNTAI	N)		Cius	NC	25		P	G\	
	where applicable)	Service	Residen	tial	Commerc	1	trial	Combine		cultura
545 RIDGEBUR		Connections			1				7 18.1	
Towns Served:										
		oring Requ	iireme	nts						
Water System	Facility: DISTRIBUTION SYSTEM (WSF II									
Total Colifor	•	<u> </u>					1 r	outine (R	T) per n	nonth
	Point (Sampling Point ID)		Monitori	ing Pe	eriod (Collection F		_	pliance S	
Select from	m Inventory of Active Sampling Points		11/1/23 -	11/3	30/23				Complet	
			12/1/23 -	12/3	31/23					
			1/1/24 -	1/31	L/24			Οι	ıt of Serv	/ice
			2/1/24 -	2/29	9/24			Οι	ıt of Serv	/ice
			3/1/24 -	3/31	L/24			Οι	ıt of Serv	/ice
			4/1/24 -	4/30	0/24					
			5/1/24 -	5/31	L/24					
			6/1/24 -	6/30	0/24					
			7/1/24 -	7/31	L/24					
			8/1/24 -	8/31	L/24					
			9/1/24 -	9/30)/24					
			10/1/24 -	10/3	31/24					
Physical Para	meters (PPS)						1 r	outine (R	T) per n	nonth
Sampling	Point (Sampling Point ID)		Monitori	ing Pe	eriod (Collection F	Perio	d Com	pliance S	Status
Select from	n Inventory of Active Sampling Points		11/1/23 -	11/3	30/23				Complet	e
			12/1/23 -	12/3	31/23					
			1/1/24 -	-				Οι	it of Serv	/ice
			2/1/24 -		·			Οι	it of Serv	/ice
			3/1/24 -	3/31	L/24			Οι	ıt of Serv	/ice
			4/1/24 -	4/30	0/24					
			5/1/24 -	-						
			6/1/24 -							
			7/1/24 -		-					
			8/1/24 -							
			9/1/24 -							
			10/1/24 -	10/3	31/24					
•	Facility: ENTRY POINT (WSF ID: 00700)									
	Nitrite (NOX)							1 routine		-
	Point (Sampling Point ID)		Monitori			Collection F	Perio		pliance S	
ENTRY PO	INT (3)		1/1/23 -						Complet	e
			1/1/24 -	12/3	1/24					

Other Compliance Schedules									
Compliance Schedule Activity	Due Date	Achieved Date							
RESPOND TO SANITARY SURVEY	11/29/2020								
L2 ASSESSMENT (MULTIPLE TC+, 2ND IN 12M)	9/2/2023								
L2 ASSESSMENT (MULTIPLE TC+, 2ND IN 12M)	9/23/2023								

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.

Conn	ecticut Department of Public Health Drink	ng Water	Section	
	Water Quality Monitoring and Compliance	e Schedu	le	

PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
CT1180264 RIDGEFIELD GOLF COURSE(PUBLIC FOUNTAIN)					NC	25	Р	GW
Local Address (v	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural	
545 RIDGEBURY	Connections			1				

Towns Served: RIDGEFIELD

Public Notification Requirements										
	Compliance	Notice	Public No	tification_	PN Certification					
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received				
REVISED TOTAL COLIFORM RULE (RTCR) TT Violation	9/3/23 -	2	1/27/2024		2/6/2024					
REVISED TOTAL COLIFORM RULE (RTCR) TT Violation	9/22/23 -	2	1/27/2024		2/6/2024					

	Water System Facility and Sampling Point Inventory											
Water System	Water System Facility	Samplina Point	Sampling Point		Total Coliform	Lead and Copper			Stage			
Facility ID	•	ID ID	Description	Status	Dula	Rule Tier	Asbestos	WQP	_			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ							
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α								
		RPF001	RR GENERIC RR	Α	Υ		Υ					
		RPF002	WATER FOUNTAIN	Α	Υ		Υ					
		UPSTREAM	WITHIN 5 SERVICE CON	Α								
00700	ENTRY POINT	3	ENTRY POINT	Α								
22061	WELL	2	WELL	Α								

Contact Information										
Name			Organization	1		Job Title				
Mr. Frank Sergiovanni				Ridgefield G	olf Course	General Manager				
Mailing Address Lin	e One		Mailing Address Line Two			City		State	Zip Code	
545 Ridgebury Rd						Ridgefie	ld	СТ	06877	
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Address				
203-748-7008					203-748-6157	golfdired	olfdirector@ridgefieldct.gov			

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

Schedule Generation Date: 4/3/2024

- 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

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

PWS ID	PWS Name			Classific	cation P	opulation	Owner Type	Primary Source
CT1180274	THE GOLF PERFORMANCE CENTER, INC.			NO	2	25	Р	GW
Local Address (where applicable)	Service	Resider	itial Cor	nmercial	Industri	al Combine	ed Agricultural
824 FTHAN ALL	AN HIGHWAY (ROUTE 7)	Connections			1			

Towns Served: RIDGEFIELD

TOWNS SERVED: RIDGEFIELD			
Monitor	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
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		
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)			
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		
Other Cor	mpliance Schedules		
Compliance Schedule Activity	Due Date	Achieved D	ate
CROSS CONNECTION SURVEY REPORT	3/1/2020		

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									
· ·										

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

Contact Information										
Name	Organization			Job Title						
Mr. Roger Knick	The Golf Performar	The Golf Performance Ctr, Inc.								
Mailing Address Line One	Mailing A	Address Line Two		City	State	Zip Code				
824 Ethan Allen Highway			Ridgefie	eld	СТ	06877				
	,									

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						Classif	cation	Population	Owi	ner Type	Primary Source
CT1180274	THE GOLF PERFO	RMANCE CE	NTER, IN	IC.			N	С	25		Р	GW
Local Address (v	vhere applicable)				Service	Residen	tial Co	mmerci	al Industri	al	Combine	d Agricultural
824 ETHAN ALLAN HIGHWAY (ROUTE 7)				Connection	ıs		1					
Towns Served: F	RIDGEFIELD				1	'						
Business Phon	usiness Phone Extension Fax Mobile Phone Emergency Phone Ema				Email A	Address						
203-241-6902	2	203-403-3	3231			203-790-4653		Roger@	thegolfper	form	ancecent	er.com
Contact Role(s):	Legal Contact, C	Owner										
Name				Org	ganization			Job Title				
Mr. Edward Mu	rphy			The	e Golf Perfo	rmance Cei	nter		Facilities N	Mana	ager	
Mailing Address	Line One		Mailing /	Address	Line Two			City			State	Zip Code
824 Ethan Allen	Highway							Ridgefi	eld		СТ	06877
Business Phon	e Extension	Fax		Mobile	e Phone	Emergency	/ Phone	Email A	Address			
203-790-4653	3							edward	edward.murphy@thegolfperformancecenter.co			
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 Departmen	nt of Public H	lealth	Drin	king '	Water	Sec	tion	
	Water Quality Mo	onitoring an	d Con	npliar	ice So	chedul	e		
PWS ID	PWS Name			Classific	ation P	on Population C		r Type F	rimary Sourc
CT1180284	RIDGEFIELD ICE CREAM SHOP			NC		25	F	o	GW
Local Address	(where applicable)	Service	Residential Comme		nmercial	Industri	al Co	ombined	Agricultura
680 DANBURY	ROAD	Connections			1				
Towns Served:	RIDGEFIELD								
	M	onitoring Requ	uireme	ents					
Water Systen	m Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)							
Total Colifor	•						1 rout	-) per month
	Point (Sampling Point ID)			ing Perio		lection Pe	riod	Compl	iance Status
Select fro	m Inventory of Active Sampling Points			- 11/30/2					
				- 12/31/2				Co	omplete
				- 1/31/24					
			- 2/29/24						
				- 3/31/24					
			4/1/24 - 4/30/24 5/1/24 - 5/31/24 6/1/24 - 6/30/24						
				- 7/31/24					
				1/24 - 8/31/24					
				- 9/30/24					
	()		10/1/24	- 10/31/2	4				
•	ameters (PPS)							•) per month
	Point (Sampling Point ID)			ing Perio		lection Pe	rıoa	Compi	iance Status
Select fro	m Inventory of Active Sampling Points			- 11/30/2					
				- 12/31/2				C	omplete
				- 1/31/24					
				- 2/29/24 - 2/21/24					
				- 3/31/24 - 4/30/24					
				- 4/30/24 - 5/31/24					
				- 5/31/24 - 6/30/24					
			0/1/24	- 0/30/24	•				

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

7/1/24 - 7/31/24 8/1/24 - 8/31/24 9/1/24 - 9/30/24 10/1/24 - 10/31/24

	1/1/25 - 12/31/23		
Other	Compliance Schedules		
Compliance Schedule Activity	Due Date	Achieved Date	
L1 ASSESSMENT (MULTIPLE TC+)	5/11/2022		
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.

	Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source			
CT1180284	CT1180284 RIDGEFIELD ICE CREAM SHOP				NC	25	Р	GW			
Local Address	Service	Residential		Commerci	al Industri	al Combin	ed Agricultural				
680 DANBURY	Connections			1							

Towns Served: RIDGEFIELD

Public Notification Requirements										
	Compliance	Notice	<u>Public No</u>	<u>tification</u>	PN Certification					
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received				
REVISED TOTAL COLIFORM RULE (RTCR) TT Violation	5/12/22 -	2	7/20/2023		7/30/2023					
E. Coli M&R Violation	4/18/22 -	3	11/29/2023		12/9/2023					
Total Coliform M&R Violation	5/1/22 - 5/31/22	3	11/29/2023		12/9/2023					

	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	WQP	Stage 2 DBPR			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ							
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α								
		UPSTREAM	WITHIN 5 SERVICE CON	Α								
00700	ENTRY POINT	3	ENTRY POINT	Α								
22063	WELL	2	WELL	Α								

		Co	ontact Inf	ormation				
			Organization		Job Title			
r. Felix Lechner			Ridgefield Ice	Owner				
e One		Mailing Addr	ess Line Two			City	State	Zip Code
					Ridgefie	ld	СТ	06877
Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ldress		
				203-746-3319				
			e One Mailing Addr	Organization Ridgefield Ico e One Mailing Address Line Two	Extension Fax Mobile Phone Emergency Phone	Organization Ridgefield Ice Cream Shop e One Mailing Address Line Two Ridgefie Extension Fax Mobile Phone Emergency Phone Email Ac	Organization Ridgefield Ice Cream Shop Owner e One Mailing Address Line Two City Ridgefield Extension Fax Mobile Phone Emergency Phone Email Address	Organization Job Title Ridgefield Ice Cream Shop Owner e One Mailing Address Line Two City State Ridgefield CT Extension Fax Mobile Phone Emergency Phone Email Address

Contact Role(s): Le	egal Contact, O	wner							
Name				Organization				Job Title	!
Mr. Alex Aziere				Ridgefield Ice	e Cream		Business M	anager	
Mailing Address Lin	e One		Mailing Add	ress Line Two			City	State	Zip Code
680 Danbury Road						Ridgefie	d	СТ	06877
Business Phone	Extension	Fax	М	obile Phone	Emergency Phone	Email Ac	ldress		
203-438-3094					203-917-1840	Ridgefie	dicecream7	7@gmail.cor	n

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 Departmen				Č				
	Water Quality Mo	nitoring and	d Com	ıpl	iance S	schedul	e		
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT1180364	ST ELIZABETH SETON CHURCH		NC		25	Р	GW		
Local Address	(where applicable)	Service	Residen	tial	Commerci	al Industri	al Combine	ed Agricultural	
520 RIDGEBUI	RY ROAD	Connections			1				
Towns Served	: RIDGEFIELD	'			1		<u> </u>		
Monitoring Requirements									

Towns Served: RIDGEFIELD			
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	600)		
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
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	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
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
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	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24	_	
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
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		
Other Comp	liance Schedules		
Compliance Schedule Activity	Due Date	Achieved D	ate

	Water Quality Monito	oring and	d Con	npli	iance S	Schedul	e	
PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
CT1180364	CT1180364 ST ELIZABETH SETON CHURCH				NC	25	Р	GW
Local Address	Local Address (where applicable)		Residentia		Commerci	al Industri	al Combine	ed Agricultural
520 RIDGEBUR	20 RIDGEBURY ROAD				1			

Towns Served: RIDGEFIELD

Other Co	ompliance Schedules		
Compliance Schedule Activity	Due Date	Achieved Date	
SANITARY DEFECT CORRECTIVE ACTION	1/28/2024		
SANITARY DEFECT CORRECTIVE ACTION	1/28/2024	12/29/2023	
CROSS CONNECTION SURVEY REPORT	3/1/2025		

	Wat	ter System Facili	ity and Sampling P	oint Ir	nventoi	Y
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Stage Rule Tier Asbestos WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ	
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α		
		SE001	RR PARISH CTR 1ST F	Α	Υ	Υ
		SE002	RR PARISH CTR 2ND F	Α	Υ	Υ
		SE003	RR REVEREND HOUSE	Α	Υ	Υ
		SE004	KIT SNK REVEREND HSE	Α	Υ	Υ
		SE005	KIT SNK PARISH CTR	Α	Υ	Υ
		UPSTREAM	WITHIN 5 SERVICE CON	Α		
00700	ENTRY POINT	3	ENTRY POINT	Α		
22067	WELL	2	WELL	Α		

			Co	ontact Inf	ormation				
Name				Organization				Job Title	
Father Alphonse Arokiam				St Elizabeth S	Seton Church	Parochial Admin			
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
520 Ridgebury Rd						Ridgebu	ry	СТ	06877
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ldress		
203-438-7292						stsetonp	arish@com	cast.net	
Contact Role(s): Le	gal Contact, O	wner							
Name				Organization				Job Title	

Name	lame				Organization			
Mr. Gerry Andrees			St. Elizabeth Seton Churh			Business Manager		
Mailing Address Line One Mailing A			ess Line Two	City		State	Zip Code	
520 Ridgebury Rd					Ridgefie	Ridgefield		06877
Business Phone Extensio	n Fax	Mo	bile Phone	Emergency Phone	Email Ac	ldress		
203-438-7292 111					sesbusm	gr@yahoo.d	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.
- B. 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 De	•					_			ction	
		uality Monit	oring and	a Coi							
PWS ID	PWS Name				Cla		ion Pop)wn		rimary Sourc
CT1180374	ST IGNATIUS RETREAT H	OUSE		5		NC		25		Р	GW
	(where applicable)		Service Connections	Reside	ntial	Comm		Industrial	(Combined	Agricultura
209 TACKORA			Connections			1	_				
Towns Served:	RIDGEFIELD										
\\\	- F		oring Requ	uirem	ents	}					
•	n Facility: DISTRIBUTIO	IN SYSTEM (WSF II	D: 00600)							. />	
Total Colifor	•			0.4	utus su F) autad	Calla				per quarter
	Point (Sampling Point ID)	alina Dainta		Monito			Colle	ction Perio	oa -		ance Status
Select fro	m Inventory of Active Sam	pling Points		10/1/23	-						mplete
				1/1/24 4/1/24						Co	mplete
				7/1/24							
Physical Para	ameters (PPS)					•		1 r	out	ine (RT)	per quarter
-	Point (Sampling Point ID)			Monito	ring F	Period	Colle	ction Perio			ance Status
Select fro	m Inventory of Active Sam	oling Points		10/1/23	- 12/	31/23				Со	mplete
				1/1/24	- 3/3	1/24				Со	mplete
				4/1/24	- 6/3	0/24					
				7/1/24	- 9/3	0/24					
Water Systen	n Facility: ENTRY POIN	T (WSF ID: 00700)									
Nitrate And	Nitrite (NOX)								1 r	outine (R	T) per year
Sampling	Point (Sampling Point ID)			Monito	ring F	Period	Colle	ction Perio	od	Compli	ance Status
ENTRY PC	DINT (3)			1/1/23	- 12/3	31/23				Co	mplete
				1/1/24	- 12/3	31/24					
				1/1/25	- 12/3	31/25					
Water Systen	n Facility: WELL (WSF	D: 22068)									
E. Coli (3014	4)							1 r	out	ine (RT)	per quarter
Sampling	Point (Sampling Point ID)			Monito	ring F	Period	Colle	ction Perio	od	Compli	ance Status
WELL (2)			:	10/1/23	- 12/	31/23				Co	mplete
				1/1/24	- 3/3	1/24				Со	mplete
				4/1/24		-					
				7/1/24	- 9/3	0/24					
		Other Co	ompliance	Sche	dule	es					
Compliance Sc	hedule Activity				Due	Date		Achieve	ed D	ate	
RESPOND TO S	SANITARY SURVEY				10/24	1/2008					
CROSS CONNE	CTION SURVEY REPORT				3/1/	2020					
	CTION SURVEY REPORT					2021					
	CTION SURVEY REPORT					2022					
CROSS CONNE	CTION SURVEY REPORT					2024					
	Wate	r System Facili	ty and Sar	mplin	g Po	int Ir	vent	ory			
Water System Wa Facility ID	ter System Facility	Sampling Point ID	Sampling Poil Description	nt		Status	Total Colifori Rule	т Сорре	er	Asbestos	Stage WQP 2 DBP
	TRIBUTION SYSTEM	4	DISTRIBUTION	N SYSTFI		A	Υ				

WITHIN 5 SERVICE CON

Α

Α

DOWNSTREAM WITHIN 5 SERVICE CON

UPSTREAM

	Water Quality Monitoring and Compliance Schedule										
PWS ID	WS ID PWS Name					Population	Owner Type	Primary Source			
CT1180374 ST IGNATIUS RETREAT HOUSE					NC 25		Р	GW			
Local Address (w	here applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural			
209 TACKORA TE	Connections			1							

	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	Stag WQP 2 DE	_		
00700	ENTRY POINT	3	ENTRY POINT	А							
22068	WELL	2	WELL	А							
61216	TREATMENT PLANT										
61218	BOOSTER PUMP-RETREAT HOUSE										

				Contact Inf	ormation				
Name				Organization	l			Job Title	
Father Jean Violett	е			St Ignatius R	etreat House		Prior		
Mailing Address Lin	e One		Mailin	g Address Line Two			City	State	Zip Code
209 Tackora Trail						Ridgefie	ld	СТ	06877
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress		
203-431-0201	12					jlviolette	e@hotmail.c	om	
Contact Role(s): Le	gal Contact								
Name				Organization				Job Title	
Mr. Br Benedict				St. Ignatius R	etreat House				
Mailing Address Lin	e One		Mailin	g Address Line Two			City	State	Zip Code
209 Tackura Trail						Ridgefie	ld	СТ	06877
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress		
203-431-0201						rangelos	sspx@gmail.	com	

Please note the following:

Contact Role(s): Administrative Contact

Towns Served: RIDGEFIELD

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End of schedule

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Schedule Generation Date: 4/3/2024

	Connecticut Departmen	nt of Public H	ealth	Dr	inking	g V	Vater	Se	ection	
	Water Quality M				7					
PWS ID	PWS Name					_			ner Type Pr	imary Source
CT1180604	659 DANBURY ROAD - RIDGEFIELD				NC		25		Р	GW
Local Address	(where applicable)	Service	Resident	ial	Commerc	ial	Industria	al	Combined	Agricultural
Towns Served:	BIDGEFIELD	Connections			1					
TOWIIS Serveu.		onitoring Requ	iromor	ntc						
Water System	n Facility: DISTRIBUTION SYSTEM (iii eiiiei	113						
Total Colifor		10.00000					1	ro	utine (RT) p	er quarter
	Point (Sampling Point ID)		Monitorin	na P	eriod (Colle	ection Per			ince Status
	m Inventory of Active Sampling Points		10/1/23 - 12/31/23						-	nplete
	,		1/1/24 - 3							nplete
			4/1/24 - 0	6/30	0/24					
			7/1/24 - 9	9/30	0/24					
Physical Par	ameters (PPS)						1	ro	utine (RT) p	er quarter
Sampling	Point (Sampling Point ID)		Monitorin	ng P	eriod (Colle	ection Per	riod	Complic	ince Status
Select fro	m Inventory of Active Sampling Points	-	10/1/23 - 12/31/23							nplete
			1/1/24 - 3						Cor	nplete
			4/1/24 - 0							
M/-1 C1	5 - 22	0700	7/1/24 - 9	9/30	0/24					
-	n Facility: ENTRY POINT (WSF ID: 0	0700)							/5:	
Nitrate (104	-		Manitaviu	D	ariad (coll.	ation Day		routine (R	
	m Inventory of Active Sampling Points		<i>Monitorin</i> 1/1/25 - 1			JOHE	ection Per	100	Compile	ince Status
Nitrite (104	· · · · · · · · · · · · · · · · · · ·		1/1/25-1	12/3	11/23		1	ro	utine (RT) p	or quartor
-	Point (Sampling Point ID)		Monitorin	na P	eriod (Colle	± ection Per			ince Status
	m Inventory of Active Sampling Points		4/1/24 - (_				100	Compile	
			7/1/24 - 9							
Nitrate And	Nitrite (NOX)			•				1	routine (R	T) per year
	Point (Sampling Point ID)		Monitorin	ng P	eriod (Colle	ection Per		-	ince Status
ENTRY PO	DINT (3)		1/1/23 - 1	12/3	1/23				Cor	nplete
			1/1/24 - 3	3/3:	1/24		1/1-3/31		Cor	nplete
	Oth	er Compliance	Sched	ule	es .					
Compliance Sc	hedule Activity		D)ue	Date		Achie	ved	Date	
RESPOND TO S	SANITARY SURVEY		12	/24	/2020					
	Public	Notification R	equire	me	ents					
		Compliance	Notice		<u>Public</u> N	lotij	fication		PN Certi	fication
Violation/Situ	ation	Period	Tier		Required	I	Performe	d	Due to DPH	Received
-	neters M&R Violation	4/1/16 - 6/30/16	3		10/6/2017				10/16/2017	
	M&R Violation	4/1/16 - 6/30/16	3		2/16/2018				2/26/2018	
-	neters M&R Violation	7/1/16 - 9/30/16	3		2/16/2018				2/26/2018	
Total Coliform	M&R Violation	7/1/16 - 9/30/16	3		2/16/2018	3			2/26/2018	

Water System Facility and Sampling Point Inventory											
Water				Total	Lead and						
System Water System Facility	Sampling Point	Sampling Point		Coliform	Copper		Stage				
Facility ID	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2 DBPR				
00600 DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ							

CT112	20604	659 DANRURY ROAD - RIDGEFIELD	NC	25	D	GW						
PWS I	D	PWS Name	Classification	Population	Owner Type	Primary Source						
		Water Quality Monitoring and Con	npliance S	Schedul	e							
	Connecticut Department of Public Health Drinking Water Section											

Connections

Residential Commercial

1

Industrial

Combined

Agricultural

Service

Towns Served: RIDGEFIELD

Local Address (where applicable)

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

Contact Information												
Name				Organization				Job Title				
Mr. John Pambianc	hi			Pamby Moto	rs		Owner					
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code			
665 Danbury Road			P.O. Box 2			Ridgefiel	ld	СТ	06877			
Business Phone	Extension	Fax	Мс	bile Phone	Emergency Phone	Email Ad	ldress					
203-438-6231												

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

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End of schedule

		Department of Quality Monit				_			ction	
PWS ID	PWS Name	Quality Monn	toring a						ner Type F	rimary Source
CT1180554	632 DANBURY ROAD	1			NO		25	II OWI	P P	GW
	ss (where applicable)	<u>'</u>	Service	Residenti		nmercial	Indust	rial	Combined	
Local Addre	ss (where applicable)		Connection		ai Coi	1	muust	IIai	Combined	Agricultural
Towns Sorve	ed: RIDGEFIELD					1				
TOWITS SETVE	u. NIDOLI ILLD	Monit	orina Do		.					
Water Syst	em Facility: DISTRIBU			quiremen	ts					
•	form (3100)	1101131312111 (1131 1	D. 00000)					1 rou	ıtine (RT)	per quarter
	ng Point (Sampling Point	ID)		Monitorin	a Perio	d Coll	ection P			iance Status
_	from Inventory of Active S			10/1/23 - 1						omplete
30,000	Tom memory or neares			1/1/24 - 3						omplete
				4/1/24 - 6						
				7/1/24 - 9						
Physical P	arameters (PPS)			.,-,-	, , -			1 rou	itine (RT)	per quarter
-	ng Point (Sampling Point	ID)		Monitorin	a Perio	d Coll	ection P			iance Status
_	from Inventory of Active S	-		10/1/23 - 1						omplete
	,	1 0		1/1/24 - 3						omplete
				4/1/24 - 6	-					
				7/1/24 - 9						
Water Syst	em Facility: ENTRY PC	OINT (WSF ID: 00700)								
Nitrate An	d Nitrite (NOX)							1	routine (RT) per year
	ng Point (Sampling Point	ID)		Monitorin	g Perio	d Coll	ection P		=	iance Status
	POINT (3)	·		1/1/23 - 1						omplete
				1/1/24 - 1	2/31/2	4			Co	omplete
				1/1/25 - 1	2/31/2	5				
	Wa	ater System Facil	ity and S	ampling F	oint	Invent	tory			
Water						Tota	ıl Lea	d and		
	Vater System Facility	Sampling Point				Colifo	-	pper		Stage
Facility ID		ID	Description	1	Stat	us Rule	e Rul	e Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4		ION SYSTEM	Α					
		DOWNSTREAM			Α					
		UPSTREAM		SERVICE CON	Α					
	NTRY POINT	3	ENTRY POI	NT	Α					
	VELL #1	2	WELL #1		Α					
61664 T	REATMENT PLANT									
		Cor	ntact Info	rmation						
Name		0	rganization						Job Title	
Mr. George	Mulvaney	N	1ulvaney Pro	perties, LLC			Owner			
Mailing Add	ress Line One	Mailing Addres	s Line Two				City		State	Zip Code
4 Christophe	er Columbus Avenue					Danbury			СТ	06810
Business F	Phone Extension	Fax Mob	ile Phone	Emergency F	hone	Email Add	dress			

203-797-8005

Contact Role(s): Legal Contact, Owner

Connecticut Department of Public Health Drinking Water Section														
	Water Quality Monitoring and Compliance Schedule													
PWS ID	PWS Name						Classif	ication	Population	Owner Type	Primary Source			
CT1180554	632 DANBURY R	OAD					N	IC	25	Р	GW			
Local Address (wi	ocal Address (where applicable) Service Resid							mmercia	al Industri	al Combine	ed Agricultural			
					Connection	IS		1						
Towns Served: RI	DGEFIELD					'					'			
Name				Or	ganization					Job Titl	е			
Ms. Janette Black	kstock			Мι	ulvaney Prop	perties			Property	Manager				
Mailing Address I	ine One		Mailing A	ddress	Line Two				City	State	Zip Code			
4 Christopher Col	umbus Avenue							Danbur	У	СТ	06810			
Business Phone	Extension	Fax		Mobil	e Phone	Emergency	/ Phone	Email A	ddress	,				
203-797-8005		203-794-	1786			203-948	-8482	janette	@mulvaney	inc.com				
Contact Role(s):	Administrative	Contact	'		"									

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End of schedule

	Connecticut Do	nartment of	f Dublic L	Joalth	Dr	inki	ng V	Vator	So	ction	
	Connecticut De Water Q	uality Monit								Ction	
PWS ID	PWS Name				Clas	sificati	on Po	pulation	Owr	ner Type I	Primary Sourc
CT1180634	LAKE WINDWING					NC		25		Р	GW
Local Address	(where applicable)		Service	Resider	ntial	Comm	ercial	Industri	al	Combined	Agricultura
SOUTH SHORE	DRIVE		Connections							1	
Towns Served:	RIDGEFIELD			-			'		'		
		Monit	oring Requ	uireme	nts						
Water Systen	n Facility: DISTRIBUTIO	N SYSTEM (WSF I	D: 00600)								
Total Colifor	m (3100)								1 ro	utine (RT) per month
Sampling	Point (Sampling Point ID)			Monitor	ing Pe	eriod	Colle	ction Pe		=	liance Status
Select fro	m Inventory of Active Samp	ling Points		4/1/24	- 4/30)/24					
				5/1/24	- 5/31	L/24					
				6/1/24	- 6/30)/24					
				7/1/24	- 7/31	L/24					
				8/1/24	- 8/31	L/24					
				9/1/24	- 9/30)/24					
Physical Para	ameters (PPS)								1 ro	utine (RT) per month
Sampling	Point (Sampling Point ID)			Monitor	ing Po	eriod	Colle	ction Pe	riod	Comp	liance Status
Select fro	m Inventory of Active Samp	ling Points		4/1/24	- 4/30)/24					
				5/1/24	- 5/31	L/24					
				6/1/24	- 6/30	0/24					
				7/1/24	- 7/31	L/24					
				8/1/24							
				9/1/24	- 9/30	0/24					
Water Systen	n Facility: ENTRY POINT	(WSF ID: 00700))								
Nitrate And	Nitrite (NOX)							1	l rou	tine (RT)	per quarter
	Point (Sampling Point ID)			Monitor	ing Pe	eriod	Colle	ction Pe	riod	Comp	liance Status
ENTRY PC	DINT (3)			4/1/24	- 6/30)/24					
				7/1/24	- 9/30)/24					
		Other C	ompliance	Sched	dule	S					
Compliance Sc	chedule Activity				Due L	Date		Achie	ved	Date	
SEASONAL STA	ART UP COMPLETION				4/1/2	2024					
	Wate	r System Facil	ity and Sa	mpling	Poi	int In	vent	ory			
Water							Total	Lead	and		
•	ter System Facility	Sampling Point		int			Colifor				Stage
Facility ID		ID	Description		9	Status	Rule	Rule	Tier	Asbestos	WQP 2 DBP

	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	Α	Υ								
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α									
		LWW001	CONCESSION STAND	Α	Υ	Υ							
		LWW002	RR GENERIC RR	Α	Υ	Υ							
		UPSTREAM	WITHIN 5 SERVICE CON	Α									
00700	ENTRY POINT	3	ENTRY POINT	Α									
23111	WELL#1	2	WELL#1	Α									

Name Organization Job Title

Mr. Rudy Marconi Town of Ridgefield First Selectman

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.

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

C	Connectic	ut Depa	irtment (of Public	с Н	ealth	Drir	ıking	Water	Se	ection	
	Wa	ter Qua	lity Mon	itoring a	and	d Com	plia	nce S	chedul	le		
PWS ID PWS Name Classification Population Owner Type Primary Source												
CT1180634 L	AKE WINDWIN	G					N	С	25		Р	GW
Local Address (wh	ere applicable)			Service		Resident	ial Co	mmercia	al Industrial		Combine	ed Agricultural
SOUTH SHORE DR	IVE			Connection	ons						1	
Towns Served: RID	GEFIELD				,							
400 Main Street								Kiageti	eia		CI	06877
Business Phone	Extension	bile Phone	Em	nergency	cy Phone Email Address							
203-431-2774		203-431-	2722					selectm	selectman@ridgefieldct.org			
Contact Role(s):	egal Contact		·									
Name				Organization	ı						Job Title	9
Mr. Robert Schne	ider			Ridgefield Pa	arks A	And Rec			Assistant	of P	arks	
Mailing Address Li	ne One		Mailing Addre	ess Line Two					City		State	Zip Code
Ridgefield Parks A				Ridgefi	eld		СТ	06877				
Business Phone	Extension	Fax	Mo	bile Phone	Em	nergency	Phone	Email A	ddress			
203-431-2755								recoutr	maint@ridg	efiel	ldct.org	
Contact Role(s):	Administrative	Contact	-									

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End of schedule

	Water Quality Monitoring and Compliance Schedule												
PWS ID	PWS Name	1		Owner Type	Pri	mary Source							
CT1180644	RIDGEFIELD GOLF COURSE(PRO SHOP &	REST.)			NC	25	L		GW				
Local Address	where applicable)	Resider	ntial	Commerci	al Industri	al Combin	ed	Agricultural					
545 RIDGEBUR	Y ROAD					1							

Towns Served: RIDGEFIELD

Monitorin	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	0600)		
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		
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
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		

Other Compliance Schedules

 Compliance Schedule Activity
 Due Date
 Achieved Date

 RESPOND TO SANITARY SURVEY
 11/29/2020

	Wa	ter System Facili	ty and Sampling P	oint Ir	rventor	у
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Stage Rule Tier Asbestos WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ	
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α		
		RPS001	KIT HAND SNK	Α	Υ	Υ
		RPS002	KIT SNK SINGLE	Α	Υ	Υ
		RPS003	KIT SNK TRPL SNK	Α	Υ	Υ
		RPS004	BAR SINK	Α	Υ	Υ
		RPS005	RR MENS RR	Α	Υ	Υ
		RPS006	RR LADY ROOM	Α	Υ	Υ
		RPS007	RR PRO SHOP	Α	Υ	Υ
		UPSTREAM	WITHIN 5 SERVICE CON	Α		
00700	ENTRY POINT	3	ENTRY POINT	Α		
47817	PRO SHOP/RESTAURANT WELL	2	WELL	Α		
59791	TREATMENT PLANT					

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	I ublic II	Cartin	וטו	mixing	vvacci	occuon	
	Water Quality Monit	oring and	d Con	npli	iance S	Schedul	e	
PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
CT1180644	RIDGEFIELD GOLF COURSE(PRO SHOP & REST	г.)			NC	25	L	GW
Local Address (w	here applicable)	Service	Residen	ntial	Commercia	al Industria	al Combine	ed Agricultural

Connections

Connecticut Department of Public Health Drinking Water Section

Towns Served: RIDGEFIELD

545 RIDGEBURY ROAD

			C	ontact Inf	ormation					
Name				Organization	1			Job Title		
Mr. Frank Sergiova	nni			Ridgefield G	olf Course		General Manager			
Mailing Address Lin	e One		Mailing Add	ress Line Two			City	State	Zip Code	
545 Ridgebury Rd						Ridgefie	ld	СТ	06877	
Business Phone	Extension	Fax	M	obile Phone	Emergency Phone	Email Ad	ldress			
203-748-7008					203-748-6157	golfdired	ctor@ridgef	ieldct.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 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

1

	Connecticut Department of Public Health Drinking Water Section										
	Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS ID PWS Name Classification Population Owner Type Primary Source										
CT1189513	590 DANBURY ROAD LLC				NC	42	Р		GW		
Local Address	ocal Address (where applicable) Service Residential Commercial Industrial Combined Agricultura										
590 DANBURY	O DANBURY ROAD Connections 4										

Towns Served: RIDGEFIELD

CROSS CONNECTION EXEMPTION

Towns Served: RIDGEFIELD			
Monitor	ring Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
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		
Other Co	mpliance Schedules		
Compliance Schedule Activity	Due Date	Achieved D	ate
	_ /		

3/1/2028 **Water System Facility and Sampling Point Inventory**

Water Total Lead and System Water System Facility Sampling Point Sampling Point Coliform Copper

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.

Schedule Generation Date: 4/3/2024

Page 30

Stage

	Water Qual	lity Mon	itoring an	d Com	pli	iance	Scł	hedul	e		
PWS ID	PWS Name				Clas	sification	Po	pulation	Owr	ner Type I	Primary Source
CT1189513	590 DANBURY ROAD LLC					NC		42		Р	GW
Local Addre	ss (where applicable)		Service	Resident	ial	Commerc	cial	Industri	al	Combined	d Agricultural
590 DANBU	RY ROAD		Connections			4					
Towns Serve	ed: RIDGEFIELD						'		'		
Facility ID	-	ID	Description		9	Status	Rule	Rule	Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DIST	RIBUTION	l	Α	Υ				
		A0001	ROCHE KITCH	EN		Α	Υ	1			
		A0002	2ND FLOOR N	IEN SINK		Α	Υ	1			
		A0003	2ND FL WOM	EN SINK		Α	Υ	1			
		A0004	DELI KITCHEN	SINK		Α	Υ	1			
		A0005	CLEANER BAT	'H SINK		Α	Υ	1			
		A0006	FLORIST BATH	1 SINK		Α	Υ	1			
		A0007	PROF WATER	BATH		Α	Υ	1			
		8000A	PROF WATER	SINK		Α	Υ	1			
		A0009	THE CATCH -	WOMENS		Α	Υ	1			
		A0010	THE CATCH -	MENS		Α	Υ	1			
		A0011	KILOMETERS	BATH SINK	(Α	Υ	1			

53560 TREATMENT PLANT

WELL 1

ENTRY POINT

00700

52993

Certified Operator Information

NAIL SALON HS

ENTRY POINT

DOWNSTREAM WITHIN 5 SERVICE CON

WELL 1

DELI BATHROOM

WITHIN 5 SERVICE CON

Α

Α

Α

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Υ

Υ

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

Facility Classification: SMALL WATER SYSTE	М		Certification
Operator Name	Operator Type	Certification(s)	Expiration
HURLBUT, PAUL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2025
HURLBUT, ANDREW	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026

HUNLBUT, ANDREW	V		ASSIGNED OF	PENATOR	WATER TREATIVIEN	IFLAINI	OPENATOR - CL	.A33 II	0/30/2020
			Co	ontact Inf	ormation				
Name				Organization	1			Job Title	
Maria Sheehan				590 Ridgefie	ld Road, LLC		List Services		
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
6 Trowbridge Drive			PO Box 516			Bethel		СТ	06801
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ldress		
203-743-2600						msheeha	an@listservices	.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.

A0012

A0013

UPSTRFAM

3

2

- 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.

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

End of schedule

	Connecticut Department	of Public F	lealth	Dı	rinkin	g V	Vater	Se	ection		
	Water Quality Mo					_			,001011		
PWS ID	PWS Name	meoring an	a don	-	ssification			_	ner Type	Primar	y Source
CT1189524	RIDGEFIELD LITTLE LEAGUE – JENSEN FIE	ELD			NC		25		P		iW
Local Address	(where applicable)	Service	Residen	ntial	Commerc	cial	Industri	al	Combine	ed Agr	icultur
2 SANFORD S	TATION RD	Connections			1						
Towns Served	l: RIDGEFIELD				I						-
	Mo	nitoring Requ	ıireme	nts	5						
Water Syste	m Facility: DISTRIBUTION SYSTEM (W	SF ID: 00600)									
Total Colifo	rm (3100)							1 rc	outine (R	T) per	montl
	g Point (Sampling Point ID)		Monitori	ing P	Period	Colle	ection Pei		=	oliance	
Select fro	om Inventory of Active Sampling Points		4/1/24	- 4/3	0/24						
			5/1/24	- 5/3	1/24						
			6/1/24	- 6/3	0/24						
			7/1/24	- 7/3	1/24						
			8/1/24 -	- 8/3	1/24						
			9/1/24	- 9/3	0/24						
			10/1/24 -	- 10/	31/24						
Total Colifo	rm (3100)							3 r	epeat (R	P) per	perio
Sampling	g Point (Sampling Point ID)		Monitori	ing P	Period	Colle	ection Pe	riod	Com	oliance	Status
Select fro	om Inventory of Active Sampling Points		10/4/23 - 10/9/23						(Comple	te
-	rameters (PPS)							1 rc	outine (R	T) per	month
Sampling	g Point (Sampling Point ID)		Monitori	ing P	Period	Colle	ection Pe	riod	Com	oliance	Status
Select fro	om Inventory of Active Sampling Points		4/1/24								
			5/1/24								
			6/1/24								
			7/1/24								
			8/1/24								
			9/1/24								
			10/1/24 -	- 10/	31/24						
•	m Facility: ENTRY POINT (WSF ID: 007	700)									
	Nitrite (NOX)								routine		-
	g Point (Sampling Point ID)		Monitori			Colle	ection Per	riod		oliance	
ENTRY P	OINT (3)		1/1/23 -						(Comple	te
			1/1/24 -								
14/-1	and the same of th		1/1/25 -	12/3	31/25						
-	m Facility: WELL 1 (WSF ID: 61440)								/ -	٥١	
E. Coli (301	•		Manit	in) out of	C-11		_	gered (T		-
	g Point (Sampling Point ID)		Monitori			COII	ection Per	iod		oliance	
WELL 1 (r Compliance	10/3/23							Comple	ıe
Compliance		r Compliance					A abi-	اء میں	Deuts		
_	chedule Activity				Date		Achie	vea	Date		
	ART UP COMPLETION				2022						
	ART UP COMPLETION NT (MULTIPLE TC+)				2023						
LT MODEODIVIE	INT (INTOLTIPLE TC+)		-	ττ/ υ	/2023						

Public	Notification R	Requiren	nents			
	Compliance	Notice	Public No	tification	PN Certij	<u>fication</u>
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received

4/1/2024

SEASONAL START UP COMPLETION

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

	Water Quality Mo	onito	oring and	d Con	np	liance S	schedul	e	
PWS ID		Cla	assification	Population	Owner Type	Primary Source			
CT1189524 RIDGEFIELD LITTLE LEAGUE – JENSEN FIELD						NC	25	Р	GW
Local Address (w	here applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
2 SANFORD STA	TION RD		Connections			1			
Towns Served: R	IDGEFIELD						·		·
REVISED TOTAL	COLIFORM RULE (RTCR) TT Violation	2	1/2/23 -	2		7/20/2023	reijoinie	7/30/202	3
REVISED TOTAL	COLIFORM RULE (RTCR) TT Violation	4	1/2/22 -	2		7/20/2023		7/30/202	3
REVISED TOTAL	COLIFORM RULE (RTCR) TT Violation	1	1/7/23 -	2		2/1/2024		2/11/202	4
Total Coliform M	1&R Violation	4/1/	23 - 4/30/23	3		11/19/2024	,	11/29/202	24

Water System Facility and Sampling Point Inventory											
Water					Total	Lead and					
System	Water System Facility	Sampling Point	Sampling Point	Coliform		Copper			Stage		
Facility ID)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2	. DBPR		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ						
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
		JF001	CONCESSION	Α	Υ						
		JF002	MENS RR	Α	Υ						
		JF003	LADIES RR	Α	Υ						
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							
61440	WELL 1	2	WELL 1	Α	<u>'</u>	·	<u> </u>	·			

Contact Information

				Contact iiii	Officiation					
Name			Organization				Job Title			
Mr. Rudy Marconi				Town of Ridg		First Selectman				
Mailing Address Line One				Mailing Address Line Two			City		Zip Code	
400 Main Street						Ridgefiel		СТ	06877	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address				
203-431-2774		203-431-2	2722			selectman@ridgefieldct.org				
Contact Role(s): Le	gal Contact									
Name				Organization			Job Title			
Mr. John Johnson				Ridgefield Little League			Manager			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code	
33 Jeffro Drive					Ridgefield		СТ	06877		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address				
203-858-2701						johnsojo71@gmail.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.
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End of schedule