Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Prim	nary Source
CT1230092 SCOTLAND ELEMENTARY SCHOOL					NTNC	200	L		GW
Local Address (where applicable) Service Reside			Residen	itial	Commerci	al Industri	al Combin	ed A	Agricultural
68 BROOK ROA	Connections	1							

Towns Served: SCOTLAND			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	500)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	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		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/21 - 12/31/23	6/1-9/30	Complete
	1/1/24 - 12/31/26	6/1-9/30	
	1/1/27 - 12/31/29	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
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- WELLS 1 & 2 (WSF ID	: 00701)		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
EP- WELL 2 (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Nitrate And Nitrite (NOX)		1 rd	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
EP- WELL 2 (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
EP- WELL 2 (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)		1 rc	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
EP- WELL 2 (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		

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

Schedule Generation Date: 4/3/2024 Page 1

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1230092	SCOTLAND ELEMENTARY SCHOOL				NTNC	200	L	GW
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combin	ed Agricultural
68 BROOK ROA	D	Connections	1					

Towns Served: SCOTLAND

Other Compliance Schedules							
Compliance Schedule Activity	Due Date	Achieved Date					
CROSS CONNECTION SURVEY REPORT	3/1/2019						
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019						
CROSS CONNECTION SURVEY REPORT	3/1/2020						
CROSS CONNECTION SURVEY REPORT	3/1/2021						
CROSS CONNECTION SURVEY REPORT	3/1/2022						
CROSS CONNECTION SURVEY REPORT	3/1/2023						
CROSS CONNECTION SURVEY REPORT	3/1/2024						
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024						
COMPLETE INITIAL LSL INVENTORY	10/16/2024						

	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	Sta WQP 2 DI	_
00600	DISTRIBUTION SYSTEM	001	GYM KITCHEN SINK	Р	Υ	2			
		002	TEACHER LOUNGE	Р	Υ	2			
		003	KINDERGARTEN	Р	Υ	2			
		004	BOILER ROOM (WELL)	Р	Υ	2			
		005	BOILER RM (TANK)	Р	Υ	2			
		4	DISTRIBUTION SYSTEM	Α	Υ				
		4-3	Room #7	Α	Υ				
		4-5	Room #2	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00701	ENTRY POINT- WELLS 1 & 2	3	EP- WELL 2	Α					
10573	WELL #1	2	WELL #1	Α					
55353	WELL #2	2	WELL #2	Α					
55355	GAC FILTERS	3	ENTRY POINT	Α					
55357	6K GAL ATM STORAGE								
55359	BOOSTER PUMPS (3)								

## Certified Operator Information

Water System Facility: GAC FILTERS (WSF ID: 55355)

Facility Classification: CLASS 1 TREA	TMENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2024
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2024

WATER TREATMENT PLANT OPERATOR - CLASS II						9/30/2024
	Co	ontact Information				
Name		Organization		!		
Scotland						
Mailing Address Line One	Mailing Addr	ess Line Two		City	State	Zip Code

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

Schedule Generation Date: 4/3/2024 Page 2

	Connecticu	it Departme	nt of Public	: Health I	Orinkin	g Water	Section	
	Wat	er Quality M	Ionitoring a	and Comp	oliance	Schedul	e	
PWS ID	PWS Name			C	lassification	Population	Owner Type	Primary Source
CT1230092	SCOTLAND ELEM	ENTARY SCHOOL			NTNC	200	L	GW
Local Address (w	here applicable)		Service	Residentia	al Commer	cial Industria	al Combine	d Agricultural
68 BROOK ROAD	)		Connection	ons 1				
Towns Served: S	COTLAND			·	·	·		·
Business Phon	e Extension	Fax	Mobile Phone	Emergency Pl	hone Emai	l Address		
Contact Role(s):	Owner							
Name			Organization				Job Title	<u> </u>
Ms. Valerie Brui	neau		Scotland Eler	mentary School		Superinte	ndent	
Mailing Address	Line One	Mailing	Address Line Two			City	State	Zip Code
68 Brook Road		P.O. Bo	x 97		Scotl	and	СТ	06264
Business Phon	e Extension	Fax	Mobile Phone	Emergency Pl	hone Emai	l Address		
860-423-0064	l I				VBru	neau@scotlan	ides.org	
Contact Role(s):	Administrative (	Contact						
Name			Organization				Job Title	9
Mr. Gary Greenl	berg		Town of Scot	land		First Selec	tman	
Mailing Address	Line One	Mailing	Address Line Two			City	State	Zip Code
9 Devotion Road		P.O. Bo	x 122		Scotl	and	СТ	06264
Business Phon	e Extension	Fax	Mobile Phone	Emergency Pl	hone Emai	l Address		
860-456-7797	1				firsts	electman@sco	otlandct.org	
Contact Role(s):	Legal Contact							

## Please note the following:

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

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

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

End of schedule

Schedule Generation Date: 4/3/2024 Page 3