	Connecticut Department	of Public H	lealth	Drink	king V	Water	Se	ction	
	Water Quality Mo	nitoring an	d Con	nplian	ce Sc	hedu	le		
PWS ID	PWS Name	0		.			-	ner Type P	rimary Source
CT1270132	SHERMAN ELEMENTARY SCHOOL			NTNC		430		L	GW
Local Address (where applicable)	Service	Residen	tial Com	mercial	Industri	ial	Combined	Agricultural
2 ROUTE 37 EA		Connections	1						
Towns Served:	SHERMAN		1						
	Мо	nitoring Requ	iireme	nts					
Water System	n Facility: DISTRIBUTION SYSTEM (W								
Asbestos (10	094)					1 rc	outin	e (RT) pe	r nine years
Sampling	Point (Sampling Point ID)		Monitori	ng Period	Coll	ection Pe	riod	Compl	iance Status
Select fro	m Inventory of Active Sampling Points		1/1/20 -	12/31/28					
Total Colifor	m (3100)						1 ro	utine (RT)) per month
Sampling	Point (Sampling Point ID)		Monitori	ng Period	Coll	ection Pe	riod	Compl	iance Status
Select fro	m Inventory of Active Sampling Points		11/1/23 -	11/30/23	}			Co	omplete
			12/1/23 -	12/31/23	8			Co	omplete
				1/31/24				Co	omplete
			2/1/24 -	2/29/24				Co	omplete
			3/1/24 -	3/31/24				Co	omplete
				4/30/24					
				5/31/24					
				6/30/24					
				7/31/24					
				8/31/24					
				9/30/24					
			10/1/24 -	10/31/24	ŀ				
Lead And Co									three years
	Point (Sampling Point ID)			ng Period		ection Pe		Compl	iance Status
Select fro	m Inventory of Active Sampling Points			12/31/25		6/1-9/30			
			1/1/26 -	12/31/28		6/1-9/30			
-	ameters (PPS)) per month
	Point (Sampling Point ID)			ng Period		ection Pe	riod		iance Status
Select fro	m Inventory of Active Sampling Points			11/30/23					omplete
				12/31/23	}				omplete
				1/31/24					omplete
				2/29/24					omplete
				3/31/24				Co	omplete
				4/30/24					
				5/31/24					
				6/30/24					
				7/31/24					
				8/31/24					
				9/30/24	1				
Water System	n Facility: ENTRY POINT (WSF ID: 007		10/1/24 -	10/31/24	•				
Chloride (10						1	l rou	tine (RT)	per quarter
-	Point (Sampling Point ID)		Monitori	ng Period	Coll	ection Pe			iance Status
ENTRY PO				12/31/23					omplete
				3/31/24	•				omplete
			-/ -/	5, 51, 24					mpiete

	Connecticut Departme Water Quality M				0			
PWS ID	PWS Name	0	A	lassificatio		pulation O		rimary Sourc
CT1270132	SHERMAN ELEMENTARY SCHOOL			NTNC		430	L	GW
	(where applicable)	Service	Residentia	I Comme	ercial	Industrial	Combined	Agricultura
2 ROUTE 37 EA		Connections	1					
Towns Served								
		Ionitoring Req	uirement	ts				
Water Syster	m Facility: ENTRY POINT (WSF ID: 0	0700)						
Chloride (10	-							per quarter
Sampling	Point (Sampling Point ID)		Monitoring		Colle	ection Perio	od Compl	iance Status
			4/1/24 - 6/	-				
			7/1/24 - 9/	/30/24				
-	nemicals (IOCS)							three years
	Point (Sampling Point ID)		Monitoring		Colle	ection Perio	od Compl	iance Status
ENTRY PO	DINT (3)		1/1/23 - 12					
			1/1/26 - 12	/31/28				
	Nitrite (NOX)						-	RT) per year
	Point (Sampling Point ID)		Monitoring		Colle	ection Perio		iance Status
ENTRY PC	DINT (3)		1/1/23 - 12					omplete
			1/1/24 - 12				C	omplete
			1/1/25 - 12	/31/25			()	
	lerbicides and PCBs-Phase II (SOC2)				~ "		• • •	three years
	Point (Sampling Point ID)		Monitoring		Colle	ection Perio	oa Compi	iance Status
ENTRY PC	JINT (3)		1/1/23 - 12		_			
Docticidos I	erbicides and PCBs-Phase V (SOC5		1/1/26 - 12	/31/28		1		+
			Monitoring	Doriod	Call	I routi		three years iance Status
ENTRY PC	Point (Sampling Point ID)		Monitoring 1/1/23 - 12		Com		u compi	iunce status
ENTRIPO	(3)		1/1/26 - 12					
Organic Cho	micals (VOCS)		1/1/20-12	/31/20		1 routi	ino (PT) nor	three years
-	Point (Sampling Point ID)		Monitoring	Period	Colle	ection Perio		iance Status
ENTRY PC			1/1/23 - 12		com		ia comp	
LINITATIO	5111 (5)		1/1/26 - 12					
	Oth	her Complianc						
Compliance S	chedule Activity			e Date		Achieve	od Date	
-	CONSUMER NOTICE CERTIFICATE			29/2013		Aciiicve	u Dute	
				1/2020				
				1/2020				
				1/2021				
				1/2022				
				1/2024				
	SERVICE LINE INVENTORY			16/2024				
	TIAL LSL INVENTORY			16/2024				
		c Notification						
	1 001	Compliance	Notice	1	Noti	fication	PN Cer	tification
Violation/Situ	ation	Period	Tier	Require		Performed	Due to DPH	

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

	Сс	onnecticut	Departm	ent of	f Public	Health	Dr	rinking	g W	/ater S	ection	
		Wate	r Quality	Monit	coring ai	nd Con	npl	iance	Sch	nedule		
PWS ID	PW	/S Name	C J		0		Clas	sification	Рор	ulation O	wner Type	Primary Source
CT127013	2 SH	ERMAN ELEMEN	TARY SCHOOL					NTNC		430	L	GW
Local Add	ress (wher	e applicable)			Service	Residen	tial	Commerc	ial	Industrial	Combine	d Agricultural
2 ROUTE 3	37 EAST				Connection	IS 1						
Towns Ser	ved: SHEF	RMAN				1	1					1
			Puk	olic Not	tification	Require	eme	ents				
				C	Compliance	Notice	?	Public N	lotifi	<u>cation</u>	PN Ce	<u>rtification</u>
Violation/	Situation				Period	Tier		Required	P	erformed	Due to DP	H Received
Physical P	arameters	M&R Violation		2/1	/23 - 2/28/23	3 3		9/5/2024			9/15/2024	ļ
		W	ater Syste	n Facil	ity and Sa	ampling	Ро	int Inve	ento	ory		
Water								7	otal	Lead an	d	
System		stem Facility	Samp	ing Point	Sampling P			Со	liforn	n Coppe	r	Stage
Facility ID)			ID	Description			Status ¹	Rule	Rule Ti	er Asbesto	s WQP 2 DBPR
00600	DISTRIBU	ITION SYSTEM		4	DISTRIBUTI	ON SYSTEM	I	А	Y			
			DOW	NSTREAM	WITHIN 5 SI	ERVICE CO	N	А				
			:	SE-1	ART ROOM			А	Υ	Ν		
			:	SE-2	FOUNTAIN	NEW ELEV		А	Y	Ν		
			:	SE-3	FOUNTAIN	NURSE#1		А	Y	Ν		
			:	SE-4	ROOM 201			А	Y	Ν		
				SE-5	KITCHEN SI	NK		А	Y	Ν		
			UPS	TREAM	WITHIN 5 SI	ERVICE CO	N	А				
00700	ENTRY P	DINT		3	ENTRY POIN	IT		А				
10576	WELL 1			2	WELL			А				
53308	WELL 2			2	WELL 2			А				
60802	ATMOSP	HERIC TANK										
			Ce	rtified	Operato	r Inform	nati	on				
Water Sy	stem Fac	ility: DISTRIBU			-		_		_			
-		n: SMALL WATE		•	•							Certification
Operator	-	-		rator Typ	e	Certificatio	on(s)					Expiration
, HURLBUT,		,		OPERATO		WATER TRE		1FNT PLAN	IT OF	FRATOR -	CLASS II	6/30/2026
					tact Info							0,00,2020
Name					rganization						Job Title	
Mr. Clay (Cope				own of Sherm	nan			Fi	rst Selectn		
Mailing Ad		e One	Maili		s Line Two					City	State	Zip Code
9 Route 3				Box 39				Sherm		,	СТ	06784-0039
Busines		Extension	Fax		ile Phone	Emergency	/ Pho			ess		
860-35			860-355-6943							wnofsherm	anct.org	
		gal Contact										
Name	- (-)	<u> </u>		0	rganization						Job Title	
Mr. Joe Lo	ombardoz	zi			nerman Board	d of Educat	ion		Fa	acilities Ma		
Mailing Ad			Maili		s Line Two					City	State	Zip Code
2 Route 3				5				Sherm		,	СТ	06784
Busines		Extension	Fax	Mob	ile Phone	Emergency	/ Pho			ess		
860-35		377				845-278-					anschool.co	om
		iministrative Cor	ntact	1						<u> </u>		
	N° /											

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
CT1270132	SHERMAN ELEMENTARY SCHOOL				NTNC	430	L	GW
Local Address (where applicable)		Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultur
2 ROUTE 37 EAS		Connections	1					
Towns Served: S	HERMAN	÷					·	

Please note the following:

The residual disinfectant concentration must be measured at the same location and time as each total coliform sample. 1.

2. If a Collection Period is specified, all water quality samples must be collected during the specified period.

3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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

End of schedule

	Connecticut Department Water Quality Mor				<u> </u>		n	
PWS ID	PWS Name	intoi ing an	A		Population			imany Cours
CT1270214	SHERMAN GREEN MARKETPLACE - WELL	#2	Cla	NTNC	79	P		GW
	(where applicable)	Service	Residential				inod	Agricultur
B ROUTE 39 N		Connections	Residential	commerc		4		Agricultur
Towns Served:						4		
iowiis serveu.				_				
Water Syster	n Facility: DISTRIBUTION SYSTEM (W	n <mark>itoring Req</mark> ı SF ID: 00600)	urement	5			-	
Asbestos (1	-				1 rc	outine (RT)) per	nine year
	Point (Sampling Point ID)		Monitoring		Collection Pe	riod Co	mplie	ance Status
Select fro	m Inventory of Active Sampling Points		1/1/16 - 12/					
			1/1/25 - 12/	/31/33				
Total Colifor	. ,					1 routine		-
	Point (Sampling Point ID)		Monitoring		Collection Pe	riod Co	-	ance Status
Select fro	m Inventory of Active Sampling Points		11/1/23 - 11					nplete
			12/1/23 - 12					mplete
			1/1/24 - 1/3					mplete
			2/1/24 - 2/2					mplete
			3/1/24 - 3/3				Со	mplete
			4/1/24 - 4/3					
			5/1/24 - 5/3					
			6/1/24 - 6/3					
			7/1/24 - 7/3					
			8/1/24 - 8/3					
			9/1/24 - 9/3					
			10/1/24 - 10	/31/24				
	opper (PBCU)					utine (RT)	-	
	Point (Sampling Point ID)		Monitoring		Collection Pe	riod Co		ance Status
Select fro	m Inventory of Active Sampling Points		7/1/23 - 12/					nplete
			1/1/24 - 6/3				Co	mplete
	. (756)		7/1/24 - 12/	31/24			()	
•	ameters (PPS)					1 routine		-
	Point (Sampling Point ID)		Monitoring		Collection Pe	rioa Co		ance Status
Select fro	m Inventory of Active Sampling Points		11/1/23 - 11					nplete
			12/1/23 - 12					nplete
			1/1/24 - 1/3					nplete
			2/1/24 - 2/2					nplete
			3/1/24 - 3/3				Co	mplete
			4/1/24 - 4/3					
			5/1/24 - 5/3					
			6/1/24 - 6/3					
			7/1/24 - 7/3					
			8/1/24 - 8/3					
			9/1/24 - 9/3					
			10/1/24 - 10	/31/24	•			
	ty Parameters Orthophosphate and To	tal Alkalinity (M	-	Doried		utine (RT)	-	
	Point (Sampling Point ID)		Monitoring		Collection Pe		mpilo	ance Status
Select tro	m Inventory of Active Sampling Points		1/1/24 - 6/3	50/24				

	Connecticut Depar					0			ection	
		ity Monitoring an	d Com							
PWS ID	PWS Name					on Po		Ow		rimary Sour
CT1270214	SHERMAN GREEN MARKETPL				NTNC		79		Р	GW
	where applicable)	Service	Resident	tial	Comm	ercial	Industr	ial	Combined	Agricultur
3 ROUTE 39 NC		Connections							4	
owns Served:	SHERMAN									
		Monitoring Requ	uireme	nts						
Nater System	n Facility: DISTRIBUTION SY	STEM (WSF ID: 00600)								
-	y Parameters Orthophospha	ite and Total Alkalinity(W	/QP9)				2 rc	outir		six month
Sampling	Point (Sampling Point ID)		Monitorii	ng Pe	eriod	Coll	ection Pe	eriod	Compl	iance Status
			7/1/24 - 3	12/3	1/24					
Nater System	n Facility: ENTRY POINT (W	SF ID: 00700)								
Chloride (10	-							1 ro		per quarte
	Point (Sampling Point ID)		Monitorii	ng Pe	eriod	Coll	ection Pe	eriod	Compl	iance Status
ENTRY PO	INT (3)		10/1/23 -	12/3	31/23				Co	omplete
			1/1/24 -		-				Co	omplete
			4/1/24 -	-	-					
			7/1/24 -	9/30)/24					
Nitrate (104	0)							1 ro		per quarte
Sampling	Point (Sampling Point ID)		Monitorii	ng Pe	eriod	Coll	ection Pe	eriod	Compl	iance Status
ENTRY PO	INT (3)		10/1/23 -	12/3	31/23				Co	omplete
			1/1/24 -	3/31	./24				Co	omplete
			4/1/24 -	6/30)/24					
			7/1/24 -	9/30)/24					
Nitrite (1041	•							1	routine (I	RT) per yea
Sampling	Point (Sampling Point ID)		Monitorii	ng Pe	eriod	Coll	ection Pe	eriod	Compl	iance Status
ENTRY PO	INT (3)		1/1/23 - 2		-				Co	omplete
			1/1/24 - 1	12/3	1/24				Co	omplete
			1/1/25 - 2	12/3	1/25					
-	emicals (IOCS)						1 ro	utin	· · ·	three year
Sampling	Point (Sampling Point ID)		Monitorii	ng Pe	eriod	Coll	ection Pe	eriod	Compl	iance Status
ENTRY PO	INT (3)		1/1/21 - 2	12/3	1/23				Co	omplete
			1/1/24 - 1	12/3	1/26					
			1/1/27 - 2	12/3	1/29					
Lead And Co	pper (PBCU)						1 rc	outir	ne (RT) per	six month
Sampling	Point (Sampling Point ID)		Monitorii	ng Pe	eriod	Coll	ection Pe	eriod	Compl	iance Status
ENTRY PO	INT (3)		1/1/24 -	6/30)/24				Co	omplete
			7/1/24 - 3	12/3	1/24					
Pesticides, H	erbicides and PCBs - Phase II	& V (SOCS)					1 ro	utin	e (RT) per	three year
Sampling	Point (Sampling Point ID)		Monitorii	ng Pe	eriod	Coll	ection Pe	eriod	Compl	iance Status
ENTRY PO	INT (3)		1/1/23 - 2	12/3	1/25					
			1/1/26 - 3	12/3	1/28					
Organic Cher	micals (VOCS)							1	routine (I	RT) per yea
Sampling	Point (Sampling Point ID)		Monitorii	ng Pe	eriod	Coll	ection Pe	eriod	Compl	iance Status
ENTRY PO	INT (3)		1/1/23 - 2	12/3	1/23				Co	omplete
			1/1/24 - 3	12/3	1/24					
			1/1/25 - 2	12/3	1/25					

Water System Facility: WELL #2 (WSF ID: 56589)

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule PWS ID **PWS Name** Classification Population Owner Type Primary Source SHERMAN GREEN MARKETPLACE - WELL #2 Ρ CT1270214 NTNC 79 GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections **3 ROUTE 39 NORTH** 4 Towns Served: SHERMAN **Monitoring Requirements** Water System Facility: WELL #2 (WSF ID: 56589) E. Coli (3014) 1 routine (RT) per month Sampling Point (Sampling Point ID) Monitorina Period **Collection Period Compliance Status** WELL #2 (2) 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 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700) Analyte Monitoring Requirement (Summary Type) Samples Reg/Month **Operating Limit** Orthophosphate Entry Point Phosphate Monitoring (PHOS) Maximum: 3 MG/L 2 **Compliance History:** Start Date: 3/1/2024 Monitoring **Operating Limit Monitoring Period Compliance Status: Compliance Status:** 3/1/2024 - 3/31/2024 **Monitoring Requirement (Summary Type) Operating Limit** Samples Req/Month Analyte 2 Orthophosphate Entry Point Phosphate Monitoring (PHOS) Minimum: 2 MG/L **Compliance History:** Start Date: 3/1/2024 Monitoring **Operating Limit Monitoring Period Compliance Status: Compliance Status:** 3/1/2024 - 3/31/2024 **Monitoring Requirement (Summary Type) Operating Limit** Samples Req/Month Analyte Entry Point pH Monitoring (PHRD) Minimum: 7.1 PH 4 рΗ Start Date: 3/1/2024 **Compliance History:** Monitoring **Operating Limit Monitoring Period Compliance Status: Compliance Status:** 3/1/2024 - 3/31/2024 Analyte **Monitoring Requirement (Summary Type) Operating Limit** Samples Req/Month Phosphate (as PO4) Entry Point Phosphate Monitoring (PHOS) Maximum: 13.04 MG/L 2 Start Date: 3/1/2024 **Compliance History:** Monitoring **Operating Limit Monitoring Period Compliance Status: Compliance Status:** 3/1/2024 - 3/31/2024

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

		Water Qua	lity Monit	oring an	a com	pnanc	e Sch	eau	e		
PWS ID	PWS Nam	e			(Classificati	on Pop	ulation	Own	er Type Pi	rimary Sourc
СТ1270214	SHERMAN	N GREEN MARKETI	PLACE - WELL #2			NTNC		79		Р	GW
Local Address	(where appli	cable)		Service	Residenti	al Comm	ercial	Industria	al (Combined	Agricultur
3 ROUTE 39 N	ORTH			Connections						4	
Towns Served	: SHERMAN										
Water Syster	m Facility: I	ENTRY POINT (V	VSFID: 00700)								
Analyte		Monitoring Requ	uirement (Summa	ary Type)	Opera	ating Limit			S	Samples Ro	eq/Month
Phosphate	e (as PO4)	Entry Point Phos	phate Monitoring	g (PHOS)	Minin	num: 8.7 l	MG/L			2	
Start Date	: 3/1/2024			-	ance Histor	-	Operat	ing Limi	it	Monitor	
					ring Period		Compli	ance Sta	atus:	Complia	nce Status:
				3/1/202	24 - 3/31/20)24					
			Other Co	ompliance	e Schedu	ules					
Compliance So	chedule Activ	/ity			D	ue Date		Achie	ved D	Date	
CTS 6: PWS N	MONITOR AF	TER OCCT INSTALL									
DISTRIBUTION	SYSTEM MA	TERIALS EVALUAT	ION		8/	31/2019					
CCTS 5: PWS C	DCCT INSTAL	ATION			12,	/26/2023		12/1	15/20	23	
SUBMIT LEAD	CONSUMER	NOTICE CERTIFICA	TE		3/	30/2024					
SUBMIT LEAD	SERVICE LIN	E INVENTORY			10,	/16/2024					
COMPLETE IN	ITIAL LSL INV	ENTORY			10,	/16/2024					
CROSS CONNE	ECTION EXEM	IPTION			3,	/1/2027					
		Water S	ystem Facili	ty and Sa	mpling I	Point In	vento	ory			
Water							Total	Lead	and		
	ater System H	Facility	Sampling Point		int		Coliforn				Stage
Facility ID			ID	Description		Status	Rule	Rule	Tier	Asbestos	WQP 2 DBI
00600 DIS	STRIBUTION S	SYSTEM	4	DISTRIBUTIO		Α					
			DOWNSTREAM			A	V				
			SHERMAN WIN			A	Y				V
			SM001			A	Y	N			Y
			SM002 SM003	WINE & LIQU	-	А Л А	Y Y	N			Y Y
			SM003	LITTLE MUN		A	Y	N			Y
			SM004	SCHOOL AGE		A	Ŷ	N			Y
			SM005	PRESCHOOL		A	Ŷ	N			Y
			5111000	INCOUL			•				•
			UPSTRFAM	WITHIN 5 SE	RVICE CON	Α					
00700 EN	TRY POINT		UPSTREAM 3	WITHIN 5 SE		A					
	TRY POINT		3	ENTRY POIN		А					
56589 WE	ELL #2	ANT									
56589 WE		ANT	3 2	ENTRY POIN WELL #2	Г	A A					
56589 WE 61483 TRE	ELL #2 EATMENT PL/		3 2 Certified	ENTRY POINT WELL #2	Г	A A					
56589 WE 61483 TRE Water Syster	ELL #2 EATMENT PL m Facility:	TREATMENT PL	3 2 Certified ANT (WSF ID: 6	ENTRY POINT WELL #2	Г	A A					
56589 WE 61483 TRE Water Syster Facility Classif	ELL #2 EATMENT PL m Facility: fication: CLA		3 2 Certified ANT (WSF ID: 6 PLANT	ENTRY POINT WELL #2 Operator 1483)	Informa	A A ation					-
56589 WE 61483 TRE Water Syster Facility Classif	ELL #2 EATMENT PL m Facility: fication: CLA ne	TREATMENT PL	3 2 Certified ANT (WSF ID: 6 PLANT Operator Type	ENTRY POINT WELL #2 Operator 1483) e C	Informa	A A ation	OPERAT		ACC !!!		Expiration
56589 WE 61483 TRE Water Syster	ELL #2 EATMENT PL m Facility: fication: CLA ne	TREATMENT PL	3 2 Certified ANT (WSF ID: 6 PLANT	ENTRY POINT WELL #2 Operator 1483) e C PR D	Informa	A A ation (s) N SYSTEM					Certification Expiration 6/30/2025 6/30/2025

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

		0							
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	e Pri	mary Source
CT1270214	SHERMAN GREEN MARKETPLACE - WELL #2				NTNC	79	Р		GW
Local Address (v	vhere applicable)	Service	Residen	itial	Commerci	al Industri	al Combin	ed	Agricultural
3 ROUTE 39 NO	RTH	Connections					4		
Towns Served: S	GHERMAN						·		·

				Contact Inf	ormation			
Name				Organization	1		Job Title	
Ms. Meredith Clear	Y			Sherman Cer	nter Holdings LLC	President		
Mailing Address Lin	e One		Mailing	Address Line Two		City	State	Zip Code
24 Bank Street						New Milford	СТ	06776
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address	HH	
203-470-6866						meredith@bankstree	tinvestment	s.com
Contact Role(s): Ac	dministrative Co	ontact, Ow	ner		-			

Please note the following:

The residual disinfectant concentration must be measured at the same location and time as each total coliform sample. 1.

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