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
CT1340222	WEST STAFFORD SCHOOL				NTNC	240	L	GW
Local Address (where applicable)		Service	Residential		Commerci	al Industri	al Combin	ed Agricultural
153 WEST STAFFORD ROAD		Connections	1					

Towns Served: STAFFORD			
Monitor	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarte
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/23	6/1-9/30	Complete
	1/1/24 - 12/31/24	6/1-9/30	
	1/1/25 - 12/31/25	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

	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				
CT1340222	WEST STAFFORD SCHOOL			NTNC 240		L	GW				
Local Address	(where applicable)	Service	Residen	tial	ial Commercial Inc		al Combine	ed Agricultural			
153 WEST STA	AFFORD ROAD	Connections	1								
Towns Served	: STAFFORD					'	'				
Monitoring Requirements											
Water Syste	Water System Facility: ENTRY POINT (WSF ID: 00700)										

	Monitorir	ng Requireme	nts		
Water System Facility:	ENTRY POINT (WSF ID: 00700)				
Organic Chemicals (VO	OCS)			1	routine (RT) per year
Sampling Point (Sam	pling Point ID)	Monitor	ing Period	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/23 -	12/31/23		Complete
		1/1/24 -	12/31/24		Complete
		1/1/25 -	12/31/25		
Moi	nthly Water System Facility	(WSF) Level N	/lonitori	ng Requiremer	nts
Vater System Facility:	ENTRY POINT (WSFID: 00700)				
Analyte	Monitoring Requirement (Summary T	ype) Ope	rating Limit	:	Samples Req/Month
рН	Entry Point pH Monitoring (PHRD)	Min	imum: 7.2 l	PH	Daily
Start Date: 1/1/2018		Compliance History	ory:	Operating Limit	Monitoring
		Monitoring Perio	d	Compliance Status:	Compliance Status:
		11/1/2023 - 11/3	0/2023		
		12/1/2023 - 12/3	1/2023		
		1/1/2024 - 1/31/2	2024		
		2/1/2024 - 2/29/	2024		
		3/1/2024 - 3/31/2	2024		
Analyte	Monitoring Requirement (Summary T	ype) Ope	rating Limit	:	Samples Req/Month
рН	Entry Point pH Monitoring (PHRD)	Max	imum: 7.8	PH	Daily
Start Date: 1/1/2018		Compliance History	ory:	Operating Limit	Monitoring
		Monitoring Perio	d	Compliance Status:	
		11/1/2023 - 11/3	0/2023	Υ	
		12/1/2023 - 12/3	1/2023	Υ	
		1/1/2024 - 1/31/2	2024	N	
		2/1/2024 - 2/29/	2024	Υ	
		3/1/2024 - 3/31/2	2024		
	Other Com	pliance Sched	lules		
ompliance Schedule Activ	vity		Due Date	Achieved I	Date
UBMIT LEAD SERVICE LIN	E INVENTORY	1	0/16/2024		
OMPLETE INITIAL LSL INV	ENTORY	1	0/16/2024		
ROSS CONNECTION SURV	'EY REPORT		3/1/2025		
	Water System Facility:	and Sampling	Point In	ventory	

	Water System Facility and Sampling Point Inventory											
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		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								
		WSSBR1	BOYS ROOM 1 FACULTY	Α	Υ	1						
		WSSBR2	BOYS ROOM 2 LIBRARY	Α	Υ	1						

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1340222	WEST STAFFORD SCHOOL			NTNC	240	L	GW
Local Address (where applicable)		Service	Resider	ntial Commerc	al Industri	al Combine	ed Agricultural
153 WEST STAFFORD ROAD		Connections	1				

Towns Served: STAFFORD

	Water Sy	stem Facili	ity and Sampling P	oint In	ventor	у			
•	Vater System Facility		Sampling Point		Total Coliform	Lead and Copper	Ashaataa	WOR	Stage
acility ID		ID	Description	Status	Rule		Asbestos	WQP	2 DBP
		WSSBR3	BOYS ROOM 3 BYCR7	Α	Y	1			
		WSSCR1	CLASSROOM 1	A	Y	1			
		WSSCR10	CLASSROOM 10	A	Y	1			
		WSSCR11	CLASSROOM 11	A	Y	1			
		WSSCR12	CLASSROOM 12	Α	Y	1			
		WSSCR13	CLASSROOM 13	Α	Υ	1			
		WSSCR14	CLASSROOM 14	Α	Υ	1			
		WSSCR15	CLASSROOM 15	Α	Y	1			
		WSSCR16	CLASSROOM 16	Α	Υ	1			
		WSSCR2	CLASSROOM 2	Α	Υ	1			
		WSSCR3	CLASSROOM 3	Α	Υ	1			
		WSSCR3DF	CLASS 3 DRINK FOUNT	Α		1			
		WSSCR4	CLASSROOM 4	Α	Υ	1			
		WSSCR5	CLASSROOM 5	Α	Υ	1			
		WSSCR5DF	CLASS 5 DRINK FOUNT	Α		1			
		WSSCR6	CLASSROOM 6	Α	Υ	1			
		WSSCR7	CLASSROOM 7	Α	Υ	1			
		WSSCR8	CLASSROOM 8	Α	Υ	1			
		WSSCR9	CLASSROOM 9	Α	Υ	1			
		WSSDF1	FOUNTAIN BY FACULTY	Α		1			
		WSSDF2	FOUNTAIN BY LIBRARY	Α		1			
		WSSDF3	FOUNTAIN BY SC7	Α		1			
		WSSFACULTY	FACULTY ROOM	Α	Υ	1			
		WSSGR1	GIRLS ROOM 1 FACULTY	Α	Υ	1			
		WSSGR2	GIRLS ROOM 2 LIBRARY	Α	Υ	1			
		WSSGR3	GIRLS ROOM 1 BYCR7	Α	Υ	1			
		WSSK3	KITCHEN 3 BAY	Α	Υ	1			
		WSSKH	KITCHEN HAND	Α	Υ	1			
		WSSKH2	KITCHEN HAND 2	Α	Υ	1			
		WSSKM	KITCHEN MOP	Α	Υ	1			
		WSSKS	KITCHEN STAFF	Α	Υ	1			
00700 E	NTRY POINT	3	ENTRY POINT	Α					
1006 S	ODA ASH CORROSION CONTROL								
10592 V	VELL	2	WELL	Α					
62611 A	TM STORAGE TANK								

Certified Operator Information

Local Address (whe	re applicable)			Service	' <u></u>	Residential	Commerci	al Industrial	Combined	Agricultura
153 WEST STAFFOR	D ROAD			Connection	ons	1				
Towns Served: STAF	FORD									
			Cer	tified Operat	or	Informatio	on			
Water System Fac	cility: DISTR	IBUTION SY		· · · · · ·						
Facility Classification	n: DISTRIBUT	ION SYSTEM								Certification
Operator Name			Oper	ator Type	Ce	ertification(s)				Expiration
NIGRO, SCOTT A.			ASSIGN	IED OPERATOR	DI	STRIBUTION S	STEM OP	ERATOR - CLAS	iS I	6/30/2025
					W	ATER TREATM	ENT PLAN	T OPERATOR -	CLASS II	6/30/2026
Water System Fac	cility: SODA	ASH CORR	OSION	CONTROL (WSF	ID:	1006)				
Facility Classification	on: CLASS 1 TF	REATMENT P	LANT							Certification
Operator Name			Oper	ator Type	Ce	ertification(s)				Expiration
NIGRO, JR., VICTOR	N.		CHIEF (OPERATOR	W	ATER TREATM	ENT PLAN	T OPERATOR -	CLASS II	6/30/2024
					DI	DISTRIBUTION SYSTEM OPERATOR - CLASS III		S III	6/30/2026	
NIGRO, DAVID			ASSIGN	IED OPERATOR	W	ATER TREATM	ENT PLAN	T OPERATOR -	CLASS I	3/31/2025
				Contact Inf	orr	nation				
Name				Organization					Job Title	
Mr. Steven Moccio				Stafford Pub		chools		Superintend		
Mailing Address Lin	e One		Mailing	g Address Line Two				City	State	Zip Code
16 Levinthal Run							Staffor	•	СТ	06076
Business Phone	Extension	Fax		Mobile Phone	Er	mergency Phor	ne Email A	Address		
860-684-2208	2100	860-684-5	5172				moccio	s@stafford.k1	2.ct.us	
Contact Role(s): Le	gal Contact, (Owner			·		·			
Name				Organization					Job Title	
Mr. Robert Butler I	II			Stafford Pub	lic S	chools		Facilities Dir	ector	
Mailing Address Lin	e One		Mailing	g Address Line Two				City	State	Zip Code
21 Levinthal Run	1	ı						d Springs	CT	06076
Business Phone	Extension	Fax		Mobile Phone	Er	mergency Phor				
860-684-0754						860-207-6526	butler3	@stafford.k12	.ct.us	
Contact Role(s): Ac	dministrative	Contact								
Name				Organization					Job Title	
Mrs. Anna Guerrier			ı	West Staffor	d Sc	hool		Principal		
Mailing Address Lin			Mailing	g Address Line Two				City	State	Zip Code
153 West Stafford F				1				d Springs	СТ	06076
Business Phone	Extension	Fax		Mobile Phone	Er	mergency Phor				
860-684-3181		860-684-0)328				gagnor	na@stafford.k1	.2.ct.us	
Contact Role(s): Le	gal Contact									

Classification | Population | Owner Type | Primary Source

240

NTNC

L

GW

PWS ID

CT1340222

Please note the following:

PWS Name

WEST STAFFORD SCHOOL

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

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.

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

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

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.

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1341172	BROOKSIDE PROFESSIONAL CENTRE				NTNC	25	Р	GW
Local Address (where applicable)		Service	Residentia		Commercia	al Industri	al Combine	ed Agricultural
72-78 WEST STAFFORD ROAD		Connections	1					

Towns Served: STAFFORD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)		1 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		
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/23	6/1-9/30	Complete
	1/1/24 - 12/31/24	6/1-9/30	
	1/1/25 - 12/31/25	6/1-9/30	
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	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		
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		

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.

	Conne	octicut Dopartment of	f Dublic	Haalth	Dri	alzina '	Mator	Sa	ction	
	Collife	ecticut Department of							LUUII	
PWS ID	PWS Nam	Water Quality Monit	ornig ar	ia Coi	_			_	or Type	Primary Source
CT1341172		DE PROFESSIONAL CENTRE				NC	25	OWII	P P	GW
Local Address (Service	Resider	1	mmercial	_	ial	 Combine	
72-78 WEST ST	-		Connection		itiai CC	Jilliller clai	maastri	ai	COMBINE	Agricultura
Towns Served:										
Towns serveur	3171110112	Monit	oring Req	uireme	ents					
Water System	n Facility:	ENTRY POINT (WSF ID: 00700)								
Inorganic Ch	•	•					1 ro	utine	(RT) pe	r three years
Sampling	Point (Sam	pling Point ID)		Monitor	ing Peri	iod Col	lection Pe			oliance Status
				1/1/26 -	12/31/	28				
Nitrate And	Nitrite (N	OX)						1 ו	outine	(RT) per year
Sampling	Point (Sam	pling Point ID)		Monitor	ing Peri	iod Col	lection Pe	riod	Com	oliance Status
ENTRY PO	DINT (3)			1/1/23 -	12/31/	23			(Complete
				1/1/24 -	12/31/	24				
				1/1/25 -	12/31/	25				
Pesticides, H	lerbicides :	and PCBs - Phase II & V (SOCS)					1 ro	utine	(RT) pe	r three years
Sampling	Point (Sam	pling Point ID)		Monitor	ing Peri	iod Col	lection Pe	riod	Com	oliance Status
ENTRY PO	DINT (3)			1/1/23 -	12/31/	25				
				1/1/26 -	12/31/	28				
Organic Chei	micals (VC	DCS)					1 ro	utine	(RT) pe	er three years
Sampling	Point (Sam	pling Point ID)		Monitor	ing Peri	iod Col	lection Pe	riod	Com	oliance Status
ENTRY PO	DINT (3)			1/1/23 -	12/31/	25				
				1/1/26 -	12/31/	28				
	Мо	nthly Water System Facil	ity (WSF)	Level [Monit	oring R	equire	mer	nts	
Water System	n Facility:	ENTRY POINT (WSFID: 00700)								
Analyte		Monitoring Requirement (Summ	ary Type)	Оре	erating I	Limit			Samples	Req/Month
рН		Entry Point pH Monitoring (PHRD))	Mir	imum:	7 PH				4
Start Date:	2/1/2002		Compl	iance Hist	ory:	Opei	rating Lim	it	Monit	_
			Monito	oring Perio	od	Com	pliance St	atus:	Comp	liance Status:
				023 - 11/3						
				023 - 12/3						
				24 - 1/31/						
				24 - 2/29/						
				24 - 3/31/						
			omplianc	e Sche	dules					
Compliance Sc		-		_	Due Da		Achie	eved L	Date	
CROSS CONNE					3/1/20					
CROSS CONNE					3/1/20					
CROSS CONNE					3/1/20					
CROSS CONNE	CTION SUR\	/EY REPORT			3/1/20	22				

3/1/2023

3/1/2024

10/16/2024

10/16/2024

CROSS CONNECTION SURVEY REPORT

CROSS CONNECTION SURVEY REPORT

COMPLETE INITIAL LSL INVENTORY

SUBMIT LEAD SERVICE LINE INVENTORY

	donnectical Department of	I ablic I	Carti	ועו		, water	Decemon	
	Water Quality Monitoring and Compliance Schedule							
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1341172	BROOKSIDE PROFESSIONAL CENTRE				NTNC	25	Р	GW
Local Address	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural	
72-78 WEST STAFFORD ROAD Connections								

Connecticut Department of Public Health Drinking Water Section

Towns Sei	ved: STAFFORD										
	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	GENERIC DISTRIBUTION	Α	Υ						
		BPC03	PED REST RM	Α	Υ	2	Υ	Υ			
		BPC04	BLDG # REST RM	Α	Υ	2					
		BPC05	INSUR KIT	Α	Υ	2					
		BPC06	INSUR REST RM	Α	Υ	1					
		BPC07	BLDG I REST RM	Α	Υ	2					
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							
10596	WELL #1	2	WELL #1	Α							

47686 TREATMENT PLANT									
Certified Operator Information									
Water System Facility: TREATMENT PLANT (WSF ID: 47686)									
Facility Classification: CLASS 1 TREATMENT PLANT									
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						
Contact lafe marking									

			Co	ontact Inf	ormation				
Name			Organization	1	Job Title				
Mr. Barry A. Cyr				Condo Realty LLC			Property Manager		
Mailing Address Line One Mailing Addr			ess Line Two			City	State	Zip Code	
169 Main Street					Manche	ster	СТ	06042	
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Address			
860-645-1776	11				860-324-3321	cyrb@condorealty.com			
					1	-1			

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

Towns Served: STAFFORD

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

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

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

End of schedule

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1341192	RED BALLOON DAYCARE				NTNC	55	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
7 PARK STREET		Connections	1					

Towns Served: STAFFORD			
Monitoria	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		Complete
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/23	6/1-9/30	Complete
	1/1/24 - 12/31/24	6/1-9/30	
	1/1/25 - 12/31/25	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Nitrate And Nitrite (NOX)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Pesticides, Herbicides and PCBs-Phase V (SOC5)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		_
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

	Connecticut Dep	artment of	Public	Health I	Orinki	ng Wa	ater Se	ction	
	Water Qua	ality Monit	oring a	nd Comp	olianc	e Sche	edule		
PWS ID	PWS Name			C	lassificatio	on Popu	lation Owr	er Type P	rimary Source
CT1341192	RED BALLOON DAYCARE				NTNC	5	5	Р	GW
Local Address (v	vhere applicable)		Service	Residentia	al Comme	ercial In	dustrial	Combined	Agricultural
7 PARK STREET			Connection	ns 1					
Towns Served: S	STAFFORD								
		Monito	oring Red	quiremen	ts				
Water System	Facility: ENTRY POINT	(WSF ID: 00700)							
Organic Chem	nicals (VOCS)						1 routine	(RT) per	three years
Sampling F	Point (Sampling Point ID)			Monitoring	Period	Collecti	ion Period	Compli	iance Status
ENTRY POI	NT (3)			1/1/21 - 12	2/31/23			Co	mplete
				1/1/24 - 12	2/31/26				
				1/1/27 - 12	2/31/29				
		Other Co	omplian	ce Schedu	les				
Compliance Sch	edule Activity			Dι	ie Date		Achieved I	Date	
SUBMIT LEAD SE	ERVICE LINE INVENTORY			10/	16/2024				
COMPLETE INITI	IAL LSL INVENTORY			10/	16/2024				
CROSS CONNEC	TION SURVEY REPORT			3/	1/2025				
	Water :	System Facili	ty and S	ampling P	oint In	ventor	У		
Water						Total	Lead and		
•	er System Facility	Sampling Point			(Coliform	Copper		Stage
Facility ID		ID	Description	1	Status	Rule	Rule Tier	Asbestos	WQP 2 DBPR
-	RIBUTION SYSTEM	1D 4	•	ION SYSTEM	Status A	Rule Y	Rule Tier	Asbestos	WQP 2 DBPR
-	RIBUTION SYSTEM		DISTRIBUTI	ION SYSTEM			Rule Tier	Asbestos	WQP 2 DBPR
	RIBUTION SYSTEM	4	DISTRIBUTI	ION SYSTEM SERVICE CON	Α		Rule Tier	Asbestos Y	WQP 2 DBPR
	RIBUTION SYSTEM	4 DOWNSTREAM	DISTRIBUTI WITHIN 5 S	ION SYSTEM SERVICE CON	A A	Y			
	RIBUTION SYSTEM	4 DOWNSTREAM RBDC01	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R	ION SYSTEM SERVICE CON	A A A	Y	1		Υ
	RIBUTION SYSTEM	4 DOWNSTREAM RBDC01 RBDC02	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R	ON SYSTEM SERVICE CON INK ROOM TAP I ROOM TAP	A A A	Y Y Y	1 1	Y	Y Y
	RIBUTION SYSTEM	4 DOWNSTREAM RBDC01 RBDC02 RBDC03	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R PLATFORM PRE K ROO	ON SYSTEM SERVICE CON INK ROOM TAP I ROOM TAP	A A A A	Y Y Y	1 1 1	Y	Y Y
-	RIBUTION SYSTEM	4 DOWNSTREAM RBDC01 RBDC02 RBDC03 RBDC04	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R PLATFORM PRE K ROO BABY RM A	ON SYSTEM SERVICE CON INK ROOM TAP I ROOM TAP M TAP	A A A A	Y Y Y Y	1 1 1	Y	Y Y Y
00600 DISTR	RIBUTION SYSTEM	4 DOWNSTREAM RBDC01 RBDC02 RBDC03 RBDC04 RBDC05	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R PLATFORM PRE K ROO BABY RM A	ON SYSTEM SERVICE CON INK ROOM TAP I ROOM TAP M TAP AD BATH TAP SERVICE CON	A A A A A	Y Y Y Y	1 1 1	Y	Y Y Y
00600 DISTR	RY POINT	4 DOWNSTREAM RBDC01 RBDC02 RBDC03 RBDC04 RBDC05 UPSTREAM	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R PLATFORM PRE K ROO BABY RM A WITHIN 5 S	ON SYSTEM SERVICE CON INK ROOM TAP I ROOM TAP M TAP AD BATH TAP SERVICE CON	A A A A A A	Y Y Y Y	1 1 1	Y	Y Y Y
00600 DISTR	RY POINT	4 DOWNSTREAM RBDC01 RBDC02 RBDC03 RBDC04 RBDC05 UPSTREAM 3 2	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R PLATFORM PRE K ROO BABY RM A WITHIN 5 S ENTRY POII	ON SYSTEM SERVICE CON INK ROOM TAP I ROOM TAP M TAP AD BATH TAP SERVICE CON	A A A A A A	Y Y Y Y	1 1 1	Y	Y Y Y
00600 DISTR	RY POINT	4 DOWNSTREAM RBDC01 RBDC02 RBDC03 RBDC04 RBDC05 UPSTREAM 3 2 Certified	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R PLATFORM PRE K ROO BABY RM A WITHIN 5 S ENTRY POII WELL Operato	ON SYSTEM SERVICE CON INK ROOM TAP I ROOM TAP M TAP AD BATH TAP SERVICE CON	A A A A A A	Y Y Y Y	1 1 1	Y	Y Y Y
00600 DISTR 00700 ENTR 10598 WELL Water System	RY POINT	4 DOWNSTREAM RBDC01 RBDC02 RBDC03 RBDC04 RBDC05 UPSTREAM 3 2 Certified SYSTEM (WSF II	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R PLATFORM PRE K ROO BABY RM A WITHIN 5 S ENTRY POII WELL Operato	ON SYSTEM SERVICE CON INK ROOM TAP I ROOM TAP M TAP AD BATH TAP SERVICE CON	A A A A A A	Y Y Y Y	1 1 1	Y	Y Y Y
00600 DISTR	Facility: DISTRIBUTION ation: SMALL WATER SYSTE	4 DOWNSTREAM RBDC01 RBDC02 RBDC03 RBDC04 RBDC05 UPSTREAM 3 2 Certified SYSTEM (WSF II	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R PLATFORM PRE K ROO BABY RM A WITHIN 5 S ENTRY POIL WELL Operato D: 00600)	ON SYSTEM SERVICE CON INK ROOM TAP I ROOM TAP M TAP AD BATH TAP SERVICE CON	A A A A A A tion	Y Y Y Y	1 1 1	Y	Y Y Y Y
00600 DISTR 00700 ENTR 10598 WELL Water System Facility Classific Operator Name	Facility: DISTRIBUTION ation: SMALL WATER SYSTE	4 DOWNSTREAM RBDC01 RBDC02 RBDC03 RBDC04 RBDC05 UPSTREAM 3 2 Certified SYSTEM (WSF II	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R PLATFORM PRE K ROO BABY RM A WITHIN 5 S ENTRY POII WELL Operato D: 00600)	ION SYSTEM SERVICE CON INK ROOM TAP I ROOM TAP M TAP AD BATH TAP SERVICE CON NT	A A A A A A tion	Y Y Y Y	1 1 1 1 1	Y Y Y	Y Y Y Y Y Certification
00600 DISTR 00700 ENTR 10598 WELL Water System Facility Classific Operator Name	Facility: DISTRIBUTION ation: SMALL WATER SYSTE	4 DOWNSTREAM RBDC01 RBDC02 RBDC03 RBDC04 RBDC05 UPSTREAM 3 2 Certified SYSTEM (WSF II	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R PLATFORM PRE K ROO BABY RM A WITHIN 5 S ENTRY POII WELL Operato D: 00600)	ON SYSTEM SERVICE CON INK ROOM TAP I ROOM TAP M TAP AD BATH TAP SERVICE CON NT OF Informa	A A A A A A Tion	Y Y Y Y Y	1 1 1 1 1	Y Y Y	Y Y Y Y Y Certification Expiration
00700 ENTR 10598 WELL Water System Facility Classific Operator Name NIGRO, JR., VICT	Facility: DISTRIBUTION : ation: SMALL WATER SYSTE	4 DOWNSTREAM RBDC01 RBDC02 RBDC03 RBDC04 RBDC05 UPSTREAM 3 2 Certified SYSTEM (WSF II	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R PLATFORM PRE K ROO BABY RM A WITHIN 5 S ENTRY POII WELL Operato D: 00600)	Certification	A A A A A A Tion	Y Y Y Y Y OPERATO	1 1 1 1 1 RATOR - CL	Y Y Y	Y Y Y Y Y Certification Expiration 6/30/2024
00700 ENTR 10598 WELL	Facility: DISTRIBUTION : ation: SMALL WATER SYSTE	4 DOWNSTREAM RBDC01 RBDC02 RBDC03 RBDC04 RBDC05 UPSTREAM 3 2 Certified SYSTEM (WSF II	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R PLATFORM PRE K ROO BABY RM A WITHIN 5 S ENTRY POII WELL Operato D: 00600)	Certification	A A A A A A A Tion	Y Y Y Y Y OPERATO	1 1 1 1 1 1 RATOR - CL DR - CLASS I	Y Y Y	Y Y Y Y Y
00700 ENTR 10598 WELL Water System Facility Classific Operator Name NIGRO, JR., VICT	Facility: DISTRIBUTION : ation: SMALL WATER SYSTE	4 DOWNSTREAM RBDC01 RBDC02 RBDC03 RBDC04 RBDC05 UPSTREAM 3 2 Certified SYSTEM (WSF II	DISTRIBUTI WITHIN 5 S KITCHEN SI TODDLER R PLATFORM PRE K ROO BABY RM A WITHIN 5 S ENTRY POII WELL Operato D: 00600)	Certification WATER TREAL DISTRIBUTION	A A A A A A A Tion	Y Y Y Y Y OPERATO	1 1 1 1 1 1 RATOR - CL DR - CLASS I	Y Y Y	Y Y Y Y Y Y

Red Balloon Daycare

Mailing Address Line Two

Mobile Phone

Owner

City

Stafford

Emergency Phone Email Address

860-207-1423

State

 CT

victoria@redballoonchildrenscenter.com

Zip Code

06016

Ms. Victoria Salzarulo

Business Phone

860-684-6985

7 Park Street

Mailing Address Line One

Extension

Fax

	Water Quality I				C	,		
		withittoring and	u Con					
PWS ID PWS Name			Classification		Population	Owner Type	Primary Source	
CT1341192	RED BALLOON DAYCARE				NTNC	55	Р	GW
Local Address	Service	Residen	tial	Commerci	al Industri	al Combin	ed Agricultural	
7 PARK STREET	Connections	1						

Connecticut Department of Dublic Health Drinking Water Section

Towns Served: STAFFORD

Contact Role(s): Administrative Contact, Owner

Please note the following:

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

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

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

End of schedule

Connecticut Department of Public Health	Drinking	g Water	Section	
Water Quality Monitoring and Con	npliance S	Schedul	e	
DIAIC ALL TO T	Cl:f:+:	Daniel Latine	O T	Dutin

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1341243	TTM PRINTED CIRCUIT - 15 INDUSTRIAL DR				NTNC	120	Р	GW
Local Address (where applicable)		Service	Residen	itial	Commerci	al Industri	al Combin	ed Agricultural
15 INDUSTRIAL	DRIVE	Connections	1					

Towns Served: STAFFORD			
Monitori	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Asbestos (1094)		1 routine	e (RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/21 - 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)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

	Connecticut	Department of	Public I	Health	Dı	rinki	ng V	Vate	: Se	ction	
	Water	Quality Monit	oring an	nd Com	ıpl	ianc	e Sc	hedu	le		
PWS ID	PWS Name	<u> </u>	<u> </u>						_	ner Type F	Primary Source
CT134124	TTM PRINTED CIRCU	IIT - 15 INDUSTRIAL DR				NTNC		120		P	GW
Local Addr	ress (where applicable)		Service	Residen	tial	Comm	ercial	Industi	ial	Combined	Agricultural
	TRIAL DRIVE		Connections	1							
Towns Ser	ved: STAFFORD										
		Monito	oring Req	uireme	nts						
Water Sy:	stem Facility: ENTRY PC	DINT (WSF ID: 00700)									
Organic	Chemicals (VOCS)								1 rou	itine (RT)	per quarter
_	oling Point (Sampling Point	ID)		Monitori	ng P	eriod	Colle	ction P			liance Status
	Y POINT (3)	·		10/1/23 -	12/	31/23				C	omplete
				1/1/24 -	3/3	1/24				C	omplete
				4/1/24 -	6/3	0/24					
				7/1/24 -	9/3	0/24					
		Other Co	omplianc	e Sched	ule	es					
Compliand	ce Schedule Activity			L	Due	Date		Achi	eved	Date	
SUBMIT LE	EAD SERVICE LINE INVENTO	RY		10)/16	/2024					
COMPLETE	E INITIAL LSL INVENTORY			10)/16	/2024					
CROSS CO	NNECTION SURVEY REPORT	-		3	3/1/	2025					
	Wa	ater System Facili	ity and Sa	mpling	Ро	int Ir	vent	ory			
Water		•	•				Total	Lead	d and		
System	Water System Facility	Sampling Point	Sampling Po	oint			Colifor	m Cop	per		Stage
Facility ID)	ID	Description			Status	Rule	Rule	e Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTIO	N SYSTEM		Α	Υ				
		DOWNSTREAM	WITHIN 5 SE	RVICE CON	1	Α					
		UPSTREAM	WITHIN 5 SE	RVICE CON	I	Α					
00700	ENTRY POINT	3	ENTRY POIN	Т		Α					
10599	WELL	2	WELL			Α					
59624	TREATMENT PLANT										
		Certified	Operator	Inform	ati	on					
Water Sy:	stem Facility: TREATME	NT PLANT (WSF ID: 5	9624)								
Facility Cla	assification: CLASS 1 TREAT	MENT PLANT									Certification
Operator l	Name	Operator Type	е (Certificatio	n(s)						Expiration
NIGRO, JR	., VICTOR N.	CHIEF OPERATO	DR V	VATER TRE	ATN	1ENT P	LANT O	PERATO	R - CL	ASS II	6/30/2024
				ISTRIBUTIO	ON S	SYSTEM	OPER/	ATOR - C	LASS	Ш	6/30/2026
NIGRO, SC	OTT A.	ASSIGNED OPER	RATOR D	DISTRIBUTION	ON S	SYSTEM	OPER/	ATOR - C	LASS	I	6/30/2025
			V	VATER TRE	ATN	1ENT P	LANT O	PERATO	R - CL	ASS II	6/30/2026
NIGRO, DA	AVID	ASSIGNED OPER	RATOR V	VATER TRE	ATN	1ENT P	LANT O	PERATO	R - Cl	ASS I	3/31/2025
		Con	tact Infor	mation							
Name		Oı	rganization							Job Title	
	es A. Nehrig	T+	m Printed Cir	cuit Groun	Inc		F	hs Man	ager		

City

charles.nehrig@ttmtech.com

Stafford

Emergency Phone Email Address

860-209-8671

State

CT

Zip Code

06075

Mailing Address Line Two

Mobile Phone

P.O. Box 145

Fax

860-684-0714

Mailing Address Line One

Contact Role(s): Legal Contact

Extension

4 Old Monson Road

Business Phone

860-746-6248

	Connectic	ut Depa	rtme	nt of	Public	Health	Drii	nking	g Water	Section		
	Wat	ter Qua	lity M	onito	oring ai	nd Con	nplia	nce S	Schedul	le		
PWS ID P	WS Name						Classif	ication	Population	Owner Type	Primary S	ource
CT1341243 T	TM PRINTED CI	RCUIT - 15 II	NDUSTRI	AL DR			NT	NC	120	Р	GW	
Local Address (wh	ere applicable)				Service	Resider	ntial Co	mmerci	al Industri	al Combin	ed Agricu	d Agricultural
.5 INDUSTRIAL DRIVE				Connection	1							
Towns Served: STA	AFFORD											
Name				Org	ganization	on Job Title					е	
Mr. Brian Santos				Ttn	Ttm Technologies				Eh&S Manager			
Mailing Address Li	ne One		Mailing	Address	Line Two				City	State	Zip Co	de
4 Old Monson Roa	nd							Staffor	d	d CT		'6
Business Phone	Extension	Fax		Mobile	e Phone	Emergency	/ Phone	Email A	Address			
860-315-0911		860-684-	0714			413-813	-9707	brian.s	rian.santos@ttmtech.com			
Contact Role(s):	Administrative (Contact			"			1				

Contact Role(s): Administrative Contac

Please note the following:

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

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

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

End of schedule

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

PWS ID PWS Name C			Cla	ssification	Population	Owner Type	Primary Source	
CT1341253	TTM PRINTED CIRCUIT - 228 UPPER ROAD				NTNC	150	Р	GW
Local Address (where applicable)		Service	Residentia		Commercia	al Industri	al Combine	ed Agricultural
228 UPPER ROAD		Connections	1					

Towns Served: STAFFORD			
Monitor	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Lead And Copper (PBCU)		10 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/23 - 12/31/23		Complete
	1/1/24 - 6/30/24		Complete
	7/1/24 - 12/31/24		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

	Connecticut Department of Public Health Drinking Water Section									
Water Quality Monitoring and Compliance Schedule										
PWS ID	/S ID PWS Name				ssification	Population	Owner Type	Primary Source		
CT1341253	TTM PRINTED CIRCUIT - 228 UPPER ROAD				NTNC	150	Р	GW		
Local Address ((where applicable)	Service	Residentia		Commerci	al Industri	al Combine	ed Agricultural		
228 UPPER ROAD		Connections	1							
Towns Served:	STAFFORD									

TOWNS Served: STAFFORD									
Monitoring Re	equirements								
Water System Facility: ENTRY POINT (WSF ID: 00700)									
Organic Chemicals (VOCS)	1 routine (RT) per t								
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status						
ENTRY POINT (3)	1/1/23 - 12/31/25								
	1/1/26 - 12/31/28								
Monthly Water System Facility (WSF) Level Monitoring Requirements									

	,, \				
Water System Facility:	ENTRY POINT (WSFID: 00700)				
Analyte	Monitoring Requirement (Summary Ty	/pe)	Operating Limit	t	Samples Req/Month
рН	Entry Point pH Monitoring (PHRD)	Minimum: 7.0		PH	4
Start Date: 9/1/2021		Compliance History:		Operating Limit	Monitoring
		Monitoring	Period	Compliance Status	: Compliance Status:
		11/1/2023 -	11/30/2023	Υ	
		12/1/2023 -	12/31/2023	Υ	
		1/1/2024 - 1	/31/2024	Υ	
		2/1/2024 - 2	/29/2024	Υ	
		3/1/2024 - 3	/31/2024		

Other Compliance Schedules									
Compliance Schedule Activity	Due Date	Achieved Date							
CCTS 6: PWS MONITOR AFTER OCCT INSTALL									
CCTS 6: PWS MONITOR AFTER OCCT INSTALL									
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024								
COMPLETE INITIAL LSL INVENTORY	10/16/2024								
CROSS CONNECTION SURVEY REPORT	3/1/2025								

CROSS CONNECTION SORVET REPORT		3/	1/2023				
Wate	er System Facili	ity and Sampling P	oint Ir	nventor	ry		
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPI
00600 DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
	BF74	MENS RESTROOM	Α	Υ			
	DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
	TTMUP05	CAFE MENS	Α	Υ	1	Υ	
	TTMUP10	LADIES ROOM	Α	Υ	1	Υ	
	TTMUP15	2ND FLOOR MENS	Α	Υ	1	Υ	
	TTMUP20	2ND FLOOR LADIES R	Α	Υ	1	Υ	
	TTMUP20L	2ND FLOOR LADIES L	Α	Υ	1	Υ	
	TTMUP25	3RD FLOOR MENS	Α	Υ	1	Υ	
	TTMUP30	3RD FLOOR WOMENS	Α	Υ	1	Υ	
	TTMUP35	HANDICAP BATH	Α	Υ	1	Υ	
	TTMUP40	MENS 1ST RIGHT	Α	Υ	1	Υ	
	TTMUP45	MENS 1ST LEFT	Α	Υ	1		

	Connecticut Department of Fubile Health Diffixing Water Section										
Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source			
CT1341253	TTM PRINTED CIRCUIT - 228 UPPER ROAD				NTNC	150	Р	GW			
Local Address (where applicable)		Service	Residen	ntial Commerci		ial Industri	al Combin	ed Agricultural			
228 UPPER ROAD		Connections	1								

Connecticut Department of Public Health Drinking Water Section

	Water System Facility and Sampling Point Inventory										
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stag WQP 2 DB			
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							
10921	WELL	2	WELL	Α							
11372	TREATMENT PLANT										

Water System Facility: TREAT	MENT PLANT (WSF ID: 11372)					
Facility Classification: CLASS 1 TREATMENT PLANT						
Operator Name	Operator Type	Certification(s)	Expiration			
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2024			
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2026			
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2025			
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026			

WATER TREATMENT PLANT OPERATOR - CLASS I

Certified Operator Information

				ormation				
me Organization							Job Title	
Mr. Charles A. Nehrig Ttm Printed Circuit Group, Inc					Ehs Manage	er		
One		Mailing	Address Line Two			City	State	Zip Code
		P.O. Bo	x 145		Stafford		СТ	06075
Extension	Fax		Mobile Phone	Emergency Phone	E Email Address			
	860-684-0	714		860-209-8671	charles.	nehrig@ttmt	ech.com	
al Contact								
			Organization				Job Title	
			Ttm Technol	ogies		Eh&S Mana	ger	
One		Mailing	Address Line Two			City	State	Zip Code
					Stafford		СТ	06076
Extension	Fax		Mobile Phone	Emergency Phone	Email Address			
	860-684-0)714		413-813-9707	brian.santos@ttmtech.com			
•	One Extension cal Contact One	One Extension Fax 860-684-0 Fal Contact One Extension Fax	One Mailing P.O. Bo Extension Fax 860-684-0714 Cal Contact One Mailing	One Mailing Address Line Two P.O. Box 145 Extension Fax Mobile Phone 860-684-0714 Cal Contact Organization Ttm Technolo One Mailing Address Line Two Extension Fax Mobile Phone	Ttm Printed Circuit Group, Inc One Mailing Address Line Two P.O. Box 145 Extension Fax Mobile Phone Emergency Phone 860-684-0714 860-209-8671 Fal Contact Organization Ttm Technologies One Mailing Address Line Two Extension Fax Mobile Phone Emergency Phone	Ttm Printed Circuit Group, Inc One Mailing Address Line Two P.O. Box 145 Stafford Extension Fax Mobile Phone Emergency Phone Email Ad 860-684-0714 860-209-8671 charles. Cal Contact Organization Ttm Technologies One Mailing Address Line Two Stafford Extension Fax Mobile Phone Emergency Phone Email Ad Stafford	Ttm Printed Circuit Group, Inc One Mailing Address Line Two P.O. Box 145 Extension Fax Mobile Phone Bemergency Phone Bemail Address 860-684-0714 Organization Ttm Technologies One Mailing Address Line Two City City Stafford Ehs Manage Cotty Stafford Ehs Manage City Stafford Extension Ttm Technologies Eh&S Manage City Stafford Extension Fax Mobile Phone Emergency Phone Email Address	Ttm Printed Circuit Group, Inc One Mailing Address Line Two P.O. Box 145 Stafford CT Extension Fax Mobile Phone Bemergency Phone Bemail Address Charles.nehrig@ttmtech.com Fal Contact Organization Ttm Technologies One Mailing Address Line Two City State Stafford CT Stafford CT Stafford CT Stafford CT Stafford CT Extension Fax Mobile Phone Emergency Phone Email Address Eh&S Manager City State Stafford CT Extension Fax Mobile Phone Emergency Phone Email Address

Please note the following:

NIGRO, DAVID

Towns Served: STAFFORD

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

ASSIGNED OPERATOR

- 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

3/31/2025

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule								
PWS ID	WS ID PWS Name			Classification		Population	Owner Type	Primary Source
CT1341343 TTM PRINTED CIRCUIT - BUILDING 5					NTNC	51	Р	GW
Local Address (where applicable)		Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
22 INDUSTRIA	Connections				1			

Towns Served: STAFFORD			
Monitorin	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/26		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/23	6/1-9/30	Complete
	1/1/24 - 12/31/24	6/1-9/30	
	1/1/25 - 12/31/25	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		·
	1/1/26 - 12/31/28		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		·
	1/1/25 - 12/31/25		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/21 - 12/31/23		Complete
, ,	1/1/24 - 12/31/26		•
	1/1/27 - 12/31/29		
Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
• •	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name				ssification	Population	Owner Type		Primary Source
CT1341343	1341343 TTM PRINTED CIRCUIT - BUILDING 5					51		Р	GW
Local Address (where applicable) Service Resid			Residen	itial	Commerci	al Industri	al C	Combine	d Agricultural
22 INDUSTRIAL DRIVE		Connections				1			

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

	Wa	iter System Facili	ity and Sampling Po	oint Ir	vento	ſy		
Water System Facility II	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				
		BLD65030	BREAK ROOM	Α	Υ			
		BLDG5010	MENS ROOM	Α	Υ	N	Υ	
		BLDG501006	1ST FLOOR MENS	Α	Υ			
		BLDG50106	1ST FLOOR MENS	Α	Υ			
		BLDG5015	LADIES ROOM	Α	Υ	Ν	Υ	
		BLDG5020	MENS ROOM	Α	Υ	Ν	Υ	
		BLDG5025	LADIES ROOM	Α	Υ	Ν	Υ	
		BLDG5030	SNACK	Α	Υ	Ν	Υ	
		DOWNSTREAM	2ND FLOOR MENS BATHR	R A	Υ			
		UPSTREAM	MENS BATHROOM	Α	Υ			
00700	ENTRY POINT	3	ENTRY POINT	Α				
60594	WELL 1	2	WELL 1	Α				
60598	TREATMENT PLANT							

Certified Operator Inform	rmatio	n
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Water System Eacility	/: DISTRIBUTION SYSTEM	(MICE ID: OOGOO)
water System Facility	/: DISTRIBUTION SYSTEM	(WSF ID: UUDUU)

		Certification
Operator Type	Certification(s)	Expiration
CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2024
	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2026
ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2025
	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026
	CHIEF OPERATOR	CHIEF OPERATOR WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS III ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS I

Water System Facility: TREATMENT PLANT (WSF ID: 60598)

Facility Classification: CLASS 1 TR	EATMENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2024
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2026
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2025
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026
NIGRO, DAVID	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	3/31/2025

	Water Quality Monitoring and Compliance Schedule								
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source	
CT1341343	TTM PRINTED CIRCUIT - BUILDING 5				NTNC	51	Р	GW	
Local Address (where applicable)		Service	Residentia		Commerci	al Industri	al Combine	ed Agricultural	
22 INDUSTRIAL DRIVE		Connections				1			

Connecticut Department of Public Health Drinking Water Section

Name						Job Title			
Mr. Charles A. Nehrig					Circuit Group, Inc		Ehs Manag	er	
One		Mailing Address Line Two				City	State	Zip Code	
4 Old Monson Road P.O. Box 14			(145			Stafford		СТ	06075
Extension	Fax		Mobile	e Phone	Emergency Phone	e Email Address			
	860-684-0	0714		860-209-8671		charles.nehrig@ttmtech.com			
al Contact									
			Org	Organization			Job Title		
			Ttn	Ttm Technologies			Eh&S Mana	ger	
One		Mailing	Address	Line Two			City	State	Zip Code
						Stafford		СТ	06076
Extension	Fax		Mobile	e Phone	Emergency Phone	Email Address			
	860-684-0	0714			413-813-9707	707 brian.santos@ttmtech.com		ch.com	
	One Extension al Contact One	One Extension Fax 860-684-0 Fal Contact One Extension Fax	One Mailing P.O. Box Extension Fax 860-684-0714 al Contact One Mailing Extension Fax	One Mailing Address P.O. Box 145 P.O. Box 145 Extension Fax Mobile 860-684-0714 Org Ttn One Mailing Address Extension Fax Mobile	One Mailing Address Line Two P.O. Box 145 Extension Fax Mobile Phone 860-684-0714 al Contact Organization Ttm Technolo One Mailing Address Line Two Extension Fax Mobile Phone	One Mailing Address Line Two P.O. Box 145 Extension Fax Mobile Phone Emergency Phone 860-684-0714 860-209-8671 al Contact Organization Ttm Technologies One Mailing Address Line Two Extension Fax Mobile Phone Emergency Phone	One Mailing Address Line Two P.O. Box 145 Stafford Extension Fax Mobile Phone Emergency Phone Email Ad 860-684-0714 860-209-8671 charles. Contact Organization Ttm Technologies One Mailing Address Line Two Extension Fax Mobile Phone Emergency Phone Email Address Line Two	One Mailing Address Line Two City P.O. Box 145 Stafford Extension Fax Mobile Phone Emergency Phone Email Address 860-684-0714 860-209-8671 charles.nehrig@ttmt al Contact Organization Ttm Technologies Eh&S Mana One Mailing Address Line Two City Stafford Extension Fax Mobile Phone Emergency Phone Email Address	One Mailing Address Line Two City State P.O. Box 145 Stafford CT Extension Fax Mobile Phone Emergency Phone Email Address 860-684-0714 860-209-8671 charles.nehrig@ttmtech.com Fal Contact Organization Job Title Ttm Technologies Eh&S Manager One Mailing Address Line Two City State Stafford CT Extension Fax Mobile Phone Emergency Phone Email Address

Please note the following:

Towns Served: STAFFORD

- 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

Co	nnecticut Department of Public Heal	lth Drinking	g Water	Section	
	Water Quality Monitoring and Co	ompliance :	Schedul	e	
PW:	S Name	Classification	Population	Owner Type	Prima

PWS ID PWS Name			Clas	ssification	Population	Owi	ner Type	Primary S	ource	
CT1341344 TTM PRINTED CIRCUIT - BUILDING 3A ANNEX				NTNC	26		Р	GW		
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industr	ial	Combine	d Agricu	ıltural
10 INDUSTRIAL	DRIVE	Connections				1				

10 INDOSTRIAL DRIVE			
Towns Served: STAFFORD			
Monito	ring Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID			
Asbestos (1094)		1 routine	e (RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/19 - 12/31/27		
Total Coliform (3100)	_, _,,	1 rout	tine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Lead And Copper (PBCU)	7,1,2: 3,30,2:	5 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/23 - 12/31/23		Complete
Select non-inventory of Active Sampling Comes	1/1/24 - 6/30/24		Complete
	7/1/24 - 12/31/24		
Physical Parameters (PPS)	7/1/24 - 12/31/24	1 rout	tine (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	Conection Feriou	Complete
Select from inventory of Active Sampling Points	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		Complete
	7/1/24 - 9/30/24		
Mater System Facility FNTDY POINT (MCF ID: 00700)	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)		4	in a (DT) was a succession
Chloride (1017)	Manitaring Pariod		tine (RT) per quarter
Sampling Point (Sampling Point ID) ENTRY POINT (3)	Monitoring Period 10/1/23 - 12/31/23	Collection Period	Compliance Status
ENTRY POINT (5)	1/1/24 - 3/31/24		Complete Complete
			Complete
	4/1/24 - 6/30/24		
1	7/1/24 - 9/30/24	4 11	(DT)
Inorganic Chemicals (IOCS)	Manitovina Povind		(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
Alternative (Alaska)	1/1/26 - 12/31/28		.: />=\
Nitrate And Nitrite (NOX)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		(\)
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/21 - 12/31/23		Complete
	1/1/24 - 12/31/26		

Conne	ecticut Department of						ection	
	Water Quality Monito	oring an	d Comp	lianc	e Sc	hedule		
PWS ID PWS Nam	ne		Cla	assificati	on Po	pulation Ov	ner Type P	rimary Source
CT1341344 TTM PRIN	NTED CIRCUIT - BUILDING 3A ANNEX			NTNC		26	Р	GW
Local Address (where appl	icable)	Service	Residential	Comm	ercial	Industrial	Combined	Agricultural
10 INDUSTRIAL DRIVE		Connections				1		
Towns Served: STAFFORD			-					
	Monito	ring Requ	uirement	S				
Water System Facility:	ENTRY POINT (WSF ID: 00700)							
Pesticides, Herbicides	and PCBs - Phase II & V (SOCS)					1 routin	e (RT) per	three years
Sampling Point (Sam	pling Point ID)		Monitoring	Period	Colle	ection Period	l Compli	ance Status
			1/1/27 - 12/	/31/29				
Organic Chemicals (VC	OCS)					1	. routine (F	RT) per year
Sampling Point (Sam		Monitoring	Period	Colle	ection Period	Compli	ance Status	
ENTRY POINT (3)			1/1/23 - 12/	/31/23			Co	mplete
			1/1/24 - 12/	/31/24				
			1/1/25 - 12/	/31/25				
	Optimal Water Quali	ty Corros	ion Conti	rol Pai	rame	ters		
Water System Facility:	DISTRIBUTION SYSTEM (WSFID:	00600)						
Start Date:	Analyte	0	perating Lim	it				
2/24/2023	рН	M	laximum:	8.5 PH				
		M	linimum:	7.9 PH				
Mo	nthly Water System Facili	ty (WSF)	Level Mo	nitori	ng Re	equireme	ents	
Water System Facility:	ENTRY POINT (WSFID: 00700)							
Analyte	Monitoring Requirement (Summa	ry Type)	Operati	ing Limit			Samples R	eq/Month
pH	Entry Point pH Monitoring (PHRD)		Minimu	ım: 7.9 l	РН			_
Start Date: 2/1/2023		Complia	ance History:		Oners	iting Limit	Monito	ring
		Monito	ring Period		-	liance Statu		nce Status:
			23 - 11/30/2	023		Υ	· .	
		12/1/20	23 - 12/31/2	023		Υ		
			4 - 1/31/202			Υ		
			4 - 2/29/202			Υ		
			4 - 3/31/202					
Analyte	Monitoring Requirement (Summa			ing Limit			Samples R	eq/Month
рН	<spaces> ()</spaces>	7 71 -7		um: 8.5			4	•
Start Date: 2/1/2023	. ,	Complia	ance History:			iting Limit	Monito	ring
, ,		Monito	ring Period		-	liance Statu		nce Status:
			23 - 11/30/2	023	CO 1111 D	nance stata		
			23 - 12/31/2					
			4 - 1/31/202					
			4 - 2/29/202					
			4 - 3/31/202					
	Other Co	mpliance						
Compliance Schedule Acti		•		. Date		Achieved	Date	
SUBMIT LEAD SERVICE LIN	<u> </u>			6/2024				
COMPLETE INITIAL LSL INV				6/2024				
CDOSS CONNECTION SUBV				/2025				

3/1/2025

CROSS CONNECTION SURVEY REPORT

PWS ID PWS Name C		Cla	ssification	Population	Owner Type	Prim	nary Source		
CT1341344 TTM PRINTED CIRCUIT - BUILDING 3A ANNEX				NTNC	26	Р		GW	
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combin	ed A	Agricultural
10 INDUSTRIAI	DRIVE	Connections				1			

Towns Served: STAFFORD

Water System Facility and Sampling Point Inventory									
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPF	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	А					
		BLD3015	MEN'S ROOM	Α	Υ	N			
		BLD3020	LADIES ROOM	Α	Υ	3			
		BLD3025	BREAKROOM	Α	Υ	N			
		BLD3030	MOP SINK	Α		1			
		BLD3035	KITCHEN 1	Α		1			
		BLD3040	KITCHEN 2	Α		1			
		BLD3045	MENS BATH	Α		1			
		BLDG3025	GENERATED BY BATCH	Α	Υ				
00700	ENTRY POINT	3	ENTRY POINT	Α					
60602	WELL 1	2	WELL 1	Α					
61912	TREATMENT PLANT								
61914	ATMOSPHERIC TANK								
62554	VFD BOOSTER PUMP								

		Certified C	pperator information

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

Facility Classification:			Certification
Operator Name	Operator Type	Certification(s)	Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2024
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2026
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2025
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026

Water System Facility: TREATMENT PLANT (WSF ID: 61912)

Facility Classifications CLASS 2 TD	CATACNIT DI ANIT		
Facility Classification: CLASS 2 TR	EATIVIENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2024
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2026
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2025
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026
NIGRO, DAVID	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	3/31/2025

Contact	Intorn	nation
COHIACI		пания

Name	Name				1		Job Title			
Mr. Charles A. Nehrig Ttm Printed Circuit Group					Circuit Group, Inc	Eh	ns Manager			
Mailing Address Line One Mailing Add				ldress Line Two		(City	State	Zip Code	
4 Old Monson Road			P.O. Box 1	45		Stafford		СТ	06075	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Addr	ldress			
860-746-6248		860-684-0	0714		860-209-8671	charles.nehrig@ttmtech.com				

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	onnectic	ut Depa	rtmei	nt of	Public	Health	Drin	ıking	Water	Sec	ction	
	Wat	er Qua	lity M	onito	oring a	nd Con	nplia	nce S	Schedul	le		
PWS ID P	WS Name						Classif	ication	Population	Own	er Type	Primary Source
CT1341344 T	TM PRINTED CI	RCUIT - BUII	DING 3A	ANNEX	(NT	NC	26		Р	GW
Local Address (who	ere applicable)				Service	Resider	ntial Co	mmercia	al Industri	al (Combine	d Agricultural
10 INDUSTRIAL DR	IVE				Connection	IS			1			
Towns Served: STA	AFFORD						·					
Contact Role(s):	egal Contact											
Name				Org	Organization Job Title						<u> </u>	
Mr. Brian Santos				Ttn	n Technolog	gies			Eh&S Mai	nager	•	
Mailing Address Li	ne One		Mailing A	Address	Line Two				City		State	Zip Code
4 Old Monson Roa	d							Stafford	d		СТ	06076
Business Phone Extension Fax M			Mobile	e Phone	Emergency	/ Phone	Email Address					
860-315-0911				413-813	-9707	brian.santos@ttmtech.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

	Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule PWS Name Classification Population Owner Type Primary Source									
PWS ID PWS Name					ssification	Population	Owner Type	Primary Source		
CT1341363	TTM PRINTED CIRCUIT - BUILDING 4				NTNC	26	Р	GW		
Local Address	ocal Address (where applicable)			ntial	Commercia	al Industri	al Combine	ed Agricultural		
36 INDUSTRIAI	DRIVE	Connections			1					

Towns Served: STAFFORD			
Monitorir	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/19 - 12/31/27		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/23	6/1-9/30	Complete
	1/1/24 - 12/31/24	6/1-9/30	·
	1/1/25 - 12/31/25	6/1-9/30	
Physical Parameters (PPS)	, , ,, , ,		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		P
	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)	, , -,,		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
Entrice Control (a)	1/1/26 - 12/31/28		
Nitrate And Nitrite (NOX)	1/1/20 12/31/20	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	concension remod	Complete
LIVINI I OINT (3)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)	1/1/25 - 12/31/23	1 routing	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/21 - 12/31/23	conection remod	Complete
ENTRY POINT (3)	1/1/24 - 12/31/26		Complete
	1/1/27 - 12/31/29		
Organic Chamicals (VOCS)	1/1/2/ - 12/31/29	1	outing (PT) parvear
Organic Chemicals (VOCS) Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	outine (RT) per year Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23	Conection Period	Complete
LIVITAT FOIRT (3)	1/1/24 - 12/31/24		complete
	1/1/25 - 12/31/25		

	Connecticut D	epartment of	Public	Health	Drink	ing W	ater So	ection	
	Water (Quality Monit	oring ar	nd Con	npliand	e Sch	edule		
PWS ID	PWS Name				Classificat	ion Pop	ulation Ow	ner Type P	rimary Source
CT134136	TTM PRINTED CIRCUIT	- BUILDING 4			NTNC		26	Р	GW
Local Add	ress (where applicable)		Service	Residen	tial Comm	nercial I	ndustrial	Combined	Agricultural
36 INDUS	TRIAL DRIVE		Connection	S	-	L			
Towns Se	rved: STAFFORD								
		Other C	omplianc	e Sched	lules				
Complian	ce Schedule Activity				Due Date		Achieved	Date	
SUBMIT L	EAD SERVICE LINE INVENTORY			1	0/16/2024				
COMPLET	E INITIAL LSL INVENTORY			1	0/16/2024				
CROSS CO	NNECTION SURVEY REPORT				3/1/2025				
	Wate	er System Facili	ity and Sa	mpling	Point In	nvento	ry		
Water						Total	Lead and	ı	
System	Water System Facility	Sampling Point		oint		Coliform			Stage
Facility IE		ID	Description		Status	Rule	Rule Tie	r Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTIO	ON SYSTEM	I A				
		BLDG4010	MENS ROOM	M	Α	Υ	N	Υ	
		BLDG4015	LADIES ROO	М	Α	Υ	3	Υ	
		BLDG4020	MENS ROOM	M	Α	Υ	N	Υ	
		BLDG4025	LADIES ROO	М	Α	Υ	N	Υ	
		BLDG4030	CAFÉ		Α	Υ	N	Υ	
		BLDGH010	MENS REST	ROOM	Α	Υ			
00700	ENTRY POINT	3	ENTRY POIN	IT	Α				
60748	WELL 1	2	WELL 1		Α				
60752	TREATMENT PLANT								
		Certified	Operator	r Inform	ation				
Water Sy	stem Facility: DISTRIBUTIO	ON SYSTEM (WSF II	D: 00600)						
Facility Cl	assification:								Certification
Operator	Name	Operator Typ	e	Certificatio	n(s)				Expiration
NIGRO, JR	R., VICTOR N.	CHIEF OPERATO	DR ۱	NATER TRE	ATMENT P	LANT OP	ERATOR - C	LASS II	6/30/2024
			[DISTRIBUTI	ON SYSTEM	1 OPERAT	OR - CLASS	S III	6/30/2026
NIGRO, SO	COTT A.	ASSIGNED OPER	RATOR [DISTRIBUTI	ON SYSTEM	1 OPERAT	OR - CLASS	1	6/30/2025
			١	NATER TRE	ATMENT P	LANT OP	ERATOR - C	LASS II	6/30/2026
Water Sy	stem Facility: TREATMENT	PLANT (WSF ID: 6	0752)						
Facility Cl	assification: CLASS 2 TREATME	ENT PLANT							Certification
Operator	Name	Operator Type	e	Certificatio	n(s)				Expiration

WATER TREATMENT PLANT OPERATOR - CLASS II 6/30/2024 NIGRO, JR., VICTOR N. **CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III** 6/30/2026 NIGRO, SCOTT A. **ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS I** 6/30/2025 WATER TREATMENT PLANT OPERATOR - CLASS II 6/30/2026 **ASSIGNED OPERATOR** NIGRO, DAVID WATER TREATMENT PLANT OPERATOR - CLASS I 3/31/2025 **Contact Information** Organization Job Title Name Ms. Kim Kwasnik Mailing Address Line One Mailing Address Line Two City State Zip Code 06076 15 Industrial Park Dr Stafford Springs CT **Business Phone** Extension Fax Mobile Phone Emergency Phone Email Address 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.

(Connectic	ut Depa	rtme	ent of	Public	Health	Drir	iking	Water	Se	ction	
	Wa	ter Qua	lity N	Jonit	oring a	nd Con	nplia	nce S	Schedul	le		
PWS ID F	WS Name						Classif	ication	Population	Own	ner Type	Primary Source
CT1341363	TM PRINTED C	IRCUIT - BUI	LDING 4				NT	NC	26		Р	GW
Local Address (wh	ere applicable)				Service	Resider	ntial Co	mmerci	al Industri	al	Combine	d Agricultural
36 INDUSTRIAL DI	RIVE		Connection	ns		1						
Towns Served: ST	AFFORD					'				1		
Contact Role(s):	Legal Contact	1		I	"							
Name				Or	ganization						Job Title	!
Mr. Brian Santos				Tti	m Technolog	gies			Eh&S Mai	nager	r	
Mailing Address L	ine One		Mailing	Address	s Line Two				City		State	Zip Code
4 Old Monson Ro	ad							Staffor	d		СТ	06076
Business Phone	Extension	Fax		Mobile Phone Emergen			y Phone	Email A	Email Address			
860-315-0911		860-684-	0714			413-813	-9707	brian.s	antos@ttmt	୭ttmtech.com		
Contact Role(s):	Administrative	Contact			1							

Please note the following:

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

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

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

End of schedule

	Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule PWS Name Classification Population Owner Type Primary Source									
PWS ID PWS Name					ssification	Population	Owner Type	Primary Source		
CT1341373	TTM TECHNOLOGIES, INC - BUILDING 6				NTNC	26	Р	GW		
Local Address (ocal Address (where applicable)			itial	Commercia	al Industri	al Combine	ed Agricultural		
20 INDUSTRIAL	PARK DRIVF			1						

Towns Served: STAFFORD			
Monitorin	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/19 - 12/31/27		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		•
	7/1/24 - 9/30/24		
Lead And Copper (PBCU)	· · · · · · · · · · · · · · · · · · ·	5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/23	6/1-9/30	Complete
	1/1/24 - 12/31/24	6/1-9/30	
	1/1/25 - 12/31/25	6/1-9/30	
Physical Parameters (PPS)	1,1,23 12,31,23		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	Concection i ciriou	Complete
Science from inventory of Active Sumpling Forms	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		Complete
	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)	7/1/24-3/30/24		
		1 vautina	(DT) may three years
Inorganic Chemicals (IOCS) Sampling Point (Sampling Point ID)	Monitoring Poriod	Collection Period	(RT) per three years Compliance Status
	Monitoring Period	Conection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
ALTERNATION (ALONA)	1/1/26 - 12/31/28	4	/
Nitrate And Nitrite (NOX)	Advattantan Daniad		outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		() · ·
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/21 - 12/31/23		Complete
	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		
Organic Chemicals (VOCS)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		

	Connecticut Dej	partment of	Public H	lealth	D	rinking	Water	Section	1	
	Water Qu	iality Monito	oring an	d Con	npl	liance S	Schedu	le		
PWS ID	PWS Name				Cla	ssification	Population	Owner Type	e Pri	mary Source
CT1341373	TTM TECHNOLOGIES, INC			NTNC	26	Р		GW		
Local Address (where applicable)		Service	Residen	tial	Commerci	al Industr	ial Combin	ned	Agricultural
20 INDUSTRIAL PARK DRIVE		Connections	ons		1					
Towns Served:	STAFFORD							·		
		Other Co	mpliance	Sched	lule	es				
Compliance Sch	hedule Activity				Due	Date	Achie	eved Date		
SUBMIT LEAD S	SERVICE LINE INVENTORY			1	0/16	5/2024				
COMPLETE INIT	FIAL LSL INVENTORY			1	0/16	5/2024				
CROSS CONNEC	CTION SURVEY REPORT				3/1/	′2025				
	Water	System Facili	ty and Sar	npling	Po	int Inve	ntory			
Water						To	otal Lead	and		
. 14/4	Continue Frankliker	Communities of Deline	Course Iller or Del							

	Water System Facility and Sampling Point Inventory										
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description		Total Coliform Rule	Lead and Copper	Asbestos		Stage		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Status A	Nuic	naie Hei	Assestes	77 (7 2	. DDF K		
		BLDG6002	MENS ROOM	Α	Υ	N	Υ	Υ			
		BLDG6004	LADIES ROOM	Α	Υ	N	Υ	Υ			
		BLDG6006	KITCHEN	Α	Υ	N	Υ	Υ			
		BLDG6008	MOP SINK	Α	Υ	N	Υ	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							
60838	WELL #1	2	WELL #1	Α							
60842	TREATMENT PLANT										

2 WELL #1	Α		
Certified Opera	tor Information		
STEM (WSF ID: 00600)		
			Certification
Operator Type	Certification(s)		Expiration
CHIEF OPERATOR	WATER TREATMENT PLANT	OPERATOR - CLASS II	6/30/2024
	DISTRIBUTION SYSTEM OPER	RATOR - CLASS III	6/30/2026
ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPER	RATOR - CLASS I	6/30/2025
	WATER TREATMENT PLANT	OPERATOR - CLASS II	6/30/2026
NT (WSF ID: 60842)			
LANT			Certification
Operator Type	Certification(s)		Expiration
CHIEF OPERATOR	WATER TREATMENT PLANT	OPERATOR - CLASS II	6/30/2024
	DISTRIBUTION SYSTEM OPER	RATOR - CLASS III	6/30/2026
ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPER	RATOR - CLASS I	6/30/2025
	WATER TREATMENT PLANT	OPERATOR - CLASS II	6/30/2026
ASSIGNED OPERATOR	WATER TREATMENT PLANT	OPERATOR - CLASS I	3/31/2025
Contact In	formation		
Organizatio	n	Job Title	2
Ttm Printed	l Circuit Group, Inc	Ehs Manager	
	Certified Operator STEM (WSF ID: 00600) Operator Type CHIEF OPERATOR ASSIGNED OPERATOR NT (WSF ID: 60842) LANT Operator Type CHIEF OPERATOR ASSIGNED OPERATOR ASSIGNED OPERATOR Contact In Organizatio	Certified Operator Information (STEM (WSF ID: 00600) Operator Type Certification(s) CHIEF OPERATOR WATER TREATMENT PLANT ODERATOR DISTRIBUTION SYSTEM OPER WATER TREATMENT PLANT OPERATOR DISTRIBUTION SYSTEM OPER WATER TREATMENT PLANT OPERATOR CErtification(s) CHIEF OPERATOR WATER TREATMENT PLANT ODISTRIBUTION SYSTEM OPERATOR DISTRIBUTION SYSTEM OPERATOR DISTRIBUTION SYSTEM OPERATOR WATER TREATMENT PLANT OPERATOR WATER TREATMENT	Certified Operator Information (STEM (WSF ID: 00600) Operator Type Certification(s) CHIEF OPERATOR WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS III ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS II NT (WSF ID: 60842) LANT Operator Type Certification(s) CHIEF OPERATOR WATER TREATMENT PLANT OPERATOR - CLASS III DISTRIBUTION SYSTEM OPERATOR - CLASS III ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS II WATER TREATMENT PLANT OPERATOR - CLASS II ASSIGNED OPERATOR WATER TREATMENT PLANT OPERATOR - CLASS II Contact Information Organization Job Title

Zip Code

06075

State

CT

City

Stafford

Emergency Phone Email Address

Mailing Address Line Two

Mobile Phone

P.O. Box 145

Fax

Mailing Address Line One

Extension

4 Old Monson Road

Business Phone

(Connectic	ut Depa	rtme	ent of	Public	Health	Drir	iking	Water	Sec	ction	
	Wat	ter Qua	lity N	Ionite	oring a	nd Con	nplia	nce S	Schedul	le		
PWS ID	PWS Name						Classif	ication	Population	Own	er Type	Primary Source
CT1341373	TTM TECHNOLO	GIES, INC - B	UILDING	3 6			NT	NC	26		Р	GW
Local Address (wh	nere applicable)				Service	Resider	ntial Co	mmerci	al Industri	al (Combine	d Agricultural
20 INDUSTRIAL PA	20 INDUSTRIAL PARK DRIVE					ns		1				
Towns Served: ST	AFFORD											
860-746-6248 860-684-0714						860-209-8671 charles.ne			.nehrig@ttr	ntech	ı.com	
Contact Role(s):	Legal Contact, C	Owner										
Name				Or	ganization						Job Title	<u>;</u>
Mr. Brian Santos				Ttr	m Technolog	gies			Eh&S Mai	nager		
Mailing Address L	ine One		Mailing	Address	Line Two				City		State	Zip Code
4 Old Monson Ro	ad							Staffor	d		CT	06076
Business Phone	Extension	Fax		Mobile Phone Emerger			/ Phone	Email A	ddress			
860-315-0911		860-684-	0714			413-813	-9707	brian.s	antos@ttmt	tech.c	com	
Contact Role(s):	Administrative	Contact			<u>'</u>							

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule