	Connecticut Department Water Quality Mon				C	'		
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT1360142	STERLING MUNICIPAL BUILDING				NC	25	L	GW
Local Address	where applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
1183 PLAINFIE	LD PIKE	1						

Towns Serve	d: S	TERL	.ING
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TOWIS Served. STERLING			
Monito	oring Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID	D: 00600)		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		
Other Co	omnliance Schedules		

	Due Date

Compliance Schedule Activity Achieved Date CROSS CONNECTION EXEMPTION 3/1/2012

	Wat	er System Facili	ity and Sampling Po	oint Ir	nventoi	У		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage ? DBPR
00600	DISTRIBUTION SYSTEM	325	UNISEX LAVORATORY	Α	Υ			
		326	HANDICAP LAVORATORY	Α	Υ			
		327	KITCHEN SINK	Α	Υ			
		328	GIRLS LAVORATORY	Α	Υ			
		329	SAMPLE TAP	Α	Υ			
		4	DISTRIBUTION SYSTEM	Α	Υ			
		4-5	SAMPLE #5	- 1	Υ			
		4-6	SAMPLE #6	- 1	Υ			
		4-7	SAMPLE #7	- 1	Υ			
		4-8	SAMPLE #8	1	Υ			
		4-9	SAMPLE #9	1	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				

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

	Water Quality Mo				C	,		11	
PWS ID	PWS Name			Cla	ssification	Population	Owner Typ	e Pr	rimary Source
CT1360142	STERLING MUNICIPAL BUILDING				NC	25	L		GW
Local Address	(where applicable)	Service	Residen	itial	Commerci	al Industr	ial Comb	ned	Agricultural
1183 PLAINFIE	LD PIKE	Connections	1						

Connecticut Department of Public Health Drinking Water Section

Towns Served: STERLING **Water System Facility and Sampling Point Inventory Total** Lead and Water Sampling Point Sampling Point System Water System Facility **Coliform** Copper Staae ID **Description** Rule Tier Asbestos WQP 2 DBPR Facility ID Rule Status 2 WELL 1 10611 WELL 1 Α **Contact Information** Name Organization Job Title Sterling Mailing Address Line One Mailing Address Line Two Zip Code City State Emergency Phone Email Address **Business Phone Extension** Fax Mobile Phone Contact Role(s): Owner Organization Job Title Name Mr. Russell M. Gray Town of Sterling First Selectman Mailing Address Line One Mailing Address Line Two Citv State Zip Code 1114 Plainfield Parkway P.O. Box 157 06373-0157 Oneco CT **Business Phone** Mobile Phone **Emergency Phone Email Address** Extension Fax 860-564-2904 860-564-1660 selectman@sterlingct.us

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

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

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

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

End of schedule

	Connecticut De	•						ection	
	Water Qı	uality Monit	oring and	d Com	pliand	e Sch	redule		
PWS ID	PWS Name			(Classificat	ion Pop	oulation Ow	ner Type P	rimary Source
CT1360024		ND			NC		100	Р	GW
	ess (where applicable)		Service	Residenti			Industrial	Combined	Agricultural
41 POND S			Connections		1	L			
Towns Serv	ved: STERLING								
\\\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.	L		oring Requ	iiremen	its				
•	stem Facility: DISTRIBUTION	N SYSTEM (WSF II	D: 00600)					(>=)	
	iform (3100)			0.0 (4 (-	Dania d	C-11-			per quarter
	ling Point (Sampling Point ID)	line Deinte		Monitorin		Colle	ction Period	Compii	ance Status
Select	from Inventory of Active Samp	ling Points		4/1/24 - 6 7/1/24 - 9	-				
Physical I	Parameters (PPS)			7/1/24 3	7/30/24		1 ro	utine (RT)	per quarter
•	ling Point (Sampling Point ID)			Monitorin	g Period	Colle	ction Period		ance Status
	from Inventory of Active Sample	ling Points		4/1/24 - 6	_			•	
	· · · · · · · · · · · · · · · · · · ·			7/1/24 - 9	9/30/24				
Water Sys	stem Facility: ENTRY POINT	- PAVILION (WSF	ID: 00700)						
Nitrate (1040)						1 ro	utine (RT)	per quarter
Samp	ling Point (Sampling Point ID)			Monitorin	g Period	Colle	ction Period	Compli	ance Status
ENTR	Y POINT - PAVILION (3)			4/1/24 - 6	5/30/24				
				7/1/24 - 9	9/30/24				
Nitrite (1	•							=	RT) per year
	ling Point (Sampling Point ID)			Monitorin		Colle	ction Period		ance Status
ENTR	Y POINT - PAVILION (3)			1/1/23 - 1				Со	mplete
				1/1/24 - 1					
		055105 (14105 15		1/1/25 - 1	2/31/25				
•	stem Facility: ENTRY POINT	- OFFICE (WSF ID): 00/01)					(>=)	
Nitrate (-			Manitarin	a Daviad	Calla			per quarter
	ling Point (Sampling Point ID)				_	Collec	ction Period	Compil	ance Status
ENIK	Y POINT - OFFICE (3)			4/1/24 - 6 7/1/24 - 9					
Nitrite (1	1041)			11124-3	7, 30, 24		1	routine /E	T) per year
	ling Point (Sampling Point ID)			Monitorin	a Period	Collec	<u> </u>	-	ance Status
	Y POINT - OFFICE (3)			1/1/23 - 1					mplete
				1/1/24 - 1					
				1/1/25 - 1					
		Other Co	ompliance	Schedu	ules				
Compliance	e Schedule Activity				ue Date		Achieved	Date	
_	START UP COMPLETION			4/	15/2024				
CROSS CON	NNECTION SURVEY REPORT			3,	/1/2025				
	Water	System Facili	ty and Sar	npling I	Point Ir	nvento	ory		
•	Water System Facility	Sampling Point		nt		Total Coliforn	n Copper		Stage
Facility ID		ID	Description		Status	Rule	Rule Tie	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	N SYSTEM	Α	Υ			

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.

WITHIN 5 SERVICE CON

Α

Α

DOWNSTREAM WITHIN 5 SERVICE CON

UPSTREAM

	Water Quality N				C	,		,001011		
PWS ID	PWS Name			Cla	ssification	Population	Owi	ner Type	Primary Sou	ırce
CT1360024 RIVER BEND CAMPGROUND					NC	100		Р	GW	
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industr	ial	Combine	d Agriculti	ural
41 POND STRE	11 POND STREET Connections									

Connecticut Department of Public Health Drinking Water Section

Towns S	erved: S	STERLIN	١G
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			Matar Si	ıstam Easi	ility and S	Sampling Po	int Ir	wonto	~~			
			water 5	ystem rac	ility allu 3	amping Po	iiic ii					
Water	Markon C.		,	Camanlina Dain	. Committee	Defeat		Total	Lead and			<i>c.</i>
- /	water sy	stem Facility	-	Sampling Poin				Coliform				Stage
Facility ID				ID	Description	n	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
00700	ENTRY P	OINT - PAVILIO	ON	3	ENTRY POI	NT - PAVILI	Α					
00701	ENTRY P	OINT - OFFICE		3	ENTRY POI	NT - OFFICE	Α					
22257	PAVILION	N WELL #1		2	PAVILION '	WELL #1	Α					
22258	OFFICE V	VELL #2		2	OFFICE WE	LL #2	Α					
				Co	ntact Info	ormation						
Name					Organization					Job Title		
Mr. Antho	ny Sinko				Riverbend Ca	mpground		Ow	ner			
Mailing Ad	dress Lin	e One		Mailing Addre	ess Line Two			Ci	ity	State	Zip C	ode
41 Pond St				P O Box 23			On	есо		CT	063	73
Business	Phone	Extension	Fax	Мо	bile Phone	Emergency Pho	ne Em	nail Addre	SS			

860-564-0788

Contact Role(s): A	dministrative (Contact, Leg	al Conta	act, Owner					
Name				Organization				Job Title	
Ms. Deloris Sinko				Riverbend Ca	ampground		Owner		
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code
41 Pond St			P O Box	x 23		Oneco		СТ	06373
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress		
860-564-3440		860-564-0	0788		860-564-7747	www.riv	erbendfun.c	com	

860-564-7747

riverbendcamp1@gmail.com

860-861-2788

Contact Role(s): Legal Contact, Owner

Please note the following:

860-564-3440

- 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.
- 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

Connection	cut Department	of Public Health	Drinl	king Water S	Section	
Wa	iter Quality Mo	nitoring and Com	nlian	ce Schedule		
PWS ID PWS Name	Quintity 110	8 41141 60111		ation Population C		Primary Source
CT1360094 SUN RIDGE RES	ORT CAMPGROUND		NC	50	Р	GW
Local Address (where applicable)		Service Resident	tial Com	mercial Industrial	Combine	ed Agricultura
131 CALVIN FRENCH ROAD		Connections		1		
Towns Served: STERLING			'	1		1
		nitoring Requiremen	nts			
Water System Facility: DISTI	RIBUTION SYSTEM (W	SF ID: 00600)				
Total Coliform (3100)	- 4				· -) per quarte
Sampling Point (Sampling F		Monitorii		Collection Perio	od Com _l	oliance Status
Select from Inventory of Act	tive Sampling Points	4/1/24 -				
DI 1 ID (DDS)		7/1/24 -	9/30/24		/==	
Physical Parameters (PPS)	Daint (D)	A down it out	na Davisa		· -) per quarte
Sampling Point (Sampling F	•	<i>Monitorii</i> 4/1/24 -		Collection Period 5/1-6/30	oa comp	oliance Status
Select from Inventory of Act	tive Sampling Points	7/1/24 -		3/1-0/30		
Water System Facility: ENTR	PV DOINT /W/SE ID: 007	· · ·	9/30/24			
Nitrate And Nitrite (NOX)	TI FOINT (W3F ID. 007	00)			1 routino	(RT) per year
Sampling Point (Sampling F	Point ID)	Monitorii	na Perioc	l Collection Perio		oliance Status
ENTRY POINT (3)	יטווניוטן	1/1/23 - :	_		_	Complete
LIVINI I OIIVI (5)		1/1/24 - 1				complete
		1/1/25 - 1				
	Otho	r Compliance Sched				
Committee Colonial Activities	Otile			Antino	- d D -d -	
Compliance Schedule Activity	201		Due Date	Acnieve	ed Date	
SEASONAL START UP COMPLETIC			5/1/2024			
CROSS CONNECTION SURVEY RE			3/1/2025			
	Water System Fa	cility and Sampling	Point	Inventory		
Water System Water System Facility	. Campling D	oint Sampling Point		Total Lead a		Chara
System - water system Facility Facility ID	, Sumpling Po ID	Description	.	Coliform Coppe Rule Rule Ti		Stage s WQP 2 DBF
00600 DISTRIBUTION SYSTEM		DISTRIBUTION SYSTEM	<u>Statu</u> A	Y	ier Asbesto	3 WQ1 2 DD1
00000 DISTRIBUTION STSTEM		AM WITHIN 5 SERVICE CON		'		
	UPSTREA					
00700 ENTRY POINT	3	ENTRY POINT	Α			
52264 DRILLED WELL #2	2	DRILLED WELL #2	A			
56663 HYDROPNEUMATIC ST		DIVIDED WELL IIZ	,,			
TANK	1010102					
59756 DRILLED WELL #1	2	DRILLED WELL #1	Α			
	(Contact Information				
Name		Organization			Job Title	2
Mr. David Bishop		Sun Ridge Resort Campgro	ound	Officer		
Mailing Address Line One	Mailing Add	dress Line Two		City	State	Zip Code
vialling Address Line One	Ivialiling Aut	ar coo Enric 1 WO	1	City		
Mailing Address Line One Owner of Sun Ridge Resort Cam		French Road	S	terling	СТ	06377

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.

sunridge1@hotmail.com

401-447-0284

860-779-1512

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

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

	trace Estates						
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1360094	SUN RIDGE RESORT CAMPGROUND			NC	50	Р	GW
Local Address (v	vhere applicable)	Service	Residen	tial Commerc	ial Industri	al Combine	ed Agricultural
131 CALVIN FRE	NCH ROAD	Connections		1			
Towns Served: S	TERLING						

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 Con	npliance S	Schedul	e							
)	PWS Name	Classification	Population	Owner Type	Primary						
	_										

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1360134 WEIDELES PIZZA & PUB (ONECO COMMONS)			NC	37	Р	GW	
Local Address (where applicable)		Service	Residen	itial Commerc	ial Industri	al Combine	ed Agricultural
901 STERLING R	DAD	Connections		1			

Towns Served: STERLING

Monitoring Requirements										
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	00600)									
Total Coliform (3100)		1 rout	ine (RT) per quarter							
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status							
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23									
	1/1/24 - 3/31/24		Complete							
	4/1/24 - 6/30/24									
	7/1/24 - 9/30/24									
Physical Parameters (PPS)		1 rout	ine (RT) per quarter							
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status							
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23									
	1/1/24 - 3/31/24		Complete							
	4/1/24 - 6/30/24									
	7/1/24 - 9/30/24									

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		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	1/15/2021	

Public Notification Requirements										
	Compliance	nce Notice <u>Public Notification</u> <u>PN Ce</u>		PN Certi	<u>fication</u>					
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received				
Total Coliform M&R Violation	1/1/10 - 3/31/10	2	6/17/2010		6/27/2010					
GROUNDWATER RULE TT Violation	5/28/10 - 6/23/10	2	10/30/2010		11/9/2010					
Total Coliform MCL Violation	10/1/10 - 12/31/10	2	1/29/2011		2/8/2011					
Total Coliform MCL Violation	1/1/11 - 1/31/11	2	3/24/2011		4/3/2011					
Physical Parameters M&R Violation	1/1/10 - 3/31/10	3	5/18/2011		5/28/2011					
Physical Parameters M&R Violation	10/1/23 - 12/31/23	3	3/18/2025		3/28/2025					
Total Coliform M&R Violation	10/1/23 - 12/31/23	3	3/18/2025		3/28/2025					

Water System Facility and Sampling Point Inventory										
Water System Facility	Sampling Point ID	Sampling Point Description	Status	Dula		Asbestos		Stage 2 DBPR		
DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Υ						
	DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
	UPSTREAM	WITHIN 5 SERVICE CON	Α							
ENTRY POINT	3	ENTRY POINT	Α							
	Water System Facility DISTRIBUTION SYSTEM	Water System Facility DISTRIBUTION SYSTEM 4 DOWNSTREAM UPSTREAM	Water System Facility Distribution System A Distribution System DOWNSTREAM WITHIN 5 SERVICE CON UPSTREAM WITHIN 5 SERVICE CON	Water System Facility Description DISTRIBUTION SYSTEM A DOWNSTREAM WITHIN 5 SERVICE CON A UPSTREAM WITHIN 5 SERVICE CON A	Water System Facility DISTRIBUTION SYSTEM A DOWNSTREAM UPSTREAM WITHIN 5 SERVICE CON A Total Coliform Rule NOTE: The status of the status	Water System Facility DISTRIBUTION SYSTEM 4 DOWNSTREAM DOWNSTREAM UPSTREAM WITHIN 5 SERVICE CON A UPSTREAM Total Coliform Copper Rule Tier A Y DOWNSTREAM WITHIN 5 SERVICE CON A	Water System Facility Description Sampling Point Description A DISTRIBUTION SYSTEM A DOWNSTREAM WITHIN 5 SERVICE CON A UPSTREAM WITHIN 5 SERVICE CON A DOWNSTREAM WITHIN 5 SERVICE CON A	Water System Facility Description A DISTRIBUTION SYSTEM A DOWNSTREAM WITHIN 5 SERVICE CON A UPSTREAM WITHIN 5 SERVICE CON A UPSTREAM WITHIN 5 SERVICE CON A		

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

	Water Quality Monitoring and Compliance Schedule								
PWS ID PWS Name				Cla	ssification	Population	Owner Type	Primary Source	
CT1360134	WEIDELES PIZZA & PUB (ONECO COMMONS)				NC	37	Р	GW	
Local Address (w	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural		
901 STERLING R	Connections			1					

Connecticut Department of Public Health Drinking Water Section

	'	Water Sy	stem Faci	lity and S	Sampling Poir	nt In	vento	ry		
Water System Water S Facility ID 22705 WELL	ystem Facility		Sampling Poin ID 2	t Sampling Descriptio	n e	atus A	Total Coliform Rule		Asbestos	Stag WQP 2 DB
			Co		ormation					
Name			(Job Title	
Mr. Albert R. Gerva	asio		C	Oneco Comm	nons, Inc.		Lan	dlord		
Mailing Address Lin	e One		Mailing Addre	ss Line Two			С	ity	State	Zip Code
15 Jencks Road						Fos	ter		RI	02825
Business Phone	Extension	Fax	Mol	oile Phone	Emergency Phon	e Em	ail Addre	SS		
401-544-4454					401-397-3001					
Contact Role(s): Le	egal Contact									
Name			C	Organization					Job Title	
Ms. Linda A. Hawki	ins		C	Oneco Comm	nons		Ow	ner		
Mailing Address Lin	e One		Mailing Addre	ss Line Two			С	ity	State	Zip Code
901 Sterling Road						Ste	rling		СТ	06377
Business Phone	Extension	Fax	Mol	oile Phone	Emergency Phon	e Em	ail Addre	SS		
860-564-0033					401-255-9712	LIZ	ZYBSONE	CO@GMAIL	COM	
Contact Role(s): A	dministrative C	Contact. Ow	ner							

Please note the following:

Towns Served: STERLING

- 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.

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

End of schedule

	Connecticut	Departme	nt of	Public I	lealth	Dri	nking	Wa	ater S	ection			
		r Quality M					Ŭ						
PWS ID	PWS Name					Classi	fication	Popu	lation O	wner Type	Pri	mary Source	
CT1361033	1126 PLAINFIELD PI	IKE				1	NC	2	5	Р		GW	
Local Address ((where applicable)			Service	Resident	ial Co	ommercia	al In	dustrial	Combine	ed	Agricultural	
1126 PLAINFIEI	LD PIKE			Connections			1						
Towns Served:	STERLING												
		N	/lonito	ring Req	uiremer	nts							
Water System	n Facility: DISTRIB	UTION SYSTEM	(WSF ID	: 00600)									
Total Colifor	m (3100)								1 rc	outine (R	Г) р	er quarter	
Sampling	Point (Sampling Poin	t ID)			Monitorin	ng Per	iod Co	ollecti	ion Perio	d Com	plia	nce Status	
Select fro	m Inventory of Active	Sampling Points			10/1/23 -	12/31	./23				Con	nplete	
					1/1/24 -	3/31/	24				Con	nplete	
					4/1/24 -	6/30/	24						
					7/1/24 -	9/30/	24						
•	ameters (PPS)								1 rc	outine (R	Г) р	er quarter	
Sampling	Point (Sampling Poin	t ID)			Monitorin	_		ollecti	ion Perio	d Com	Compliance Status		
Select fro	m Inventory of Active	Sampling Points			10/1/23 -	-						nplete	
					1/1/24 -						Con	nplete	
					4/1/24 -								
					7/1/24 -	9/30/	24						
	n Facility: ENTRY P	OINT (WSF ID:	00700)										
	Nitrite (NOX)									=		er quarter	
	Point (Sampling Poin	t ID)			Monitorin	_		ollecti	ion Perio		_	nce Status	
ENTRY PO	DINT (3)				10/1/23 -							nplete	
					1/1/24 -						Con	nplete	
					4/1/24 -								
					7/1/24 -								
	W	ater System	Facilit	ty and Sa	mpling	Poin	it Inve	ntor	У				
Water		- "		- " -				tal	Lead an				
System Water	ter System Facility	Sampiin II		Sampling Po Description	int		n.	form ule	Coppe		oc l	Stage VQP 2 DBPR	
	TDIDLITION CVCTCM			DISTRIBUTIO	NI CVCTENA		utus	Y	Nule 116	ASDESIG	US V	VQF Z DDFN	
00600 DIST	TRIBUTION SYSTEM	DOWNS		WITHIN 5 SE			A	Y					
		UPST		WITHIN 5 SE			A						
00700 ENT	RY POINT	3		ENTRY POINT			A						
22828 WEI				WELL A	!		A						
22020 WEI	LL I				ti		A						
				act Infor	mation								
Name	-		Org	ganization						Job Titl	e		
Mr. Robert F. F		n a -11-	0 -1 -1	Dar T					neowner			7:- 0- 1	
Mailing Addres				Line Two				Ci	ty	State		Zip Code	
1126 Plainfield		P. O. Bo		- DI		DI-	Oneco	-1 -1		СТ		06373	
Business Pho		Fax			mergency								
860-564-823	35	_	959-92	29-1572	401-212-6	5229	rtryer2	гр@д	mail.com	1			

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.

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

Connecticut Department of Public Health Drinking Water Section											
Water Quality Monitoring and Con	npliance S	Schedul	e								
PWS Name	Classification	Population	Owner Type	Prim							

	20001 20001109 1 1011100	9 8		- 1		0 2 2 0 0 0 0 0 1		
PWS ID PWS Name					ssification	Population	Owner Type	Primary Source
CT1361033	1126 PLAINFIELD PIKE			NC	25	Р	GW	
Local Address (v	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural	
1126 PLAINFIEL	Connections			1				

Towns Served: STERLING

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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- 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

	Connecticu	л рера	rtment of	Public	пеани	וווע	ıkıng	; VV	ater	Se	ction	
	Wat	er Qual	lity Monit	oring ar	nd Con	iplia	nce S	Sch	edul	e		
PWS ID	PWS Name					Classif	ication	Popu	lation	Own	er Type Pi	rimary Sourc
CT1360154	ONECO MARKET					N	С	2	25		Р	GW
Local Address	(where applicable)			Service	Residen	tial Co	mmerci	al Ir	ndustria	al	Combined	Agricultura
1107 PLAINFIE	ELD PIKE			Connections	5		1					
Towns Served:	l: STERLING											
			Monit	oring Req	uireme	nts						
Water Syster	m Facility: DISTR I	BUTION SY	STEM (WSF I	D: 00600)								
Total Colifor	rm (3100)								1	rou	tine (RT)	per quarter
	g Point (Sampling Po	oint ID)			Monitori	ng Peri	od C	ollect	ion Per			ance Status
Select fro	om Inventory of Acti	ve Sampling	Points		10/1/23 -	12/31/	'23				Co	mplete
					1/1/24 -	3/31/2	4				Co	mplete
					4/1/24 -	6/30/2	4					
					7/1/24 -	9/30/2	4					
Physical Par	rameters (PPS)								1	rou	tine (RT)	per quarter
Sampling	g Point (Sampling Po	oint ID)			Monitori	ng Peri	od C	ollect	ion Per	riod	Compli	ance Status
Select fro	om Inventory of Acti	ve Sampling	Points		10/1/23 -	12/31/	'23				Co	mplete
					1/1/24 -	3/31/2	4				Co	mplete
					4/1/24 -	6/30/2	4					
					7/1/24 -	9/30/2	.4					
Water Syster	m Facility: ENTRY	POINT (W	/SF ID: 00700)									
Nitrate And	Nitrite (NOX)									1 r	outine (R	T) per year
Sampling	g Point (Sampling Po	oint ID)			Monitori	ng Peri	od C	ollect	ion Per	riod	Compli	ance Status
ENTRY PO	OINT (3)				1/1/23 -							mplete
					1/1/24 -						Co	mplete
						12/31/2	25					
					1/1/25 -							
	,	Water Sy	stem Facil	ity and Sa			t Inve	nto	ry			
Water					mpling		To	otal	Lead (
System Wa	ater System Facility		Sampling Point	Sampling Po	mpling	Poin	Coli	otal iform	Lead (oer	Ashartas	
System Wa Facility ID	ater System Facility		Sampling Point ID	Sampling Po	mpling	Poin:	To Coli Itus R	otal iform lule	Lead (oer	Asbestos	_
System Wa Facility ID		:	Sampling Point ID 4	Sampling Po Description	impling pint DN SYSTEM	Poin Sta	Coli tus R	otal iform	Lead (oer	Asbestos	Stage WQP 2 DBP
System Wa Facility ID	ater System Facility	:	Sampling Point ID 4 DOWNSTREAM	Sampling Po Description DISTRIBUTION WITHIN 5 SE	impling pint ON SYSTEM ERVICE CON	Sta	To Coli I <u>tus</u> R A	otal iform lule	Lead (oer	Asbestos	_
System Wa Facility ID 00600 DIS	ater System Facility STRIBUTION SYSTEM	:	Sampling Point ID 4 DOWNSTREAM UPSTREAM	Sampling Po Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE	impling Dint DN SYSTEM ERVICE CON	Sta	To Coli Itus R A A	otal iform lule	Lead (oer	Asbestos	_
System Wa Facility ID 00600 00700 ENT	STRIBUTION SYSTEM	:	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3	Sampling Po Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE ENTRY POIN	impling Dint DN SYSTEM ERVICE CON	Sta	To Coli A A A A	otal iform lule	Lead (oer	Asbestos	_
System Wa Facility ID 00600 00700 ENT	ater System Facility STRIBUTION SYSTEM	:	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2	Sampling Po Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE ENTRY POIN DUG WELL	impling DIN SYSTEM ERVICE CON T	Sta	To Coli Itus R A A	otal iform lule	Lead (oer	Asbestos	_
System Wa Facility ID 00600 00700 ENT	STRIBUTION SYSTEM	:	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2	Sampling Po Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE ENTRY POIN	impling DIN SYSTEM ERVICE CON T	Sta	To Coli A A A A	otal iform lule	Lead (oer	Asbestos	_
System War Facility ID 00600 DIS 00700 ENT 22936 WE	STRIBUTION SYSTEM STRY POINT ELL #1	:	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2 Cor	Sampling Po Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE ENTRY POIN DUG WELL	impling DIN SYSTEM ERVICE CON T	Sta	To Coli A A A A	otal iform lule	Lead (oer	Asbestos Job Title	_
System War Facility ID 00600 DIS 00700 ENT 22936 WE Name Jay Shri Krishr	STRIBUTION SYSTEM TRY POINT ELL #1 ne LLC	:	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2 Con	Sampling Po Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE ENTRY POIN DUG WELL Tact Information	impling DIN SYSTEM ERVICE CON T	Sta	To Coli A A A A	otal iform lule	Lead (oer		WQP 2 DBP
System War Facility ID 00600 DIS 00700 ENT 22936 WE Name Jay Shri Krishr Mailing Addre	STRIBUTION SYSTEM STRY POINT ELL #1 ne LLC ess Line One	:	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2 Cor	Sampling Po Description DISTRIBUTIO WITHIN 5 SE WITHIN 5 SE ENTRY POIN DUG WELL Tact Information	impling DIN SYSTEM ERVICE CON T	Sta	To Coli A A A A	otal iform cule Y	Lead (oer		
System War Facility ID 00600 DIS 00700 ENT 22936 WE Name Jay Shri Krishr Mailing Addre	STRIBUTION SYSTEM STRY POINT ELL #1 ne LLC ess Line One	:	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2 Con	Sampling Po Description DISTRIBUTION WITHIN 5 SE WITHIN 5 SE ENTRY POIN DUG WELL Extract Information S Line Two	oint ON SYSTEM ERVICE CON T	Sta	Colintus RAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	otal iform cule Y	Lead (Copp Rule	oer	Job Title	WQP 2 DBP
System War Facility ID 00600 DIS 00700 ENT 22936 WE Name Jay Shri Krishr	STRIBUTION SYSTEM STRY POINT ELL #1 ne LLC ess Line One	:	Sampling Point ID 4 DOWNSTREAM UPSTREAM 3 2 Con O Mailing Addres	Sampling Po Description DISTRIBUTION WITHIN 5 SE WITHIN 5 SE ENTRY POIN DUG WELL Extract Information S Line Two	impling DIN SYSTEM ERVICE CON T	Sta	Colintus RAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	otal iform cule Y	Lead (Copp Rule	oer	Job Title State	WQP 2 DBP

	Lonnecticu	it Depa	rtment o	f Public	Health	Drir	ıkıng	water	Section		
	Wat	er Qua	lity Moni	toring a	nd Con	nplia	nce S	chedul	le		
PWS ID	PWS Name					Classif	ication	Population	Owner Type	Primary Source	
CT1360154	ONECO MARKET			NC		С	25	Р	GW		
Local Address (wi	here applicable)			Service	Residen	tial Co	mmercia	al Industri	I Industrial Combined		
1107 PLAINFIELD	PIKE			Connection	ıs		1				
Towns Served: ST	ERLING				'			1	1	1	
Name			C	Organization Job Tit					Job Titl	e	
Mr. Sanjay Patel			D	And K LLC				Owner			
Mailing Address L	ine One		Mailing Addres	ss Line Two				City	State	Zip Code	
1107 Plainfield Pi	ke , P. O. Box 269						Sterling	;	СТ	06373	
Business Phone	Extension	Fax	Mob	ile Phone	Emergency	/ Phone	Email Address				
860-564-8181							onecomarket@gmail.com				
Contact Role(s):	Administrative C	ontact Leg	al Contact Ow	ner							

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