	Connecticut D	epartment of	Public Heal	th Drir	nking V	Water S	ection	
	Water (Quality Monit	oring and Co	omplia	nce Sc	hedule		
PWS ID	PWS Name		0				vner Type P	rimary Source
CT145002		NT		N		25	P	GW
	ress (where applicable)		Service Resi		mmercial	Industrial	Combined	
	9 BUCKLEY HIGHWAY		Connections	acritiar co	1	maastriar	Combined	Agricultural
	ved: UNION				1			
TOWIIS SEI	veu. ONION							
			oring Requirer	nents				
	stem Facility: DISTRIBUTION	ON SYSTEM (WSF II	D: 00600)					
	liform (3100)	_						per quarter
	oling Point (Sampling Point ID)			toring Peri		ection Period	-	iance Status
Selec	t from Inventory of Active Sam	npling Points		23 - 12/31/				omplete
				24 - 3/31/2			Co	omplete
				24 - 6/30/2				
			7/1/	24 - 9/30/2	.4			
-	Parameters (PPS)					1 rc		per quarter
	oling Point (Sampling Point ID)			toring Peri		ection Period		iance Status
Selec	t from Inventory of Active Sam	npling Points		23 - 12/31/				omplete
				24 - 3/31/2			Co	omplete
				24 - 6/30/2				
			7/1/	24 - 9/30/2	.4			
Water Sy	stem Facility: ENTRY POIN	IT (WSF ID: 00700)						
Nitrate A	And Nitrite (NOX)					•	1 routine (I	RT) per year
Samp	oling Point (Sampling Point ID)	Moni	toring Perio	od Coll	ection Period	d Compl	iance Status
ENTR	RY POINT (3)		1/1/2	23 - 12/31/2	23		Co	omplete
			1/1/2	24 - 12/31/2	24		Cd	omplete
			1/1/2	25 - 12/31/2	25			
	Wate	er System Facili	ty and Sampli	ng Point	t Invent	tory		
Water					Tota	ıl Lead an	d	
System	Water System Facility	Sampling Point	Sampling Point		Colifo	rm Copper		Stage
Facility ID)	ID	Description	Sta	itus Rul	e Rule Tie	r Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYST	EM A	Y P			
		DOWNSTREAM	WITHIN 5 SERVICE	CON A	4			
		UPSTREAM	WITHIN 5 SERVICE	CON A	4			
00700	ENTRY POINT	3	ENTRY POINT	A	4			
22421	WELL	2	WELL	A	Α			
61660	TREATMENT PLANT							
		Con	tact Informati	on				
Name			ganization				Job Title	
Mr. Art M	lurdock		O Travelers Restaura	ant			102 1100	
	ddress Line One	Mailing Address				City	State	Zip Code
	kley Highway	maning Addi Co.	2.110 1440		Union	0.01	CT	06076
123, Duck	,b				3111311		Ç 1	00070

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.

Emergency Phone Email Address

karen17@cox.net

Mobile Phone

Business Phone

860-684-4920

Extension

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

Fax

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

water Quality Monitoring and Comphanice beneaute										
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source		
CT1450024	TRAVELERS RESTAURANT				NC	25	Р	GW		
Local Address	(where applicable)	Service Residential Commercial Industrial Combined		ed Agricultural						
1257-1259 BU	CKLEY HIGHWAY	Connections			1					
		·			•	•		· · · · · · · · · · · · · · · · · · ·		

Towns Served: UNION

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 D Water (epartment of Quality Monito							
PWS ID	PWS Name	J			<u> </u>			wner Type P	rimary Source
CT1450214	UNION WEIGH STATIO	N			NC		25	S	GW
Local Address	s (where applicable)		Service	Residentia	al Comm	nercial I	ndustrial	Combined	Agricultura
INTERSTATE 8	* * * * * * * * * * * * * * * * * * * *		Connections		1	1			
Towns Served	d: UNION								
		Monito	ring Requ	iremen	ts				
Water Syste	em Facility: DISTRIBUTI	ON SYSTEM (WSF ID): 00600)						
Total Colifo	orm (3100)						1 r	outine (RT)	per quarter
Samplin	g Point (Sampling Point ID)		Monitoring	g Period	Collect	tion Perio	od Compli	ance Status
Select fr	om Inventory of Active Sar	npling Points		10/1/23 - 1	2/31/23			Со	mplete
				1/1/24 - 3	/31/24			Со	mplete
				4/1/24 - 6	/30/24				
				7/1/24 - 9	/30/24				
Physical Pa	rameters (PPS)						1 r	outine (RT)	per quarter
Samplin	g Point (Sampling Point ID)		Monitoring	g Period	Collect	tion Perio	od Compli	ance Status
Select fr	om Inventory of Active Sar	npling Points	·	10/1/23 - 1	2/31/23			Со	mplete
				1/1/24 - 3	/31/24			Со	mplete
				4/1/24 - 6	/30/24				
				7/1/24 - 9	/30/24				
Water Syste	em Facility: ENTRY POI	NT (WSF ID: 00700)							
Nitrate And	d Nitrite (NOX)							1 routine (F	T) per year
Samplin	g Point (Sampling Point ID)		Monitoring	g Period	Collect	tion Perio	od Compli	ance Status
ENTRY P	POINT (3)			1/1/23 - 12	2/31/23			Со	mplete
				1/1/24 - 12	2/31/24			Со	mplete
			_	1/1/25 - 12	2/31/25				
	Monthly Wat	er System Facili	ty (WSF) I	Level Mo	onitori	ing Rec	uirem	ents	
Water Syste	em Facility: ENTRY POIN	IT (WSFID: 00700)					•		
Analyte	Monitoring	Requirement (Summa	ry Type)	Opera	ting Limi	t		Samples R	eq/Month
рН	Entry Point	pH Monitoring (PHRD)		Minim	num: 7.0	PH		4	
Start Date	e: 9/1/2008		Complia	nce Histor	y:	Operati	ng Limit	Monito	ing
			Monitor	ing Period		-	nce Stat		nce Status:
			11/1/20	23 - 11/30/	2023				
			12/1/20	23 - 12/31/	2023				
			1/1/202	4 - 1/31/20	24				
			2/1/202	4 - 2/29/20	24				
				4 - 3/31/20					
		Other Co	mpliance	Schedu	ıles				
Compliance S	Schedule Activity				ue Date		Achieve	ed Date	
-	ECTION SURVEY REPORT			3/	1/2029				
	Wat	er System Facili	ty and Sar	mpling P	oint Ir	nvento	ry		
Water			•			Total	Lead a	nd	
	ater System Facility	Sampling Point	Sampling Poi	nt		Coliform			Stage
Facility ID	-		Description		Status	D. J.		ier Asbestos	_
00600 DI	STRIBUTION SYSTEM	3	GENERATED E	ВҮ ВАТСН	A	Υ			
			DISTRIBUTION		Α	Υ			
		DOWNSTREAM			Α				
		2011101112/11/1			, ,				

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.

	Water Quality Monito				C	,		
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT1450214 UNION WEIGH STATION				NC		25	S	GW
Local Address (v	vhere applicable)	Service	Residen	tial	Commerci	al Industri	al Combine	ed Agricultural

Connections

Connecticut Department of Public Health Drinking Water Section

INTERSTATE 84 WEST
Towns Served: UNION

	Wa	ter System Facili	ity and Sampling P	oint Ir	nvento	ry		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	tage DBPR
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
23033	WELL #1	2	WELL #1	Α				
55195	TREATMENT PLANT							

Certified Operator Information

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

Facility C	lassification: DISTRIBUTION SYSTEM	1		Certification
Operato	^r Name	Operator Type	Certification(s)	Expiration
GRANT,	SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2026
			DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2026

									-,,
			Co	ntact Inf	ormation				
Name				Organization	l	Job Title			
Mr. Joseph Giuliett	i			Department	of Transportation		Commissioner		
Mailing Address Line One Mailing Addr			Mailing Addr	ress Line Two			City	State	Zip Code
2800 Berlin Turnpik	æ					Newingt	on	СТ	06111
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Ad	ail Address		
860-594-3000									

Contact Role(s): Administrative Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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End of schedule