	Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source				
CT1460493	JOHANSEN PROPERTIES				NC	50	Р	GW				
Local Address (where applicable)  Service Residential Commercial Industrial Combined Agricult							ed Agricultural					

Connections

1

458 TALCOTTVILLE ROAD
Towns Served: VERNON

Towns Served: VERNON			
Monitor	ring Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	: 00600)		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 10/31/23		Complete
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	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		
Total Coliform (3100)		3 re	peat (RP) per period
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/14/23 - 10/19/23		Complete
	11/14/23 - 11/19/23		Complete
	11/14/23 - 11/19/23		Complete
	11/14/23 - 11/19/23		Complete
Total Coliform (3100)		3 temporary rou	tine (TR) 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
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	<b>Collection Period</b>	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		
Water System Facility: WELL (WSF ID: 20026)			
E. Coli (3014)		1 trigge	ered (TG) per period
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status

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.

	Connecticut De Water Qu	•	nt of Public H Onitoring an						
PWS ID	PWS Name	<u>U</u>			Classific			wner Type P	rimary Sourc
CT1460493	JOHANSEN PROPERTIES				NO	2	50	Р	GW
ocal Address (	(where applicable)		Service	Resident	ial Cor	nmercial	Industrial	Combined	Agricultura
158 TALCOTTV	ILLE ROAD		Connections			1			
Towns Served:	VERNON								l
		M	onitoring Requ	ıiremer	nts				
Water Systen	n Facility: WELL (WSF II								
E. Coli (3014	1)						1 tr	iggered (TG)	per period
-	Point (Sampling Point ID)			Monitorin	ng Perio	d Col	lection Perio		ance Status
WELL (2)			·	10/13/23 -	10/19/	23		Со	mplete
			-	11/13/23 -	11/19/	23			mplete
-			-	11/13/23 -	11/19/	23		Со	mplete
				11/13/23 -				Со	mplete
		Oth	er Compliance	Sched	ules				
Compliance Sc	hedule Activity				ue Dat	е	Achieve	ed Date	
RESPOND TO S	ANITARY SURVEY			9,	/13/201	.9			
1 ASSESSMEN	IT (MULTIPLE TC+)			9,	/22/202	3			
2 ASSESSMEN	IT (MULTIPLE TC+, 2ND IN 1	2M)		11	./17/20	23			
L2 ASSESSMEN	IT (MULTIPLE TC+, 2ND IN 1	2M)		12	/17/20	23			
		Public	Notification R	Require	ment	S			
			Compliance	Notice	P	ublic Not	<u>ification</u>	PN Cert	ification
/iolation/Situ	ation		Period	Tier	Red	uired	Performed	Due to DPH	Received
REVISED TOTA	L COLIFORM RULE (RTCR) T	T Violation	9/23/23 -	2	1/11	L/2024		1/21/2024	
REVISED TOTA	L COLIFORM RULE (RTCR) T	T Violation	11/18/23 -	2	1/11	L/2024		1/21/2024	
REVISED TOTA	L COLIFORM RULE (RTCR) T	T Violation	12/18/23 -	2	3/23	L/2024		3/31/2024	
	Wate	r System F	acility and Sai	mpling	Point	Inven	tory		
Water						Tot	al Lead a	nd	
•	ter System Facility		Point Sampling Poi	int		Colife			Stage
Facility ID		ID	Description		Stat			ier Asbestos	WQP 2 DBP
00600 DIS	TRIBUTION SYSTEM	4	DISTRIBUTIO		Α	Y			
			REAM WITHIN 5 SEF						
		UPSTRE	AM WITHIN 5 SEF	RVICE CON	Α				
00700 ENT	RY POINT	3	ENTRY POINT	=	Α				
20026 WE	LL	2	WELL		A				
			<b>Contact Infor</b>	mation					
Name			Organization					Job Title	
Mr. Ed Johans	en		Johansen Prope	rties					
Mailing Addres	ss Line One	Mailing A	ddress Line Two				City	State	Zip Code

Mobile Phone

860-729-5669

CT

Vernon

edjohansen1@hotmail.com

Emergency Phone Email Address

06066

458 Talcottville Rd

**Business Phone** 

Extension

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

Fax

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

	Tracer Quarrey	and and and	u 0011	прим	1100 0	oncadi			
PWS ID	PWS Name			Classific	cation P	opulation	Owner Type	Primary Source	
CT1460493	JOHANSEN PROPERTIES			N	С	50	Р	GW	
Local Address (	where applicable)	Service	Resider	ntial Cor	mmercial	Industri	al Combine	ed Agricultural	
458 TALCOTTV	ILLE ROAD	Connections			1				
Tarring Cominadi	VEDNION					*			

# Towns Served: VERNON 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.

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

End of schedule

	Connecticut Dep	partment of	Public H	ealth	Drin	ıking	Wa	ater Se	ection	
	Water Qu	ality Monit	oring and	d Com	plia	nce S	Sche	edule		
PWS ID	PWS Name								ner Type	Primary Sour
CT146002	NEWHOCA LODGE				N			25	P	GW
Local Add	lress (where applicable)		Service	Residen	tial Co	mmercia	al In	ndustrial	Combine	d Agricultu
195 GRIEF			Connections			1				0 11 11
	rved: VERNON									
		Monito	oring Requ	ireme	nts					
Water Sy	stem Facility: <b>DISTRIBUTION</b>	SYSTEM (WSF I	D: 00600)							
<b>Total Co</b>	oliform (3100)							1 ro	utine (RT	) per quarte
Sam	pling Point (Sampling Point ID)			Monitori	ng Perio	od Co	ollecti	ion Period	Comp	oliance Status
Selec	ct from Inventory of Active Sampl	ing Points	:	10/1/23 -	12/31/	23			(	Complete
				1/1/24 -	3/31/2	4				
				4/1/24 -	6/30/2	4				
				7/1/24 -	9/30/2	4				
Physical	Parameters (PPS)							1 ro	utine (RT	) per quarte
-	pling Point (Sampling Point ID)			Monitori	ng Perio	od Co	ollecti	ion Period	=	oliance Status
Selec	ct from Inventory of Active Sampl	ing Points	10/1/23 - 12/31/23			23			(	Complete
				1/1/24 -	3/31/2	4				·
				4/1/24 -						
				7/1/24 -						
Water Sy	stem Facility: ENTRY POINT	(WSF ID: 00700)								
	And Nitrite (NOX)							1	routine	(RT) per yea
	pling Point (Sampling Point ID)			Monitori	na Perio	od Co	ollecti	– ion Period		oliance Status
_	RY POINT (3)			1/1/23 -						Complete
	(0)			1/1/24 -						
				1/1/25 -						
		Other C	ompliance	· ·						
Complian	ce Schedule Activity		•		Due Dat	te		Achieved	Date	
	TO SANITARY SURVEY			7	/17/20:	19				
	Water	System Facili	ity and Sar	npling	Point	t Inve	ntor	rv		
Water		-	•			То	tal	Lead and	1	
System	Water System Facility	Sampling Point	Sampling Poi	nt		Coli	form	Copper		Stag
Facility ID	)	ID	Description		Sta	tus R	ule	Rule Tier	Asbesto	s WQP 2 DB
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	SYSTEM	P		Υ			
		DOWNSTREAM	WITHIN 5 SER	VICE CON	I A	A				
		UPSTREAM	WITHIN 5 SER	VICE CON	I A	A				
00700	ENTRY POINT	3	ENTRY POINT		P	A				
22428	WELL	2	WELL		Þ	4				
		Con	tact Inforr	nation						
Name			rganization						Job Title	<u> </u>
	in D. Sitler		ernon-Parks &	Recreatio	n Dept		Dire	ector		
	ddress Line One	Mailing Address						ity	State	Zip Code
								- 1	2.3.0	

Mobile Phone

Vernon

msitler@vernon-ct.gov

Emergency Phone Email Address

860-306-4753

 $\mathsf{CT}$ 

06066

120 South Street

**Business Phone** 

860-870-3520

Extension

Contact Role(s): Administrative Contact

Fax

860-870-3525

C	Connecticut	t Depa	rtment of	f Public	Health	Drir	ıking	g Water	Section					
	Wate	r Qua	lity Monit	coring a	nd Con	nplia	nce S	Schedul	le					
PWS ID P	WS Name					Classif	ication	Population	Owner Type	Primary Source				
CT1460024 N	EWHOCA LODGE	NC 25 P												
Local Address (wh	ere applicable)			Service	Resider	ntial Co	mmerci	al Industri	I Industrial Combined Ag					
195 GRIER ROAD				Connection	ns		1							
Towns Served: VEI	RNON								1	1				
Name			0	rganization					Job Titl	e				
Mr. Michael Purca	iro		To	own of Verno	n			Town Adr	ninistrator					
Mailing Address Li	ne One		Mailing Addres	s Line Two				City	State	Zip Code				
Memorial Building	,		14 Park Place				Vernor	า	СТ	06066				
Business Phone	Extension	Fax	Mob	ile Phone	Emergency	/ Phone	Email A	Address						
860-870-3670							mpurc	aro@vernor	n-ct.gov					
Contact Role(s):	egal Contact		,	"										

- 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.

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

End of schedule

Connecticut Depa	artment of	Public	Health I	Drin	king V	Water Se	ection	
Water Qua								
PWS ID PWS Name		011118 011		Classific			ner Type	Primary Source
CT1460104 500 EAST PLAZA				N		25	P	GW
Local Address (where applicable)		Service	Residentia		nmercial	Industrial	Combine	ed Agricultural
500 TALCOTTVILLE ROAD		Connection			1			8
Towns Served: VERNON								
	Monite	oring Red	quiremen	ts				
Water System Facility: DISTRIBUTION S	YSTEM (WSF I	D: 00600)						
Total Coliform (3100)						1 ro	utine (RT	) per quarter
Sampling Point (Sampling Point ID)			Monitoring	g Perio	d Coll	ection Period	=	oliance Status
Select from Inventory of Active Sampling	g Points		10/1/23 - 1	2/31/2	23		(	Complete
			1/1/24 - 3	3/31/24	1		(	Complete
			4/1/24 - 6	5/30/24	1			
			7/1/24 - 9	9/30/24	1			
Physical Parameters (PPS)						1 ro	utine (RT	) per quarter
Sampling Point (Sampling Point ID)			Monitoring	g Perio	d Coll	ection Period	Com	oliance Status
Select from Inventory of Active Sampling	g Points		10/1/23 - 1	2/31/2	23		(	Complete
			1/1/24 - 3	3/31/2	1		(	Complete
			4/1/24 - 6	5/30/24	1			
			7/1/24 - 9	9/30/24	1			
Water System Facility: ENTRY POINT (V	<b>WSF ID: 00700)</b>							
Nitrate And Nitrite (NOX)						1	routine	(RT) per year
Sampling Point (Sampling Point ID)			Monitoring	g Perio	d Coll	ection Period	Com	oliance Status
ENTRY POINT (3)			1/1/23 - 12	2/31/2	3		(	Complete
				0 /0 4 /0				
			1/1/24 - 12	2/31/2	4			Complete
			1/1/24 - 12 1/1/25 - 12					Complete
Water S	ystem Facili	ity and Sa	1/1/25 - 12	2/31/2	5	tory		Complete
Water S	ystem Facili	ity and Sa	1/1/25 - 12	2/31/2	5	•		Complete
Water System Water System Facility	Sampling Point	Sampling P	1/1/25 - 12 ampling F	2/31/2	Inven	al Lead and rm Copper		Stage
Water	•	•	1/1/25 - 12 ampling F	2/31/2	Inven  Tota  Colifo	al Lead and rm Copper		Stage
Water System Water System Facility	Sampling Point	Sampling P	1/1/25 - 12 ampling F	2/31/2 <b>Point</b>	Inven  Tota  Colifo	al Lead and rm Copper		
Water System Water System Facility Facility ID	Sampling Point ID	Sampling P Description DISTRIBUTION WITHIN 5 S	1/1/25 - 12 ampling F  coint ON SYSTEM ERVICE CON	2/31/2 Point  Stat	Inven  Toto Colifo tus Rul Y	al Lead and rm Copper		Stage
Water System Water System Facility Facility ID	Sampling Point ID 4	Sampling P Description DISTRIBUTION WITHIN 5 S	1/1/25 - 12 ampling F coint ON SYSTEM ERVICE CON ERVICE CON	2/31/2 Point  State A	Inven Toto Colifo cus Rul	al Lead and rm Copper		Stage
Water System Water System Facility Facility ID	Sampling Point ID 4 DOWNSTREAM	Sampling P Description DISTRIBUTION WITHIN 5 S	1/1/25 - 12 ampling F coint ON SYSTEM ERVICE CON ERVICE CON	2/31/2 Point  State A	Inven Tota Colifo Rul Y	al Lead and rm Copper		Stage
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM	Sampling Point ID 4 DOWNSTREAM UPSTREAM	Sampling P Description DISTRIBUTION WITHIN 5 S	1/1/25 - 12 ampling F coint ON SYSTEM ERVICE CON ERVICE CON	2/31/2 Point Star A A	5 Inven Tota Colifo sus Rul	al Lead and rm Copper		Stage
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM  00700 ENTRY POINT	Sampling Point ID  4  DOWNSTREAM  UPSTREAM  3 2	Sampling P Description DISTRIBUTION WITHIN 5 S WITHIN 5 S ENTRY POIN	1/1/25 - 12 ampling F  coint ON SYSTEM ERVICE CON ERVICE CON	Star A A	5 Inven Tota Colifo sus Rul	al Lead and rm Copper		Stage
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM  00700 ENTRY POINT	Sampling Point ID  4  DOWNSTREAM UPSTREAM 3 2	Sampling P Description DISTRIBUTION WITHIN 5 S WITHIN 5 S ENTRY POIN	1/1/25 - 12 ampling F  coint ON SYSTEM ERVICE CON ERVICE CON	Star A A	5 Inven Tota Colifo sus Rul	al Lead and rm Copper		Stage os WQP 2 DBPR
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM  00700 ENTRY POINT 22434 WELL	Sampling Point ID  4  DOWNSTREAM UPSTREAM 3 2  Con	Sampling P Description DISTRIBUTION WITHIN 5 S WITHIN 5 S ENTRY POIN WELL	1/1/25 - 12 ampling F  coint ON SYSTEM ERVICE CON ERVICE CON T	Star A A	Tota Colifo Rul Y	al Lead and rm Copper	l r Asbesto	Stage os WQP 2 DBPR
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM  00700 ENTRY POINT 22434 WELL	Sampling Point ID  4  DOWNSTREAM UPSTREAM 3 2  Con	Sampling P Description DISTRIBUTION WITHIN 5 S WITHIN 5 S ENTRY POIN WELL Etact Info rganization ew 500 East,	1/1/25 - 12 ampling F  coint ON SYSTEM ERVICE CON ERVICE CON T	Star A A	Tota Colifo Rul Y	nl Lead and rm Copper e Rule Tie	l r Asbesto	Stage os WQP 2 DBPR
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM  00700 ENTRY POINT 22434 WELL  Name Mr. Frederick P. Konon	Sampling Point ID  4  DOWNSTREAM UPSTREAM 3 2  Con	Sampling P Description DISTRIBUTION WITHIN 5 S WITHIN 5 S ENTRY POIN WELL Etact Info rganization ew 500 East,	1/1/25 - 12 ampling F  coint ON SYSTEM ERVICE CON ERVICE CON T	Star A A A A	Tota Colifo Rul Y	Lead and rm Copper e Rule Ties  Owner  City	r Asbesto	Stage os WQP 2 DBPR
Water System Water System Facility Facility ID  00600 DISTRIBUTION SYSTEM  00700 ENTRY POINT 22434 WELL  Name Mr. Frederick P. Konon Mailing Address Line One	Sampling Point ID  4  DOWNSTREAM UPSTREAM 3 2  Con On No Mailing Address	Sampling P Description DISTRIBUTION WITHIN 5 S WITHIN 5 S ENTRY POIN WELL Etact Info rganization ew 500 East,	1/1/25 - 12 ampling F  coint ON SYSTEM ERVICE CON ERVICE CON T	Stan A A A A	Tota Colifo Rus Y	Dead and rm Copper e Rule Ties  Owner  City  Err	Job Title	Stage os WQP 2 DBPR

Contact Role(s): Administrative Contact, Legal Contact

	Connecticut	: Depa	rtment o	of Public	: Health	Drir	ıking	g Water	Section	
	Wate	r Qua	lity Moni	itoring a	and Con	nplia	nce S	Schedul	e	
PWS ID	PWS Name					Classifi	cation	Population	Owner Type	Primary Source
CT1460104	500 EAST PLAZA					N	С	25	Р	GW
ocal Address (w	here applicable)			Service	Resider	ntial Co	mmerci	al Industri	al Combine	ed Agricultural
500 TALCOTTVILL	E ROAD			Connectio	ons		1			
Towns Served: VI	ERNON									
Name				Organization					Job Title	9
New 500 East LLO	2									
Mailing Address I	ine One		Mailing Addre	ess Line Two				City	State	Zip Code
14 Caisson Rd							Colche	ster	СТ	06415
Business Phone	e Extension	Fax	Мо	bile Phone	Emergenc	y Phone	Email A	Address		
Contact Role(s):	Owner		-		*					

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

End of schedule

	Connecticut Departme	ent of Pub	lic Healt	h Di	rinking	g Water S	Section		
	Water Quality M				`				
PWS ID	PWS Name	10111011118	5 ana do	_			Owner Type Pr	imary Source	
CT1460134	ITALIAN SOCIAL CLUB OF ROCKVILLE				NC	25	Р	GW	
Local Address (	where applicable)	Service	Reside	ntial	Commerc	ial Industrial	Combined	Agricultural	
56 SNIPSIC STR	EET	Conne	ctions		1				
Towns Served:	VERNON		-			<u> </u>			
	N	/lonitoring	Requirem	ents	;				
Water System	Facility: <b>DISTRIBUTION SYSTEM</b>	(WSF ID: 0060	00)						
<b>Total Colifor</b>	m (3100)					1 :	routine (RT) բ	er quarter	
Sampling	Point (Sampling Point ID)		Monito	ring P	Period C	Collection Peri	od Compli	ance Status	
Select fro	m Inventory of Active Sampling Points		10/1/23	3 - 12/	31/23		Co	mplete	
			1/1/24						
			4/1/24	-					
			7/1/24	l - 9/3	0/24				
•	ameters (PPS)						routine (RT) p	-	
Sampling Point (Sampling Point ID)  Monitoring Period Collection Period Compliance Statu									
Select from	m Inventory of Active Sampling Points		10/1/23				Col	mplete	
			1/1/24						
			4/1/24 7/1/24						
Water System	n Facility: ENTRY POINT (WSF ID:	00700\	7/1/22	- 9/3	0/24				
	Nitrite (NOX)	00700)					1 routine (R	T) per vear	
	Point (Sampling Point ID)		Monito	rina P	Period (	Collection Peri	•	ance Status	
ENTRY PO			1/1/23					mplete	
	V-7		1/1/24					<u> </u>	
			1/1/25					_	
	Publ	ic Notificati	ion Requi	eme	ents				
		Complian	ice Notic	ce	Public N	<u>lotification</u>	PN Cert	<u>ification</u>	
Violation/Situ	ation	Period		r	Required	Performed	Due to DPH	Received	
REVISED TOTAL	L COLIFORM RULE (RTCR) TT Violation	6/3/17 - 5/	9/18 2		3/25/2018	}	4/4/2018		
REVISED TOTAL	L COLIFORM RULE (RTCR) TT Violation	6/30/17 - 5/	/9/18 2		3/25/2018	}	4/4/2018		
REVISED TOTAL	L COLIFORM RULE (RTCR) TT Violation	11/30/17 - 5	/9/18 2		3/25/2018		4/4/2018		
	Water System	Facility and	d Samplin	g Po	int Inve	entory			
Water					Т	otal Lead a	nd		
		g Point Sampli	_			liform Coppe		Stage	
Facility ID					Jiuius		ier Asbestos	WQP 2 DBPR	
00600 DIST			BUTION SYSTE		A	Υ			
		STREAM WITHIN			Α				
00700 FNT	UPSTI		N 5 SERVICE CO	NΙ	Α				
		B ENTRY	FUINT		Α				
22436 WEI		2 WELL			A				
		Contact I	nformatio	n					

Italian Social Club of Rockvil

Organization

Mobile Phone

Mailing Address Line Two

Name

Mr. Mike Francis

**Business Phone** 

PO Box 192

Mailing Address Line One

Extension

Fax

Job Title

State

 $\mathsf{CT}$ 

Zip Code

06066

President

City

Vernon

Emergency Phone Email Address

(	Connecticu	t Depa	rtmer	nt of Public	Health	n Drir	nking	Water	Section				
	Wate	er Qua	lity Mo	onitoring a	ind Con	nplia	nce S	Schedul	le				
PWS ID	PWS Name					Classif	ication	Population	Owner Type	Primary Source			
CT1460134 I	TALIAN SOCIAL C	LUB OF RO	CKVILLE			N	IC	25	Р	GW			
Local Address (wh	nere applicable)			Service	Resider	ntial Co	Commercial Industrial Combined Agricu						
56 SNIPSIC STREE	T			Connectio	ns		1						
Towns Served: VE	RNON												
000-073-3340	_	000-073-	2002	000-223-2020			ппкеш	acumai kiic.	COITI				
Contact Role(s):	Legal Contact												
Name				Organization					Job Titl	e			
Mr. Matthew Fisc	cher			Italian Soc. Cl	ub of Rockv	ville		President					
Mailing Address L	ine One		Mailing A	ddress Line Two				City	State	Zip Code			
P.O. Box 192			Italian So	cial Club of Rockv	ille		Rockvil	le	СТ	06066			
Business Phone	Extension	Fax		Mobile Phone	Emergenc	y Phone	Email A	Address	,				
860-205-9071							matt.de	ogman.fisch	er22@gmail.	com			
Contact Role(s):	Administrative C	ontact, Leg	al Contac	t, Owner			•						

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

End of schedule

Connecticut Depart Water Qualit					_		ction	
PWS ID PWS Name		<u> </u>		lassific			ner Type P	rimary Source
CT1460254 CAMP NEWHOCA PARK				NC		25	P	GW
Local Address (where applicable)		Service	Residentia		nmercial		Combined	
GRIER ROAD		Connection		21 COI	1	maastriar	Combined	/ Igricaltural
Towns Served: VERNON					-			
Towns served. VERNON	Monito	ring Dog	iromon	t c				
Water System Facility: <b>DISTRIBUTION SYST</b>			quiremen	ts				
	LIVI (VV3F IL	J. 00000)				1	tine (DT)	
Total Coliform (3100)			Monitorina	. Dorio	d Collo			per quarter
Sampling Point (Sampling Point ID)	!ata		Monitoring			ction Period	Compi	iance Status
Select from Inventory of Active Sampling Po	ints		4/1/24 - 6					
			7/1/24 - 9	/30/24			(>=\	
Physical Parameters (PPS)								per quarter
Sampling Point (Sampling Point ID)			Monitoring			ction Period	Compi	iance Status
Select from Inventory of Active Sampling Po	ints		4/1/24 - 6					
			7/1/24 - 9	/30/24	<b>.</b>			
Water System Facility: ENTRY POINT (WSF	· ID: 00700)							
Nitrate And Nitrite (NOX)							<del>-</del>	RT) per year
Sampling Point (Sampling Point ID)			Monitoring			ction Period		iance Status
ENTRY POINT (3)			1/1/23 - 12				Co	omplete
			1/1/24 - 12					
			1/1/25 - 12	2/31/2	5			
	Other Co	omplian	ce Schedu	les				
Compliance Schedule Activity			Dι	ie Date	е	Achieved	Date	
SEASONAL START UP COMPLETION			6/	1/2024	4			
Water Syst	tem Facili	ty and S	ampling P	oint	Invent	ory		
Water					Total	Lead and		
	mpling Point				Colifor		_	Stage
Facility ID	ID	Description		Stat		Rule Tier	Asbestos	WQP 2 DBPR
00600 DISTRIBUTION SYSTEM	4		ON SYSTEM	Α	Υ			
	WNSTREAM			Α				
	JPSTREAM	WITHIN 5 S	ERVICE CON	Α				
00700 ENTRY POINT	3	ENTRY POI	VT	Α				
22448 WELL	2	WELL		Α				
	Con	tact Info	rmation					
Name	Or	ganization					Job Title	
Mr. Martin D. Sitler	Ve	rnon-Parks	& Recreation	Dept	D	irector		
Mailing Address Line One Ma	ailing Address	Line Two				City	State	Zip Code
120 South Street					Vernon		СТ	06066
Business Phone Extension Fax	Mobil	e Phone	Emergency P	hone	Email Add	ress		
860-870-3520 860-870-352	!5		860-306-47	753	msitler@v	ernon-ct.gov		

Contact Role(s): Administrative Contact

(	Connecticu	t Depa	irtment c	of Public	Health	ı Drii	nking	g Water	Section			
	Wate	er Qua	lity Moni	toring a	nd Con	nplia	nce S	Schedul	le			
PWS ID P	WS Name					Classif	ication	Population	Owner Type	Primary Source		
CT1460254 C	AMP NEWHOCA	PARK				N	IC	25	Р	GW		
Local Address (wh	Service	Resider	ntial Co	mmerci	al Industri	al Combine	ed Agricultura					
GRIER ROAD				Connection	ns		1					
Towns Served: VE	RNON				'			1	1	,		
Name			(	Organization	rganization Job Title					e		
Mr. Michael Purc	aro		-	Town of Vernon				Town Administrator				
Mailing Address L	ine One		Mailing Addre	ess Line Two			City		State	Zip Code		
Memorial Building 14 Park Place							Vernon		СТ	06066		
Business Phone	Extension	Fax	Mo	bile Phone	Emergency	y Phone	Email Address					
860-870-3670							mpurcaro@vernon-ct.gov					
Contact Role(s):	Legal Contact						1					

- 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.

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End of schedule

	Connecticut Depart	tment of Public H	lealth	$\mathbf{D}$	rınkıng	, Water	Section	
	Water Qualit	y Monitoring and	d Con	npl	liance S	Schedul	e	
PWS ID PWS Name				Classification		Population	Owner Type	Primary Source
CT1463014			NC	37	Р	GW		
Local Address (	Service	Resider	ntial	Commerci	al Industri	al Combin	ed Agricultural	
101 FISH AND (	Connections			1				
Towns Sarvade	VEDNIONI	·						

Towns Served: VERNON			
Monitor	ing Requirements		
Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID:</b>	00600)		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		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	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		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	<b>Collection Period</b>	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 Cor	mpliance Schedules		
Compliance Schedule Activity	Due Date	Achieved D	ate

	Water System Facility and Sampling Point Inventory										
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α							
		TS1	MEN'S ROOM SINK	Α	Υ						
		TS2	WOMEN'S ROOM SINK	Α	Υ						
		TS3	KITCHEN SINK	Α	Υ						
00700	ENTRY POINT	3	ENTRY POINT	Α							
60771	WELL 1	2	WELL 1	Α							
62745	CARBON FILTER										

3/1/2029

CROSS CONNECTION EXEMPTION

Contact Information										
Name				Organization	1	Job Title				
Mr. Peter E Kasacel	eter E Kasacek Rockville Fish And Game Club 1St Vp									
Mailing Address Line One Mailing Addr				ess Line Two			City	State	Zip Code	
94 Seagraves Rd					Coventry	/	CT	06238		
Business Phone	Extension	Fax	Мо	obile Phone	Emergency Phone	Email Ac	ldress			
860-742-7074			86	0-377-8902	860-377-8902	petekasacek@gmail.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	Connectic	ut Depa	rtment of	Public	Health	Drir	nking	Water	Section			
	Wat	ter Qua	lity Monite	oring ar	nd Con	nplia	nce S	chedul	e			
PWS ID P	PWS Name Classification Population Owner Type Primary Source											
CT1463014 R	ROCKVILLE FISH AND GAME - TRAP AND SKEET NC 37 P G									GW		
Local Address (wh		Service	Resider	tial Co	mmercia	l Industri	al Combine	ed Agricultural				
101 FISH AND GAME ROAD				Connection	S		1					
Towns Served: VE	RNON								-			
Contact Role(s):	Administrative (	Contact										
Name			Or	ganization					Job Titl	9		
Mr. Greg Thomas			Ro	ckville Fish 8	k Game Clւ	ıb		Trustee				
Mailing Address Li	ne One		Mailing Address	Line Two				City	State	Zip Code		
P.O. Box 211							Vernon		СТ	06066		
Business Phone	Extension	Fax	Mobil	e Phone	Emergency	/ Phone	Email Address					
860-610-8150					860-818	-8903	gregthomas686@gmail.com					
Contact Role(s):	Legal Contact		1	<del>.</del>			•					

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