

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500052	JOHN DORR NATURE LAB	NTNC	30	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
220 NETTLETON ROAD	Connections	1			

Towns Served: WASHINGTON

Monitoring Requirements

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

Chlorine Residual (1012)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
Asbestos (1094)	1 routine (RT) per nine years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Haloacetic Acids (2456)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EQUIP RM 1F MN BLDG (EQ1FMB)	1/1/25 - 12/31/25	8/1-8/31	Complete
	1/1/26 - 12/31/26	8/1-8/31	
	1/1/27 - 12/31/27	8/1-8/31	
Total Trihalomethanes (2950)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WET LAB SINK 2F BARN (WL2FBARN)	1/1/25 - 12/31/25	8/1-8/31	Complete
	1/1/26 - 12/31/26	8/1-8/31	
	1/1/27 - 12/31/27	8/1-8/31	
Total Coliform (3100)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Lead And Copper (PBCU)	5 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/25 - 12/31/27	6/1-9/30	
Physical Parameters (PPS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>

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PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500052	JOHN DORR NATURE LAB	NTNC	30	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
220 NETTLETON ROAD	Connections	1			

Towns Served: WASHINGTON

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

1 routine (RT) per year				
Nitrate And Nitrite (NOX)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/25 - 12/31/25		Complete
		1/1/26 - 12/31/26		
		1/1/27 - 12/31/27		
Pesticides, Herbicides and PCBs-Phase II (SOC2)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/23 - 12/31/25		Complete
		1/1/26 - 12/31/28		
		1/1/29 - 12/31/31		
Pesticides, Herbicides and PCBs-Phase V (SOC5)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/23 - 12/31/25		Complete
		1/1/26 - 12/31/28		
		1/1/29 - 12/31/31		
Organic Chemicals (VOCS)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/25 - 12/31/25		Complete
		1/1/26 - 12/31/26		
		1/1/27 - 12/31/27		

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily
Start Date: 3/1/2012		Compliance History: Monitoring Period	Operating Limit Monitoring Compliance Status: Compliance Status:
		8/1/2025 - 8/31/2025	
		9/1/2025 - 9/30/2025	
		10/1/2025 - 10/31/2025	
		11/1/2025 - 11/30/2025	
		12/1/2025 - 12/31/2025	

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2026	

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule	Asbestos Rule Tier	WQP 2 DBPR	Stage
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500052	JOHN DORR NATURE LAB	NTNC	30	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
220 NETTLETON ROAD	Connections	1			

Towns Served: WASHINGTON

Water System Facility and Sampling Point Inventory						
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule Tier	Asbestos WQP 2 DBPR Stage
		AP11FBARN	APT 1 SINK 1F BARN	A	Y	1
		AP21FBARN	APT 2 SINK 1F BARN	A	Y	1
	DOWNSTREAM	WITHIN 5 SERVICE CON		A		
		EQ1FMB	EQUIP RM 1F MN BLDG	A	Y	1
		KS2FMB	KIT SINK 2F MN BLDG	A	Y	1
		NECK	NE CABIN KIT	A	Y	1
		NKIT	NELLS KIT	A	Y	1
		PKIT	PAYNE KIT	A	Y	1
	UPSTREAM	WITHIN 5 SERVICE CON		A		
		VABATH	VAN ALSTYNE BATH	A	Y	1
		WL2FBARN	WET LAB SINK 2F BARN	A	Y	1
00700	ENTRY POINT	3	ENTRY POINT	A		
10645	WELL #3	2	WELL #3	A		
10646	WELL #2	2	WELL #2	A		
10647	WELL #1	2	WELL #1	A		
45071	TREATMENT PLANT					
51751	ATMOSPHERIC STORAGE					
52036	WELL #4	2	WELL #6	A		

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 45071)

Facility Classification: CLASS 2 TREATMENT PLANT			Certification Expiration
Operator Name	Operator Type	Certification(s)	
GRANT, SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2026
PETITTI, ANDY	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2028
		WATER TREATMENT PLANT OPERATOR - CLASS I	12/31/2028

Contact Information

Name	Organization	Job Title			
John Dorr Nature Lab-Horace Mann School					
Mailing Address Line One		Mailing Address Line Two	City	State	Zip Code
231 W 246Th St			Bronx	NY	10471-3430
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
718-432-4000					
Contact Role(s):	Legal Contact, Owner				

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

PWS ID	PWS Name				Classification	Population	Owner Type	Primary Source
CT1500052	JOHN DORR NATURE LAB				NTNC	30	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
220 NETTLETON ROAD			1					
Towns Served: WASHINGTON								
Name			Organization			Job Title		
Mr. Gordon Jensen			Horace Mann School			Dir Facilites Mgmt		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code	
231 W 246Th St					Bronx	NY	10471	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
718-432-3989		860-868-1494			gordon_jensen@horacemann.org			

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

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	Classification	Population	Owner Type	Primary Source
CT1500102	SHEPAUG MIDDLE/HIGH SCHOOL	NTNC	770	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
159 SOUTH STREET	Connections	1			

Towns Served: WASHINGTON

Monitoring Requirements

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

Chlorine Residual (1012)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
Asbestos (1094)	1 routine (RT) per nine years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Disinfectant Byproducts - TTHM & HAA5 (DBP)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
HANDICAP BATH MS (SVS003)	1/1/25 - 12/31/25	7/1-7/31	Complete
	1/1/26 - 12/31/26	7/1-7/31	
	1/1/27 - 12/31/27	7/1-7/31	
Lead And Copper (PBCU)	10 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/25 - 12/31/27	6/1-9/30	
Physical Parameters (PPS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Water System Facility: **ENTRY POINT** (WSF ID: 00700)

Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		
Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
Pesticides, Herbicides and PCBs-Phase II (SOC2)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500102	SHEPAUG MIDDLE/HIGH SCHOOL	NTNC	770	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
159 SOUTH STREET	Connections	1			

Towns Served: WASHINGTON

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			
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			Complete
	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			
Organic Chemicals (VOCS)			1 routine (RT) per three years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/24 - 12/31/26			
	1/1/27 - 12/31/29			

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point RDC (EPRD)	Minimum: 0.2 MG/L	Continuous
Start Date:	Compliance History: Monitoring Period	Operating Limit	Monitoring
9/1/2013	8/1/2025 - 8/31/2025	Y	
	9/1/2025 - 9/30/2025	Y	
	10/1/2025 - 10/31/2025	Y	
	11/1/2025 - 11/30/2025	Y	
	12/1/2025 - 12/31/2025	Y	
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7 PH	Daily
Start Date:	Compliance History: Monitoring Period	Operating Limit	Monitoring
1/1/2002	8/1/2025 - 8/31/2025	Y	
	9/1/2025 - 9/30/2025	Y	
	10/1/2025 - 10/31/2025	Y	
	11/1/2025 - 11/30/2025	Y	
	12/1/2025 - 12/31/2025	Y	

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2026	

Water System Facility and Sampling Point Inventory

Water System	Water System Facility	Sampling Point	Sampling Point	Total Coliform	Lead and Copper	Stage

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500102	SHEPAUG MIDDLE/HIGH SCHOOL	NTNC	770	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
159 SOUTH STREET	1				

Towns Served: WASHINGTON

Facility ID	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2	DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
	DOWNSTREAM	WITHIN 5 SERVICE CON	A					
	SVS001	KITCHEN HANDWASH	A	Y	2	Y		
	SVS002	FACULTY OFFICE	A	Y	2	Y		
	SVS003	HANDICAP BATH MS	A	Y	2	Y		Y
	SVS004	HANDICAP BATH HS	A	Y	2	Y		
	SVS005	HOME EC SINK	A	Y	2	Y		
	SVS006	KITCHEN SINK 2	A	Y	2	Y		
	SVS007	NURSES ROOM	A	Y	2	Y		
	SVS008	OFFICE BATH	A	Y	2	Y		
	SVS009	FACULTY LADIES	A	Y	2	Y		
	SVS010	FACULTY MENS	A	Y	2	Y		
	SVS011	M.S. OFFICE BATH	A	Y	2	Y		
	SVS012	FRONT OFFICE BATH	A	Y	2	Y		
	SVS013	FACULTY BATH	A	Y	2	Y		
	SVS014	CUSTODIAL BATH	A	Y	2	Y		
	SVS015	H.S. BOYS LOCKER RM	A	Y	2	Y		
	SVS016	GIRLS POOL LOCKER RM	A	Y	2	Y		
	SVS017	SCIENCE LAB SINK	A	Y	2	Y		
	SVSAG001	BOTTLE STATION	A	Y	N	Y		
	SVSAG002	AGBLDG WOMEN SINK 1	A	Y	N	Y		
	SVSAG003	AGBLDG DOG SINK 1	A	Y	N	Y		
	UPSTREAM	WITHIN 5 SERVICE CON	A					
00700	ENTRY POINT	3	ENTRY POINT	A				
10650	WELL #3	2	WELL #3	A				
10651	WELL #1	2	WELL #1	A				
10652	WELL #2	2	WELL #2	A				
53624	UPPER ATMOSPHERIC STORAGE							
53626	LOWER ATMOSPHERIC STORAGE							
62829	PRESSURE TANK							
982	SHEPAUG MHS PLANT							

Certified Operator Information

Water System Facility: **SHEPAUG MHS PLANT (WSF ID: 982)**

Facility Classification:	CLASS 1 TREATMENT PLANT	Certification	Expiration
Operator Name	Operator Type	Certification(s)	
KILBOURN, ERIC M.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2028
KILBOURN, JORDAN H	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2026 9/30/2027

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

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CT1500102	SHEPAUG MIDDLE/HIGH SCHOOL	NTNC	770	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
159 SOUTH STREET		1			

Towns Served: WASHINGTON

Contact Information

Name	Organization	Job Title		
Mr. Donald J. O'leary	Regional School District 12	Facility Director		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
11A School St		Washington	CT	06794
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-868-6174		860-868-6103		860-868-6100 olearyd@region-12.org

Contact Role(s): **Administrative Contact**

Name	Organization	Job Title		
Dr. Donald Schels	Regional School District 12	Superintendent		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
11A School Street		Washington Depot	CT	06794
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-868-6100	6108	860-868-6103		schelsd@region-12.org

Contact Role(s): **Legal Contact**

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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

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End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500182	MAYFLOWER INN	NTNC	109	P	GW
Local Address (where applicable)	118 WOODBURY ROAD	Service Connections	Residential 10	Commercial	Industrial
				Combined	Agricultural

Towns Served: WASHINGTON

Monitoring Requirements

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

Chlorine Residual (1012)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		Complete
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 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		Complete
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		
Disinfectant Byproducts - TTHM & HAA5 (DBP)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
KITCHEN SINK #2 (MAYINN009)	1/1/25 - 12/31/25	9/1-9/30	Complete
	1/1/26 - 12/31/26	9/1-9/30	
	1/1/27 - 12/31/27	9/1-9/30	
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	1/1/25 - 12/31/27	6/1-9/30	
Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500182	MAYFLOWER INN	NTNC	109	P	GW
Local Address (where applicable)	118 WOODBURY ROAD	Service Connections	Residential 10	Commercial	Industrial
				Combined	Agricultural

Towns Served: WASHINGTON

Monitoring Requirements

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

Physical Parameters (PPS)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	1/1/26 - 1/31/26		Complete
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

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		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
Nitrate And Nitrite (NOX)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

Pesticides, Herbicides and PCBs-Phase II (SOC2)

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		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

Pesticides, Herbicides and PCBs-Phase V (SOC5)

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		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

Organic Chemicals (VOCS)

Organic Chemicals (VOCS)	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		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

Water System Facility: WELL #2 (WSF ID: 10653)

E. Coli (3014)	1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL #2 (2)	8/1/25 - 8/31/25		Complete

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500182	MAYFLOWER INN	NTNC	109	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
118 WOODBURY ROAD	Connections	10			

Towns Served: WASHINGTON

Monitoring Requirements

Water System Facility: WELL #2 (WSF ID: 10653)

E. Coli (3014)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
		9/1/25 - 9/30/25		Complete
		10/1/25 - 10/31/25		Complete
		11/1/25 - 11/30/25		Complete
		12/1/25 - 12/31/25		Complete
		1/1/26 - 1/31/26		Complete
		2/1/26 - 2/28/26		
		3/1/26 - 3/31/26		
		4/1/26 - 4/30/26		
		5/1/26 - 5/31/26		
		6/1/26 - 6/30/26		
		7/1/26 - 7/31/26		

Water System Facility: WELL #1 (WSF ID: 10654)

E. Coli (3014)	Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	WELL #1 (2)	8/1/25 - 8/31/25		Complete
		9/1/25 - 9/30/25		Complete
		10/1/25 - 10/31/25		Complete
		11/1/25 - 11/30/25		Complete
		12/1/25 - 12/31/25		Complete
		1/1/26 - 1/31/26		Complete
		2/1/26 - 2/28/26		
		3/1/26 - 3/31/26		
		4/1/26 - 4/30/26		
		5/1/26 - 5/31/26		
		6/1/26 - 6/30/26		
		7/1/26 - 7/31/26		

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Maximum: 0.2 MG/L	Daily
Start Date:	Compliance History:	Operating Limit	Monitoring
1/1/2017	Monitoring Period	Compliance Status:	Compliance Status:
	8/1/2025 - 8/31/2025		
	9/1/2025 - 9/30/2025		
	10/1/2025 - 10/31/2025		
	11/1/2025 - 11/30/2025		
	12/1/2025 - 12/31/2025		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500182	MAYFLOWER INN	NTNC	109	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
118 WOODBURY ROAD	Connections	10			

Towns Served: WASHINGTON

Water System Facility: **ENTRY POINT (WSFID: 00700)**

Analyte	Monitoring Requirement (Summary Type)	Operating Limit		Samples Req/Month	
		Minimum:	6.4 PH	Daily	Monitoring
pH	Entry Point pH Monitoring (PHRD)				Compliance Status:
Start Date: 12/1/2008		Compliance History:	Operating Limit	Monitoring	
		Monitoring Period	Compliance Status:	Compliance Status:	
		8/1/2025 - 8/31/2025			
		9/1/2025 - 9/30/2025			
		10/1/2025 - 10/31/2025			
		11/1/2025 - 11/30/2025			
		12/1/2025 - 12/31/2025			

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2026	

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total		Lead and Coliform Rule		Copper Rule Tier		Asbestos WQP 2 DBPR		Stage
				Status	Rule	Y	N	Y	N	Y	N	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y							
		DOWNSTREAM	WITHIN 5 SERVICE CON	A								
		MAYINN001	MAIN BLDG KITCHEN	A	Y		N					Y
		MAYINN002	MAIN BLDG BAR	A	Y		N					
		MAYINN003	SPEEDWELL HOUSE	A	Y		N					Y
		MAYINN004	STANDISH HOUSE	A	Y		N					
		MAYINN005	BROOK HOUSE	A	Y		N					
		MAYINN006	TEA HOUSE	A	Y		N					
		MAYINN007	KITCHEN HW SINK	A	Y		N					
		MAYINN008	MN BLD PREP KIT SINK	A	Y		N					
		MAYINN009	KITCHEN SINK #2	A	Y		N					
		MAYINN010	KITCHEN SINK #5	A	Y		N					
		MAYINN011	LOBBY MENS ROOM	A	Y		N					
		MAYINN012	LOBBY HC BATH	A	Y		N					
		MAYINN013	LOBBY LADIES ROOM	A	Y		N					
		MAYINN014	ROOM 21 BATH	A	Y		N					
		MAYINN015	ROOM 22 BATH	A	Y		N					
		MAYINN016	ROOM 22 SINK	A	Y		N					
		MAYINN017	ROOM 23 BATH	A	Y		N					
		MAYINN018	ROOM 24 SINK	A	Y		N					
		MAYINN019	ROOM 25 SINK	A	Y		N					
		MAYINN020	ROOM 26 BATH	A	Y		N					
		MAYINN021	ROOM 27 BATH	A	Y		N					
		MAYINN022	ROOM 31 BATH	A								
		MAYINN023	ROOM 32 BATH	A	Y		N					

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500182	MAYFLOWER INN	NTNC	109	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
118 WOODBURY ROAD	10				

Towns Served: WASHINGTON

Water System Facility and Sampling Point Inventory									
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP 2	DBPR Stage
	MAYINN024	ROOM 33 BATH		A	Y	N			
	MAYINN025	ROOM 34 BATH		A	Y	N			
	MAYINN026	ROOM 35 BATH		A	Y	N			
	MAYINN027	ROOM 36 BATH		A	Y	N			
	MAYINN028	ROOM 37 BATH		A	Y	N			
	MAYINN029	ROOM 38 BATH		A	Y	N			
	MAYINN030	BASEMENT PASTRY ROOM		A	Y	N			
	MAYINN031	BASEMENT MENS ROOM		A	Y	N			
	MAYINN032	MENS FITNESS SINK		A	Y	N			
	MAYINN033	LADIES FITNESS SINK		A	Y	N			
	MAYINN034	BASEMENT LADIES ROOM		A	Y	N			
	MAYINN035	BASEMENT LOUNGE SINK		A	Y	N			
	MAYINN036	SPEEDWELL ROOM 11		A	Y	N			
	MAYINN037	SPEEDWELL ROOM 12		A	Y	N			
	MAYINN038	SPEEDWELL ROOM 14		A	Y	N			
	MAYINN039	SPEEDWELL ROOM 15		A	Y	N			
	MAYINN040	SPEEDWELL LL BATH		A		N			Y
	MAYINN041	SPEEDWELL LL MECH RO		A	Y	N			
	MAYINN042	STANDISH ROOM 20 BAT		A	Y	N			
	MAYINN043	STANDISH ROOM 17 BAT		A	Y	N			
	MAYINN044	STANDISH ROOM 18 BAT		A	Y	N			
	MAYINN045	STANDISH ROOM 19 BAT		A	Y	N			
	MAYINN046	TEA HOUSE BATH #2		A	Y	N			
	MAYINN047	TEA HOUSE KITCHEN		A	Y	N			
	UPSTREAM	WITHIN 5 SERVICE CON		A					Y
00700	ENTRY POINT	3	ENTRY POINT	A					
10653	WELL #2	2	WELL #2	A					
10654	WELL #1	2	WELL #1	A					
53320	ATMOSPHERIC STORAGE								
53322	BOOSTER PUMPS								
985	WATER TREATMENT								

Certified Operator Information

Water System Facility: WATER TREATMENT (WSF ID: 985)

Facility Classification:	CLASS 1 TREATMENT PLANT	Certification Expiration
Operator Name	Operator Type	Certification(s)
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS II
		6/30/2026 6/30/2026

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500182	MAYFLOWER INN	NTNC	109	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
118 WOODBURY ROAD	10				

Towns Served: WASHINGTON

Certified Operator Information

Water System Facility: WATER TREATMENT (WSF ID: 985)

Facility Classification: CLASS 1 TREATMENT PLANT

Certification
Expiration

Operator Name	Operator Type	Certification(s)	
CROWNSHAW, MICHAEL L	ASSIGNED OPERATOR	SMALL WATER SYSTEM OPERATOR	3/31/2028

Contact Information

Name		Organization		Job Title		
Mr. Sean Heslin		Auberge Resorts Collection		Engineering		
Mailing Address Line One		Mailing Address Line Two			City	State
118 Woodbury Road		Route 47			Washington	CT
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	Zip Code
860-868-9466				860-868-9466	sean.heslin@aubergeresorts.com	06793

Contact Role(s): Administrative Contact, Legal 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

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	Classification	Population	Owner Type	Primary Source
CT1500312	WASHINGTON PRIMARY SCHOOL	NTNC	247	L	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
11A SCHOOL STREET	Connections	1			

Towns Served: WASHINGTON

Monitoring Requirements

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

Asbestos (1094)	1 routine (RT) per nine years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Lead And Copper (PBCU)	5 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/25 - 12/31/27	6/1-9/30	
Physical Parameters (PPS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Water System Facility: **ENTRY POINT** (WSF ID: 00700)

Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
Organic Chemicals (VOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500312	WASHINGTON PRIMARY SCHOOL	NTNC	247	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
11A SCHOOL STREET		1			

Towns Served: WASHINGTON

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT		3/1/2026

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper	Asbestos	WQP 2	DBPR
					Coliform Rule	Copper Rule Tier				
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y					
		DOWNTREAM	WITHIN 5 SERVICE CON	A						
		UPSTREAM	WITHIN 5 SERVICE CON	A						
		WPS001	STAFF KITCHEN	A	Y	2		Y		
		WPS002	GRADE 1	A	Y	2		Y		
		WPS003	HANDICAP BATH 2	A	Y	2		Y		
		WPS004	MAIN OFFICE	A	Y	2		Y		
		WPS005	NURSES ROOM	A	Y	2		Y		
		WPS006	ROOM 103	A	Y	2		Y		
		WPS007	BOYS MAIN	A	Y	2		Y		
		WPS008	ROOM 108	A	Y	2		Y		
		WPS009	ROOM 109	A	Y	2		Y		
		WPS010	ROOM 110	A	Y	2		Y		
		WPS011	CUSTODIAN	A	Y	2		Y		
		WPS012	ROOM 116	A	Y	2		Y		
		WPS013	BOYS LAV	A	Y	2		Y		
		WPS014	GIRLS LAV	A	Y	2		Y		
		WPS015	ROOM 118	A	Y	2		Y		
00700	ENTRY POINT	3	ENTRY POINT	A						
10655	WELL	2	WELL	A						

Certified Operator Information

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

Facility Classification:	SMALL WATER SYSTEM	Certification Expiration	
Operator Name	Operator Type	Certification(s)	Certification Expiration
KILBOURN, ERIC M.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2028 12/31/2028
KILBOURN, JORDAN H	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2026 9/30/2027

Contact Information

Name	Organization	Job Title		
Mr. Donald J. O'leary	Regional School District 12	Facility Director		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
11A School St		Washington	CT	06794
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500312	WASHINGTON PRIMARY SCHOOL	NTNC	247	L	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
11A SCHOOL STREET	1				

Towns Served: WASHINGTON

860-868-6174		860-868-6103		860-868-6100	olearyd@region-12.org
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Contact Role(s): **Administrative Contact**

Name	Organization	Job Title		
Dr. Donald Schels	Regional School District 12	Superintendent		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
11A School Street		Washington Depot	CT	06794
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-868-6100	6108	860-868-6103		schelsd@region-12.org
Email Address				

Contact Role(s): **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

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

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

End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500343	WASHINGTON MONTESSORI SCHOOL	NTNC	350	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
240 LITCHFIELD TURNPIKE (ROUTE 202)	Connections		1		

Towns Served: WASHINGTON

Monitoring Requirements

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

Asbestos (1094)	1 routine (RT) per nine years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Lead And Copper (PBCU)	5 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/25 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/26	6/1-9/30	
	1/1/27 - 12/31/27	6/1-9/30	
Physical Parameters (PPS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		

Water System Facility: **ENTRY POINT** (WSF ID: 00700)

Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		
Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		
Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
Organic Chemicals (VOCS)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500343	WASHINGTON MONTESSORI SCHOOL	NTNC	350	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
240 LITCHFIELD TURNPIKE (ROUTE 202)	Connections		1		

Towns Served: WASHINGTON

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit		Samples Req/Month	
		Minimum:	7.0 PH	Daily	Monitoring
pH	Entry Point pH Monitoring (PHRD)				Compliance Status:
Start Date:	9/1/2011	Compliance History:	Operating Limit	Monitoring	
		Monitoring Period	Compliance Status:	Compliance Status:	
		8/1/2025 - 8/31/2025			
		9/1/2025 - 9/30/2025			
		10/1/2025 - 10/31/2025			
		11/1/2025 - 11/30/2025			
		12/1/2025 - 12/31/2025			

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2026	

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total		Lead and Coliform Rule		Copper Rule Tier		Asbestos WQP 2 DBPR		Stage
				Status	Rule	Y	N	Y	N	Y	N	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y							
		DOWNSTREAM	WITHIN 5 SERVICE CON	A								
		UPSTREAM	WITHIN 5 SERVICE CON	A								
		WASHMONT-01	LOBBY BATHROOM	A			N					
		WASHMONT-02	STAFF ROOM	A	Y		N					
		WASHMONT-03	YCC	A	Y		N					
		WASHMONT-04	CHAUNDA'S ROOM	A	Y		N					
		WASHMONT-05	NANCY'S ROOM	A	Y		N					
		WASHMONT-06	AMY'S ROOM	A	Y		N					
		WASHMONT-07	ART ROOM	A	Y		N					
		WASHMONT-08	M.S. KITCHEN	A	Y		N					
00700	ENTRY POINT	WASHMONT-09	SHEILA'S ROOM	A	Y		N					
		WASHMONT-10	KATH'S ROOM	A	Y		N					
		WASHMONT-11	JEN'S ROOM	A			N					
10942	WELL #1	2	WELL #1	A								
10943	WELL #2	2	WELL #2	A								
45959	ATMOSPHERIC STORAGE											
45961	HYDROSTATIC STORAGE											
57801	TREATMENT PLANT											

Certified Operator Information

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1500343	WASHINGTON MONTESSORI SCHOOL	NTNC	350	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
240 LITCHFIELD TURNPIKE (ROUTE 202)	Connections		1		

Towns Served: WASHINGTON

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 57801)

Facility Classification: CLASS 1 TREATMENT PLANT

Certification
Expiration

Operator Name	Operator Type	Certification(s)	
KILBOURN, ERIC M.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2028
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2028

Contact Information

Name	Organization	Job Title		
Ms. Anne Fenton	Washington Montessori School	Cfoo		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
240 Litchfield Turnpike		New Preston	CT	06777
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-868-0551	2041	860-868-1362		505-690-9535 afenton@washingtonmontessori.org

Contact Role(s): Owner

Name	Organization	Job Title		
Mr. John R. Hay	Washington Montessori Assoc	Facilities Manager		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
240 Litchfield Turnpike		New Preston	CT	06777
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-868-0551				860-689-6809 jhay@washingtonmontessori.org

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

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

<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.

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1501013	DEVEREUX GLENHOLME SCHOOL - MAIN CAMPUS	NTNC	245	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
81 SABBADAY LANE		15			

Towns Served: WASHINGTON

Monitoring Requirements

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

Asbestos (1094)	1 routine (RT) per nine years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/22 - 12/31/30		
Total Coliform (3100)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		
Lead And Copper (PBCU)	5 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/25 - 12/31/27	6/1-9/30	
Physical Parameters (PPS)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	8/1/25 - 8/31/25		Complete
	9/1/25 - 9/30/25		Complete
	10/1/25 - 10/31/25		Complete
	11/1/25 - 11/30/25		Complete
	12/1/25 - 12/31/25		Complete
	1/1/26 - 1/31/26		
	2/1/26 - 2/28/26		
	3/1/26 - 3/31/26		
	4/1/26 - 4/30/26		
	5/1/26 - 5/31/26		
	6/1/26 - 6/30/26		
	7/1/26 - 7/31/26		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1501013	DEVEREUX GLENHOLME SCHOOL - MAIN CAMPUS	NTNC	245	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
81 SABBADAY LANE	Connections		15		

Towns Served: WASHINGTON

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Nitrate And Nitrite (NOX)				1 routine (RT) per year
Sampling Point (Sampling Point ID)		Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/25 - 12/31/25		Complete
		1/1/26 - 12/31/26		
		1/1/27 - 12/31/27		
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		Complete
		1/1/26 - 12/31/28		
		1/1/29 - 12/31/31		
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		Complete
		1/1/26 - 12/31/28		
		1/1/29 - 12/31/31		
Organic Chemicals (VOCS)				1 routine (RT) per three years
Sampling Point (Sampling Point ID)		Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)		1/1/24 - 12/31/26		
		1/1/27 - 12/31/29		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
MAIL/HAND DELIVER NOTICE TO CONSUMERS	12/31/2025	7/9/2025
CROSS CONNECTION SURVEY REPORT	3/1/2026	
CERTIFY LEAD SL NOTIFICATION	7/1/2026	7/9/2025
MAIL/HAND DELIVER NOTICE TO CONSUMERS	12/31/2026	1/12/2026
CERTIFY LEAD SL NOTIFICATION	7/1/2027	1/12/2026
MAIL/HAND DELIVER NOTICE TO CONSUMERS	12/31/2027	
CERTIFY LEAD SL NOTIFICATION	7/1/2028	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform	Lead and Copper Rule	Asbestos	WQP 2 DBPR	Stage
					Rule	Tier			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y				
		DEVGLEN001	BIRCHWOOD	A	Y		1		
		DEVGLEN002	CARRIAGE	A	Y		1		
		DEVGLEN003	LAUREL	A	Y		1		
		DEVGLEN004	GLENHOLM	A	Y		1		
		DEVGLEN005	PUEBLO	A	Y		1		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A					

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1501013	DEVEREUX GLENHOLME SCHOOL - MAIN CAMPUS	NTNC	245	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
81 SABBADAY LANE			15		

Towns Served: WASHINGTON

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper Rule	Asbestos Rule Tier	Stage WQP 2	DBPR
	UPSTREAM	WITHIN 5 SERVICE CON		A						
00700	ENTRY POINT	3	ENTRY POINT	A						
1004	WELL 1	2	WELL 1	A						
45428	PRESSURE STORAGE									
60316	WELL 2	2	WELL 2	A						
60318	ATMOSPHERIC TANK									

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
GRANT, SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2026
PETITTI, ANDY	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2028
		WATER TREATMENT PLANT OPERATOR - CLASS I	12/31/2028

Contact Information

Name	Organization	Job Title		
Mr. Cj Kersten	Devereux-Glenholme School	Main Contact		
Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
81 Sabbaday Lane		Washington	CT	06793
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone
860-868-7377				860-868-7377

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

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End of schedule

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1501143	MAYFLOWER SPA	NTNC	72	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
118 WOODBURY ROAD			6		

Towns Served: WASHINGTON

Monitoring Requirements

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

Chlorine Residual (1012)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
Asbestos (1094)	1 routine (RT) per nine years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Disinfectant Byproducts - TTHM & HAA5 (DBP)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
LL TREATMENT PREP (MAYSPA010)	1/1/25 - 12/31/25	9/1-9/30	Complete
	1/1/26 - 12/31/26	9/1-9/30	
	1/1/27 - 12/31/27	9/1-9/30	
Lead And Copper (PBCU)	5 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/25 - 12/31/27	6/1-9/30	
	1/1/28 - 12/31/30	6/1-9/30	
Physical Parameters (PPS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
	1/1/29 - 12/31/31		
Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
	1/1/27 - 12/31/27		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1501143	MAYFLOWER SPA	NTNC	72	P	GW
Local Address (where applicable)	Service	Residential	Commercial	Industrial	Combined
118 WOODBURY ROAD	Connections		6		

Towns Served: WASHINGTON

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)		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		Complete	
	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			

Organic Chemicals (VOCS)		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		Complete	
	1/1/26 - 12/31/28			
	1/1/29 - 12/31/31			

Water System Facility: WELL 1 (WSF ID: 52883)

E. Coli (3014)		1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL 1 (2)	7/1/25 - 9/30/25		Complete	
	10/1/25 - 12/31/25		Complete	
	1/1/26 - 3/31/26			
	4/1/26 - 6/30/26			

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily
Start Date: 8/1/2017	Compliance History: Monitoring Period	Operating Limit	Monitoring
	8/1/2025 - 8/31/2025	Compliance Status:	Compliance Status:
	9/1/2025 - 9/30/2025		
	10/1/2025 - 10/31/2025		
	11/1/2025 - 11/30/2025		
	12/1/2025 - 12/31/2025		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2026	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total	Lead and Coliform	Copper	Stage
					Rule	Rule Tier	Asbestos	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	A				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MAYSPA001	ALLERTON BACK L BAT	A	Y		N	
		MAYSPA002	ALLERTON FRT L BATH	A	Y		N	

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1501143	MAYFLOWER SPA	NTNC	72	P	GW
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined
118 WOODBURY ROAD			6		

Towns Served: WASHINGTON

Water System Facility and Sampling Point Inventory						
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule Tier	Asbestos WQP 2 DBPR Stage
	MAYSPA003	ALLERTON BCK R BATH	A	Y	N	
	MAYSPA004	ALLERTON FRT R BATH	A	Y	N	
	MAYSPA005	SPA LOBBY POWDER RM	A	Y	N	
	MAYSPA006	SPA BATHROOM AREA	A	Y	N	
	MAYSPA007	SPA BATHROOM AREA	A	Y	N	
	MAYSPA008	LL ALLERTON LOCKER 1	A	Y	N	Y
	MAYSPA009	LL ALLERTON LOCKER 2	A	Y	N	
	MAYSPA010	LL TREATMENT PREP	A	Y	N	Y
	MAYSPA011	LL HOUSEKEEP CLOSET	A	Y	N	
	MAYSPA012	LL POWDER RM 1	A	Y	N	
	MAYSPA013	LL POWDER RM 2	A	Y	N	Y
	MAYSPA014	PREP KITCHEN SINK	A	Y	N	
	MAYSPA015	PREP KITCHEN HW SINK	A	Y	N	
	MAYSPA016	BARN PUMP STATION	A	Y	N	
	MAYSPA017	LAUNDRY	A	Y	N	
	UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A		
		MAYSPA016	BARN PUMP STATION	A		
52883	WELL 1	2	WELL 1	A		
52889	ATMOSPHERIC TANKS					
60900	TREATMENT PLANT					

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 60900)

Facility Classification:		Certification Expiration
Operator Name	Operator Type	Certification(s)
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II
		DISTRIBUTION SYSTEM OPERATOR - CLASS II
CROWNshaw, Michael L	ASSIGNED OPERATOR	SMALL WATER SYSTEM OPERATOR
		3/31/2028

Contact Information

Name	Organization	Job Title
Mr. Sean Heslin	Auberge Resorts Collection	Engineering
Mailing Address Line One	Mailing Address Line Two	City
118 Woodbury Road	Route 47	State
		Zip Code
Business Phone	Extension	Fax
860-868-9466		Mobile Phone
		Emergency Phone
		Email Address
		860-868-9466
		sean.heslin@aubergevents.com

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

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

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1501143	MAYFLOWER SPA			NTNC	72	P	GW
Local Address (where applicable)		Service	Residential	Commercial	Industrial	Combined	Agricultural
118 WOODBURY ROAD		Connections		6			

Towns Served: WASHINGTON

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

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

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

End of schedule