	Connecticut Department				0				
	Water Quality Mon	itoring an							
PWS ID	PWS Name		Cla	ssification		on O	wner Type P		
CT1539023	KANGAROO KORNER CHILDCARE CENTER			NTNC	65		Р	GW	
	(where applicable)	Service	Residential	Commer	cial Indu	strial	Combined	Agricultur	
	MOUNTAIN ROAD	Connections		1					
Fowns Served	: WATERTOWN								
	Mon	itoring Requ	uirements	5					
Water Syster	m Facility: DISTRIBUTION SYSTEM (WSI	F ID: 00600)							
Asbestos (1	.094)				1	L rout	tine (RT) pe	nine year	
Sampling	g Point (Sampling Point ID)		Monitoring F	Period	Collection	Perio	d Compli	ance Status	
Select fro	om Inventory of Active Sampling Points		1/1/20 - 12/3	31/28					
Total Colifo	rm (3100)					1 r	outine (RT)	per quarte	
Sampling	g Point (Sampling Point ID)		Monitoring F	Period	Collection	Perio	d Compli	ance Status	
Select fro	om Inventory of Active Sampling Points		10/1/23 - 12/	/31/23			Co	Complete	
			1/1/24 - 3/3	1/24			Co	mplete	
			4/1/24 - 6/3	0/24					
			7/1/24 - 9/3	0/24					
Lead And Co	opper (PBCU)						5 routine (F	T) per yea	
Sampling	g Point (Sampling Point ID)		Monitoring F	Period	Collection	Perio	od Compli	Compliance Status	
Select from Inventory of Active Sampling Points			1/1/23 - 12/3			mplete			
			1/1/24 - 12/3	31/24	6/1-9,	/30			
			1/1/25 - 12/3	31/25	6/1-9,	/30			
Physical Par	rameters (PPS)					1 r	outine (RT)	per quarte	
Sampling Point (Sampling Point ID)			Monitoring F	Period	Collection Period		d Compli	Compliance Statu	
Select fro	om Inventory of Active Sampling Points		10/1/23 - 12/	/31/23			Co	mplete	
			1/1/24 - 3/3	1/24			Co	mplete	
			4/1/24 - 6/3	0/24					
			7/1/24 - 9/3	0/24					
Nater Syster	m Facility: ENTRY POINT (WSF ID: 0070	0)							
Inorganic Ch	nemicals (IOCS)				1	routi	ne (RT) per	three year	
	g Point (Sampling Point ID)		Monitoring F	Period	Collection	Perio	d Compli	ance Status	
ENTRY POINT (3)			1/1/22 - 12/3						
			1/1/25 - 12/3	31/27					
	Nitrite (NOX)						1 routine (F		
Sampling	g Point (Sampling Point ID)		Monitoring F	Period	Collection	Perio	od Compli	ance Status	
ENTRY PO	OINT (3)		1/1/23 - 12/3					Complete	
			1/1/24 - 12/31/24				Co	mplete	
			1/1/25 - 12/3	31/25					
	Herbicides and PCBs-Phase II (SOC2)						ne (RT) per	-	
	Sampling Point (Sampling Point ID)		Monitoring F		Collection	Perio	d Compli	ance Status	
ENTRY PO	OINT (3)		1/1/23 - 12/3						
			1/1/26 - 12/3	31/28			_		
-	Herbicides and PCBs-Phase V (SOC5)						ne (RT) per	-	
	g Point (Sampling Point ID)		Monitoring F		Collection	Perio	od Compli	ance Status	
ENTRY PO	DINT (3)		1/1/23 - 12/3						
			1/1/26 - 12/3	31/28					
-	emicals (VOCS)						1 routine (F		
Sampling	g Point (Sampling Point ID)		Monitoring F	Period	Collection	Perio	d Compli	ance Status	

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	Conn	ecticut Dep	artment of	Public H	ealth	Dr	inkin	g Wa	ater	Se	ction			
		^	ality Monit					0			••••			
PWS ID	<u> </u>					pulation Ow		ner Type P	rimary	Source				
CT1539023	KANGAR	OO KORNER CHILI	DCARE CENTER				NTNC		55		P	G		
Local Address (w	here app	licable)		Service Resident		tial Commer		cial In	ndustria	al	Combined	Agri	Agricultural	
120 FRENCH MO	UNTAIN	ROAD		Connections		1								
Towns Served: V	VATERTO	WN		- I										
			Monite	oring Requ	ireme	nts								
Water System	Facility:	ENTRY POINT	(WSF ID: 00700)											
Organic Chem	icals (V	OCS)								1	routine (I	RT) pe	r year	
Sampling P	oint (San	npling Point ID)		Monitoring Period									oliance Status	
ENTRY POIN	NT (3)				1/1/23 -	12/31	L/23				Co	omplet	e	
					1/1/24 -	12/31	L/24							
					1/1/25 -	12/31	L/25							
Water System	Facility:	WELL #1 (WSF	ID: 10788)											
E. Coli (3014)									1	. rou	tine (RT)	per q	uarter	
Sampling P	Monitoring Period				Collect	Compl	Compliance Status							
WELL #1 (2)				10/1/23 - 12/31/23							Co	omplet	e	
	1/1/24 - 3/31/24													
						4/1/24 - 6/30/24								
					7/1/24 -	9/30	/24							
			Other C	ompliance	Sched	ules	S							
Compliance Sche	edule Act	ivity			L	Due D)ate		Achie	ved	Date			
SUBMIT LEAD SE	SUBMIT LEAD SERVICE LINE INVENTORY)/16/	2024							
COMPLETE INITI	AL LSL IN'	VENTORY		10/16/2024										
CROSS CONNECT	TION SUR	VEY REPORT			3	3/1/2	028							
		Water	System Facili	ity and Sar	npling	Poi	nt Inv	ento	r y					
Water								Total	Lead	and				
	er System	Facility	Sampling Point		nt		Сс	oliform					Stage	
Facility ID			ID	Description		S	tatus	Rule	Rule	Tier	Asbestos	WQP	2 DBPI	
00600 DISTR	RIBUTION	SYSTEM	4	DISTRIBUTION	I SYSTEM		А	Y						
			DOWNSTREAM				А							
			DP-01	SINK TODDLE	R 1 AREA		А	Y	1		Y			
1														
			DP-02	SINK TODDLE			А		1		Y			
			DP-03	SINK TODDLE	R 3 AREA		A A		1 1		Y			
			DP-03 DP-04	SINK TODDLE	R 3 AREA AREA						Y Y			
			DP-03 DP-04 DP-05	SINK TODDLE SINK INFANT A SINK PRE-K AF	R 3 AREA AREA REA		А		1		Y			
			DP-03 DP-04 DP-05 DP-06	SINK TODDLE SINK INFANT SINK PRE-K AF SINK CHILDRE	R 3 AREA AREA REA NS BATH		A A		1 1		Y Y Y Y			
			DP-03 DP-04 DP-05 DP-06 DP-07	SINK TODDLE SINK INFANT SINK PRE-K AF SINK CHILDRE SINK ADULT B	R 3 AREA AREA REA NS BATH		A A A		1 1 1		Y Y Y			
			DP-03 DP-04 DP-05 DP-06	SINK TODDLE SINK INFANT SINK PRE-K AF SINK CHILDRE	R 3 AREA AREA REA NS BATH		A A A A	Y Y	1 1 1 1		Y Y Y Y			

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GIRLS BATH 2

ENTRY POINT

WELL #1

WITHIN 5 SERVICE CON

А

А

А

А

Y

1

Y

DP-10

UPSTREAM

3

2

00700 ENTRY POINT

WELL #1

51932 TREATMENT PLANT

10788

	Wa	ter Qual	lity N	lonitoring	and C	Complia	ince S	Schedu	le			
PWS ID F	WS Name			U		Classi	fication	Population	Owner	r Type P	rimary Sour	
CT1539023	ANGAROO KOI	RNER CHILDO	ARE CE	NTER		N	ГNC	65	F	>	GW	
ocal Address (wh	ere applicable)			Service	Res	sidential Co	ommercia	al Industri	ial Co	ombined	Agricultur	
120 FRENCH MOU	JNTAIN ROAD			Connecti	ons		1					
Towns Served: W	ATERTOWN				·	·		·				
			Cer	tified Operat	or Inf	ormatio	n					
Nater System F	acility: TREA	MENT PLA	NT (W	SF ID: 51932)								
acility Classifica	tion: CLASS 1 TH	REATMENT P	ANT								Certificatio	
Operator Name			Opera	ator Type	Certifi	ication(s)					Expiration	
(ILBOURN, ERIC N	Л.		CHIEF C	PERATOR	DISTRI	BUTION SYS	TEM OPE	ERATOR - CI	LASS I		12/31/202	
					WATE	R TREATMEI	NT PLANT	OPERATO	R - CLAS	SS II	12/31/202	
KILBOURN, JORDA	AN H		ASSIGN	ED OPERATOR	WATE	R TREATMEI	NT PLANT	OPERATO	R - CLAS	SS II	6/30/2026	
					DISTRI	DISTRIBUTION SYSTEM OPERATOR - CLASS I					9/30/202	
				Contact Inf	format	tion						
Name				Organization					J	ob Title		
Ms. Cathy Wickline Kangaroo Ko												
Mailing Address Line One				Mailing Address Line Two				City		State	Zip Code	
120 French Mountain Rd							Watertown			СТ	06795	
Business Phone					Emerg	gency Phone	e Email Address					
860-945-6628		860-945-3	8151				childcare@kangarooskorner.com					
Contact Role(s):	Legal Contact, (Dwner			-							
Name				Organization	า				J	ob Title		
Mrs. Lisa M. Oste	rberg			Kangaroos K	orner In	с.		Executive	Directo	or		
Mailing Address L	ine One		Mailing	Address Line Two				City		State	Zip Code	
120 French Mountain Road							Watert	own	СТ	06795		
Business Phone	Extension	Fax		Mobile Phone	Emerg	gency Phone	e Email Address		i			
860-945-6628 860-945-3151					lisaosterberg@kangarooskorner.com						om	
Contact Role(s):	Administrative	Contact										
Name				Organization	า				J	ob Title		
F M Reality Assoc	iates LLC											
Mailing Address Line One			Mailing Address Line Two					City		State	Zip Code	
76 French Mount	ı Mountain Rd		<u> </u>			- <u>_</u>		Watertown		СТ	06795	
Business Phone	Extension	Fax		Mobile Phone	Emerg	gency Phone	e Email A	Email Address				
Contact Role(s):	Legal Contact, (Dwner										
Please note the f	ollowing:											
The residual dis	infectant concen	tration must b	e measu	red at the same loca	tion and t	ime as each t	total colifo	orm sample.				
. If a Collection F	Period is specified	, all water qua	ity samp	les must be collecte	d during t	he specified	period.					
B. Depending on r	esults, additional	monitoring m	ay be red	quired (i.e. repeat or	confirma	tion samples). This sch	edule is subj	ject to cl	hange, ar	id any related	

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

End of schedule

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