Connecticut Department of					_			ection		
Water Quality Monit	oring an	d Com	_				1			
PWS ID PWS Name			Class	ification	Pop	ulation	Ow	ner Type   F	rimary Source	
CT1539023 KANGAROO KORNER CHILDCARE CENTER			Ν	ITNC		65		Р	GW	
Local Address (where applicable)	Service	Residen	tial C	Commerc	cial	Industri	ial	Combined	Agricultural	
120 FRENCH MOUNTAIN ROAD	Connections			1						
Towns Served: WATERTOWN										
Monito	oring Requ	uireme	nts							
Water System Facility: DISTRIBUTION SYSTEM (WSF II	D: 00600)									
Asbestos (1094)						1 rc	outir	ne (RT) pe	r nine years	
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>			Collec	tion Pe	riod	Compl	<b>Compliance Status</b>		
Select from Inventory of Active Sampling Points	1/1/20 -	12/31	/28							
Total Coliform (3100)						1	L rou	utine (RT)	per quarter	
Sampling Point (Sampling Point ID)		Monitori	ng Pe	riod	Collec	tion Pe	riod	Compl	iance Status	
Select from Inventory of Active Sampling Points		4/1/24 -	6/30,	/24				Co	omplete	
	<u></u>	7/1/24 -	9/30,	/24				Co	mplete	
	<u></u>	10/1/24 -	1/24				Co	mplete		
	<u></u>	1/1/25 -	/25					<u></u>		
		4/1/25 -	6/30,	/25						
Lead And Copper (PBCU)							5	routine (I	RT) per year	
Sampling Point (Sampling Point ID)		<b>Monitoring Period</b>			<b>Collection Period</b>			Compl	iance Status	
Select from Inventory of Active Sampling Points		1/1/23 -	12/31	./23	6/1-9/30			Co	Complete	
		1/1/24 -	12/31	/24	6,	/1-9/30		Co	omplete	
		1/1/25 -	12/31	./25	6,	/1-9/30				
Physical Parameters (PPS)						1	L rou	utine (RT)	per quarter	
Sampling Point (Sampling Point ID)		Monitori	ng Pe	riod	Collec	tion Pe	riod	Compl	iance Status	
Select from Inventory of Active Sampling Points		4/1/24 - 6/30/24						Co	Complete	
		7/1/24 - 9/30/24 10/1/24 - 12/31/24						Co	omplete	
								Co	omplete	
		1/1/25 - 3/31/25								
		4/1/25 - 6/30/25								
Water System Facility: ENTRY POINT (WSF ID: 00700)										
Inorganic Chemicals (IOCS)						1 ro	utine	e (RT) per	three years	
Sampling Point (Sampling Point ID)		Monitoring Period			Collec	tion Pe	riod	Compl	Compliance Status	
ENTRY POINT (3)		1/1/22 -	12/31	./24				Co	omplete	
		1/1/25 -	12/31	./27						
Nitrate And Nitrite (NOX)								<del>-</del>	RT) per year	
Sampling Point (Sampling Point ID)		Monitori	ng Pe	riod	Collec	tion Pe	riod	Compl	iance Status	
ENTRY POINT (3)		1/1/23 -	-	-				Co	omplete	
		1/1/24 -						Co	omplete	
		1/1/25 -	12/31	./25						
Pesticides, Herbicides and PCBs-Phase II (SOC2)									three years	
Sampling Point (Sampling Point ID)		Monitori			Collec	tion Pe	riod	Compl	iance Status	
ENTRY POINT (3)		1/1/23 -								
		1/1/26 -	12/31	./28						
Pesticides, Herbicides and PCBs-Phase V (SOC5)									three years	
Sampling Point (Sampling Point ID)		Monitori			Collec	tion Pe	riod	Compl	iance Status	
ENTRY POINT (3)		1/1/23 -								
		1/1/26 -	12/31	./28						

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.

Schedule Generation Date: 12/18/2024

	Connecticut D	on outmont of	Dublic II	ool+h l	Dwiml	in a V	Moton	Co	ation		
	Connecticut Do	epartment of Juality Monit							CUOII		
DIAKS ID		quality Monit	oring and								
PWS ID	PWS Name	UII DOADE CENTED		(				Owr		rimary Sour	
CT153902		HILDCARE CENTER		5	NTNC		65	.	Р	GW	
	ress (where applicable)		Service	Residenti			Industria	ıl	Combined	Agricultur	
	CH MOUNTAIN ROAD		Connections			1					
Towns Ser	rved: WATERTOWN										
		Monito	oring Requ	iremen	ts						
Water Sy	stem Facility: ENTRY POIN	T (WSF ID: 00700)									
Organic	Chemicals (VOCS)							1	routine (I	RT) per yea	
Samp	pling Point (Sampling Point ID)	)	Monitoring Period			Colle	ection Per	Compl	<b>Compliance Status</b>		
ENTR	RY POINT (3)					Co	Complete				
				1/1/24 - 1	2/31/24				Co	omplete	
				1/1/25 - 1	2/31/25						
Water Sy	stem Facility: WELL #1 (W	'SF ID: 10788)									
E. Coli (3	3014)						1	rou	tine (RT)	per quarte	
Samp	oling Point (Sampling Point ID)	)	I	Monitorin	g Period	Colle	ection Per	Compl	Compliance Status		
WELL	L #1 (2)			4/1/24 - 6	5/30/24				Co	mplete	
			7/1/24 - 9/30/24						Co	mplete	
			1	.0/1/24 - 1	12/31/24				Co	mplete	
			1/1/25 - 3/31/25								
				4/1/25 - 6	5/30/25						
		Other C	ompliance	Schedu	ıles						
Compliand	ce Schedule Activity			Di	ue Date		Achiev	ved l	Date		
SUBMIT LE	EAD SERVICE LINE INVENTORY			10/	/16/2024		8/8	/202	24		
COMPLETI	E INITIAL LSL INVENTORY				-						
CROSS CO	NNECTION SURVEY REPORT				/1/2028						
	Wate	er System Facili	ity and San	nnling F	Point I	nvent	orv				
Water	Trace		ic, and can	. B		Total	<u> </u>	hnr			
System	Water System Facility	Sampling Point	Samplina Poir	nt		Colifor				Stag	
Facility ID		ID	Description		Status	D. J.			Asbestos	WQP 2 DBI	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	SYSTEM	A	Y					
		DOWNSTREAM			Α	-					
		DP-01	SINK TODDLER		Α	Υ	1		Υ		
		DP-02	SINK TODDLER		Α	·	1		Y		
		DP-03	SINK TODDLER		A		1		Y		
		DP-04	SINK INFANT A		A		1		Y		
		DP-05	SINK PRE-K AR		A		1		Y		
		DP-06	SINK THE RAIS		A		1		Y		
		DP-07	SINK ADULT B		A		1		Y		
		DP-08	BOYS BATH 1		A	Υ	1		Y		
		DP-09	BOYS BATH 2		A	Y	1		Y		
		DP-10	GIRLS BATH 2		A	Y	1		Y		
		UPSTREAM	WITHIN 5 SER	VICE CON	A	ī	1		ı		
00700	ENITDY DOINT			VICE CON							
00700	ENTRY POINT	3	ENTRY POINT		Α						
10788	WELL #1	2	WELL #1		Α						

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

51932 TREATMENT PLANT

Schedule Generation Date: 12/18/2024 Page 2

		C	- 7	intoring a									
_	PWS Name							ication   Population   Owner Type   Primary Source					
				NC	65	Р	GW						
Local Address (where applicable)			Service			mmercial	Industrial	Combined	Agricultur				
120 FRENCH MO	UNTAIN ROAD			Connectio	Connections		1						
Towns Served: W	ATERTOWN												
			Certif	ied Operato	or Inform	atior	1						
Water System F	acility: TREAT	MENT PLAN	NT (WSF	ID: 51932)									
Facility Classifica	tion: CLASS 1 TR	EATMENT PL	ANT							Certification			
Operator Name			Operato	т Туре	Certification		Expiration						
KILBOURN, ERIC I	M.	(	CHIEF OPE	RATOR	ATOR DISTRIBUTION SYST		TEM OPER	RATOR - CLA	SS I	12/31/202			
				IT PLANT	12/31/202								
KILBOURN, JORDAN H ASSIGNED O			OPERATOR	PERATOR WATER TREATMEN			IT PLANT OPERATOR - CLASS II						
			DISTRIBUTION SYST			TEM OPER	9/30/2024						
				Contact Info	ormation								
Name				Organization					Job Title				
Ms. Cathy Wickli	ne			Kangaroo Koi									
-			dress Line Two				State	Zip Code					
120 French Mountain Rd					Watertown CT			СТ	06795				
Business Phone	Extension	Fax		Mobile Phone Emergence			E Email Address						
860-945-6628		860-945-3	151		childcare@kangarooskorne								
Contact Role(s):	Legal Contact, C	)wner			1								
Name				Organization					Job Title				
Mrs. Lisa M. Osterberg				Kangaroos Ko	Korner Inc. Executive Director				irector				
_			dress Line Two	City State				Zip Code					
120 French Mountain Road							Waterto	wn	СТ	06795			
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone Er		Email Ad						
860-945-6628		860-945-3	151			lisaosterberg@kangarooskorner.com							
Contact Role(s):	Administrative	Contact			1								
Name				Organization					Job Title				
F M Reality Asso	ciates LLC												
Mailing Address I	ine One		Mailing Ad	dress Line Two				City	State	Zip Code			
76 French Mount	ain Rd						Waterto	wn	СТ	06795			
Business Phone	Extension	Fax	ı	Mobile Phone	Emergency	Phone	e Email Address		1				
Contact Role(s):	_	wner											
Please note the f	_		_										
<ol> <li>The residual di</li> </ol>	sinfectant concent	ration must be	measured	at the same locati	ion and time as	s each t	otal colifor	m sample.					

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

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

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.

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

End of schedule