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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1610202	CHILDRENS DAY SCHOOL OF WILTON				NTNC	96	Р	GW
Local Address (w	here applicable)	Service	Resider	itial	Commerci	al Industri	al Combine	ed Agricultural
111 RIDGEFIELD	ROAD	Connections	1					

Towns Served: WILTON			
Monitori	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
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 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		
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
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	1/1/21 - 12/31/23	6/1-9/30	Complete
	1/1/24 - 12/31/26	6/1-9/30	
	1/1/27 - 12/31/29	6/1-9/30	
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		
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
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)	1/1/22 - 12/31/24		
	1/1/25 - 12/31/27		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		
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		
	1/1/26 - 12/31/28		
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		
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	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 Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule									
PWS ID								rimary Source		
CT1610202	0202 CHILDRENS DAY SCHOOL OF WILTON NTNC 96 P GW								GW	
Local Address (v	where applicable)	Service	Resider	ntial	Commercia	al Industri	al Cor	nbined	Agricultural	
111 RIDGEFIELD	ROAD	Connections	1							

Moni	toring Requirements		
Water System Facility: ENTRY POINT (WSF ID: 00700	0)		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/22 - 12/31/24		
	1/1/25 - 12/31/27		
Water System Facility: WELL (WSF ID: 10684)			
E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Other	Compliance Schedules		
Compliance Schedule Activity	Due Date	Achieved D	ate
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2011		
CROSS CONNECTION SURVEY REPORT	3/1/2020		
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024		
COMPLETE INITIAL LSL INVENTORY	10/16/2024		

	E IIIIII (E ESE IIII EIII EIII		10/1	0, 202 .					
	Wat	er System Facili	ity and Sampling Po	oint Ir	vento	ſy			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Sta WQP 2 D	_
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		BR11	BATHROOM NEAR RM11	Α	Υ	2	Υ		
		BR12	BATHROOM NEAR RM12	Α	Υ	2	Υ		
		BR15	BATHROOM NEAR RM15	Α	Υ	2	Υ		
		BR-DAY	BATH DAYCARE LOW LEV	Α	Υ	2	Υ		
		BR-STAFF	STAFF BATHROOM	Α	Υ	2	Υ		
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		RM11	ROOM 11	Α	Υ	2	Υ		
		RM12	ROOM 12	Α	Υ	2	Υ		
		RM13	ROOM 13	Α	Υ	2	Υ		
		RM14	ROOM 14	Α	Υ	2	Υ		
		RM15	ROOM 15	Α	Υ	2	Υ		
		RM16	ROOM 16	Α	Υ	2	Υ		
		RM3	KITCHEN	Α	Υ	2	Υ		
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
10684	WELL	2	WELL	Α					
57562	TREATMENT PLANT								

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

	Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source		
CT1610202	CHILDRENS DAY SCHOOL OF WILTON				NTNC	96	Р	GW		
Local Address (v	where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural		
111 RIDGEFIELD	ROAD	Connections	1							

Connecticut Department of Public Health Drinking Water Section

Towns Served: WILTON

			Certi	fied Operat	or Information)			
Water System Fac	ility: TREAT	MENT PLAI	NT (WSF	ID: 57562)					
Facility Classificatio	n: CLASS 1 TR	EATMENT PL	_ANT						Certificatio
Operator Name			Operato	or Type	Certification(s)				Expiration
ROWLEY, BRENDAN			CHIEF OP	ERATOR	DISTRIBUTION SYST	SS I	12/31/202		
					WATER TREATMEN	- CLASS II	12/31/202		
				Contact Inf	ormation				
Name				Organization	1			Job Title	
Mrs. Elizabeth H. Cr	ristini			Childrens Da	y School of Wilton		Director		
Mailing Address Line	e One		Mailing A	ddress Line Two			City	State	Zip Code
111 Ridgefield Rd						Wilton		СТ	06897
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress		
203-762-8001		203-762-8	3550		203-216-0992	beth.cris	stini@cdsw.o	org	
Contact Role(s): Le	gal Contact, O	wner							
Name				Organization				Job Title	
Mrs. Summer J. Do	wney			Childrens Da	y School of Wilton		Office Adm	inistrator	
Mailing Address Line	e One		Mailing A	ddress Line Two			City	State	Zip Code
111 Ridgefield Rd						Wilton		CT	06897
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress		
203-762-8001		203-762-8	₹550		203-820-8909	office@d	dsw org		

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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

End of schedule

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1615083	ROLLING HILLS COUNTRY CLUB				NTNC	100	Р	GW
Local Address (v	here applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
333 HURLBUTT	STREET	Connections	2					

Towns Served: WILTON			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	500)		
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 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		
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	1/1/22 - 12/31/24	6/1-9/30	
	1/1/25 - 12/31/27	6/1-9/30	
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)	, , , , ,		
Toluene (2991)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/23 - 12/31/23		Complete
- 12)	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
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		
(e)	1/1/26 - 12/31/28		
Nitrate And Nitrite (NOX)	_, _,,	1 n	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	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		
Pesticides, Herbicides and PCBs - Phase II & V (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		
2 1 0 (9)	1/1/26 - 12/31/28		

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	Connecticut Department of Public Health Drinking Water Section								
	Water Quality Monitoring and Compliance Schedule								
PWS ID	PWS ID PWS Name Classification Population Owner Type Primary Source								
CT1615083	T1615083 ROLLING HILLS COUNTRY CLUB NTNC 100 P GW								

Residential Commercial

2

Industrial

Combined

Agricultural

Service

Connections

333 HURLBUTT STREET Towns Served: WILTON

Local Address (where applicable)

Monitoring Requirements									
Water System Facility: ENTRY POINT (WSF ID: 00700)									
Organic Chemicals (VOCS)	emicals (VOCS) 1 routine (RT) per qua								
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status						
ENTRY POINT (3)	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								

Other Compliance Schedules									
Compliance Schedule Activity	Due Date	Achieved Date							
CROSS CONNECTION SURVEY REPORT	3/1/2023								
CROSS CONNECTION SURVEY REPORT	3/1/2024								
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024								
COMPLETE INITIAL LSL INVENTORY	10/16/2024								

Public Notification Requirements										
	Compliance Notice <u>Public Notification</u> <u>PN Certification</u>									
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received				
Physical Parameters M&R Violation	4/1/23 - 6/30/23	3	9/11/2024		9/21/2024					
Total Coliform M&R Violation	4/1/23 - 6/30/23	3	9/11/2024		9/21/2024					
Pesticides, Herbicides and PCBs - Phase M&R Violation	1/1/20 - 12/31/22	3	9/11/2024		9/21/2024					

000.0.00	,	-, -,		0/ ==/=			, ==, === :			
	Water System Facility and Sampling Point Inventory									
Water System	Water System Facility	Sampling Point ID	Sampling Point		Total Coliform	Lead and Copper	Ashastas		Stage	
Facility IE			Description	Status		Kule Her	Asbestos	WQP .	Z DDPF	
00600 D	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	Α	Υ					
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α						
		RH001	KIT HAND SNK	Α	Υ	2	Υ	Υ		
		RH002	KIT SNK SINGLE	Α	Υ	2	Υ	Υ		
		RH003	KIT SNK DOUBLE	Α	Υ	2	Υ	Υ		
		RH004	KIT SNK FOOD PREP	Α	Υ	2	Υ	Υ		
		RH005	KIT SNK TRPL SNK	Α	Υ	2	Υ	Υ		
		RH006	BAR TRIPLE SINK	Α	Υ	2	Υ	Υ		
		RH007	BAR HAND SINK	Α	Υ	2	Υ	Υ		
		RH008	SERVERS STAT H SNK	Α	Υ	2	Υ	Υ		
		RH009	SERVER STAT SING SNK	Α	Υ	2	Υ	Υ		
		RH010	RR LADY MN FLR L	Α	Υ	2	Υ	Υ		
		RH011	RR LADY RM MN FLR M	Α	Υ	2	Υ	Υ		
		RH012	RR LADY RM MN FLR R	Α	Υ	2	Υ	Υ		
		RH013	RR MEN RM MAIN FLR L	Α	Υ	2	Υ	Υ		
		RH014	RR MEN RM MAIN FLR R	Α	Υ	2	Υ	Υ		
		RH015	RR LADY CHANG RM NO1	Α	Υ	1	Υ			

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1615083	ROLLING HILLS COUNTRY CLUB				NTNC	100	Р	GW
Local Address (where applicable)		Service	Residential		Commercia	al Industri	al Combine	ed Agricultural
333 HURLBUTT	STREET	Connections	2					

		Water System Facili	ity and Sampling Po	oint Ir	ventor	У			
Water System Facility ID	Water System Facility	Sampling Point	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos		Stage 2 DBPR
		RH016	RR LADY CHANG RM NO2	Α	Υ	2	Υ	Υ	
		RH017	RR LADY CHANG RM NO3	Α	Υ	2	Υ	Υ	
		RH018	RR LADY CHANG RM NO4	Α	Υ	2	Υ	Υ	
		RH019	RR MEN CHG L WAL S 1	Α	Υ	2	Υ	Υ	
		RH020	RR MEN CHG L WAL S 2	Α	Υ	2	Υ	Υ	
		RH021	RR MEN CHG L WAL S 3	Α	Υ	2	Υ	Υ	
		RH022	RR MEN CHG L WAL S 4	Α	Υ	2	Υ	Υ	
		RH023	RR MEN CHG R WALS 1	Α	Υ	2	Υ	Υ	
		RH024	RR MEN CHG R WAL S 2	Α	Υ	2	Υ	Υ	
		RH025	RR MEN CHG R WAL S 3	Α	Υ	2	Υ	Υ	
		RH026	RR MEN CHG R WALS 4	Α	Υ	2	Υ	Υ	
		RH027	MENS LOCKER RM	Α	Υ	1			
		RH028	MAIN KITCHEN	Α	Υ	1			
		RH029	BACK KITHCHEN	Α	Υ	2			
		RH030	COFFEE STATION	Α	Υ	2			
		RH031	LADIES RM SINK	Α	Υ	1			
		RH032	GOLF SHOP	Α	Υ	1			
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
10687	SOUTHEAST WELL	2	NEW WELL	Α					
56241	CLUB HOUSE WELL	2	CLUB HOUSE WELL	Α					
987	WATER TREATMENT								

Certified (Operat	or Int	formation
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Water System Facility: WATER TREATMENT (WSF ID: 987)

 Facility Classification:
 CLASS 1 TREATMENT PLANT
 Certification

 Operator Name
 Operator Type
 Certification(s)
 Expiration

 HURLBUT, PAUL
 CHIEF OPERATOR
 WATER TREATMENT PLANT OPERATOR - CLASS II
 12/31/2025

				Contact Info	ormation				
Name				Organization				Job Title)
Mr. Joseph Jaffe							President		
Mailing Address Lin	e One		Mailing A	ddress Line Two			City	State	Zip Code
333 Hurlbutt Street						Wilton		СТ	06897
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	dress		

Contact Role(s): Legal Contact

203-762-8381

Jonnecticut	. рера	rtment of	Public i	ieaith .	Drin	iking	water	Section	n	
Wate	r Qua	lity Monite	oring an	d Com	plia	nce S	chedul	e		
WS Name				(Classifi	cation P	opulation	Owner Typ	e Pri	imary Source
ROLLING HILLS COL	JNTRY CL	UB			NT	NC	100	Р		GW
ere applicable)			Service	Residenti	ial Co	mmercial	Industri	al Combi	ned	Agricultural
REET			Connections	2						
LTON							1	<u> </u>		1
		Or	ganization					Job Ti	tle	
vitt		Sla	avitt,Connery & Vardimis Partner Law Firm							
ine One		Mailing Address	Line Two				City	State	te Zip Code	
						Norwalk		СТ		06850
Extension	Fax	Mobil	e Phone E	mergency I	Phone	Email Ac	ddress			
Owner		,								
		Or	ganization					Job Ti	tle	
lant		Ro	lling Hills Cou	ıntry Club			General N	/lanager		
ine One		Mailing Address	Line Two				City	State	е	Zip Code
t						Wilton CT C		06897		
Extension	Fax	Mobil	e Phone E	mergency f	Phone	Email Ac	ddress	,		
				203-561-0	4.44					
	Wate WS Name ROLLING HILLS COU ere applicable) REET LTON vitt ine One Extension Owner lant ine One	Water Qual WWS Name ROLLING HILLS COUNTRY CLU ere applicable) REET LTON vitt ine One Extension Fax Owner lant ine One t	Water Quality Monitor WAS Name ROLLING HILLS COUNTRY CLUB REET LTON Or Witt Sla Ine One Extension Fax Mobil Owner Iant Ine One Mailing Address Ro Ine One Mailing Address Mobil Mailing Address Mobil Mailing Address	Water Quality Monitoring and PWS Name ROLLING HILLS COUNTRY CLUB REET Service Connections LTON Organization Witt Slavitt, Connery Ine One Mailing Address Line Two Extension Fax Mobile Phone Extension Owner Organization Rolling Hills Country Mailing Address Line Two Mailing Address Line Two	Water Quality Monitoring and Com WS Name COLLING HILLS COUNTRY CLUB Erer applicable) REET Connections Organization Slavitt, Connery & Vardimis ine One Mailing Address Line Two Owner Organization Extension Fax Mobile Phone Emergency I Organization Rolling Hills Country Club ine One Mailing Address Line Two t Extension Fax Mobile Phone Emergency I Mobile Phone Emergency I Mobile Phone Emergency I Extension Mailing Address Line Two t Extension Mobile Phone Emergency I Extension Mobile Phone Emergency I Extension Mobile Phone Emergency I Extension Emergency I Extension Mobile Phone Emergency I Extension Emergency I	Water Quality Monitoring and Complia Was Name Classific ROLLING HILLS COUNTRY CLUB ere applicable) REET Connections Connecti	Water Quality Monitoring and Compliance Service NTNC PROBLING HILLS COUNTRY CLUB REET LTON Organization Witt Slavitt, Connery & Vardimis ine One Mailing Address Line Two Norwalk Extension Fax Mobile Phone Mailing Address Line Two Organization Mailing Hills Country Club ine One Mailing Address Line Two Moling Hills Country Club ine One Mailing Address Line Two Mobile Phone Emergency Phone Wilton Extension Fax Mobile Phone Emergency Phone Emergency Phone Mailing Address Line Two t Wilton	Water Quality Monitoring and Compliance Schedul WS Name Classification Population NTNC 100 Precent applicable Properties Propertie	Water Quality Monitoring and Compliance Schedule WS Name Classification Population Owner Type ROLLING HILLS COUNTRY CLUB REET Connections REET Connections REET Connections REET Connections REET Connections Residential Commercial Industrial Combination Residential Commercial Industrial Residential Residential Commercial Industrial Residential Residenti	Classification Population Owner Type Problems

Connecticut Department of Public Health Drinking Water Section

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.
- Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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

End of schedule

Schedule Generation Date: 4/3/2024

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule									
PWS ID PWS Name					ssification	Population	Owner Type	Prir	mary Source
CT1615113	THE GRUMMAN HILL MONTESSORI ASSOCIA	ATION			NTNC	259	Р		GW
Local Address (Service	Residen	tial	Commerci	al Industri	al Combin	ed	Agricultural	
34 WHIPPLE RC	AD	Connections	1						

Towns Served: WILTON		1	,
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	600)		
Asbestos (1094)		1 routine	e (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 rout	tine (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		
Lead And Copper (PBCU)		10 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/23 - 12/31/23		Complete
	1/1/24 - 6/30/24		
	7/1/24 - 12/31/24		
Physical Parameters (PPS)		1 rout	tine (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)			
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		
	1/1/26 - 12/31/28		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		
Pesticides, Herbicides and PCBs - Phase II & V (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		
	1/1/26 - 12/31/28		
Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		

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 C			Classification	Population	Owner Type	Primary Source	
CT1615113 THE GRUMMAN HILL MONTESSORI ASSOCIATION			NTNC	259	Р	GW	
Local Address (where applicable)		Service	Resider	itial Commerci	al Industri	al Combine	ed Agricultural
34 WHIPPLE RO	AD	Connections	1				

Towns Served: WILTON

Other Compliance Schedules								
Compliance Schedule Activity	Due Date	Achieved Date						
DISTRIBUTION SYSTEM MATERIALS EVALUATION	8/31/2019							
RESPOND TO SANITARY SURVEY	7/2/2022		_					
CROSS CONNECTION SURVEY REPORT	3/1/2024							
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024							
COMPLETE INITIAL LSL INVENTORY	10/16/2024							

	Wat	er System Facili	ity and Sampling Po	oint In	ventor	У		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		GHM001	KIT SNK PARENTS RM	Α	Υ	2	Υ	
		GHM002	RR PARENTS RM	Α	Υ	2	Υ	
		GHM003	KIT SNK HS L ROOM 2	Α	Υ	2	Υ	
		GHM004	KIT SNK ROOM 3	Α	Υ	2	Υ	
		GHM005	KIT SNK ROOM 4	Α	Υ	2	Υ	
		GHM006	KIT SNK ROOM 5	Α	Υ	2	Υ	
		GHM007	KIT SNK ROOM 6	Α	Υ	2	Υ	
		GHM008	KIT SNK ROOM 8	Α	Υ	2	Υ	
		GHM009	HAND SINK L ROOM 2	Α	Υ	2	Υ	
		GHM010	HAND SINK R ROOM 2	Α	Υ	2	Υ	
		GHM011	RR ROOM 2	Α	Υ	2	Υ	
		GHM012	HAND SINK ROOM 3	Α	Υ	2	Υ	
		GHM013	RR MENS RM ROOM 3	Α	Υ	2	Υ	
		GHM014	RR LADIES RM ROOM 3	Α	Υ	2	Υ	
		GHM015	HAND SINK ROOM 4	Α	Υ	2	Υ	
		GHM016	HAND SINK ROOM 5	Α	Υ	2	Υ	
		GHM017	HAND SINK ROOM 6	Α	Υ	2	Υ	
		GHM018	HAND SINK ROOM 9	Α	Υ	2	Υ	
		GHM019	HAND SINK ROOM 10	Α	Υ	2	Υ	
		GHM020	HAND SINK ROOM 11	Α	Υ	2	Υ	
		GHM021	HAND SINK ROOM 12	Α	Υ	2	Υ	
		GHM022	HAND SINK ROOM 14	Α	Υ	2	Υ	
		GHM023	KIT SNK DBL L ROOM 7	Α	Υ	2	Υ	
		GHM024	KIT SNK DBL R ROOM 7	Α	Υ	2	Υ	
		GHM025	HAND SNK L ROOM 8	Α	Y	2	Y	
		GHM026	HAND SNK R ROOM 8	Α	Y	2	Y	
		GHM027	WTR FOUNTAIN ROOM 8	A	Y	2	Y	
		GHM028	WTR FOUNTAIN ROOM 9	Α	Y	_	Y	
		GHM029	WTR FOUNTAIN ROOM 11		Y	2	Y	
		GHM029	WIR FOUNTAIN ROOM 11	. А	Y	2	Y	

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

PWS ID PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT1615113 THE GRUMMAN HILL MONTESSORI ASSOCIATION					NTNC	259	Р	GW
Local Address (where applicable)		Service Residen		ntial	Commerci	al Industri	al Combine	ed Agricultural
34 WHIPPLE ROAD		Connections	1					

	Water System Facility and Sampling Point Inventory								
Water					Total	Lead and			
System	Water System Facility		Sampling Point		Coliform	Copper		S	tage
Facility ID)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2	DBPR
		GHM030	WTR FOUNTAIN ROOM 12	. A	Υ	2	Υ		
		GHM031	WTR FOUNTAIN ROOM 13	A	Υ	2	Υ		
		GHM033	KIT SNK SING ROOM 9	Α	Υ	2	Υ		
		GHM034	KIT SNK SING ROOM 10	Α	Υ	2	Υ		
		GHM035	KIT SNK SING ROOM 11	Α	Υ	2	Υ		
		GHM036	KIT SNK SING ROOM 12	Α	Υ	2	Υ		
		GHM037	KIT SNK SING ROOM 13	Α	Υ	2	Υ		
		GHM038	KIT SNK DBL ROOM 9	Α	Υ	2	Υ		
		GHM039	KIT SNK DBL ROOM 10	Α	Υ	2	Υ		
		GHM040	KIT SNK DBL ROOM 11	Α	Υ	2	Υ		
		GHM041	KIT SNK DBL ROOM 12	Α	Υ	2	Υ		
		GHM042	UTILITY SNK ROOM 13	Α	Υ	2	Υ		
		GHM043	RR UNISEX	Α	Υ	2	Υ		
		GHM044	BREAKROOM STAFF	Α	Υ	2	Υ		
		GHM045	QUIET RM	Α	Υ	2			
		GHM046	PARENTS RM L SINK	Α	Υ	2			
		GHM047	PARENTS RM S SINK	Α	Υ	2			
		GHM048	STAFF LUNCH RM	Α	Υ	2			
		GHM049	UMA RM S SINK	Α	Υ	2			
		GHM050	RM 9 S SINK	Α	Υ	2			
		GHM051	LATE DAY RM	Α	Υ	2			
		GHM052	RM 12	Α	Υ	2			
		GHM053	RM 10	Α	Υ	2			
		GHM054	KRISTEN RM	Α	Υ	2			
		GHM055	R RM BY BRIGHT RM	Α	Υ	2			
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
10690	WELL 2	2	WELL 2	Α					
54258	WELL 1	2	WELL 1	Α					
62055	NEW DRESSURE TANK								

Certified Operator Information

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

62855 NEW PRESSURE TANK

Facility Classification: SMALL WATER SYSTE	M		Certification
Operator Name	Operator Type	Certification(s)	Expiration
LEMKE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	3/31/2024

	Water Quality Monit	oring an	d Con	npl	iance S	Schedul	e	
PWS ID PWS Name				Cla	ssification	Population	Owner Type	Primary Source
CT1615113 THE GRUMMAN HILL MONTESSORI ASSOCIATION					NTNC	259	Р	GW
Local Address (where applicable)		Service	Residential		Commerci	al Industri	al Combine	ed Agricultural
34 WHIPPLE ROAD		Connections	1					

Connecticut Department of Public Health Drinking Water Section

				Contact Inf	ormation					
Name				Organization			Job Title			
Ms. Wanda Stockfisch				Grumman Hi	II Montessori Assn		Agent			
Mailing Address Lin	e One		Mailing A	Address Line Two			City	State	Zip Code	
34 Whipple Road						Wilton		СТ	06897	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address				
203-762-7397										
Contact Role(s): Le	gal Contact									
Name				Organization	1		Job Title			
Ms. Lois C Amador				Grumman Hi	II Montessori Assoc		Business Manager			
Mailing Address Lin	e One		Mailing A	Address Line Two		City		State	Zip Code	
34 Whipple Road						Wilton		СТ	06897	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	e Email Address				
203-834-0440	12	203-761-	9368			LoisA@SevenAcresMontessori.org				
Contact Role(s): Ac	dministrative (Contact								

Please note the following:

Towns Served: WILTON

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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

End of schedule