	Connecti	cut Department of	f Public l	Health l	Drinki	ng V	Vater S	Section	l
	Wa	ater Quality Monit	coring an	id Comj	plianc	e Scl	nedule		
PWS ID	PWS Name			(Classificati	on Po	oulation O	wner Type	Primary Soul
CT1660262	WOLCOTT COM	IGREGATIONAL CHURCH			NC		31	Р	GW
Local Addres	s (where applicable	2)	Service	Residenti	al Comm	ercial	Industrial	Combin	ed Agricultu
185 CENTER	STREET		Connections	1					
Towns Serve	d: WOLCOTT								
	5 111 010		oring Req	uiremen	ts				
-	•	RIBUTION SYSTEM (WSF I	D: 00600)					/5:	
Total Colifo	= = =	Detect (D)		0.0	Davidad	C-11-		=	T) per quarte
-	ng Point (Sampling			Monitoring		Colle	ction Perio	oa Com	pliance Statu
Select fr	rom inventory of A	ctive Sampling Points		10/1/23 - 1					Complete
				1/1/24 - 3					Complete
				4/1/24 - 6					
Di di In	(000)			7/1/24 - 9	/30/24		4	/ 5:	-1
-	rameters (PPS)	n :			5	o "		=	T) per quarte
-	ng Point (Sampling	•		Monitoring		Colle	ction Perio	oa Com	pliance Statu
Select fr	rom inventory of A	ctive Sampling Points		10/1/23 - 1					Complete
				1/1/24 - 3					Complete
				4/1/24 - 6					
Mator Syste	om Facility: ENT	RY POINT (WSF ID: 00700)		7/1/24 - 9	730/24				
•	•	KT POHVI (WSP ID. 00700)					1 -	outino (P	T) nor quart
	d Nitrite (NOX) ng Point (Sampling	Point ID)		Monitoring	a Pariod	Colla	t r ction Perio	=	T) per quarte pliance Statu
	POINT (3)	rollit ibj		10/1/23 - 1		Cone	Ction Ferio	d Com	Complete
LINITA	-OINT (3)			1/1/24 - 3					Complete
				4/1/24 - 6		<u> </u>			Complete
				7/1/24 - 9					
	Manth	Motor Sustant Fasi	:+. /\A/CT\			na Da		onto	
		y Water System Facil	ity (WSF)	Level ivi	onitori	ng Ke	quirem	ents	
Water Syste		RY POINT (WSFID: 00700)							
Analyte		nitoring Requirement (Summ			iting Limit			Samples	Req/Month
рН		ry Point pH Monitoring (PHRI			num: 7 PF	1			4
Start Date	e: 1/1/2002			iance Histor	y:		ting Limit		toring
				ring Period	'	Comp	liance Stat	us: Comp	oliance Status
				023 - 11/30/					
				023 - 12/31/					
				24 - 1/31/20					
				24 - 2/29/20					
		0.1		24 - 3/31/20					
		Other C	omplianc	e Schedu	iles				
-	Schedule Activity				ue Date		Achieve	ed Date	
	SANITARY SURVEY				/5/2023				
CROSS CONN	IECTION EXEMPTIO	N		3/	1/2027				
		Water System Facil	ity and Sa	mpling F	Point In	vent	ory		
Water						Total			
-	ater System Facilit			oint		Colifor			Stag
Facility ID	ICTRIBUTION OF CO	ID A	Description	ALCYCTE:	Status	Rule	ките Тт	er Asbest	os WQP 2 DB
00600 DI	ISTRIBUTION SYSTE	M 4	DISTRIBUTIO	IN SYSTEM	Α	Y			

	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											
CT1660262	WOLCOTT CONGREGATIONAL CHURCH				NC	31	Р	GW				
Local Address (w	here applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural				
185 CENTER STREET Connections 1												
Towns Served: WOLCOTT												

	Water	System Facili	ity and Sampling P	oint Ir	vento	ry			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
1051	WOLCOTT CONGREGATIONAL TREATMENT STATION								
10793	WELL #1	2	WELL #1	Α					

Certified Operator Information

Water System Facility: WOLCOTT CONGREGATIONAL TREATMENT STATION (WSF ID: 1051)

Facility Classification: CLASS 1 TR	EATMENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
WEID, JEREMIAH J.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2025
		WATER TREATMENT PLANT OPERATOR - CLASS I	12/31/2024

				Contact Inf	ormation				
Name				Organization				Job Title	
Board of Trustees \	Nolcott Cong.	Church							
Mailing Address Lin	e One		Mailin	g Address Line Two			City	State	Zip Code
185 Center Street						Wolcott		СТ	06716
Business Phone	Extension	Fax	•	Mobile Phone	Emergency Phone	Email Ad	dress		
203-879-1293									
Contact Role(s): Le	gal Contact, O	wner							
Name				Organization	l			Job Title	
Mr. Dennis Dean				Wolcott Con	gregational Church				
Mailing Address Lin	e One		Mailin	g Address Line Two			City	State	Zip Code
185 Center Street						Wolcott		СТ	06716
Business Phone	Extension	Fax	•	Mobile Phone	Emergency Phone	Email Ad	dress		
203-879-1293					203-695-1539	dennisrd	ean1258@a	att.net	

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 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			Clas	ssification	Population	Owner Type	Primary Source
CT1660014	ALL SAINTS EPISCOPAL CHURCH				NC	25	Р	GW
Local Address (w	here applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
282 BOUNDLINE	ROAD	Connections			1			

Towns Served: WOLCOTT			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	00)		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/23 - 11/30/23		Complete
	12/1/23 - 12/31/23		Complete
	1/1/24 - 1/31/24		Complete
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		
	4/1/24 - 4/30/24		
	5/1/24 - 5/31/24		
	6/1/24 - 6/30/24		
	7/1/24 - 7/31/24		
	8/1/24 - 8/31/24		
	9/1/24 - 9/30/24		
	10/1/24 - 10/31/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)		1 rd	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		
Water System Facility: WELL (WSF ID: 22600)			
E. Coli (3014)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	11/1/23 - 11/30/23		Complete

12/1/23 - 12/31/23

1/1/24 - 1/31/24

Complete

Complete

	Co	onnectic	ut Dena	rtment o	f Public	Health I	Drin	king V	Nater S	ection	
	Ŭ.		•	ity Moni						0001011	
PWS ID	DV	VS Name	ici Quai	ity Moin	toring a					wnor Typo I	Primary Source
CT1660014		L SAINTS EPISO	CODAL CHILD	CL			N(25	P P	GW
		re applicable)	COT AL CITOR		Service	Residentia		nmercial	Industrial	Combined	
282 BOUN					Connection		ui coi	1	maastriar	Combine	Agriculturur
Towns Serv								-			
TOWNS SELF	veu. Wo.			Monit	oring Re	quiremen	tc				
Water Sys	stem Fac	cility: WELL	(WSF ID: 22		oring ne	quireinen					
E. Coli (3	3014)								1 r	outine (RT) per month
_	-	t (Sampling Po	oint ID)			Monitoring	g Perio	d Coll	ection Perio	-	liance Status
						2/1/24 - 2	/29/24	1		С	omplete
						3/1/24 - 3	/31/24	1			
						4/1/24 - 4	/30/24	1			
						5/1/24 - 5	/31/24	1			
						6/1/24 - 6	/30/24	1			
						7/1/24 - 7	//31/24	1			
						8/1/24 - 8	3/31/24	1			
						9/1/24 - 9	/30/24	1			
						10/1/24 - 1	.0/31/2	24			
			Water Sy	stem Faci	lity and S	ampling F	oint	Invent	tory		
Water								Tota			-
•	water S	ystem Facility	3	Sampling Point ID	t Sampling F Description			Colifo			Stage
Facility ID	DICTRIRI	ITIONI CVCTENA			•		Stat		e Kule He	er Asbestos	WQP 2 DBPR
00600	DISTRIBL	JTION SYSTEM		4		ION SYSTEM	A				
				DOWNSTREAM			A				
00700	ENITOV D	OINT		UPSTREAM		SERVICE CON	A				
	ENTRY P	OINT		3	ENTRY POI	IN I	A				
22600		CALT DI AAIT		2	WELL		Α				
60918	TREATIVI	ENT PLANT									
					ntact Info	rmation					
Name					Organization					Job Title	
Mr. Eric Sa						copal Church		-	Iunior Warde		
Mailing Ad		e One		Mailing Addre	ss Line Two				City	State	Zip Code
PO Box 60:								Wolcott		СТ	06716
Business		Extension	Fax		ile Phone	Emergency P		Email Add	dress		
203-879		10	203-758-2	1/69		203-597-78	838				
	oie(s): Le	egal Contact									
Name	n: -			C	Organization					Job Title	
Episcopal I	Diocese o	of Connecticut									
Mailing Ad	allocation of the	- 0		Mailing Addres	1 to				City	State	Zip Code

Mobile Phone

Hartford

Emergency Phone Email Address

CT

06105-2295

1335 Asylum Avenue

Extension

Fax

Business Phone

800-233-4481 Contact Role(s): **Owner**

C	onnectici	ut Depa	rtment	of Public	Health	Drir	ıking	g Water	Section	
	Wat	er Qua	lity Mon	itoring a	nd Con	nplia	nce S	Schedul	e	
PWS ID PY	WS Name					Classif	ication	Population	Owner Type	Primary Source
CT1660014 A	LL SAINTS EPISC	COPAL CHUR	RCH		N	С	25	Р	GW	
Local Address (who	ere applicable)			Service	Resider	ntial Co	mmerci	al Industri	al Combine	ed Agricultural
282 BOUNDLINE R	OAD			Connection	ns		1			
Towns Served: WC	LCOTT								1	
Name				Organization					Job Titl	e
Mr. Phil J. Mazur				All Saints Chur	rch			Junior Wa	ırden	
Mailing Address Li	ne One		Mailing Addr	ess Line Two				City	State	Zip Code
P.O. Box 6015							Wolcot	:t	СТ	06716
Business Phone	Extension	Fax	Mo	bile Phone	Emergency	y Phone	Email A	Address	1	
860-995-8910										
Contact Role(s): A	Administrative (Contact	'	"						

Please note the following:

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

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

End of schedule

	Connecticut Depa	rtmen	t of P	ublic H	ealth	Dı	rinking	y Wa	ter S	ection	
	Water Qual						_			0001011	
PWS ID	PWS Name					_				wner Type I	Primary Source
CT1660084	KRYSTAL GARDENS						NC	25		Р	GW
Local Address ((where applicable)			rvice	Residen	tial	Commerci	ial Ind	ustrial	Combined	d Agricultural
1146 SPINDLE	HILL ROAD		Со	nnections			1				
Towns Served:	WOLCOTT										
		Mo	onitori	ng Requ	ireme	nts	.				
Water Systen	n Facility: DISTRIBUTION SY	STEM (V	WSF ID: 0	00600)							
Total Colifor	-								1 r		per quarter
	Point (Sampling Point ID)				Monitori			Collectio	n Perio		liance Status
Select fro	m Inventory of Active Sampling	Points			10/1/23 -						omplete
					1/1/24 -					С	omplete
					4/1/24 -						
Dharainal Daw	(DDC)				7/1/24 -	9/3	0/24		4		
•	ameters (PPS) Point (Sampling Point ID)				Monitori	ina B	Pariod C	Collectio			per quarter
	m Inventory of Active Sampling	Points			10/1/23 -			.onectio	II PEIIO		omplete
Sciectifo	m inventory of Active Sampling	1 011163			1/1/24 -						omplete
					4/1/24 -		-				ompiete
					7/1/24 -		-				
Water Systen	n Facility: ENTRY POINT (W	/SF ID: 00	700)			-					
Nitrate And	Nitrite (NOX)									1 routine (RT) per year
Sampling	Point (Sampling Point ID)				Monitori	ing P	Period C	Collectio		-	liance Status
ENTRY PO	DINT (3)				1/1/23 -	12/3	31/23			С	omplete
					1/1/24 -	12/3	31/24			C	omplete
					1/1/25 -	12/3	31/25				
		Public	Notifie	cation R	equire	eme	ents				
			Comp	oliance	Notice		<u>Public N</u>	otificat	<u>ion</u>	PN Ce	rtification
Violation/Situe	ation		Pe	riod	Tier		Required	Perf	rmed	Due to DPF	H Received
GROUNDWATE	ER RULE TT Violation		6/17/23	3 - 2/1/24	2		11/9/2023			11/19/2023	3
	Water Sy	stem F	acility	and Sar	npling	Ро	int Inve	entory	•		
Water									ead an		
*	ter System Facility			mpling Poil	nt			_	Coppe		Stage
Facility ID	EDIDLITION CVCTENA	ID		scription	LCVCTEN		Jiulus		Kuie III	er Aspestos	WQP 2 DBPR
00600 DIS	TRIBUTION SYSTEM	4		STRIBUTION THIN 5 SER			Α	Y			
		UPSTREA		THIN 5 SER			A A				
00700 ENT	RY POINT	3		TRY POINT	VICE COI	•	A				
22607 WE		2	W				A				
	ATMENT PLANT		771								
	SSURE TANKS										
222.7 . 112			Conta	ct Inforr	nation						
			Conta		nation						

Job Title Name Organization Ms. Lisa Mottillo Krystal Gardens Mailing Address Line One Mailing Address Line Two City State Zip Code 42 Ferrone Avenue Waterbury CT 06705 **Business Phone Mobile Phone** Emergency Phone Email Address Extension Fax

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 H	leaitn	וע	rinking	g water	Section	
	Water Quality Mor	nitoring and	d Con	npl	iance S	Schedul	le	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1660084	KRYSTAL GARDENS			NC	25	Р	GW	
Local Address	(where applicable)	Service	Resider	itial	Commerci	al Industri	al Combine	ed Agricultural
1146 SPINDLE	HILL ROAD	Connections			1			
Towns Served	: WOLCOTT				,			
203-879-40	050				krystai	gardenscate	ring@yanoo.	com
Contact Role	Administrative Contact Legal Contact	Owner						

Compositions Department of Dublic Health Driving Meter Coation

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

End of schedule

Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 7/1/24 - 9/30/24 Physical Parameters (PPS) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Community of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 7/1/24 - 9/30/24 Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 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) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	Primary Sourc		
PWS ID PWS Name CT1660094 FARMINGBURY GOLF COURSE NC 49 P Local Address (where applicable) Service Connections No volume Type Connections Residential Commercial Industrial Combination of the Connection of t	GW ed Agricultura T) per quarter pliance Status Complete		
CT1660094 FARMINGBURY GOLF COURSE Local Address (where applicable) Monitoring Requirements Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Select from Inventory of Active Sampling Points Local Local Entry Point (Sampling Point ID) Select from Inventory of Active Sampling Points Local Local Entry Point (Sampling Point ID) Select from Inventory of Active Sampling Points Local Local Entry Point (Sampling Point ID) Select from Inventory of Active Sampling Points Local Local Entry Point (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Come Come Come Come Come Come Come Come	GW ed Agricultura T) per quarter pliance Status Complete		
Local Address (where applicable) 141 EAST STREET Connections Monitoring Requirements Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Select from Inventory of Active Sampling Points Physical Parameters (PPS) Select from Inventory of Active Sampling Points Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 Physical Parameters (PPS) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 Physical Parameters (PPS) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 7/1/24 - 9/30/24 Physical Parameters (PPS) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 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) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Come ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	Agricultura T) per quarter pliance Status Complete		
Monitoring Requirements Monitoring Requirements	T) per quarter pliance Status Complete		
Towns Served: WOLCOTT Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 6/30/24 7/1/24 - 9/30/24 Physical Parameters (PPS) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 Physical Parameters (PPS) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 6/30/24 4/1/24 - 6/30/24 4/1/24 - 6/30/24 4/1/24 - 6/30/24 4/1/24 - 6/30/24 7/1/24 - 9/30/24 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Come ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	complete		
Monitoring Requirements Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100)	complete		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100)	complete		
Total Coliform (3100) Sampling Point (Sampling Point ID) Monitoring Period Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 7/1/24 - 9/30/24 Physical Parameters (PPS) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 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) Nitrate And Nitrite (NOX) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	complete		
Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 7/1/24 - 9/30/24 Physical Parameters (PPS) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 7/1/24 - 9/30/24 Physical Parameters (PPS) Sampling Point (Sampling Point ID) Monitoring Period Collection Period Come Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 9/30/24 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	complete		
Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 3/31/24 4/1/24 - 6/30/24 7/1/24 - 9/30/24 Physical Parameters (PPS) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 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) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	Complete		
1/1/24 - 3/31/24 4/1/24 - 6/30/24 7/1/24 - 9/30/24			
A/1/24 - 6/30/24 7/1/24 - 9/30/24 Physical Parameters (PPS) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 1/1/24 - 6/30/24 7/1/24 - 9/30/24 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	Complete		
Physical Parameters (PPS) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 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) Nitrate And Nitrite (NOX) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	_		
Physical Parameters (PPS) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 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) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)			
Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 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) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)			
Select from Inventory of Active Sampling Points 10/1/23 - 12/31/23 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) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	T) per quarter		
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) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	pliance Status		
4/1/24 - 6/30/24 7/1/24 - 9/30/24 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	Complete		
7/1/24 - 9/30/24 Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	Complete		
Water System Facility: ENTRY POINT (WSF ID: 00700) Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)			
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)			
Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)			
ENTRY POINT (3) 1/1/23 - 12/31/23 1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	(RT) per year		
1/1/24 - 12/31/24 1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	Compliance Status		
1/1/25 - 12/31/25 Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	Complete		
Monthly Water System Facility (WSF) Level Monitoring Requirements Water System Facility: ENTRY POINT (WSFID: 00700)	Complete		
Water System Facility: ENTRY POINT (WSFID: 00700)			
Analysis Manitaving Paguiyamant (Summany Tuna) Quanting Limit Samula			
Analyte Monitoring Requirement (Summary Type) Operating Limit Samples	s Req/Month		
pH Entry Point pH Monitoring (PHRD) Minimum: 6.4 PH	4		
Start Date: 3/1/2010 Compliance History: Operating Limit Moni	toring		
	oliance Status:		
11/1/2023 - 11/30/2023			
12/1/2023 - 12/31/2023			
1/1/2024 - 1/31/2024			
2/1/2024 - 2/29/2024			
3/1/2024 - 3/31/2024			

Public Notification Requirements									
	Compliance	Notice	Public No	tification	PN Certification				
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received			
E. Coli	10/10/17 - 12/31/17	3	12/28/2018		1/7/2019				

	Water System Facility and Sampling Point Inventory										
Water System Facility IL		Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR		
00600	DISTRIBUTION SYSTEM		DISTRIBUTION SYSTEM WITHIN 5 SERVICE CON	A A	Υ						

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

PWS ID PWS Name C					Population	Owner Type	Primary Source
CT1660094 FARMINGBURY GOLF COURSE					49	Р	GW
Local Address (where applicable)		Service	Residen	tial Commerc	ial Industri	al Combine	ed Agricultural
141 EAST STREET		Connections		2			

Towns Served: WOLCOTT

Water System Facility and Sampling Point Inventory											
Water System Water System For Facility ID	acility Sampling Poin ID	t Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier			stage DBPR			
	UPSTREAM	WITHIN 5 SERVICE CON	Α								
00700 ENTRY POINT	3	ENTRY POINT	Α								
22608 WELL	2	WELL	Α								
56730 TREATMENT PLA	ANT										

Contact Information										
Name Organization					1	Job Title				
Mr. Christopher Dinunzio Farmingbury Golf Course										
Mailing Address Lin	e One		Mailing Addr	ess Line Two					Zip Code	
141 East Street						Wolcott		СТ	06716	
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Address				
203-879-8823						CZO71@	yahoo.com			

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 schedule.

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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				Classification		Population	Owner Type	Primary Source		
CT1660114	NUTMEG FARMS CT LLC			NC		25	Р	GW		
Local Address (v	here applicable)	Service	Residen	ntial Commerci		al Industri	al Combine	ed Agricultural		
1520 WOLCOTT ROAD		Connections		1						
Towns Served: V	VOLCOTT									

Towns Served: WOLCOTT							
	Ionitoring Requ	iremen	ts				
Water System Facility: DISTRIBUTION SYSTEM ((WSF ID: 00600)						
Total Coliform (3100)				1 r	outine (RT) p	er quarter	
Sampling Point (Sampling Point ID)	ı	Monitoring	Period	Collection Perio	od Complia	nce Status	
Select from Inventory of Active Sampling Points	-	10/1/23 - 1	2/31/23		Cor	nplete	
		1/1/24 - 3/31/24					
		4/1/24 - 6	/30/24				
		7/1/24 - 9	/30/24				
Physical Parameters (PPS)				1 r	outine (RT) p	er quarter	
Sampling Point (Sampling Point ID)	ı	Monitoring	Period	Collection Perio	od Complic	nce Status	
Select from Inventory of Active Sampling Points	-	10/1/23 - 1	2/31/23		Cor	nplete	
		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: 0	0700)						
Nitrate And Nitrite (NOX)					1 routine (R	Γ) per year	
Sampling Point (Sampling Point ID)		Monitoring Period Collection Pe			iod Compliance Status		
ENTRY POINT (3)		1/1/23 - 12/31/23			Complete		
		1/1/24 - 12	2/31/24				
		1/1/25 - 12	2/31/25				
Oth	ner Compliance	Schedu	les				
Compliance Schedule Activity		Du	ıe Date	Achieve	ed Date		
RESPOND TO SANITARY SURVEY		5/2	25/2023				
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN		8/2	25/2023				
CROSS CONNECTION SURVEY REPORT		3/	1/2024				
Public	c Notification R	equiren	nents				
	Compliance	Notice		Notification Notification	PN Certi	fication	
Violation/Situation	Period	Tier	Required		Due to DPH	Received	
Distribution Color MCL Violation	1/1/07 - 3/31/07	2	8/29/200		9/8/2007		
GROUNDWATER RULE TT Violation	8/26/23 -	2	11/5/202	3	11/15/2023		

GINOOND	WATER ROLL II VIOIALI	211	0/20/	23	_	11/3/2	023	11/13/2023				
	Water System Facility and Sampling Point Inventory											
Water System Facility ID	Water System Facility	Sampling		npling Poin cription	ot	Status	Total Coliform Rule		Asbestos		Stage 2 DBPR	
00600	DISTRIBUTION SYSTEM	<i>1</i> 4	DIS	TRIBUTION	SYSTEM	Α	Υ					
		DOWNSTF	REAM WIT	HIN 5 SER	VICE CON	Α						
		UPSTRE	AM WIT	HIN 5 SER	VICE CON	Α						
00700	ENTRY POINT	3	ENT	RY POINT		Α						
22610	WELL	2	WE	LL		Α						
54157	TREATMENT PLANT		·	·			·					

CT1660114	NUTMEG FARMS CT LLC	NC	25	Р	GW					
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source					
	Water Quality Monitoring and Compliance Schedule									
	Connecticut Department of Public Health Drinking water Section									

- CD | Lite | Health | Detail to AMara - Coart

Local Address (where applicable)	Service	Residential	Commercial	Industria	I Combined	Agricultural
1520 WOLCOTT ROAD	Connections		1			

Towns Served: WOLCOTT

				Contact Inf	ormation			
Name				Organization	1		Job Title	
Mr. Randy Petronir	10			Nutmeg Farr	ns CT LLC			
Mailing Address Line One Mailing Add			Address Line Two		City	State	Zip Code	
114 Harrison Drive						Wolcott	СТ	06716
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
	203-879-18				203-509-4005	petro917@aol.com		

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 schedule.

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

End of schedule

	Connecticut Departme	nt of Public H	[ealth	Drinkir	σΙ	Nater	Se	ction	
	Water Quality M				_			Ction	
PWS ID	PWS Name	9 8		Classification				ner Type Pr	imary Sourc
CT1660134	J & M PIZZA			NC		25		P	GW
Local Address	(where applicable)	Service	Residen	tial Comme	cial	Industri	al	Combined	Agricultura
1512 WOLCOT	T ROAD	Connections		1					
Towns Served:	: WOLCOTT		I	'					1
	N	Ionitoring Requ	iireme	nts					
Nater Syster	m Facility: DISTRIBUTION SYSTEM ((WSF ID: 00600)							
Total Colifor	m (3100)					1	rou	utine (RT) p	er quarte
Sampling	Point (Sampling Point ID)		Monitori	ng Period	Colle	ection Pe	riod	Complic	ance Status
Select fro	m Inventory of Active Sampling Points		10/1/23 -	12/31/23				Cor	mplete
			1/1/24 -	3/31/24				Cor	mplete
			4/1/24 -	6/30/24					
			7/1/24 -	9/30/24					
Physical Par	ameters (PPS)					1	rou	utine (RT) p	er quarte
Sampling	Point (Sampling Point ID)		Monitori	ng Period	Colle	ection Per	riod	Complic	ance Status
Select fro	om Inventory of Active Sampling Points		10/1/23 -	12/31/23				Cor	mplete
			1/1/24 -	3/31/24				Cor	mplete
				6/30/24					
			7/1/24 -	9/30/24					
Water Syster	m Facility: ENTRY POINT (WSF ID: 0	00700)							
Nitrate (104	•							utine (RT) p	-
	Point (Sampling Point ID)			ng Period	Colle	ection Per	riod	-	ince Status
ENTRY PO	DINT (3)			12/31/23					mplete
				3/31/24				Cor	mplete
				6/30/24					
			7/1/24 -	9/30/24					
Nitrite (104								routine (R	
	Point (Sampling Point ID)			ng Period	Colle	ection Per	riod	-	ince Status
ENTRY PO	DINT (3)			12/31/23					mplete
			• •	12/31/24				Cor	mplete
				12/31/25					
	Publi	c Notification R	equire	ments					
		Compliance	Notice	<u>Public</u>	Notij	<u>fication</u>		PN Certi	<u>fication</u>
Violation/Situ		Period	Tier	Require		Performe		Due to DPH	Received
	M&R Violation	6/1/04 - 6/30/04	2	12/8/200				.2/18/2004	
Total Coliform	M&R Violation	1/1/06 - 3/31/06	2	6/30/200)6			7/10/2006	
	Water System	Facility and Sar	npling	Point Inv	ent	ory			
Water					Tota				
System Wa	ter System Facility Sampling	Point Sampling Poi	nt	C	olifor	m Cop	oer		Stage

	V	later System Facili	ty and Sampling F	Point Ir	nvento	ry			
Water					Total	Lead and			
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper			Stage
Facility ID)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
22612	WELL	2	WELL	Α					
60668	TREATMENT PLANT								

	Water Qual	ity Monitoring and			C					
PWS ID	PWS Name			Cla	ssification	Population	ı Ov	wner Type	Prir	mary Source
CT1660134	J & M PIZZA				NC	25		Р		GW
Local Address (where applicable)		Service	Residen	ntial	Commercia	ial Industri		Combine	ed	Agricultural
1512 WOLCO	1512 WOLCOTT ROAD		ons		1					

Connecticut Department of Public Health Drinking Water Section

			(Contact Inf	ormation				
Name				Organization	1			Job Title	
Mr. Felix Garcia				Garcia Resta	urant, LLC		Owner		
Mailing Address Line One M		Mailing Address Line Two			City		State	Zip Code	
1512 Wolcott Rd						Wolcott		СТ	06716
Business Phone	Extension	Fax	N	Mobile Phone	Emergency Phone	Email Ac	ldress		
203-560-8243					203-560-8243	felixo19	31@icloud.cor	n	

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

Towns Served: WOLCOTT

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

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

End of schedule

	Connecticut Department of Water Quality Moni				C			ection	
	water Quality Mon	toring am	u Gon	ıhı	lance	cheuu	וכ		
PWS ID	PWS Name				ssification	Population	Ow	ner Type	Primary Source
CT1660154	THE LAKE HOUSE				NC	300		Р	GW
Local Address	Service	Residen	tial	Commerci	al Industr	ial	Combine	d Agricultural	
66 CENTRAL AVENUE		Connections			1				

Towns Served: WOLCOTT			
Monitoring Re	quirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
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		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/30/24		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
FNTRY POINT (3)	1/1/23 - 12/31/23		Complete

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		_

	Wate	er System Facili	ty and Sampling P	oint Ir	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 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		LAKE005	BRIDAL SUITE #1 SINK	Α	Υ	2	Υ	
		LAKE006	WOMENS BATH SINK #1	Α	Υ	2		
		LAKE007	WOMENS BATH SINK #2	Α	Υ	2		
		LAKE008	WOMENS BATH SINK #3	Α	Υ	2		
		LAKE009	WOMENS BATH SINK #4	Α	Υ	2		
		LAKE010	BRIDAL SUITE SINK #2	Α	Υ	2		
		LAKE011	MENS BATH SINK #1	Α	Υ	2		
		LAKE012	MENS BATH SINK #2	Α	Υ	2		
		LAKE013	MENS BATH SINK #3	Α	Υ	2		
		LAKE014	KITCHEN BATH SINK	Α	Υ	2		
		LAKE015	KITCHEN HAND SINK	Α	Υ	2		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
22614	WELL	2	WELL	Α				
62674	ATMOSPHERIC STORAGE							
62675	VFD BOOSTER PUMPS							

	donnecticat Departi	meme of a dome in	Carcii			, water	been	11	
	Water Quality	Monitoring and	d Con	npl	liance S	Schedu	le		
PWS ID	PWS Name			Cla	ssification	Population	Owner Typ	e Pr	rimary Source
CT1660154	THE LAKE HOUSE				NC	300	Р		GW
Local Address (where applicable)		Service	Residen	ntial	Commercia	al Industr	ial Comb	ned	Agricultural
66 CENTRAL A	66 CENTRAL AVENUE				1				

Connecticut Department of Public Health Drinking Water Section

Towns Served: WOLCOTT

66 CENTRAL AVENUE

zation tral Ave LLC	Member City	Job Title	Zip Code	
		State	7in Codo	
Two	City	State	7in Codo	
. 1110	City	State	Zip Code	
	Wolcott	06716		
one Emergency Phone	Email Address			
914-490-4821	66centralace@gmail.com			
		one Emergency Phone Email Address	one Emergency Phone Email Address	

Contact Role(s): Administrative 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.
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End of schedule

	Conne	cticut Dep	artment of	Public F	lealth I	Drink	ing Wa	ater Se	ction	
			ality Monit	oring an						
PWS ID CT166016	PWS Name 1189 WOL	COTT ROAD			С	lassificat NC		lation Owr 37	ner Type Pr P	imary Source GW
	ress (where applic	cable)		Service	Residentia	al Comm	nercial Ir	ndustrial	Combined	Agricultural
	LCOTT ROAD			Connections		1	1			
Towns Sei	rved: WOLCOTT									
\A/=+== C.		DISTRIBUTION		oring Requ	uiremen	ts				
	vstem Facility: I	DISTRIBUTION	SYSTEM (WSF II	D: 00600)				4	· · · · /DT\	
	oliform (3100)	ling Boint ID			Monitorina	. Dorind	Callage			er quarter
-	pling Point (Samp		a Doints		Monitoring		Conect	ion Period	-	nnce Status
Selec	ct from Inventory	of Active Sampin	ig Politis		10/1/23 - 1					mplete
					1/1/24 - 3				Col	nplete
					4/1/24 - 6					
Dhysical	Davamatava /Di	nc\			7/1/24 - 9	/30/24		1 40.	tino (DT) u	
-	Parameters (Pi pling Point (Samp				Monitoring	n Dariad	Collect	1 rou ion Period		per quarter ance Status
_	ct from Inventory		ng Points		10/1/23 - 1		Conect	ion Periou		mplete
Selec	t from inventory	of Active Samplin	ig Politis		1/1/24 - 3					nplete
					4/1/24 - 6				COI	пріесе
					7/1/24 - 9					
Water Sv	stem Facility: I	ENTRY POINT (WSF ID: 00700)		7/1/24-5	750724				
	And Nitrite (NO	•	1131 121 007 007					1	routine (R	T) per year
	pling Point (Samp	•			Monitoring	n Period	Collect	ion Period	=	ince Status
_	RY POINT (3)	mig i ome ib,			1/1/23 - 12		Conce	ion i criou	-	nplete
LIVII	(1) (3)				1/1/24 - 12					nplete
					1/1/25 - 12					
	Mon	thly Water	System Facil	ity (WSF)			ing Req	uiremei	nts	
Water Sy	stem Facility: E	NTRY POINT (WSFID: 00700)							
Analy	te	Monitoring Req	uirement (Summa	ary Type)	Opera	ting Limi	t		Samples Re	q/Month
рН			∕lonitoring (PHRD		Minim	um: 6.4	PH		4	
Start [Date: 10/1/2009			Compli	ance History	y:	Operatii	ng Limit	Monitori	ing
				Monito	ring Period			nce Status:		nce Status:
				11/1/20)23 - 11/30/	2023	-			
				12/1/20)23 - 12/31/	2023				
				1/1/202	24 - 1/31/20	24				
				2/1/202	24 - 2/29/20	24				
				3/1/202	24 - 3/31/20	24				
			Other Co	ompliance	Schedu	les				
Complian	ce Schedule Activ	ity			Du	ıe Date		Achieved I	Date	
RESPOND	TO SANITARY SUI	RVEY			9/2	29/2019				
		Water 9	System Facili	ty and Sa	mpling P	oint Ir	nvento	ry		
Water							Total	Lead and		
System	Water System Fo	acility	Sampling Point		int		Coliform			Stage
Facility ID			ID	Description		Status		Rule Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION S	YSTEM	4	DISTRIBUTIO		Α	Y			
			DOWNSTREAM			Α				
			UPSTREAM	WITHIN 5 SE	RVICE CON	Α				

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

			<u> </u>		1				
PWS ID	PWS Name				Clas	ssification	Population	Owner Type	Primary Source
CT1660164	1189 WOLCOTT ROAD)				NC	37	Р	GW
Local Address (v	where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
1189 WOLCOTT	ROAD		Connections			1			

Towns Served: WOLCOTT

	Wa	iter System Facili	ity and Samplin	g Point Ir	iventoi	ſy			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	•	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00700	ENTRY POINT	3	ENTRY POINT	Α					
22615	WELL	2	WELL	Α					
56456	TREATMENT PLANT								

			Co	ontact Info	ormation				
Name				Organization				Job Title	
Mr. Steven Cronan							Owner		
Mailing Address Line One Mailing Add			Mailing Addr	ess Line Two			City	State	Zip Code
1189 Wolcott Road						Wolcott		СТ	06716
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	dress		
203-257-5546					203-509-3413	sjcsjw@g	gmail.com		

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 schedule.

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

End of schedule

Schedule Generation Date: 4/3/2024

	Connecticut Departm					0		ection	
	Water Quality	Monit	oring and	d Comp	olianc	e Sche	edule		
PWS ID	PWS Name			С	lassificati	on Popu	lation O	wner Type F	rimary Source
CT1660194	PLAZA AT 382-390 WOLCOTT ROA	D- BACK V	VELL		NC	2	25	Р	GW
Local Address (v	vhere applicable)		Service	Residentia	l Comm	ercial Ir	dustrial	Combined	l Agricultural
382-390 WOLCC	OTT ROAD		Connections		1				
Towns Served: V	WOLCOTT								
		Monit	oring Requ	iirement	ts				
Water System	Facility: DISTRIBUTION SYSTEM	И (WSF I	D: 00600)						
Total Coliform	n (3100)						1 r	outine (RT)	per quarter
Sampling F	Point (Sampling Point ID)			Monitoring	Period	Collect	ion Perio	d Compl	iance Status
Select from	n Inventory of Active Sampling Point	S	-	10/1/23 - 12	2/31/23			Co	omplete
				1/1/24 - 3,	/31/24			Co	omplete
				4/1/24 - 6,	/30/24				
				7/1/24 - 9,	/30/24				
Physical Para	meters (PPS)						1 r	outine (RT)	per quarter
Sampling F	Point (Sampling Point ID)			Monitoring	Period	Collect	ion Perio	d Compl	iance Status
Select from	Inventory of Active Sampling Point	S	:	10/1/23 - 1	2/31/23			Co	omplete
				1/1/24 - 3,	/31/24			Co	omplete
				4/1/24 - 6,	/30/24				
				7/1/24 - 9/	/30/24				
Water System	Facility: ENTRY POINT (WSF ID): 00700)							
Nitrate And N	litrite (NOX)							1 routine (RT) per year
	Point (Sampling Point ID)			Monitoring	Period	Collect	ion Perio	-	iance Status
ENTRY POI				1/1/23 - 12				_	omplete
	,			1/1/24 - 12					omplete
									_
		Other C	ompliance						
Compliance Sch			•		e Date		Achieve	d Date	
-	NITARY SURVEY				9/2020				
RESPOND TO SA					0/2020				
TEST STEET ST		alic Not	ification R	,	•				
	Pul			<u> </u>			••		
Violetion /Citual	tion.	C	ompliance Period	Notice		<u>ic Notifica</u>			<u>tification</u>
Violation/Situat		7/1		Tier	Requir		formed	Due to DPH	
Total Coliform N	eters M&R Violation		/23 - 9/30/23	3	12/10/2			12/20/2024	
Total Collform N			/23 - 9/30/23	3	12/10/2			12/20/2024	
	Water Syster	m Facili	ity and Sar	npling P	oint In	vento	ſy		
Water						Total	Lead ar		
	er System Facility Sample	_	Sampling Poin	nt		Coliform	Coppe		Stage
Facility ID		ID	Description		Status	Rule	Rule Ti	er Asbestos	WQP 2 DBPR
00600 DISTE	RIBUTION SYSTEM	4	DISTRIBUTION		Α	Υ			
			WITHIN 5 SER		Α				
		TREAM	WITHIN 5 SER	VICE CON	Α				
00700 ENTR	RY POINT	3	ENTRY POINT		Α				

WELL

Α

2

22618

WELL

59388 TREATMENT PLANT

	Connecticut	Department of	r Public H	lealth	Di	rinking	g water	Section	
	Water	r Quality Monit	oring and	d Con	npl	iance S	Schedul	e	
PWS ID	PWS Name				Clas	ssification	Population	Owner Type	Primary Source
CT1660194	PLAZA AT 382-390 V	VOLCOTT ROAD- BACK V	VELL		NC		25	Р	GW
Local Address	(where applicable)	Service	Residen	ntial Commercial		al Industri	al Combin	ed Agricultura	
382-390 WOL	COTT ROAD		Connections			1			
Towns Served	: WOLCOTT		·				·	·	
		Cor	tact Inform	mation	1				
Name		0	rganization					Job Titl	e
Mr. Domenick	c Parziale								
Mailing Addre	ss Line One	Mailing Addres	s Line Two				City	State	Zip Code
10050 Valiant	Ct	Apt 102			Miromar		ar Lakes	FL	33913

A CD blad Hall Datel to March Court

Emergency Phone Email Address

Extension

Contact Role(s): Le	gal Contact, O	wner								
Name				Organization	l		Job Title			
Vincenzo Parziale										
Mailing Address Line One Mailing Ad				ess Line Two		City	State	Zip Code		
10 High Ridge Run						Bristol	СТ	06010		
Business Phone	Extension	Fax	Мо	obile Phone	Emergency Phone	Email Address				
			20:	3-233-8273	203-768-4911	Vparziale782@gmai	il.com			

Mobile Phone

203-768-4911

Contact Role(s): Administrative Contact

Please note the following:

Business Phone

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.

Fax

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

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

End of schedule

C	onnecticut Depa	rtment of Pu	blic H	lealth D	rinkir	ng V	<i>N</i> ater	Se	ction	
	Water Qua	lity Monitorii	ng an							
	VS Name			Cla		n Po	-	Owr		mary Source
	OCKSTAR LOUNGE			I	NC		35		Р	GW
Local Address (whe		Serv		Residential	Comme	rcial	Industria	al	Combined	Agricultural
1652 WOLCOTT RO		Coni	nections		1					
Towns Served: WO	ССОТТ									
		Monitoring	<u> </u>	iirements	5					
•	cility: DISTRIBUTION S	YSTEM (WSF ID: 00	600)						(2=)	
Total Coliform (0 d = (t = ()	D =! =!	C-11				er quarter
	nt (Sampling Point ID)	Dalata		Monitoring I		Colle	ection Per	100		nce Status
Select from in	ventory of Active Sampling	Points		10/1/23 - 12/						nplete
				1/1/24 - 3/3					Con	nplete
				4/1/24 - 6/3						
Dhysical Davassa	tore (DDC)			7/1/24 - 9/3	50/24		1		+: /DT\	
Physical Parame	• •			Monitoring I	Dariad	Call				er quarter
	nt (Sampling Point ID) ventory of Active Sampling	Points				Cone	ection Per	ioa		nce Status
Select Holli III	ventory of Active Sampling	POIITS		10/1/23 - 12/						nplete nplete
				1/1/24 - 3/3 4/1/24 - 6/3					COI	пріесе
				7/1/24 - 9/3						
Water System Fa	cility: ENTRY POINT (V	VSE ID: 00700\		77 17 24 - 37 3	00/24					
•	cility. ENTRY POINT (V	V3F ID. 00700)					1		tina (DT) m	
Nitrate (1040)	nt (Sampling Point ID)			Monitoring I	Period	Colle	⊥ ection Per			er quarter Ince Status
ENTRY POINT				10/1/23 - 12 _/		Cone	ection Per	iou		nplete
LIVIKITOINI	(3)			1/1/24 - 3/3						nplete
				4/1/24 - 6/3						IIpiete
				7/1/24 - 9/3						
Nitrate And Nitr	ite (NOX)			,, 1, 2, 3, 0	.0, 2 :			1	routine (R)	Γ) per year
	nt (Sampling Point ID)			Monitoring I	Period	Colle	ection Per		-	nce Status
ENTRY POINT	· · · · · · · · · · · · · · · · · · ·			1/1/23 - 12/						nplete
	. ,			1/1/24 - 12/	-					nplete
				1/1/25 - 12/						·
Water System Fa	cility: WELL (WSF ID: 2	2620)								
E. Coli (3014)	, .	·					1	rou	tine (RT) p	er quarter
,	nt (Sampling Point ID)			Monitoring I	Period	Colle	ection Per			nce Status
WELL (2)				10/1/23 - 12,	/31/23				Con	nplete
				1/1/24 - 3/3	31/24				Con	nplete
				4/1/24 - 6/3	30/24					
				7/1/24 - 9/3	30/24					
	Monthly Water S	ystem Facility (WSF) L	evel Mo	nitorin	g Re	equirer	ner	nts	
Water System Fa	cility: ENTRY POINT (W	/SFID: 00700)								
Analyte	Monitoring Requ	irement (Summary Ty	/pe)	Operati	ng Limit				Samples Re	q/Month
рН	Entry Point pH M	onitoring (PHRD)		Minimu	m: 7.0 Pl	Н			4	
Start Date: 8/	1/2018		Complia	nce History:		Opera	ating Limi	t	Monitori	ng
			Monitor	ing Period		-	liance Sta			nce Status:
			11/1/20	23 - 11/30/20	023					

12/1/2023 - 12/31/2023

	Water Quality	Monitoring and	d Con	npl	iance S	Schedul	e	
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT1660214	ROCKSTAR LOUNGE				NC	35	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
652 WOLCOTT ROAD Connections					1			

Connecticut Department of Public Health Drinking Water Section

Towns Served: WOLCOTT

Water System Facility	y: ENTRY POINT (WSFID: 00700)			
Analyte	Monitoring Requirement (Summary Ty	pe) Operation	ng Limit	Samples Req/Month
рН	Entry Point pH Monitoring (PHRD)	Minimu	m: 7.0 PH	4
Start Date: 8/1/20	18	Compliance History:	Operating Limit	Monitoring
		Monitoring Period	Compliance Statu	S: Compliance Status:
		1/1/2024 - 1/31/2024	1	
		2/1/2024 - 2/29/2024	1	
		3/1/2024 - 3/31/2024	1	

Public Notification Requirements										
	Compliance Notice <u>Public Notification</u> <u>PN Certification</u>									
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received				
Distribution Turbidity MCL Violation	7/1/05 - 9/30/05	2	11/3/2005		11/13/2005					
E. Coli M&R Violation	7/1/19 - 9/30/19	3	12/11/2020		12/21/2020					

	Water System Facility and Sampling Point Inventory											
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ							
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α								
		UPSTREAM	WITHIN 5 SERVICE CON	Α								
00700	ENTRY POINT	3	ENTRY POINT	Α								
22620	WELL	2	WELL	Α								
61055	CALCITE FILTER											

				Contact Inf	formation				
Name				Organization	า			Job Title	
Mr. Andrew Wielbl	ad			M Propertie	A Properties LLC Owner				
Mailing Address Lin	e One		Mailing A	Address Line Two			City	State	Zip Code
1652 Wolcott Rd						Wolcott		СТ	06716
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	dress		
860-828-7773		860-828-	5522		860-983-0475	andywiel	blad@iclou	d.com	

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

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

End of schedule

	Conne	cticut Dep	artment of	Public H	lealth D	rinki	ng Wa	ater Se	ction	
		Water Qua	ality Monit	oring an						
PWS ID	PWS Nam				Cl					imary Source
CT1660234	PETERSON					NC		.5	Р	GW
	ss (where appli	cable)		Service	Residentia			dustrial	Combined	Agricultural
MAD RIVER				Connections		1				
Towns Serve	ed: WOLCOTT									
Mater Syst	om Eacility:	DISTRIBUTION		oring Requ	urement	ts				
•	•	DISTRIBUTION	SYSTEM (WSF II	D: 00600)				1	tina (DT) :	
	form (3100) ing Point (Sam _l	olina Boint ID)			Monitoring	Dariad	Collect	1 rou ion Period		per quarter ance Status
-		of Active Samplin	ng Points		Monitoring 10/1/23 - 12		Conecti	on Perioa		mplete
Select	irom inventory	of Active Samplin	ig Politis						COI	iipiete
					4/1/24 - 6/	*				
Di di da		DC)			7/1/24 - 9/	30/24		4	(DT)	
-	arameters (P	=			0.00 iti	Douted	Callage			per quarter
	ing Point (Samp				Monitoring		Collecti	ion Period		ance Status
Select 1	from inventory	of Active Samplin	ng Points		10/1/23 - 12				Coi	mplete
					4/1/24 - 6/					
					7/1/24 - 9/	/30/24				
•	•	ENTRY POINT (WSF ID: 00700)							
	nd Nitrite (NC								-	T) per year
_	ing Point (Samp	oling Point ID)			Monitoring			ion Period		ance Status
ENTRY	POINT (3)				1/1/23 - 12			-12/31	Coi	mplete
					1/1/24 - 12			-12/31		
					1/1/25 - 12	/31/25	4/1	-12/31		
			System Facil	ity (WSF) I	Level Mo	onitori	ng Req	uiremer	nts	
Water Syst	em Facility: I	ENTRY POINT (WSFID: 00700)							
Analyte		Monitoring Req	uirement (Summa	ary Type)	Operat	ting Limit	;	:	Samples Re	eq/Month
рН		Entry Point pH N	Nonitoring (PHRD)	Minim	um: 7 PH	l		4	
Start Da	te: 9/1/2013			Complia	ance History	/:	Operatir	ng Limit	Monitor	ing
				Monito	ring Period		Complia	nce Status:	Complia	nce Status:
				11/1/20	23 - 11/30/2	2023				
				12/1/20	23 - 12/31/2	2023				
				1/1/202	4 - 1/31/202	24				
				2/1/202	4 - 2/29/202	24				
				3/1/202	4 - 3/31/202	24				
			Other Co	ompliance	Schedu	les				
Compliance	Schedule Activ	rity			Du	e Date		Achieved L	Date	
SEASONAL S	START UP COM	PLETION			4/1	1/2024				_
		Water 9	System Facili	ty and Sai	mpling P	oint In	ventor	Ύ		
Water							Total	Lead and		
	Nater System F	acility	Sampling Point		nt		Coliform	Copper	a - l :	Stage
Facility ID			ID	Description		Status	Rule	Rule Tier	Aspestos	WQP 2 DBPR
00600	DISTRIBUTION S	YSTEM	4	DISTRIBUTION		Α	Y			
			DOWNSTREAM			Α				
			UPSTREAM	WITHIN 5 SEF		Α				
	ENTRY POINT		3	ENTRY POINT	•	Α				
22622 V	WELL		2	WELL		Α				

	Water Oualit	y Monitoring and			C			.001011		
PWS ID	PWS Name	<u>, , , , , , , , , , , , , , , , , , , </u>			ssification		_	ner Type	Primary	Source
CT1660234	PETERSON PARK				NC	25		Р	G۷	V
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industr	ial	Combine	d Agric	cultural
MAD RIVER R	AD RIVER ROAD Connections 1									

Connecticut Department of Public Health Drinking Water Section

Wa	ter System Facili	ity and Samplin	g Point Ir	nvento	ry			
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description	Status	Coliform	Lead and Copper Rule Tier	Asbestos	Sta WQP 2 Di	9
58387 TREATMENT PLANT			Status				<u> </u>	

		Co	ontact Inf	ormation				
			Organization	1			Job Title	
						Building Off	icial	
e One		Mailing Addr	ess Line Two			City	State	Zip Code
					Wolcott		СТ	06716
Business Phone Extension Fax N				Emergency Phone	Email Ac	ldress		
203-879-8100 136					pparks@	wolcottct.or	g	
	Extension	Extension Fax	e One Mailing Addr Extension Fax Mo	e One Mailing Address Line Two Extension Fax Mobile Phone	Extension Fax Mobile Phone Emergency Phone	e One Mailing Address Line Two Wolcott Extension Fax Mobile Phone Emergency Phone Email Ad	Organization Building Off e One Mailing Address Line Two City Wolcott Extension Fax Mobile Phone Emergency Phone Email Address	Organization Job Title Building Official e One Mailing Address Line Two City State Wolcott CT Extension Fax Mobile Phone Emergency Phone Email Address

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

Please note the following:

Towns Served: WOLCOTT

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

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

End of schedule

	C	D	CD 11: II	7 1.1	D :	1 .	TAT			
		Department of							ection	
		r Quality Moni	toring and	d Com						
PWS ID	PWS Name									Primary Source
CT166027						1C	25		Р	GW
	lress (where applicable)		Service	Residen	tial Co	ommercia	l Ind	dustrial	Combine	ed Agricultural
	DTICK ROAD		Connections			1				
Towns Se	rved: WOLCOTT			•						
\\/-+C-	vetere Feedlite DICTRID		toring Requ	ureme	nts					
•	ystem Facility: DISTRIB	UTION SYSTEM (WSF	וט: טטפטט)					4		-1
	oliform (3100)			8.0 14 1			II4!		-) per quarter
	pling Point (Sampling Poin			Monitori	_		nectio	on Period		pliance Status
Selec	ct from Inventory of Active	Sampling Points		10/1/23 -						Complete
				1/1/24 -						Complete
				4/1/24 -						
51 · · · · · · ·	I December (DDC)			7/1/24 -	9/30/2	24		4	/p=	-1
•	Parameters (PPS)			A danihani	Daw	: C-	II = =4:.		=) per quarter
	pling Point (Sampling Poin			Monitorii			nectio	on Period		Carrelate
Selec	ct from Inventory of Active	Sampling Points		10/1/23 -						Complete
				1/1/24 -						Complete
				4/1/24 - 7/1/24 -	-					
Mator Si	ystem Facility: ENTRY P	OINT (WEETD: 00700	11	7/1/24-	3/30/2	24				
	•	OINT (W3F ID. 00700	')							(DT)
	And Nitrite (NOX)	+ (D)		Monitori	na Dou	ind Co	llosti			(RT) per year
	pling Point (Sampling Poin	ונ וטן		Monitorii			песио	on Period		Complete
EINII	RY POINT (3)			1/1/23 -						Complete
			_	1/1/24 -						Complete
				1/1/25 -						
	W	/ater System Faci	lity and Sar	mpling	Poin	t Inver	ntor	У		
Water						Tot		Lead and		
System		Sampling Poin ID	t Sampling Poi	nt		Colif		Copper		Stage
Facility IL			Description			atus Ru		Kule He	r Aspesto	os WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION			A ۱	/			
			/ WITHIN 5 SER			A				
		UPSTREAM	WITHIN 5 SER			Α				
00700	ENTRY POINT	3	ENTRY POINT			Α				
22626	WELL	2	WELL			A				
55429	TREATMENT PLANT									
		Co	ntact Inform	mation						
Name			Organization						Job Titl	e
Deacon E	mil Croce		St. Pius X				Offic	ce Manag	ger	
Mailing A	ddress Line One	Mailing Addre	ess Line Two				Cit	У	State	Zip Code
525 Wood	dtick Road					Wolcott			СТ	06716

Emergency Phone Email Address

dcn.croce@aohgct.org

Mobile Phone

Business Phone

203-879-2544

Contact Role(s): Legal Contact

Extension

Fax

C	onnectic	ut Depa	rtmer	nt of	Public	Health	Drir	ıking	, Water	Section		
	Wat	ter Qua	lity M	onit	oring a	nd Con	nplia	nce S	Schedul	le		
PWS ID P	WS Name						Classif	ication	Population	Owner Type	Pri	mary Source
CT1660274 ST	T. PIUS X CHUR	СН					N	С	25	Р		GW
Local Address (who	ere applicable)				Service	Resider	ntial Co	mmercia	al Industri	al Combine	ed	Agricultural
525 WOODTICK RO	DAD				Connection	S		1				
Towns Served: WC	LCOTT						'			1		
Name				Or	ganization					Job Titl	e	
Monsignor Thoma	s Ginty			St	Basil The Gr	eat Parish	Corp		Pastor			
Mailing Address Li	ne One		Mailing A	ddress	Line Two				City	State		Zip Code
525 Woodtick Rd								Wolcot	:t	СТ		06716
Business Phone	Extension	Fax		Mobil	e Phone	Emergency	/ Phone	Email A	Address			
203-879-2544		203-879-	2545					msgr.gi	inty@aohct	.org		
Contact Role(s):	Administrative	Contact						1				

Please note the following:

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

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

End of schedule

	Connecticut De	epartment of	Public H	ealth	Drii	nki	ng W	ater Se	ction	
	Water Q	uality Monit	oring and	d Con	nplia	ınc	e Sch	edule		
PWS ID	PWS Name				Classif	ficati	on Popu	lation Ow	ner Type Pr	imary Source
CT166030	4 WOLCOTT BASEBALL AS	SOCIATION			N	NC	2	25	Р	GW
Local Addı	ress (where applicable)		Service	Residen	tial Co	omm	ercial I	ndustrial	Combined	Agricultural
NICHOLS F	ROAD		Connections			1				
Towns Ser	rved: WOLCOTT									
		Monito	oring Requ	ireme	nts					
Water Sy	stem Facility: DISTRIBUTIO	N SYSTEM (WSF II	D: 00600)							
Total Co	liform (3100)							1 rou	utine (RT) p	er quarter
Samp	pling Point (Sampling Point ID)		ı	Monitori	ing Peri	iod	Collect	ion Period	Complic	ance Status
Selec	ct from Inventory of Active Sam	oling Points		4/1/24 -	- 6/30/2	24				
				7/1/24 -	9/30/2	24				
Physical	Parameters (PPS)							1 rou	utine (RT) p	er quarter
Samp	pling Point (Sampling Point ID)			Monitori	ing Peri	iod	Collect	ion Period	Complic	ance Status
Selec	ct from Inventory of Active Sam	oling Points		4/1/24 -	- 6/30/2	24				
				7/1/24 -	- 9/30/2	24				
Water Sy	stem Facility: ENTRY POIN	Γ (WSF ID: 00700)								
Nitrate	(1040)							1 rou	ıtine (RT) p	er quarter
Samp	pling Point (Sampling Point ID)			Monitori	ing Peri	iod	Collect	ion Period	Complic	ance Status
ENTR	RY POINT (3)			4/1/24 -	- 6/30/2	24				
				7/1/24 -	9/30/2	24				
Nitrite ((1041)							1	routine (R	T) per year
Samp	pling Point (Sampling Point ID)			Monitori	ing Peri	iod	Collect	ion Period	Complic	ance Status
ENTR	RY POINT (3)			1/1/23 -	12/31/	23			Cor	mplete
				1/1/24 -	12/31/	24				
				1/1/25 -	12/31/	25				_
		Other Co	ompliance	Sched	lules					
Complian	ce Schedule Activity				Due Da	ite		Achieved	Date	
RESPOND	TO SANITARY SURVEY			1	0/18/2	015				
SEASONAI	L START UP COMPLETION				4/1/20	24				
	Wate	r System Facili	ity and San	npling	Poin	t In	vento	ry		
Water							Total	Lead and		
System	Water System Facility	Sampling Point		nt			Coliform			Stage
Facility ID)	ID	Description		Sto	atus	Rule	Rule Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	I SYSTEM	1 .	Α	Υ			
		DOWNSTREAM	WITHIN 5 SER	VICE COI	N .	Α				
		HAND SINK	HAND SINK GI	RILL		Α	Υ	2		
		LADIES ROOM	LADIES ROOM	ISINK		Α	Υ	2		
		MENS ROOM	MENS ROOM	SINK		Α	Υ	2		
		UPSTREAM	WITHIN 5 SER	VICE COI	N .	Α				
00700	ENTRY POINT	3	ENTRY POINT			Α				
22628	WELL	2	WELL			Α				
		Con	tact Inforn	nation						

Name Organization Job Title

Ms. Kristen Moreira Wolcott Baseball Association Co_Treasurer

Mailing Address Line One Mailing Address Line Two City State Zip Code

PO Box 6119 Wolcott CT 06716

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.

(Connectic	ut Depa	rtme	ent of	Public	Health	Dri	nking	Water	Section	
	Wa	ter Qua	lity N	<u>Ioni</u> to	orin <mark>g</mark> a	nd Con	nplia	nce S	Schedul	e	
PWS ID	PWS Name						Classif	ication	Population	Owner Type	Primary Source
CT1660304	WOLCOTT BASE	BALL ASSOCI	ATION				N	IC	25	Р	GW
Local Address (w	here applicable)				Service	Resider	itial Co	mmerci	al Industri	al Combine	ed Agricultural
NICHOLS ROAD					Connectio	ns		1			
Towns Served: W						·					
Business Phone	Extension	Fax		IIIdolvi	e Phone	Emergency	/ Pnone	Email F	Address		
860-560-3637								Baw06	716@gmail.	com	
Contact Role(s):	Administrative	Contact									
Name				Org	ganization					Job Title	e
Mr. Gary Finke				Wo	olcott Basel	ball Associat	tion		Co-Treasu	rer	
Mailing Address	Line One		Mailing	Address	Line Two				City	State	Zip Code
PO Box 6119								Wolcot	tt	СТ	06716
Business Phone	e Extension	Fax		Mobil	e Phone	Emergency	/ Phone	Email A	Address		
203-704-7926								baw06	716@gmail.	com	
Contact Role(s):	Legal Contact										

Please note the following:

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

End of schedule

	C		יון חי	1.1	D .	.1.	TAT	-1	C			
	Connecticut D	•				_				ction		
	Water (Quality Monit	oring and	d Com								
PWS ID	PWS Name				Class	ification	Popu	lation	Owne	er Type F	rimary :	Source
CT1660314	WOLCOTT LANES, INC					NC		25		Р	GW	
	ss (where applicable)		Service	Residen	tial C	Commerci	al Ir	ndustria	al C	Combined	l Agric	ultural
955 WOLCO	TT ROAD		Connections			1						
Towns Serve	d: WOLCOTT											
			oring Requ	ireme	nts							
Water Syste	em Facility: DISTRIBUTI	ON SYSTEM (WSF I	D: 00600)									
Total Colif	orm (3100)							1	rout	ine (RT)	per qu	arter
Samplii	ng Point (Sampling Point ID)		Monitori	ng Pe	riod C	ollect	ion Per	iod	Compl	iance St	atus
Select f	rom Inventory of Active San	npling Points	:	10/1/23 -	12/32	1/23				Co	omplete	
				1/1/24 -	3/31/	/24				Co	omplete	
				4/1/24 -	6/30/	/24						
				7/1/24 -	9/30/	/24						
Physical Pa	arameters (PPS)							1	rout	ine (RT)	per qu	arter
Samplin	ng Point (Sampling Point ID)		Monitori	ng Pe	riod C	ollect	ion Per	iod	Compl	iance St	atus
Select f	rom Inventory of Active San	npling Points	:	10/1/23 -	12/32	1/23				Co	omplete	
				1/1/24 -	3/31/	/24				Co	omplete	
				4/1/24 -	6/30/	/24						
				7/1/24 -	9/30/	/24						
Water Syste	em Facility: ENTRY POIN	NT (WSF ID: 00700)										
	d Nitrite (NOX)								1 r	outine (-
=	ng Point (Sampling Point ID)		Monitori			ollect	ion Per	iod		iance St	
ENTRY I	POINT (3)			1/1/23 -	12/31	/23				Co	omplete	
				1/1/24 -	12/31	/24				Co	omplete	
				1/1/25 -	12/31	/25						
	Wat	er System Facili	ity and Sar	npling	Poir	nt Inve	nto	ry				
Water						To	otal	Lead (and			
	later System Facility	Sampling Point		nt			iform					Stage
Facility ID		ID	Description			tatus R	Rule	Rule	Tier	Asbestos	WQP 2	? DBPR
00600 D	ISTRIBUTION SYSTEM	4	DISTRIBUTION			Α	Υ					
		DOWNSTREAM				Α						
		UPSTREAM	WITHIN 5 SER	VICE CON	١	Α						
00700 EI	NTRY POINT	3	ENTRY POINT			Α						
22629 W	/ELL	2	WELL			Α						
54163 TI	REATMENT PLANT											
		Con	tact Inforr	nation								
Name		0	rganization							Job Title		
Mr. Todd R.	Welton	W	olcott Lanes.In	c.			Ow	ner				
Mailing Addr	ress Line One	Mailing Address	s Line Two				С	ity		State	Zip Co	ode
955 Wolcott		P.O. Box 6122				Wolco				СТ	0671	
						_						

Emergency Phone Email Address

TPBMJ@AOL.COM

203-879-7466

Mobile Phone

Business Phone

203-879-1469

Extension

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

Fax

203-879-1469

	Connecticu	ıt Depa	irtment (of Public	c Health	Drir	iking	Water	Sec	tion	
	Wat	er Qua	lity Mon	itoring a	and Con	nplia	nce S	chedul	e		
PWS ID	PWS Name					Classif	ication	Population	Owne	r Type	Primary Source
T1660314	NOLCOTT LANES	, INC				N	IC	25		Р	GW
ocal Address (wi	nere applicable)			Service	Resider	itial Co	mmercia	al Industri	al C	ombine	d Agricultural
55 WOLCOTT RO)AD			Connection	ons		1				
owns Served: W	OLCOTT			·				·			
Name				Organization					J	ob Title	9
955 Wolcott Rd L	LC										
Mailing Address I	ine One		Mailing Addr	ess Line Two				City		State	Zip Code
955 Wolcot Rd							Wolcot	t		CT	06716
Business Phone	Extension	Fax	Mo	bile Phone	Emergency	/ Phone	Email A	ddress			
Contact Role(s):	Owner				•						

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

End of schedule

	Connecticut De	nartmar	at of	Dublic	[aalth l	Drinl	ing M	Vator	Soction	
	Connecticut De	•								
D1446 ID	Water Qu	ianty M	OHILL	ning an		<u> </u>				
PWS ID	PWS Name				(ion Po			rimary Source
CT1660374	WOLCOTT LAND OWNER	S PROTECTIV				NC		25	P	GW
	(where applicable)			Service	Residenti		nercial	Industrial	Combined	Agricultural
920 WOODTIC				Connections			1			
Towns Served:	WOLCOTT	2.4	•••	• • •	•					
Matar Custon	n Facility			ring Requ	ııremen	ts				
-	n Facility: DISTRIBUTION	N SYSTEIVI (WSF ID): 00600)				1	time (DT)	
Total Colifor					0.4 - 10 it - 11 in	a Daviad	Calla		= =	per quarter
	Point (Sampling Point ID)	line Delinte			Monitoring		Cone	ction Perio	-	iance Status
Select fro	m Inventory of Active Samp	ling Points			10/1/23 - 1					omplete
					1/1/24 - 3				CC	omplete
					4/1/24 - 6					
	. (550)				7/1/24 - 9	0/30/24		_	(>=\	
_	ameters (PPS)						- "			per quarter
	Point (Sampling Point ID)				Monitoring		Colle	ction Perio		iance Status
Select fro	m Inventory of Active Samp	ling Points			10/1/23 - 1					omplete
					1/1/24 - 3				Co	omplete
					4/1/24 - 6					
	= 10.				7/1/24 - 9	0/30/24				
	n Facility: ENTRY POINT	(WSF ID: 0	0700)							
	Nitrite (NOX)								-	RT) per year
	Point (Sampling Point ID)				Monitoring		Colle	ction Perio		iance Status
ENTRY PC	DINT (3)				1/1/23 - 12				Co	omplete
					1/1/24 - 1				Cc	omplete
					1/1/25 - 1	2/31/25				
		Public	: Noti	fication R	Requirer	nents				
			Со	mpliance	Notice	Pub	lic Notif	ication	PN Cer	<u>tification</u>
Violation/Situ	ation			Period	Tier	Requi	red P	Performed	Due to DPH	Received
Total Coliform	M&R Violation		7/1/0	04 - 9/30/04	2	3/17/2	2005		3/27/2005	
Total Coliform	M&R Violation		10/1/0	04 - 12/31/04	2	7/7/2	005		7/17/2005	
Total Coliform	M&R Violation		1/1/0	05 - 3/31/05	2	9/3/2	005		9/13/2005	
Physical Param	neters M&R Violation		7/1/0	04 - 9/30/04	3	2/15/2	2006		2/25/2006	
Physical Param	neters M&R Violation		10/1/0	04 - 12/31/04	3	6/7/2	006		6/17/2006	
	Water	System I	Facilit	ty and Sar	mpling F	Point II	nvent	ory		
Water							Total			
*	ter System Facility			Sampling Poi	nt		Colifor			Stage
Facility ID		ID		Description		Status		Rule Ti	er Asbestos	WQP 2 DBPR
00600 DIS	TRIBUTION SYSTEM	4		DISTRIBUTION		Α	Υ			
				WITHIN 5 SER		Α				
		UPSTRE	EAM	WITHIN 5 SEF	RVICE CON	Α				

ENTRY POINT

WELL

3

2

Α

Α

00700 ENTRY POINT

TREATMENT PLANT

22633 WELL

54145

	Connecticut Department of Lubile Health Drinking Water Section									
	Water Quality Monito	oring and	d Con	npl	iance S	Schedul	e			
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source		
CT1660374	WOLCOTT LAND OWNERS PROTECTIVE ASSN	. INC			NC	25	Р	GW		
Local Address (w	itial	Commercia	al Industria	al Combine	ed Agricultural					

Connections

1

Connecticut Department of Public Health Drinking Water Section

920 WOODTICK ROAD
Towns Served: WOLCOTT

Contact Information											
Name		Organization	1	Job Title							
Mr. Frank Noble		Wolcott Land	downers Association	President							
Mailing Address Lin	e One	ess Line Two			City	State	Zip Code				
920 Woodtick Road						Wolcott		СТ	06716		
Business Phone	Extension	Fax	M	Mobile Phone Emergency Phone Email Address							
203-910-8781						FNPN1@	NPN1@SBCGLOBAL.NET				

Contact Role(s): Administrative Contact, Legal Contact

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End of schedule

	Co	nnectic	ut Depa	rtment of	Public	Health	Drir	nkir	ng Wa	ater Se	ection	
			_	lity Monit								
PWS ID	PW	'S Name	ter qua	irey 1.10111e	orms ar	III GOII					ner Type	Primary Source
CT1660384			ROAD (WOL	COTT INN & SUI	TES)			NC		25	P	GW
		e applicable)	(1101111		Service	Residen		omme		dustrial	Combine	
1273 WOLC					Connection			1				7.8
Towns Serv												
				Monito	oring Rec	uireme	nts					
Water Sys	tem Fac	ility: DISTR	IBUTION S	YSTEM (WSF II	D: 00600)							
Total Coli	iform (3	100)								1 rou	utine (RT)	per quarter
	-	t (Sampling P	oint ID)			Monitori	ng Peri	iod	Collect	ion Period		liance Status
Select	from Inv	entory of Act	ive Sampling	Points		10/1/23 -	12/31/	/23			C	omplete
						1/1/24 -	3/31/2	24			C	omplete
						4/1/24 -	6/30/2	24				
						7/1/24 -	9/30/2	24				
Physical F	Paramet	ers (PPS)								1 rou	utine (RT)	per quarter
Sampl	ling Poin	t (Sampling P	oint ID)			Monitori	ng Peri	iod	Collect	ion Period	Comp	liance Status
Select	from Inv	entory of Act	ive Sampling	Points		10/1/23 -	12/31/	/23			С	omplete
						1/1/24 -	3/31/2	24			C	omplete
						4/1/24 -	6/30/2	24				
						7/1/24 -	9/30/2	24				
Water Sys	tem Fac	ility: ENTR	Y POINT (V	VSF ID: 00700)								
Nitrate A	nd Nitri	te (NOX)								1	routine (RT) per year
Sampl	ling Poin	t (Sampling P	oint ID)			Monitori	ng Peri	iod	Collect	ion Period	Comp	liance Status
ENTRY	POINT (3)				1/1/23 -	12/31/2	23			C	omplete
						1/1/24 -	12/31/2	24				
						1/1/25 -	12/31/	25				
			Water S	ystem Facili	ty and Sa	ampling	Poin	t Inv	ventoi	ТУ		
Water									Total	Lead and	1	
-	Water Sy	stem Facility		Sampling Point				C	Coliform	Copper		Stage
Facility ID				ID	Description			atus	Rule	Rule Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBL	TION SYSTEM	1	4	DISTRIBUTION			A	Υ			
				DOWNSTREAM	WITHIN 5 S	ERVICE CON	N /	Α				
				UPSTREAM	WITHIN 5 S	ERVICE CON	N /	Α				
00700	ENTRY P	DINT		3	ENTRY POIN	JT		A				
22634	WELL			2	WELL			A				
54159	TREATMI	ENT PLANT										
54161	ATMOSP	HERIC STORA	GE TANK									
				Con	tact Info	rmation						
Name				Or	ganization						Job Title	
Mr. Viral Pa	atel				olcott Inn &	Suites						
Mailing Add	dress Lin	e One		Mailing Address	Line Two				Ci	ty	State	Zip Code
1273 Wolco	ott Rd							Wol	cott		СТ	06716
Business	Phone	Extension	Fax	Mobi	le Phone	Emergency	Phone	Ema	il Addres	SS	, ,	

203-879-8097

amerivuwolcott@gmail.com

203-879-4618

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

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

	Tracer Quarrey From	or mg am	G G G T I	TP I	idii oo t	oncadi	. —	
PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
CT1660384	1273 WOLCOTT ROAD (WOLCOTT INN & SU		NC	25	Р	GW		
Local Address	Local Address (where applicable)			ntial	Commerci	al Industri	al Combine	ed Agricultural
1273 WOLCOTT ROAD		Connections			1			
Tarrina Camicadi	WOLCOTT							

Towns Served: WOLCOTT

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	Co	onnecticu	-						_				tion		
DIA/C ID	DVA		er Qua	lity Monit	oring ar	iu Con	_						. T	Duine	
PWS ID CT1660394		VS Name OLCOTT PUBLIC	LIDDADV				Clas	NC	on P	opulai 25	tion C	Jwne	r Type		ry Sourc SW
			LIDKAKT		Service	Residen	tial	Comm	orcial		ustrial		- ombine		ricultura
469 BOUN		re applicable)			Connection		ILIdi	1		mat	ustriai	C	ombine	u Ag	icuitura
Towns Serv					Commedian										
TOWIIS SELV	veu. vvoi			D.0 !+	D	•									
Water Svs	stem Fac	cility: DISTRIE	BUTION SY		oring Req	Juireme	nts								
Total Col		•			2.00000,						1 1	routi	ne (RT) ner (quarter
	-	t (Sampling Poi	int ID)			Monitori	ina P	eriod	Col	lection					Status
		entory of Activ		Points		10/1/23 -								omple	
		, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · ·			1/1/24 -								omple	
						4/1/24 -									
						7/1/24 -		-							
Physical I	Paramet	ters (PPS)					<u>'</u>	•			1 r	routi	ne (RT) per o	quarter
•		t (Sampling Poi	int ID)			Monitori	ing P	eriod	Col	lection				•	Status
Select	t from Inv	entory of Activ	e Sampling	Points		10/1/23 -							C	Comple	ete
						1/1/24 -	- 3/3:	1/24					C	omple	ete
						4/1/24 -	- 6/30	0/24							
						7/1/24 -	9/30	0/24							
Water Sys	stem Fac	cility: ENTRY	POINT (W	/SF ID: 00700)											
Nitrate A	nd Nitri	te (NOX)										1 ro	utine ((RT) p	er year
Samp	ling Poin	t (Sampling Poi	int ID)			Monitori	ing P	eriod	Col	lection	n Perio	od	Comp	liance	Status
ENTR'	Y POINT (3)				1/1/23 -	12/3	1/23					C	omple	te
						1/1/24 -	12/3	1/24					C	omple	te
						1/1/25 -	12/3	1/25							
		V	Water Sy	stem Facil	ity and Sa	ampling	Po	int In	ven	tory	,				
Water									Tota		ead a				
•		ystem Facility		Sampling Point					Colifo		Coppe			- 14/0	Stage
Facility ID		ITIONI CYCTERA		ID	Description			<u>Status</u>	Rul		kuie i	ier A	spesto	s wų	P 2 DBP
00600	DISTRIBU	JTION SYSTEM		4	DISTRIBUTION			A	Υ						
				DOWNSTREAM UPSTREAM	WITHIN 5 SE			A							
00700	ENTRY P	OINT		3			V	Α							
	WELL	OINT		2	WELL	11		A A							
22033	VVELL							A							
				Con	itact Info	rmation)								
Name				0	rganization							J	ob Title		
Wolcott													1		
Mailing Ad	dress Lin	e One		Mailing Addres	s Line Two					City			State	Zip	Code
Business	Phone	Extension	Fax	Moh	ile Phone	Emergency	/ Pho	ne Fm	ail Ad	dress					
243111033		2.001131011	Tux	IVIOD				[JII AU	J. C33					
Contact Ro	او(د)٠ ا ه	egal Contact, Ov	vner												
- Contact No	(5).	our contact, Ov													

C	onnecticu	ıt Depa	rtment	of Public	Health	ı Drii	nking	Water	Section			
	Wat	er Qua	lity Mon	itoring a	nd Con	nplia	nce S	Schedul	le			
PWS ID PY	PWS Name Classifi							Population	Owner Type	Primary Source		
CT1660394 W	WOLCOTT PUBLIC LIBRARY						IC	25	L	GW		
Local Address (who	ere applicable)			Service	Resider	ntial Co	mmerci	ial Industrial Combined Agricu				
469 BOUNDLINE R	OAD			Connection	ns		1					
Towns Served: WC	LCOTT					'			'	1		
Name				Organization	Job Title							
Ms. Sue Ouellette				Wolcott Public	Library			Admin				
Mailing Address Li	ne One		Mailing Addr	ess Line Two				City	State	Zip Code		
469 Boundline Rd							Wolcot	:t	СТ	06717		
Business Phone	Extension	Fax	Mo	bile Phone	Emergenc	y Phone	Email A	Email Address				
203-879-6720							souelle	tte@wolcot	tct.org			
Contact Role(s):	dministrative C	Contact		1			1					

contact Role(s). Administrative Conta

Please note the following:

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

End of schedule

Connecticut Departme	nt of Publ	ic Healt	h Dr	inkir	ng W	ater S	ection				
Water Quality M	onitoring	and Co	mpli	iance	Sch	edule					
PWS ID PWS Name			Classification Population Owner Type Primary Sou								
CT1660404 WOLCOTT TOWN HALL				NC	2	25	L	GW			
Local Address (where applicable)	Service	Resid	ential	Comme	rcial I	ndustrial	Combined	Agricultural			
10 KENEA AVE	Connec	tions		1							
Towns Served: WOLCOTT		,									
M	lonitoring F	Requirem	ents								
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	0)									
Total Coliform (3100)						1 ro	utine (RT) p	er quarter			
Sampling Point (Sampling Point ID)		Monit	oring Pe	eriod	Collect	tion Period	d Complia	nce Status			
Select from Inventory of Active Sampling Points		10/1/2	3 - 12/3	31/23			Cor	nplete			
		1/1/2	4 - 3/31	1/24			Cor	nplete			
		4/1/2	4 - 6/30	0/24							
		7/1/2	4 - 9/30	0/24							
Physical Parameters (PPS)						1 ro	utine (RT) p	er quarter			
Sampling Point (Sampling Point ID)		Monit	oring Pe	eriod	Collect	tion Period	d Complia	nce Status			
Select from Inventory of Active Sampling Points	ng Points			31/23			Cor	Complete			
		1/1/2	4 - 3/31	1/24			Cor	nplete			
		4/1/2	4 - 6/30	0/24							
		7/1/2	4 - 9/30	0/24							
Water System Facility: ENTRY POINT (WSF ID: 0	0700)										
Nitrate (1040)						1 ro	utine (RT) p	er quarter			
Sampling Point (Sampling Point ID)		Monit	oring Pe	eriod	Collect	tion Period	d Complia	nce Status			
ENTRY POINT (3)		10/1/2	3 - 12/3	31/23			Cor	nplete			
		1/1/2	4 - 3/31	1/24			Cor	nplete			
		4/1/2	4 - 6/30	0/24				_			
		7/1/2	4 - 9/30	0/24							
Nitrite (1041)						:	L routine (R	Γ) per year			
Sampling Point (Sampling Point ID)		Monit	oring Pe	eriod	Collect	tion Period	d Complia	nce Status			
ENTRY POINT (3)		1/1/2	3 - 12/3	1/23			Cor	nplete			
		1/1/2	l - 12/3:	1/24			Cor	nplete			
		1/1/2	5 - 12/3	1/25							
Public	c Notificati	on Requi	reme	nts							
	Complian	ce Not	ice	Public	Notific	ation	PN Certi	fication			
Violation/Situation	Period	Tie	er	Require	d Pei	rformed	Due to DPH	Received			
Nitrate MCL Violation	1/1/13 - 3/3	1/13 1	2	2/20/201	13		3/2/2013				
Water System	Facility and	l Samplin	g Poi	int Inv	ento	ry					
Water					Total	Lead and	d				
System Water System Facility Sampling	Point Samplin	_		C	oliform	Copper		Stage			
Facility ID ID	Descrip	tion	5	Status	Rule	Rule Tie	r Asbestos I	NQP 2 DBPR			
00600 DISTRIBUTION SYSTEM 4	DISTRIB	UTION SYSTI	M	Α	Υ						
DOWNST	REAM WITHIN	5 SERVICE C	ON	Α							
UPSTR	EAM WITHIN	5 SERVICE C	ON	Α							
00700 ENTRY POINT 3	ENTRY F	POINT		Α							

Α

WELL

22636 WELL

54749 TREATMENT PLANT

	dofficed bepartment of rabble freath britishing water beetion										
	Water Quality Monit	toring and	d Con	npl	liance S	Schedul	e				
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source			
CT1660404	T1660404 WOLCOTT TOWN HALL					25	L	GW			
Local Address (v	vhere applicable)	Service	Residentia		Commerci	al Industri	al Combin	ed Agricultural			
10 KENEA AVE	Connections			1							
Towns Served: \	WOLCOTT					'					

	Co	ontact Inf	ormation					
ne		Organization				Job Title		
Peter R. Parks		Building Official						
ling Address Line One	Mailing Addr	ress Line Two			City State		Zip Code	
enea Avenue				Wolcott		СТ	06716	
usiness Phone Extension Fax	Mo	obile Phone	Emergency Phone	Email Address				
03-879-8100 136				pparks@	wolcottct.o	rg		
tact Role(s): Administrative Contact	,							
ne		Organization				Job Title		
cott								
ling Address Line One	Mailing Addr	ess Line Two			City	State	Zip Code	
usiness Phone Extension Fax	Mo	obile Phone	Emergency Phone	Email Ac	ldress			
usiness Phone Extension								

Contact Role(s): Legal Contact, Owner

Please note the following:

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- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

End of schedule

Connecticut Departme	nt of Public H	ealth D	rinking	Water S	ection
Water Quality M			_		
PWS ID PWS Name	tomicorning and				wner Type Primary Source
CT1660424 WOODTICK RECREATIONAL STAND		0.0	NC	25	P GW
Local Address (where applicable)	Service	Residential			Combined Agricultural
201 NICHOLS ROAD	Connections	Residential	1	maasman	- Zombinea / Ignearearea
Towns Served: WOLCOTT			_		
	lonitoring Requ	irement	S		
Water System Facility: DISTRIBUTION SYSTEM					
Total Coliform (3100)	(1101 121 0000)			1 1	routine (RT) per month
Sampling Point (Sampling Point ID)	1	Monitoring	Period Co	ollection Perio	
Select from Inventory of Active Sampling Points		5/1/24 - 5/			
		6/1/24 - 6/			
		7/1/24 - 7/			
		8/1/24 - 8/			
		9/1/24 - 9/			
Physical Parameters (PPS)			·	1 1	routine (RT) per month
Sampling Point (Sampling Point ID)	ı	Monitoring	Period Co	ollection Perio	
Select from Inventory of Active Sampling Points		5/1/24 - 5/	31/24		·
		6/1/24 - 6/			
		7/1/24 - 7/	31/24		
		8/1/24 - 8/	31/24		
		9/1/24 - 9/	30/24		
Water System Facility: ENTRY POINT (WSF ID: 0	00700)				
Nitrate And Nitrite (NOX)					1 routine (RT) per year
Sampling Point (Sampling Point ID)	1	Monitoring	Period Co	ollection Perio	
ENTRY POINT (3)		1/1/23 - 12,	/31/23		Complete
		1/1/24 - 12,	/31/24		
		1/1/25 - 12,	/31/25		
Otl	her Compliance	Schedul	es		
Compliance Schedule Activity			e Date	Achieve	d Date
SEASONAL START UP COMPLETION		5/1	./2024		
Publi	c Notification R	equirem	ents		
	Compliance	Notice	Public No	<u>tification</u>	PN Certification
Violation/Situation	Period	Tier	Required	Performed	Due to DPH Received
Total Coliform MCL Violation	7/1/15 - 9/30/15	2	8/19/2015		8/29/2015
Water System	Facility and San	npling Po	oint Inve	ntory	
Water				tal Lead an	
	g Point Sampling Poin	it	-	form Coppe	_
Facility ID ID			Status		er Asbestos WQP 2 DBPR
00600 DISTRIBUTION SYSTEM 4				Υ	
	TREAM WITHIN 5 SER		A		
UPSTR		VICE CON	Α .		
00700 ENTRY POINT 3	ENTRY POINT		Α		

Α

WELL

2

22638 WELL

	Water Quality Mon	nitoring an	d Con	npl	liance S	Schedul	e	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1660424	WOODTICK RECREATIONAL STAND			NC	25	Р	GW	
Local Address ((where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combin	ed Agricultural
201 NICHOLS R	ROAD	Connections			1			
Towns Served:	WOLCOTT	•						·

			C	ontact Inf	ormation				
Name				Organization	1			Job Title	
Town of Wolcott									
Mailing Address Lin	e One		Mailing Add	ress Line Two		City	State	Zip Code	
10 Kenea Rd						Wolcott		СТ	06716
Business Phone	Extension	Fax	М	obile Phone	Emergency Phone	Email Address			
Contact Role(s): Le	egal Contact, Ow	ner							
Name				Organization	1			Job Title	
Mr. Larry Pelletier				Woodtick Pa	vilion				
Mailing Address Lin	e One		Mailing Add	ress Line Two		City		State	Zip Code
201 Nichols Road						Wolcott		СТ	06716
Business Phone	Extension	Fax	М	obile Phone	Emergency Phone	Email Ad	dress		
860-965-9216						ljp54@ya	ahoo.com		
Contact Role(s): A	dministrative Co	ntact			·				

Please note the following:

- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Department of	of Public H	lealth	ושו	rinking	Water	Section	
	Water Quality Moni	toring an	d Con	npl	liance S	Schedul	e	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1660494	MAHANS LAKEVIEW FINE CATERING LLC				NC	40	Р	GW
Local Address (where applicable)		Service	Resider	ntial Commerci		al Industri	al Combine	ed Agricultural
15 GRILLEY RO	DAD	Connections			1			

Towns Served: WOLCOTT

Towns Served. Wolcott									
Monitori	ng Requirements								
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)								
Total Coliform (3100)		1 routin							
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status						
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23								
	1/1/24 - 3/31/24								
	4/1/24 - 6/30/24								
	7/1/24 - 9/30/24								
Physical Parameters (PPS)		1 rout	ine (RT) per quarter						
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status						
Select from Inventory of Active Sampling Points	10/1/23 - 12/31/23								
	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)									
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								
Other Con	npliance Schedules								
Compliance Schedule Activity	Due Date	Achieved D	ate						
CROSS CONNECTION SURVEY REPORT	3/1/2021								

Other Co	inpliance selicaties		
Compliance Schedule Activity	Due Date	Achieved Date	
CROSS CONNECTION SURVEY REPORT	3/1/2021		
CROSS CONNECTION SURVEY REPORT	3/1/2022		
CROSS CONNECTION SURVEY REPORT	3/1/2023		
CROSS CONNECTION SURVEY REPORT	3/1/2024		

	Public Notification Requirements											
	Compliance	Notice	Public No	<u>tification</u>	PN Certification							
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received						
Total Coliform M&R Violation	10/1/22 - 12/31/22	3	7/11/2024		7/21/2024							
Physical Parameters M&R Violation	10/1/22 - 12/31/22	3	7/11/2024		7/21/2024							
Total Coliform M&R Violation	7/1/22 - 9/30/22	3	7/11/2024		7/21/2024							
Physical Parameters M&R Violation	7/1/22 - 9/30/22	3	7/11/2024		7/21/2024							
Total Coliform M&R Violation	4/1/22 - 6/30/22	3	7/11/2024		7/21/2024							
Physical Parameters M&R Violation	4/1/22 - 6/30/22	3	7/11/2024		7/21/2024							
Nitrate And Nitrite M&R Violation	1/1/22 - 12/31/22	3	7/11/2024		7/21/2024							

	V	Vater System Facili	ity and Sampling I	Point Ir	nventoi	ſy			
1	Water System Facility	, ,	Sampling Point		Coliform	Lead and Copper			Stage
Facility	ID	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				

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 Monit				C	,	e	
PWS ID	PWS Name		Cla	Classification Popu		Owner Type	Primary Source	
CT1660494	CT1660494 MAHANS LAKEVIEW FINE CATERING LLC					40	Р	GW
Local Address	Local Address (where applicable)			ntial Commerci		al Industri	al Combine	ed Agricultural
15 GRILLEY RC	Connections			1				

Towns Served: WOLCOTT

	Water System Facility and Sampling Point Inventory											
Water					Total	Lead and						
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper			Stage			
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α								
		UPSTREAM	WITHIN 5 SERVICE CON	Α								
00700	ENTRY POINT	3	ENTRY POINT	Α								
22878	WELL #1	2	WELL #1	Α								
22922	WELL #2	2	WELL #2	Α								
46645	TREATMENT PLANT											
61662	ATMOSPHERIC STORAGE											
61663	HYDROPNEUMATIC STORAGE											

			C	ontact Inf	formation				
Name				Organization	า	Job Title			
Mr. David Mahan							Owner		
Mailing Address Lin	e One		Mailing Add	Address Line Two City Star				State	Zip Code
2527 Litchfield Roa	d			Watertown CT					06798
Business Phone	Extension	Fax	М	obile Phone	Emergency Phone	Email Ad	ldress		
860-879-9363					860-946-0049				
Contact Role(s): Le	egal Contact, C	Owner							
Name				Organization	า			Job Title	
Mr. Marty Fallon				Mahans Lak	eview Fine Catering		General Ma	anager	
Mailing Address Lin	e One		Mailing Add	ress Line Two			City	State	Zip Code
15 Grilley Rd						Wolcott		СТ	06716
Business Phone	Extension	Fax	М	Mobile Phone Emergency Phone		Email Address			
203-879-9363		203-879-	6161 20	3-232-8006		info@mahanscatering.com			
6		C 4 4	-						

Contact Role(s): Administrative Contact

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End of schedule

	C	1: 1D 1	. CD 11: 11	L LL D	. 1 .	XA7 4	C		
	Conne	ecticut Departme				_		ction	
		Water Quality M	lonitoring and						
PWS ID	PWS Nam	e		Cla	ssification	Population	Own	er Type P	rimary Source
CT1660544	WOLCOT	T VFW POST 1979			NC	25		Р	GW
Local Address	(where appl	icable)	Service	Residential	Commer	cial Industria	al	Combined	Agricultura
1115 WOLCOT	T ROAD		Connections					1	
Towns Served	WOLCOTT								
		N	Ionitoring Requ	iirements	S				
,		DISTRIBUTION SYSTEM	(WSF ID: 00600)						
Total Colifor	• •								per quarter
		pling Point ID)		Monitoring P		Collection Per	riod		iance Status
Select fro	m Inventory	of Active Sampling Points	:	10/1/23 - 12/					mplete
				1/1/24 - 3/3	•			Cc	mplete
				4/1/24 - 6/3	•				
				7/1/24 - 9/3	0/24				
Physical Par	- '	-							per quarter
, ,		pling Point ID)		Monitoring P		Collection Per	riod		iance Status
Select fro	m Inventory	of Active Sampling Points		10/1/23 - 12/	•				mplete
				1/1/24 - 3/3				Cc	mplete
				4/1/24 - 6/3					
	= 111.			7/1/24 - 9/3	0/24				
•		ENTRY POINT (WSF ID: 0	00700)			_			
Nitrate (104	-	ulius Daint ID)		Adamitanina F	ania d				per quarter
		pling Point ID)		Monitoring P		Collection Per	rioa		iance Status
ENTRY PO) INI (3)			10/1/23 - 12/					mplete
				1/1/24 - 3/3					mplete
				4/1/24 - 6/3	•				
A121	B111 - 11 - /B14	2V)		7/1/24 - 9/3	0/24			/ -	\ - \
Nitrate And	-	•		8.4 ta t	Sauta d	Callantian Day		-	RT) per year
-		pling Point ID)		Monitoring P		Collection Per	rioa		iance Status
ENTRY PO	JINI (3)			1/1/23 - 12/3					mplete
				1/1/24 - 12/3				Cc	mplete
				1/1/25 - 12/3	•				
	Mo	nthly Water System	Facility (WSF) I	_evel Mor	nitorin	g Require	mer	nts	
Water Syster	m Facility:	ENTRY POINT (WSFID: 00	0700)						
Analyte		Monitoring Requirement	(Summary Type)	Operatir	ng Limit		!	Samples R	eq/Month
рН		Entry Point pH Monitoring	(PHRD)	Minimur	m: 6.4 PH	l		4	4
Start Date	8/1/2004			ince History: ing Period		Operating Limi Compliance St		Monito Complia	ring ance Status:
			11/1/20	23 - 11/30/20					
			12/1/20	23 - 12/31/20)23				
			1/1/202	4 - 1/31/2024	ļ				
			2/1/202	4 - 2/29/2024					
			3/1/202	4 - 3/31/2024	ļ				

	Water System Facility and Sampling Point Inventory											
Water				Total	Lead and							
System 1	Water System Facility	Sampling Point	Sampling Point	Coliform	Copper	Stage						
Facility ID		ID	Description	Status Rule	Rule Tier	Asbestos WQP 2 DBPR						

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT1660544	WOLCOTT VFW POST 1979	NC	25 P		GW		
Local Address (v	where applicable)	Service	Resider	ntial Commerci	al Industri	al Combine	ed Agricultural
1115 WOLCOTT	ROAD	Connections				1	

Towns Served: WOLCOTT

	Water System Facility and Sampling Point Inventory										
Water System Facility IE	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ						
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							
22919	VFW WELL #1	2	WELL #1	Α							
48883	CALCITE FILTER										

Contact Information										
Name				Organization	1			Job Title		
Mr. Paul J. Gallucci		Wolcott V.F.	W. Post 1979		Post Quartermaster					
Mailing Address Line One Mailing Addr				ess Line Two		City State			Zip Code	
P. O. Box 6079			1115 Wolcot	t Road		Wolcott CT			06716	
Business Phone	Extension	Fax	Мо	bile Phone	Emergency Phone	Email Ac	ldress	·		
203-879-6891					203-525-2874	wolcottvfw1979@hotmail.com				

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

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End of schedule

	Conne	cticut Department of I	Public H	ealth D	rinkin	g W	ater	Section	on			
		Water Quality Monito	ring and	d Compi	liance	Sch	edul	e				
PWS ID	PWS Name					n Population Ow			/pe Pr	imary Source		
CT1660564	RIETDYKE	SENIOR CENTER			NC	2	25	Р		GW		
Local Address	(where applied	cable)	ervice	Residential	Commer	cial I	ndustria	l Com	bined	Agricultura		
211 NICHOLS I	ROAD	C	Connections						1			
Towns Served	WOLCOTT	·				'						
		Monitor	ing Requ	irements	5							
Water Syster	m Facility:	DISTRIBUTION SYSTEM (WSF ID:	00600)									
Total Colifor	m (3100)						1	routine	(RT)	er quarter		
Sampling	Point (Samp	ling Point ID)		Monitoring I	Period	Collect	tion Per	iod C	ompli	ance Status		
Select fro	m Inventory	of Active Sampling Points	:	10/1/23 - 12,	/31/23				Co	mplete		
				1/1/24 - 3/3	31/24				Co	mplete		
				4/1/24 - 6/3	30/24							
				7/1/24 - 9/3	30/24							
Physical Par	· -						1	routine	(RT) ¡	er quarter		
		oling Point ID)		Monitoring I		Collect	tion Per	iod C		ance Status		
Select fro	m Inventory	of Active Sampling Points	:	10/1/23 - 12/31/23				Complete				
				1/1/24 - 3/3					Со	mplete		
				4/1/24 - 6/3	•							
	- 111			7/1/24 - 9/3	30/24							
	•	ENTRY POINT (WSF ID: 00700)										
Nitrate And	•	•				- "			-	T) per year		
		oling Point ID)		Monitoring I		Collect	tion Per	iod C		ance Status		
ENTRY PO	DINT (3)			1/1/23 - 12/						mplete		
				1/1/24 - 12/					Со	mplete		
				1/1/25 - 12/			•	_				
		thly Water System Facilit	y (WSF) L	evel Mo	nitoring	g Rec	quirer	nents				
Water Syster	n Facility: E	NTRY POINT (WSFID: 00700)										
Analyte		Monitoring Requirement (Summary	y Type)	Operati	ng Limit			Samı	oles Re	eq/Month		
рН		Entry Point pH Monitoring (PHRD)		Minimu	m: 7 PH				4			
Start Date	11/1/2009		Complia	nce History:	C	perati	ng Limit	M	onitor	ing		
			Monitor	ing Period	С	omplia	ance Sta	tus: Co	mplia	nce Status:		
				23 - 11/30/20								
				23 - 12/31/20								
				4 - 1/31/2024								
				4 - 2/29/2024								
			3/1/202	4 - 3/31/2024	4							
		Other Co	mpliance	Schedul	es							
Compliance So	chedule Activ	ity			Date		Achiev	ed Date				
RESPOND TO S	SANITARY SUI	RVEY		9/29	/2019							
RESPOND TO S	SANITARY SUI	RVEY		9/29	/2019							
		Water System Facility	y and Sar	npling Po	int Inv	ento	ry					
Water						Total	Lead o	and				

DISTRIBUTION SYSTEM

Description

DOWNSTREAM WITHIN 5 SERVICE CON

Coliform Copper

Rule

Υ

Status

Α

Α

Stage

Rule Tier Asbestos WQP 2 DBPR

Sampling Point Sampling Point

ID

4

System Water System Facility

00600 DISTRIBUTION SYSTEM

Facility ID

	Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source					
CT1660564		NC	25	Р	GW							
Local Address	Service	Residen	tial Commerc	ial Industri	al Combine	ed Agricultural						
211 NICHOLS F	11 NICHOLS ROAD					1						

Towns Served: WOLCOTT

Name

	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		Stage 2 DBPR		
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							
23020	WELL	2	WELL	Α							
56501	TREATMENT PLANT										
61556	HYDROPNEUMATIC TANK	·		·		·					

Contact Information

Organization

Ms. Donna Belval	. Donna Belval				lyke Senior Center	,	Activities Director			
Mailing Address Lin	e One		Mailing	Address Line Two		City State Zip			Zip Code	
211 Nichols Road				Wolcott				СТ	06716	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	one Email Address				
203-879-8133		203-879-	7605		203-578-5704	dbelval@wolcottct.org				
Contact Role(s): A	dministrative	Contact								
Name				Organization				Job Title	ļ.	
Ms. Mary Morrone				Town of Wol	cott	ı	Municiple Age	nt		
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code	
10 Kenea Ave						Wolcott		СТ	06716	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address				
203-879-8100	103					mmorron	e@wolcott.ct.	org		

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

End of schedule

Job Title

Con		ut Departme					_				1	
	Wat	ter Quality M	lonit	oring a	nd Comp	olia	nce S	Sche	edule			
PWS ID PWS N	lame				С	lassifi	cation	Popu	lation O	wner Type	e Pr	imary Source
CT1660594 WOLC	OTT ACTIV	ITY AND LEARNING	CENTER	1		N	С	2	.5	Р		GW
Local Address (where a	pplicable)			Service	Residentia	al Cor	mmerci	al In	dustrial	Combir	ned	Agricultural
48 TODD ROAD				Connection	ns					2		
Towns Served: WOLCO	ТТ				,							
		N	/lonite	oring Red	quiremen	ts						
Water System Facility	: DISTR	IBUTION SYSTEM	(WSF I	D: 00600)								
Total Coliform (310	0)								1 r	outine (R	T) p	er quarter
Sampling Point (So	ampling Po	oint ID)			Monitoring	, Perio	od C	ollecti	ion Perio	d Con	nplid	ance Status
Select from Invent	ory of Acti	ve Sampling Points			10/1/23 - 1	2/31/2	23				Coi	mplete
					1/1/24 - 3	/31/2	4				Coi	mplete
					4/1/24 - 6	/30/2	4					
					7/1/24 - 9	/30/2	4					
Physical Parameters	(PPS)								1 r	outine (R	T) p	er quarter
Sampling Point (So	ampling Po	oint ID)			Monitoring	, Perio	od C	ollecti	ion Perio	od Con	nplic	ance Status
Select from Invent	ory of Acti	ve Sampling Points			10/1/23 - 1	2/31/2	23				Coı	mplete
					1/1/24 - 3	/31/2	4				Coi	mplete
					4/1/24 - 6	/30/2	4					
					7/1/24 - 9	/30/2	4					
Water System Facility	: ENTRY	POINT (WSF ID:	00700)									
Nitrate And Nitrite	(NOX)									1 routine	e (R	T) per year
Sampling Point (So	ampling Po	oint ID)			Monitoring	, Perio	od C	ollecti	ion Perio	d Con	nplid	ance Status
ENTRY POINT (3)					1/1/23 - 12	2/31/2	!3				Coı	mplete
					1/1/24 - 12	2/31/2	.4				Coı	mplete
					1/1/25 - 12	2/31/2	!5					
		Water System	Facili	ity and Sa	ampling P	oint	Inve	ntor	у			
Water							To	otal	Lead ar	nd		
System Water Syste	m Facility	•	_	Sampling P				iform	Coppe			Stage
Facility ID		II.)	Description		Sta	tus R	Rule	Rule Ti	er Asbesi	tos	WQP 2 DBPR
00600 DISTRIBUTIO	N SYSTEM				ON SYSTEM	А		Υ				
				WITHIN 5 S		А	١					
		UPSTI	REAM	WITHIN 5 S	ERVICE CON	А	١					
00700 ENTRY POIN	Т	3	}	ENTRY POIN	NT	А	١					
48237 WELL		2) -	WELL		Д	١					
			Con	tact Info	rmation							
Name			Oı	rganization						Job Tit	le	
Mr. Philip J. Olmstead			W	olcott Town	Hall - Water I	Dept		Wa	ter Admi	nistrator		
Mailing Address Line O	ne	Mailing	Address	s Line Two				Ci	ty	State	9	Zip Code
C/O Wolcott Town Hall		10 Kene	ea Aveni	ue			Wolco	tt		СТ		06716
Business Phone Ex	xtension	Fax	Mobi	le Phone	Emergency P	hone	Email A	Addres	SS			

203-879-1414

polmstead@wolcottct.org.

203-879-8143

Contact Role(s): Administrative Contact, Legal Contact

203-879-8141

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

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1660594 WOLCOTT ACTIVITY AND LEARNING CENTER					25	Р	GW
Local Address (v	Local Address (where applicable)			Residential Commerci		al Combine	ed Agricultural
48 TODD ROAD		Connections				2	

Towns Served: WOLCOTT

Please note the following:

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

End of schedule

	Connecticut D	epartment of	Public H	Iealth	Dr	inki	ng W	ater S	ection	
	Water	Quality Monit	oring an	d Con	npl	ianc	e Sch	edule		
PWS ID	PWS Name				Clas	sificati	on Popu	ulation O	wner Type Pr	imary Source
CT166060	04 AMERICAN LEGION PO	OST 165				NC		25	Р	GW
Local Add	ress (where applicable)		Service	Residen	tial	Comm	ercial I	ndustrial	Combined	Agricultural
1253 WO	LCOTT ROAD		Connections			2				
Towns Se	rved: WOLCOTT						,		1	
		Monito	oring Requ	uireme	nts					
Water Sy	stem Facility: DISTRIBUT	ION SYSTEM (WSF II	D: 00600)							
Total Co	oliform (3100)							1 rc	outine (RT) _I	er quarter
Sam	pling Point (Sampling Point IL	o)		Monitori	ing P	eriod	Collect	tion Perio	d Compli	ance Status
Seled	ct from Inventory of Active Sa	mpling Points		10/1/23 -	12/3	31/23			Со	mplete
				1/1/24 -	3/31	1/24			Со	mplete
				4/1/24 -	6/30	0/24				
				7/1/24 -	9/30	0/24				
Physical	Parameters (PPS)							1 r	outine (RT) _I	oer quarter
Sam	pling Point (Sampling Point IL	o)		Monitori	ing P	eriod	Collect	tion Perio	d Compli	ance Status
Seled	ct from Inventory of Active Sa	mpling Points		10/1/23 -	12/3	31/23			Со	mplete
				1/1/24 -	3/31	1/24			Co	mplete
				4/1/24 -	6/30	0/24				
				7/1/24 -	9/30	0/24				
		Other Co	ompliance	Sched	lule	:S				
Complian	ce Schedule Activity				Due l	Date		Achieve	d Date	
RESPOND	TO SANITARY SURVEY			-	2/5/2	2006				
	Wat	ter System Facili	ty and Sar	mpling	Poi	int In	vento	ry		
Water							Total	Lead an	d	
System	Water System Facility	Sampling Point		nt			Coliform			Stage
Facility II		ID	Description			Status	Rule	Rule Tie	er Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION			Α	Υ			
		DOWNSTREAM			-	Α				
		UPSTREAM	WITHIN 5 SER		V	Α				
00700	ENTRY POINT	3	ENTRY POINT			Α				
48810	WELL #1	2	WELL #1			Α				
48814	WELL #2	2	WELL#2			Α				
62184	TREATMENT PLANT									
		Con	tact Inform	mation						
Name		Oı	ganization						Job Title	

			Co	ontact Inf	ormation				
Name				Organization	1			Job Title	
Mr. Richard Merrit	t	American Le	gion Post 165						
Mailing Address Line One Mailing Add				ess Line Two		City	State	Zip Code	
PO Box 6370						Wolcott		СТ	06716
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Ad	ddress		
203-233-2177						ctalpost	165@gmail.c	om	
Contact Role(s): A	dministrative C	ontact, Leg	al Contact						

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

	Water Quarry 19101	meer mig am	u 0011	TP I	idii oo c	onean		
PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
CT1660604 AMERICAN LEGION POST 165					NC	25	Р	GW
Local Address (where applicable)	Service	Resider	ntial Commerci		al Industri	al Combine	ed Agricultural
1253 WOLCOTT	ROAD	Connections			2			
Tarring Compade	WOLCOTT							

Towns Served: WOLCOTT

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

End of schedule

		t Department o er Quality Moni				U		ection	
PWS ID	PWS Name	1 Quality Mon	toring a		Classifica			ner Tyne P	rimary Source
CT1669114					NC	-	25	P P	GW
	ess (where applicable)		Service	Residenti	_		Industrial	Combined	
2 NORTH ST	* * * * * * * * * * * * * * * * * * * *		Connectio		ai com	1	inaastriai	Combined	Agricultural
	red: WOLCOTT								
TOWIIS SELV	eu. Wolcott	N/ani-	toring Do		L.				
Mater Cue	tors Facility DICTRIR			quiremen	τς				
•	tem Facility: DISTRIB	UTION SYSTEM (WSF	וט: טטפטט)				1 40	utino (DT)	
	form (3100)	a+ (D)		Monitorin	a Dorios	d Collac	tion Period		per quarter
-	from Inventory of Active			<i>Monitoring</i> 10/1/23 - 1			tion Period		iance Status
Select	from Inventory of Active	Sampling Points				3			mplete
				1/1/24 - 3				C	mplete
				4/1/24 - 6					
- · · · ·	(220)			7/1/24 - 9	0/30/24			/>=\	
	Parameters (PPS)								per quarter
_	ling Point (Sampling Poir	-		Monitoring			tion Period		iance Status
Select	from Inventory of Active	Sampling Points		10/1/23 - 1		3			mplete
				1/1/24 - 3				Co	mplete
				4/1/24 - 6					
-				7/1/24 - 9	0/30/24				
	tem Facility: ENTRY F	POINT (WSF ID: 00700	0)						
	nd Nitrite (NOX)							-	RT) per year
-	ling Point (Sampling Poir	nt ID)		Monitoring			tion Period		iance Status
ENTRY	POINT (3)			1/1/23 - 1	-				mplete
				1/1/24 - 1				Cc	mplete
				1/1/25 - 1	2/31/25	<u> </u>			
	W	/ater System Faci	lity and S	ampling F	Point	Invento	ry		
Water						Total	Lead and	1	
-	Water System Facility	Sampling Poin				Coliforn			Stage
Facility ID		ID	Description		Statu	_{is} Rule	Rule Tie	r Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUT		Α				
		DOWNSTREAM			Α				
		UPSTREAM	WITHIN 5 S	SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POI	NT	Α				
52517	WELL 1	2	WELL 1		Α				
57576	TREATMENT PLANT								
		Co	ntact Info	rmation					
Name			Organization					Job Title	
Ms. Michel	le Dube		Hangry Fork			Ac	dmin		
Mailing Add	dress Line One	Mailing Addre				(City	State	Zip Code
2 North St.					٧	Volcott	-	СТ	06716
Business	Phone Extension	Fax Mol	bile Phone	Emergency F	hone E	mail Addr	ess		

k9mdube@yahoo.com

203-441-4068

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

Connecticut Department of Public Health	Drinking Water	Section
Water Quality Monitoring and Con	npliance Schedule	9

	water Quarry	u uon	upi	idifec t	ciicaai	C		
PWS ID PWS Name C					ssification	Population	Owner Type	Primary Source
CT1669114 2 NORTH STREET					NC	25	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
2 NORTH STRE	ET	Connections	Connections		1			
					•		· · · · · · · · · · · · · · · · · · ·	

Towns Served: WOLCOTT

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

End of schedule

			45 J.L					
	Connecticut Dep					_		
	Water Qua	ality Mo	nitoring and	d Comp	oliance	Schedule		
PWS ID	PWS Name			С	lassificatio	n Population C	wner Type Pri	mary Source
CT1669144	WOLCOTT SPORTS COMPL	EX			NC	25	Р	GW
Local Address	(where applicable)		Service	Residentia	al Comme	cial Industrial	Combined	Agricultural
473 SPINDLE	HILL ROAD		Connections		1			
Towns Served	l: WOLCOTT							
		Mo	nitoring Requ	iremen	ts			
Water Syste	m Facility: DISTRIBUTION	SYSTEM (W	/SF ID: 00600)					
Total Colifo	• •						outine (RT) p	•
	g Point (Sampling Point ID)			Monitoring		Collection Perio		nce Status
Select fro	om Inventory of Active Samplir	ng Points		10/1/23 - 1				nplete
				1/1/24 - 3			Cor	nplete
				4/1/24 - 6				
				7/1/24 - 9	/30/24			
-	rameters (PPS)			0.0	Deut 1		outine (RT) p	•
	g Point (Sampling Point ID)	.		Monitoring		Collection Perio	•	nce Status
Select fro	om Inventory of Active Samplir	ng Points	:	10/1/23 - 1				nplete
				1/1/24 - 3			Cor	nplete
				4/1/24 - 6 7/1/24 - 9				
Matan Custo	m Facility FAITDY BOINT	WCE ID: 00	700\	7/1/24 - 9	/30/24			
-	m Facility: ENTRY POINT (יסט יכון אכאין	700)				4 12 12	=1
	l Nitrite (NOX) g Point (Sampling Point ID)			Monitoring	. Pariod	Collection Perio	1 routine (R	nce Status
ENTRY P				1/1/23 - 12		Conection Pena		nplete
LININIF	Olivi (3)			1/1/24 - 12			COI	iipiete
				1/1/25 - 12				-
		Dublic						
		Public	Notification R	-			201.0	<i>C</i> :
Violation/Situ	uation		Compliance Period	Notice Tier		Notification	PN Certi	
	urbidity MCL Violation		10/1/08 - 12/31/08	2	2/14/200		Due to DPH 2/24/2009	Received
Distribution	·		acility and Sar				2/24/2003	
Water	vvater	System Fe	actificy affu Sai	iipiiiig r		Total Lead a	nd	
	ater System Facility	Samplina P	oint Sampling Poi	nt		oliform Coppe		Stage
Facility ID	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ID	Description		Status		er Asbestos	
00600 DIS	STRIBUTION SYSTEM	3	GENERATED E	BY BATCH	A	Υ		<u>-</u>
		4	DISTRIBUTION	J	Α			
		DOWNSTR	EAM WITHIN 5 SER		Α			
		UPSTREA			Α			
00700 EN	ITRY POINT	3	ENTRY POINT		Α			
55392 WI	ELL 1	2	WELL 1		Α			
			Contact Inforr	mation				
Name			Organization				Job Title	
Mr. Carmen F	Romeo		Wolcott Sports C	Complex		Treasurer		

City

cromeo99@gmail.com

Waterbury

Emergency Phone Email Address

State

CT

Zip Code 06704

Mailing Address Line Two

Mobile Phone

Mailing Address Line One

Extension

Fax

44 Chase River Road

Business Phone

203-910-5664

	Connecticut Department of	Public n	lealui	וע	HIKING	water	Section		
	Water Quality Monit	oring an	d Con	npl	liance So	chedule	е		
PWS ID	WS ID PWS Name Classification Population Owner Type Primary Source								
CT1669144	WOLCOTT SPORTS COMPLEX			NC 25			Р	GW	
Local Address (where applicable) Service Residential Commercial Indu								d Agricultural	
473 SPINDLE H	IILL ROAD	Connections			1				

Towns Served: WOLCOTT

Contact Role(s): Administrative Contact, Legal Contact

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End of schedule

								_		
	Connecticut D	epartment of	Public H	lealth D	rin	king \	Water	Se	ction	
	Water (Quality Monit	oring and	d Comp	liar	ice Sc	chedule	e		
PWS ID	PWS Name	quarrey 1.10111c	or mg am						or Type D	rimary Source
CT166915				Cit	NC		25	OWI	I	GW
	ress (where applicable)		Service	Residential		nmercial	Industria	ıl İ	Combined	
201 NICHO			Connections	Nesidelitiai	Con	IIIIerciai	muustiia	11	1	Agricultural
	ved: WOLCOTT									
TOWIIS SEI	veu. WOLCOTT									
		IVIONITO	oring Requ	iirement	S					
Water Sy:	stem Facility: DISTRIBUTI	ON SYSTEM (WSF I	D: 00600)							
Total Col	liform (3100)						1	l ro	utine (RT)	per month
Samp	oling Point (Sampling Point ID)		Monitoring	Perio	d Col	lection Per	iod	Compli	ance Status
Selec	t from Inventory of Active Sar	npling Points		5/1/24 - 5/	31/24					
				6/1/24 - 6/	30/24					
				7/1/24 - 7/	31/24					
				8/1/24 - 8/	31/24					
				9/1/24 - 9/	30/24					
Physical	Parameters (PPS)						1	l ro	utine (RT)	per month
Samp	oling Point (Sampling Point ID)		Monitoring	Perio	d Col	lection Per	iod	Compli	ance Status
Selec	t from Inventory of Active Sar	npling Points		5/1/24 - 5/	31/24					
				6/1/24 - 6/	30/24					
				7/1/24 - 7/	31/24					
				8/1/24 - 8/	31/24					
				9/1/24 - 9/	30/24					
Water Sy:	stem Facility: ENTRY POIN	NT (WSF ID: 00700)								
Nitrate A	And Nitrite (NOX)							1 1	routine (R	RT) per year
	oling Point (Sampling Point ID)		Monitoring	Perio	d Col	lection Per		=	ance Status
	Y POINT (3)	-		1/1/23 - 12/	/31/23	3			Co	mplete
	· ,			1/1/24 - 12/						
				1/1/25 - 12/						
		Other Co	ompliance							
Comonlinus	an Calandula Antivitus	Other C	omphanee				Achiev		Desta	
	ce Schedule Activity				e Date		Acniev	/ea L	Jate	
SEASONAL	START UP COMPLETION				./2024					
	Wat	er System Facili	ity and Sar	npling Po	oint	Inven	tory			
Water						Tota				
System	Water System Facility	Sampling Point		nt		Colifo				Stage
Facility ID		ID	Description		Stat		e Rule	lier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION		Α	Y				
		DOWNSTREAM			A					
		UPSTREAM	WITHIN 5 SER	VICE CON	A					
00700	ENTRY POINT	3	ENTRY POINT		Α					
61670	WELL 1	2	WELL 1		Α					
		Con	tact Inforr	mation						
Name		Oı	ganization						Job Title	
Town of W	Volcott									
	ddress Line One	Mailing Address	s Line Two				City		State	Zip Code
10 Kenea I					,	Wolcott			СТ	06716

Emergency Phone Email Address

Mobile Phone

Fax

Extension

Business Phone

	Connecticut Department of Public Health Drinking Water Section											
	Wat	er Qua	lity Mon	itoring a	nd Con	nplia	nce S	Schedul	le			
PWS ID	PWS ID PWS Name Classification Population Owner Type Primary Source											
CT1669154	WOODTICK PAVII	ION				1	1C	25	L		GW	
Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural												
201 NICHOLS ROA	01 NICHOLS ROAD Connections									1		
Towns Served: W	OLCOTT								,			
Contact Role(s):	Legal Contact, O	wner										
Name				Organization					Jo	b Title		
Mr. Larry Pelletie	er			Woodtick Pavi	lion							
Mailing Address L	ine One		Mailing Addre	ess Line Two				City		State	Zip Code	
201 Nichols Road							Wolco	tt		СТ	06716	
Business Phone	susiness Phone Extension Fax Mobile Phone Emergency Phone Email Address											
860-965-9216							ljp54@	yahoo.com				
Contact Role(s): Administrative Contact												

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End of schedule

Water Quality Monitoring and Compliance Schedule PWS ID PWS Name Classification Population Owner Type Primary Source CT1669164 DOLLAR GENERAL WOLCOTT Local Address (where applicable) Service Residential Commercial Industrial Combined Agriculture Connections 1												
CT1669164 DOLLAR GENERAL WOLCOTT NC 25 P GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agriculture												
Local Address (where applicable) Service Residential Commercial Industrial Combined Agriculture												
1651 WOLCOTT ROAD, WOLCOTT, CT Connections 1												
Towns Served: WOLCOTT												
Monitoring Requirements												
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)												
Total Coliform (3100) 1 routine (RT) per quarte												
Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status												
Select from Inventory of Active Sampling Points 10/1/23 - 10/31/23 Complete												
1/1/24 - 3/31/24 Complete												
4/1/24 - 6/30/24												
7/1/24 - 9/30/24												
Total Coliform (3100) 3 repeat (RP) per period												
Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status												
Select from Inventory of Active Sampling Points 10/26/23 - 10/31/23 Complete												
Total Coliform (3100) 3 temporary routine (TR) per month												
Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status												
Select from Inventory of Active Sampling Points 11/1/23 - 11/30/23 Complete												
Physical Parameters (PPS) 1 routine (RT) per quarte												
Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status												
DISTRIBUTION (4) 10/1/23 - 12/31/23 Complete												
1/1/24 - 3/31/24 Complete												
4/1/24 - 6/30/24												
7/1/24 - 9/30/24												
Water System Facility: ENTRY POINT (WSF ID: 00700)												
Nitrate And Nitrite (NOX) 1 routine (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												
Water System Facility: WELL 1 (WSF ID: 61968)												
E. Coli (3014) 1 triggered (TG) per period												
Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status												
WELL (2) 10/25/23 - 10/31/23 Complete												
Water System Facility and Sampling Point Inventory												
Water Total Lead and												
System Water System Facility Sampling Point Sampling Point Coliform Copper Stage												
Facility ID ID Description Status Rule Rule Tier Asbestos WQP 2 DBF												

DISTRIBUTION

ENTRY POINT

5 SERVICE CONNECTION

DOWNSTREAM 5 SERVICE CONNECTION

WELL

UPSTREAM

3

2

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00600 DISTRIBUTION SYSTEM

00700 ENTRY POINT

61968 WELL 1

Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source		
CT1669164	DOLLAR GENERAL WOLCOTT				NC	25	Р	GW		
Local Address	Service	Residential		Commerci	al Industri	al Combine	ed Agricultural			
1651 WOLCOTT ROAD, WOLCOTT, CT		Connections					1			

				Contact Inf	ormation						
Name				Organization				Job Title			
Mr. Mark Cipriano				Napoli Prospect, LLC				Managing Partner			
Mailing Address Lin		Mailing Address Line Two			City		State	Zip Code			
58 Pleasant Drive					Southbu	ry	СТ	06488			
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress				
				203-509-6525		Markcipriano1@gm		ail.com			
Contact Role(s): O	wner		,								
Name				Organization			Job Title				
Mr. Kristin Elliott				Dollar General Wolcott			Env Serv Manager				
Mailing Address Lin		Mailing Address Line Two			City		State	Zip Code			
100 Mission Ridge						Goodlet	tsville	TN	37072		
Business Phone	Extension	Fax		Mobile Phone Emergency P		e Email Address					
615-855-5365						EnvCompliance@dollargeneral.com			m		
Contact Role(s): A	dministrative C	Contact, Leg	al Contact								

Please note the following:

Towns Served: WOLCOTT

- 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