Connecticut De Water O	•	Public Hear				ction		
PWS ID PWS Name		011119 011101 0	-			ner Type Primary Source		
CT0430014 EAST HARTFORD BREWIN	IG COMPANY		NC	31		P GW		
Local Address (where applicable)	IG COMI ANT	Service Res				Combined Agricultural		
776 TOLLAND STREET		Connections			austriai	Combined Agricultural		
Towns Served: EAST HARTFORD		COTTTCCCTOTTS		1				
TOWNS Served. EAST HARTFORD	Monite	oring Require	ments					
Water System Facility: <b>DISTRIBUTION</b>			ilelits					
Total Coliform (3100)	(31312101 (0031 11	<b>5. 00000</b> ,			1	ting (PT) nor quarter		
Sampling Point (Sampling Point ID)	Mon	1 routine (RT) per quantities (RT) per quantit						
	ling Doints			Conecui	on Periou	Compliance Status  Complete		
Select from Inventory of Active Samp		(25 - 6/30/25		· · · · · · · · · · · · · · · · · · ·				
			<sup>25</sup> - 9/30/25			Complete		
			26 - 3/31/26					
		4/1/	26 - 6/30/26					
Total Coliform (3100)			itoring Period			epeat (RP) per period		
	Sampling Point (Sampling Point ID)				on Period	Compliance Status		
Select from Inventory of Active Samp	ling Points	9/19	/25 - 9/24/25			Complete		
Total Coliform (3100)				3 tem	porary ro	utine (TR) per month		
Sampling Point (Sampling Point ID)		Mon	itoring Period	Collection	on Period	Compliance Status		
Select from Inventory of Active Samp	ling Points	10/1/	25 - 10/31/25			Complete		
Physical Parameters (PPS)					1 rou	tine (RT) per quarter		
Sampling Point (Sampling Point ID)		Mon	itoring Period	Collection	on Period	<b>Compliance Status</b>		
Select from Inventory of Active Samp	ling Points	4/1/	25 - 6/30/25			Complete		
		7/1/	25 - 9/30/25			Complete		
		10/1/	25 - 12/31/25			Complete		
			26 - 3/31/26			·		
			26 - 6/30/26					
Water System Facility: ENTRY POINT	(WSF ID: 00700)	, ,						
Nitrate And Nitrite (NOX)					1	routine (RT) per year		
Sampling Point (Sampling Point ID)			itoring Period	Collection	on Period	Compliance Status		
ENTRY POINT (3)			24 - 12/31/24			Complete		
			25 - 12/31/25			Complete		
		1/1/	26 - 12/31/26			•		
Water System Facility: WELL (WSF ID	): 20835)		. ,					
E. Coli (3014)					1 trigg	gered (TG) per period		
Sampling Point (Sampling Point ID)		Mon	itoring Period	Collection	on Period	Compliance Status		
WELL (2)			/25 - 9/24/25			Complete		
	Other C	ompliance Sch				·		
Compliance Schedule Activity			Due Date		Achieved I	Date		
RESPOND TO SANITARY SURVEY			1/13/2022					
Water	System Facil	ity and Sampl		nventor	У			
Water					Lead and			
System Water System Facility	Sampling Point	Sampling Point		Coliform	Copper	Stage		
Facility ID	ID	Description	Status	Dula		Asbestos WQP 2 DBPR		
00600 DISTRIBUTION SYSTEM	4	DISTRIBUTION SYS		Υ				
	DOWNSTREAM	WITHIN 5 SERVICE						
	UPSTREAM	WITHIN 5 SERVICE	CON A					

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

Schedule Generation Date: 11/13/2025

Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name				ssification	Population	Owner Type Primary Source		
CT0430014	EAST HARTFORD BREWING COMPANY			NC		31	Р	GW	
Local Address	(where applicable)	Service	Residen	ntial	Commercia	al Industri	al Combine	d Agricultural	
776 TOLLAND	STREET	Connections			1				

Connecticut Department of Public Health Drinking Water Section

Towns Served: EAS	T HARTFORD							·			
Water System Facility and Sampling Point Inventory											
Water System Water S Facility ID  00700 ENTRY P 20835 WELL	ystem Facility		Sampling Poin ID 3 2	t Sampling Descriptio ENTRY PO	n St	atus A A	Total Coliform Rule		Asbestos	WQP	Stage 2 DBPR
			Co	ntact Info	ormation						
Name			(	Organization				Job Title			
Mr. Donald Hoenig			E	ast Hartford	Brewing Co						
Mailing Address Lir	e One		Mailing Addre	ss Line Two			Ci	ty	State	Zip C	ode
P.O. Box 272						Tho	mpson		СТ	062	.77
Business Phone	Extension	Fax	Mol	obile Phone Emergency Pho		e Em	ail Addres	SS			
860-234-6722						dor	don@easthartfordbrewing.com				
Contact Role(s): A	dministrative	Contact, Ow	ner								

## 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.

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

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

End of schedule