

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

|                                  |                             |  |                     |                |            |            |                |              |
|----------------------------------|-----------------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| PWS ID                           | PWS Name                    |  |                     | Classification | Population | Owner Type | Primary Source |              |
| CT1479013                        | VOLUNTOWN ELEMENTARY SCHOOL |  |                     | NTNC           | 365        | L          | GW             |              |
| Local Address (where applicable) |                             |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 195 MAIN STREET                  |                             |  |                     | 1              |            |            |                |              |
| Towns Served: VOLUNTOWN          |                             |  |                     |                |            |            |                |              |

### Monitoring Requirements

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

| Asbestos (1094)  |                          | 1 routine (RT) per nine years  |                          |
|--|--------------------------|--------------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points                    | 1/1/20 - 12/31/28        |                                |                          |
| Total Coliform (3100)  |                          | 1 routine (RT) per quarter     |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points                    | 4/1/25 - 6/30/25         |                                | Complete                 |
|  | 7/1/25 - 9/30/25         |                                |                          |
|  | 10/1/25 - 12/31/25       |                                |                          |
|  | 1/1/26 - 3/31/26         |                                |                          |
| Lead And Copper (PBCU)   |                          | 5 routine (RT) per three years |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points                    | 1/1/23 - 12/31/25        | 6/1-9/30                       |                          |
|  | 1/1/26 - 12/31/28        | 6/1-9/30                       |                          |
| Physical Parameters (PPS)  |                          | 1 routine (RT) per quarter     |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points                    | 4/1/25 - 6/30/25         |                                | Complete                 |
|  | 7/1/25 - 9/30/25         |                                |                          |
|  | 10/1/25 - 12/31/25       |                                |                          |
|  | 1/1/26 - 3/31/26         |                                |                          |
| Water System Facility: ENTRY POINT (WSF ID: 00700)                 |                          |                                |                          |
| Inorganic Chemicals (IOCS)   |                          | 1 routine (RT) per three years |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 1/1/23 - 12/31/25        |                                |                          |
|  | 1/1/26 - 12/31/28        |                                |                          |
| Nitrate And Nitrite (NOX)  |                          | 1 routine (RT) per year        |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 1/1/24 - 12/31/24        |                                | Complete                 |
|  | 1/1/25 - 12/31/25        |                                |                          |
|  | 1/1/26 - 12/31/26        |                                |                          |
| Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS) |                          | 1 (RT) per three years         |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 1/1/23 - 12/31/25        | 1/1-12/31                      | Waiver                   |
| Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS) |                          | 1 routine (RT) per three years |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 1/1/26 - 12/31/28        |                                |                          |
| Organic Chemicals (VOCS)   |                          | 1 routine (RT) per three years |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 1/1/23 - 12/31/25        |                                |                          |
|  | 1/1/26 - 12/31/28        |                                |                          |

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

|                                  |                             |                     |             |                |            |            |                |
|----------------------------------|-----------------------------|---------------------|-------------|----------------|------------|------------|----------------|
| PWS ID                           | PWS Name                    |                     |             | Classification | Population | Owner Type | Primary Source |
| CT1479013                        | VOLUNTOWN ELEMENTARY SCHOOL |                     |             | NTNC           | 365        | L          | GW             |
| Local Address (where applicable) |                             | Service Connections | Residential | Commercial     | Industrial | Combined   | Agricultural   |
| 195 MAIN STREET                  |                             |                     | 1           |                |            |            |                |
| Towns Served: VOLUNTOWN          |                             |                     |             |                |            |            |                |

### Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

| Analyte              | Monitoring Requirement (Summary Type) | Operating Limit    | Samples Req/Month  |
|----------------------|---------------------------------------|--------------------|--------------------|
| pH                   | Entry Point pH Monitoring (PHRD)      | Minimum: 7 PH      | 4                  |
| Start Date: 1/1/2002 | Compliance History:                   | Operating Limit    | Monitoring         |
|                      | Monitoring Period                     | Compliance Status: | Compliance Status: |
|                      | 5/1/2025 - 5/31/2025                  |                    |                    |
|                      | 6/1/2025 - 6/30/2025                  |                    |                    |
|                      | 7/1/2025 - 7/31/2025                  |                    |                    |
|                      | 8/1/2025 - 8/31/2025                  |                    |                    |
|                      | 9/1/2025 - 9/30/2025                  |                    |                    |

### Other Compliance Schedules

| Compliance Schedule Activity             | Due Date   | Achieved Date |
|--|------------|---------------|
| RESPOND TO SANITARY SURVEY               | 2/27/2021  |               |
| RESPOND TO SANITARY SURVEY               | 10/22/2025 |               |
| CORRECTIVE ACTION/CORRECTIVE ACTION PLAN | 1/20/2026  |               |
| CROSS CONNECTION SURVEY REPORT           | 3/1/2026   |               |

### 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 WQP 2 DBPR |
|--------------------------|--|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600                    | DISTRIBUTION SYSTEM                    | 4                 | DISTRIBUTION SYSTEM        | A      | Y                   |                           |          |                  |
|                          |  | DOWNSTREAM        | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
|                          |  | OM9000            | KITCHEN SINK               | A      | Y                   | 2                         | Y        |                  |
|                          |  | OM9001            | OFFICE SINK                | A      | Y                   |                           |          |                  |
|                          |  | OM9002            | OFFICE SINK                | A      | Y                   | 2                         |          |                  |
|                          |  | OM9003            | JR. HIGH BOYS LAV          | A      | Y                   | 2                         |          |                  |
|                          |  | OM9004            | JR. HIGH GIRLS LAV         | A      | Y                   | 2                         |          |                  |
|                          |  | OM9005            | ART ROOM SINK              | A      |                     | 2                         |          |                  |
|                          |  | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | ENTRY POINT                            | 3                 | ENTRY POINT                | A      |                     |                           |          |                  |
| 10640                    | WELL                                   | 2                 | WELL                       | A      |                     |                           |          |                  |
| 1537                     | VOLUNTOWN ELEMENTARY TREATMENT STATION |                   |                            |        |                     |                           |          |                  |
| 48326                    | WELL #2                                | 2                 | WELL 2                     | A      |                     |                           |          |                  |
| 53291                    | ATMOSPHERIC STORAGE                    |                   |                            |        |                     |                           |          |                  |
| 53293                    | PRESSURE STORAGE                       |                   |                            |        |                     |                           |          |                  |
| 53295                    | BOOSTER PUMPS                          |                   |                            |        |                     |                           |          |                  |

### Certified Operator Information

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

| PWS ID                           | PWS Name                    |  |                     | Classification | Population | Owner Type |          | Primary Source |  |
|----------------------------------|-----------------------------|--|---------------------|----------------|------------|------------|----------|----------------|--|
| CT1479013                        | VOLUNTOWN ELEMENTARY SCHOOL |  |                     | NTNC           | 365        | L          |          | GW             |  |
| Local Address (where applicable) |                             |  | Service Connections | Residential    | Commercial | Industrial | Combined | Agricultural   |  |
| 195 MAIN STREET                  |                             |  |                     | 1              |            |            |          |                |  |
| Towns Served: VOLUNTOWN          |                             |  |                     |                |            |            |          |                |  |

### Certified Operator Information

**Water System Facility: VOLUNTOWN ELEMENTARY TREATMENT STATION (WSF ID: 1537)**

**Facility Classification:** CLASS 1 TREATMENT PLANT

| Operator Name        | Operator Type  | Certification(s)                          | Certification Expiration |
|----------------------|----------------|---|--------------------------|
| LAFRAMBOISE, PAUL F. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I    | 9/30/2027                |
|                      |                | WATER TREATMENT PLANT OPERATOR - CLASS II | 9/30/2027                |

### Contact Information

|                            |           |                          |              |                 |                         |
|----------------------------|-----------|--------------------------|--------------|-----------------|-------------------------|
| Name                       |           | Organization             |              | Job Title       |                         |
| <b>Mr. Adam S. Burrows</b> |           |                          |              | Superintendent  |                         |
| Mailing Address Line One   |           | Mailing Address Line Two |              | City            | State Zip Code          |
| 195 Main Street            |           | P.O. Box 129             |              | Voluntown       | CT 06384-1821           |
| Business Phone             | Extension | Fax                      | Mobile Phone | Emergency Phone | Email Address           |
| 860-376-9167               |           | 860-376-3185             |              |                 | JMELGEY@VOLUNTOWNCT.ORG |

**Contact Role(s): Legal Contact**

|                             |           |                           |              |                     |                           |
|-----------------------------|-----------|---------------------------|--------------|---------------------|---------------------------|
| Name                        |           | Organization              |              | Job Title           |                           |
| <b>Ms. Darlena Loranger</b> |           | Voluntown School District |              | Executive Assistant |                           |
| Mailing Address Line One    |           | Mailing Address Line Two  |              | City                | State Zip Code            |
| 195 Main Street             |           | PO Box 129                |              | Voluntown           | CT 06384                  |
| Business Phone              | Extension | Fax                       | Mobile Phone | Emergency Phone     | Email Address             |
| 860-376-9167                | 442       | 860-376-9167              |              | 860-376-2325        | dloranger@voluntownct.org |

**Contact Role(s): Administrative Contact**

#### **Please note the following:**

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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                            |  |                     | Classification | Population | Owner Type | Primary Source |              |
|----------------------------------|-------------------------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT1470084                        | TAMARACK LODGE & GLAMPING RESORT CT |  |                     | NTNC           | 55         | P          | GW             |              |
| Local Address (where applicable) |                                     |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 21 TEN ROD ROAD                  |                                     |  |                     |                | 1          |            |                |              |
| Towns Served: VOLUNTOWN          |                                     |  |                     |                |            |            |                |              |

### Monitoring Requirements

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

| Asbestos (1094)  |                          | 1 routine (RT) per nine years  |                          |
|--|--------------------------|--------------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points                    | 1/1/25 - 12/31/33        |                                |                          |
| Total Coliform (3100)  |                          | 1 routine (RT) per quarter     |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points                    | 4/1/25 - 6/30/25         |                                | Complete                 |
|  | 7/1/25 - 9/30/25         |                                | Complete                 |
|  | 10/1/25 - 12/31/25       |                                |                          |
|  | 1/1/26 - 3/31/26         |                                |                          |
| Lead And Copper (PBCU)   |                          | 5 routine (RT) per six months  |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points                    | 1/1/25 - 6/30/25         |                                | Complete                 |
|  | 7/1/25 - 12/31/25        |                                |                          |
|  | 1/1/26 - 6/30/26         |                                |                          |
| Physical Parameters (PPS)  |                          | 1 routine (RT) per quarter     |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points                    | 4/1/25 - 6/30/25         |                                | Complete                 |
|  | 7/1/25 - 9/30/25         |                                | Complete                 |
|  | 10/1/25 - 12/31/25       |                                |                          |
|  | 1/1/26 - 3/31/26         |                                |                          |
| Water System Facility: ENTRY POINT (WSF ID: 00700)                 |                          |                                |                          |
| Inorganic Chemicals (IOCS)   |                          | 1 routine (RT) per three years |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 1/1/23 - 12/31/25        |                                | Complete                 |
|  | 1/1/26 - 12/31/28        |                                |                          |
| Nitrate And Nitrite (NOX)  |                          | 1 routine (RT) per year        |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 1/1/24 - 12/31/24        |                                | Complete                 |
|  | 1/1/25 - 12/31/25        |                                | Complete                 |
|  | 1/1/26 - 12/31/26        |                                |                          |
| Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS) |                          | 1 routine (RT) per quarter     |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 4/1/25 - 6/30/25         |                                | Complete                 |
|  | 7/1/25 - 9/30/25         |                                | Complete                 |
|  | 10/1/25 - 12/31/25       |                                |                          |
|  | 1/1/26 - 3/31/26         |                                |                          |
| Organic Chemicals (VOCS)   |                          | 1 routine (RT) per quarter     |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 4/1/25 - 6/30/25         |                                | Complete                 |
|  | 7/1/25 - 9/30/25         |                                | Complete                 |

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

|  |                                     |                    |                            |                   |                     |                           |          |                  |
|--|-------------------------------------|--------------------|----------------------------|-------------------|---------------------|---------------------------|----------|------------------|
| PWS ID   | PWS Name                            | Classification     | Population                 | Owner Type        | Primary Source      |                           |          |                  |
| CT1470084  | TAMARACK LODGE & GLAMPING RESORT CT | NTNC               | 55                         | P                 | GW                  |                           |          |                  |
| Local Address (where applicable)                           | Service Connections                 | Residential        | Commercial                 | Industrial        | Combined            | Agricultural              |          |                  |
| 21 TEN ROD ROAD  |                                     |                    | 1                          |                   |                     |                           |          |                  |
| Towns Served: VOLUNTOWN                                    |                                     |                    |                            |                   |                     |                           |          |                  |
| Monitoring Requirements                                    |                                     |                    |                            |                   |                     |                           |          |                  |
| Water System Facility: ENTRY POINT (WSF ID: 00700)         |                                     |                    |                            |                   |                     |                           |          |                  |
| Organic Chemicals (VOCS)                                   |                                     |                    | 1 routine (RT) per quarter |                   |                     |                           |          |                  |
| Sampling Point (Sampling Point ID)                         |                                     | Monitoring Period  | Collection Period          | Compliance Status |                     |                           |          |                  |
|  |                                     | 10/1/25 - 12/31/25 |                            |                   |                     |                           |          |                  |
|  |                                     | 1/1/26 - 3/31/26   |                            |                   |                     |                           |          |                  |
| Other Compliance Schedules                                 |                                     |                    |                            |                   |                     |                           |          |                  |
| Compliance Schedule Activity                               |                                     | Due Date           | Achieved Date              |                   |                     |                           |          |                  |
| SUBMIT LEAD SERVICE LINE INVENTORY                         |                                     | 10/16/2024         |                            |                   |                     |                           |          |                  |
| COMPLETE INITIAL LSL INVENTORY                             |                                     | 10/16/2024         |                            |                   |                     |                           |          |                  |
| CROSS CONNECTION SURVEY REPORT                             |                                     | 3/1/2026           |                            |                   |                     |                           |          |                  |
| 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 WQP 2 DBPR |
| 00600  | DISTRIBUTION SYSTEM                 | 4                  | DISTRIBUTION SYSTEM        | A                 | Y                   |                           |          |                  |
|  |                                     | DOWNSTREAM         | WITHIN 5 SERVICE CON       | A                 |                     |                           |          |                  |
|  |                                     | TLC1               | CABIN 1                    | A                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLC2               | CABIN 2                    | A                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLC3               | CABIN 3                    | A                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLC4               | CABIN 4                    | I                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLC5               | CABIN 5                    | I                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLHW1              | BAR HANDWASH               | A                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLHW2              | KITCHEN HANDWASH           | A                 |                     | 3                         | Y        |                  |
|  |                                     | TLMR               | MENS ROOM                  | A                 | Y                   | 3                         |          |                  |
|  |                                     | TLPS               | KITCHEN PREP SINK          | A                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLST1              | SAFARI TENT 1              | A                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLST2              | SAFARI TENT 2              | A                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLST3              | DISTRIBUTION SYSTEM        | A                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLST4              | SAFARI TENT 4              | I                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLST5              | SAFARI TENT 5              | I                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLUR1              | UNISEX ROOM 1              | A                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLUR2              | UNISEX ROOM 2              | A                 | Y                   | 3                         | Y        |                  |
|  |                                     | TLWR               | WOMENS ROOM                | A                 | Y                   | 3                         | Y        |                  |
|  |                                     | UPSTREAM           | WITHIN 5 SERVICE CON       | A                 |                     |                           |          |                  |
| 00700  | ENTRY POINT                         | 3                  | ENTRY POINT                | A                 |                     |                           |          |                  |
| 22467  | WELL                                | 2                  | WELL                       | A                 |                     |                           |          |                  |
| Certified Operator Information                             |                                     |                    |                            |                   |                     |                           |          |                  |
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) |                                     |                    |                            |                   |                     |                           |          |                  |
| Facility Classification: DISTRIBUTION SYSTEM               |                                     |                    |                            |                   |                     |                           |          |                  |
| Operator Name  | Operator Type                       | Certification(s)   | Certification Expiration   |                   |                     |                           |          |                  |

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Schedule Generation Date: 10/3/2025

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

| PWS ID                           | PWS Name                            |  |                     | Classification | Population | Owner Type | Primary Source |              |
|----------------------------------|-------------------------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT1470084                        | TAMARACK LODGE & GLAMPING RESORT CT |  |                     | NTNC           | 55         | P          | GW             |              |
| Local Address (where applicable) |                                     |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 21 TEN ROD ROAD                  |                                     |  |                     |                | 1          |            |                |              |
| Towns Served: VOLUNTOWN          |                                     |  |                     |                |            |            |                |              |

### Certified Operator Information

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

Facility Classification: DISTRIBUTION SYSTEM

| Operator Name         | Operator Type     | Certification(s)                          | Certification Expiration |
|-----------------------|-------------------|---|--------------------------|
| NIGRO, JR., VICTOR N. | CHIEF OPERATOR    | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2027                |
|                       |                   | DISTRIBUTION SYSTEM OPERATOR - CLASS III  | 6/30/2026                |
| NIGRO, SCOTT A.       | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I    | 6/30/2028                |
|                       |                   | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2026                |

### Contact Information

|                          |  |           |                          |                               |  |                  |                         |       |          |
|--------------------------|--|-----------|--------------------------|-------------------------------|--|------------------|-------------------------|-------|----------|
| Name                     |  |           |                          | Organization                  |  |                  | Job Title               |       |          |
| Ms. Pamela Potemri       |  |           |                          | Tamar Ldg&Glamp Rsort Ct, LLC |  |                  |                         |       |          |
| Mailing Address Line One |  |           | Mailing Address Line Two |                               |  | City             |                         | State | Zip Code |
| 5 Cossaduck Hill Road    |  |           |                          |                               |  | North Stonington |                         | CT    | 06359    |
| Business Phone           |  | Extension | Fax                      | Mobile Phone                  |  | Emergency Phone  | Email Address           |       |          |
| 860-376-0224             |  |           |                          |                               |  | 860-334-9649     | pamelapotemri@gmail.com |       |          |

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

|                          |  |           |                          |                |              |                 |                 |       |          |
|--------------------------|--|-----------|--------------------------|----------------|--------------|-----------------|-----------------|-------|----------|
| Name                     |  |           |                          | Organization   |              |                 | Job Title       |       |          |
| Mr. Joseph Potemri       |  |           |                          | Tamarack Lodge |              |                 | General Manager |       |          |
| Mailing Address Line One |  |           | Mailing Address Line Two |                |              | City            |                 | State | Zip Code |
| 21 Ten Rod Road          |  |           |                          |                |              | Voluntown       |                 | CT    | 06384    |
| Business Phone           |  | Extension | Fax                      |                | Mobile Phone | Emergency Phone | Email Address   |       |          |
| 860-376-0224             |  |           |                          |                |              | 401-258-6397    | joe@tl-ct.com   |       |          |

Contact Role(s): **Administrative Contact**

#### Please note the following:

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