

Connecticut Department of Public Health Drinking Water Section									
Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name				Classification	Population	Owner Type	Primary Source	
CT1680034	1633 MAIN STREET - WOODBURY				NC	25	P	GW	
Local Address (where applicable)				Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
					1				
Towns Served: WOODBURY									
Monitoring Requirements									
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)									
Total Coliform (3100)					1 routine (RT) per quarter				
Sampling Point (Sampling Point ID)				Monitoring Period		Collection Period		Compliance Status	
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					
Physical Parameters (PPS)					1 routine (RT) per quarter				
Sampling Point (Sampling Point ID)				Monitoring Period		Collection Period		Compliance Status	
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)									
Nitrate And Nitrite (NOX)					1 routine (RT) per year				
Sampling Point (Sampling Point ID)				Monitoring Period		Collection Period		Compliance Status	
ENTRY POINT (3)				1/1/24 - 12/31/24				Complete	
				1/1/25 - 12/31/25				Complete	
				1/1/26 - 12/31/26					
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					
			UPSTREAM WITHIN 5 SERVICE CON	A					
00700	ENTRY POINT	3	ENTRY POINT	A					
22648	WELL	2	WELL	A					
Contact Information									
Name				Organization			Job Title		
Mr. Srijan Katwaz				Pse, LLC			Owner		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
1633 Main St North						Woodbury		CT	06798
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
617-708-6278					srijann123@gmail.com				
Contact Role(s): Owner									

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
<b>CT1680034</b>	<b>1633 MAIN STREET - WOODBURY</b>	<b>NC</b>	<b>25</b>	<b>P</b>	<b>GW</b>
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial
			<b>1</b>		
Towns Served: WOODBURY					
Name		Organization		Job Title	
<b>Mr. Alfredo Ciarlo</b>		Big Daddy's Pizza		Owner	
Mailing Address Line One		Mailing Address Line Two		City	State
1633 Main St North				Woodbury	CT
Zip Code					
	06798				
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-263-7233			860-384-2749		saratoga66@aol.com
Contact Role(s): <b>Administrative Contact, Legal Contact</b>					

**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	
CT1680044	DAIRY DELITE & JOHNS CAFE			NC	40	P	GW	
Local Address (where applicable)			Service	Residential	Commercial	Industrial	Combined	Agricultural
693 & AMP; 705 MAIN STREET SOUTH			Connections		2			
Towns Served: WOODBURY								

### Monitoring Requirements

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

<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>	
<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		

<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>	
<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)**

<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>	
<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		

### Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
22649	WELL	2	WELL	A				

### Contact Information

Name			Organization			Job Title	
<b>Mr. John White</b>			Dairy Delite & John's Cafe			Owner	
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
2 Clubhouse Road					Woodbury	CT	06798
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-263-0188				203-263-8431			

Contact Role(s): **Owner**

**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
<b>CT1680044</b>	<b>DAIRY DELITE &amp; JOHNS CAFE</b>	<b>NC</b>	<b>40</b>	<b>P</b>	<b>GW</b>
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial
693 & AMP; 705 MAIN STREET SOUTH			2		
Towns Served: WOODBURY					
Name		Organization		Job Title	
<b>Mr. William F. Okesson III</b>		John's Cafe			
Mailing Address Line One		Mailing Address Line Two		City	State
693 Main Street				Woodbury	CT
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-263-0188					
Contact Role(s): <b>Administrative Contact, Owner</b>					
Name		Organization		Job Title	
<b>Mr. Masudur Patwary</b>				Owner	
Mailing Address Line One		Mailing Address Line Two		City	State
705 Main St South				Woodbury	CT
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-263-4450				203-231-2724	
Contact Role(s): <b>Legal Contact, Owner</b>					
<b>Please note the following:</b> <ol style="list-style-type: none"> <li>The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.</li> <li>If a Collection Period is specified, all water quality samples must be collected during the specified period.</li> <li>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.</li> </ol>					

***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
CT1680104	PREMIER CARE OF WOODBURY			NC	45	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
280 MIDDLE ROAD TURNPIKE			2				
Towns Served: WOODBURY							

### Monitoring Requirements

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

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 - 5/31/25		Complete
	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		
	1/1/26 - 3/31/26		

Total Coliform (3100)		3 repeat (RP) per period	
<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	5/14/25 - 5/19/25		Complete

Total Coliform (3100)		3 temporary routine (TR) per month	
<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	6/1/25 - 6/30/25		Complete

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)**

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		

Water System Facility: **WELL (WSF ID: 22654)**

E. Coli (3014)		1 triggered (TG) per period	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL (2)	5/13/25 - 5/19/25		Complete

E. Coli (3014)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL (2)	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		

### Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION SURVEY REPORT	3/1/2017	
CROSS CONNECTION SURVEY REPORT	3/1/2018	
CROSS CONNECTION SURVEY REPORT	3/1/2019	

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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
CT1680104	PREMIER CARE OF WOODBURY			NC	45	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
280 MIDDLE ROAD TURNPIKE			2				
Towns Served: WOODBURY							

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2020	
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	
CROSS CONNECTION SURVEY REPORT	3/1/2025	
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			
00700	ENTRY POINT	3	ENTRY POINT	A				
22654	WELL	2	WELL	A				

### Contact Information

Name				Organization			Job Title		
Mr. Nilesh H. Amin				Premier Care					
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
60 Soundview Ave., Unit 2						Norwalk		CT	06854
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
203-809-0552				203-809-0552	neilamin@yahoo.com				

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

Name				Organization			Job Title		
Mr. Edward Belanger				Premier Care Rch			Administrator		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
280 Middle Road Turnpike						Woodbury		CT	06798
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
860-681-1337			203-263-7303				nssta33@yahoo.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**

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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	
CT1680124	308 SHERMAN HILL ROAD			NC	25	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
308 SHERMAN HILL ROAD					1			
Towns Served: WOODBURY								

### Monitoring Requirements

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

Total Coliform (3100)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		

Physical Parameters (PPS)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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)**

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		

### 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				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
22656	WELL	2	WELL	A				

### Contact Information

Name				Organization			Job Title		
Mr. David Scully									
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
153 Hazel Plain Rd.						Woodbury		CT	06798
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
203-263-5256			203-754-2353			203-206-9192	dscully@ksmlegal.com		
Contact Role(s): Administrative Contact, Legal Contact, Owner									

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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	
CT1680124	308 SHERMAN HILL ROAD			NC	25	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
308 SHERMAN HILL ROAD					1			
Towns Served: WOODBURY								

**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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**End of schedule**