

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0310052 | CORNWALL CONSOLIDATED SCHOOL | NTNC | 202 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 5 CREAM HILL ROAD | | | 1 | | | | |
| Towns Served: CORNWALL | | | | | | | |

Monitoring Requirements

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

| Chlorine Residual (1012) | 1 routine (RT) 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 | 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 | | |
| 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 Haloacetic Acids (2456) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| UPSTAIRS BOYS BATHR (UBB0017) | 1/1/24 - 12/31/24 | 9/1-9/30 | |
| | 1/1/25 - 12/31/25 | 9/1-9/30 | |
| Total Trihalomethanes (2950) | 1 routine (RT) per year | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| LIBRARY 212 (CCS012) | 1/1/24 - 12/31/24 | 9/1-9/30 | |
| | 1/1/25 - 12/31/25 | 9/1-9/30 | |
| Total Coliform (3100) | 1 routine (RT) 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 | 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 | | |
| 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 | 11/18/23 - 11/22/23 | | 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 | | |
| CT0310052 | CORNWALL CONSOLIDATED SCHOOL | NTNC | 202 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 5 CREAM HILL ROAD | | | 1 | | | | |

Towns Served: CORNWALL

Monitoring Requirements

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

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> |
|---|--------------------------|--------------------------|--------------------------|
| | 12/2/23 - 12/6/23 | | Complete |
| | 12/2/23 - 12/6/23 | | |

Lead And Copper (PBCU) **10 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 | 1/1/24 - 6/30/24 | | |
| | 7/1/24 - 12/31/24 | | |

Physical Parameters (PPS) **1 routine (RT) 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 | 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)**

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) | 1/1/21 - 12/31/23 | | |
| | 1/1/24 - 12/31/26 | | |
| | 1/1/27 - 12/31/29 | | |

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) | 1/1/23 - 12/31/23 | | Complete |
| | 1/1/24 - 12/31/24 | | Complete |
| | 1/1/25 - 12/31/25 | | |

Pesticides, Herbicides and PCBs-Phase II (SOC2) **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 | | |

Pesticides, Herbicides and PCBs-Phase V (SOC5) **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 | | |

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 | | |
| CT0310052 | CORNWALL CONSOLIDATED SCHOOL | NTNC | 202 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 5 CREAM HILL ROAD | | | 1 | | | | |

Towns Served: CORNWALL

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Pesticides, Herbicides and PCBs-Phase V (SOC5) 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> |
|---|--------------------------|--------------------------|--------------------------|
| | 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) | 1/1/21 - 12/31/23 | | Complete |
| | 1/1/24 - 12/31/26 | | |
| | 1/1/27 - 12/31/29 | | |

Water System Facility: WELL #2 (WSF ID: 52357)

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 (2) | 11/17/23 - 11/22/23 | | Complete |
| | 12/1/23 - 12/6/23 | | Complete |
| | 12/1/23 - 12/6/23 | | |

E. Coli (3014) 1 routine (RT) per month

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| WELL #2 (2) | 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: WELL #3 (WSF ID: 52359)

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 #3 (2) | 11/17/23 - 11/22/23 | | Complete |
| | 12/1/23 - 12/6/23 | | |
| | 12/1/23 - 12/6/23 | | Complete |

E. Coli (3014) 1 routine (RT) per month

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| WELL #3 (2) | 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 | | |

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 | | |
| CT0310052 | CORNWALL CONSOLIDATED SCHOOL | NTNC | 202 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 5 CREAM HILL ROAD | | | 1 | | | | |

Towns Served: CORNWALL

Monitoring Requirements

Water System Facility: **WELL #3 (WSF ID: 52359)**

| | |
|---|---------------------------------|
| E. Coli (3014) | 1 routine (RT) per month |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> |
| | <i>Collection Period</i> |
| | <i>Compliance Status</i> |
| | 7/1/24 - 7/31/24 |
| | 8/1/24 - 8/31/24 |
| | 9/1/24 - 9/30/24 |
| | 10/1/24 - 10/31/24 |

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 |
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: 0.05 MG/L | Daily |
| Start Date: 1/1/2024 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 1/1/2024 - 1/31/2024 | | |
| | 2/1/2024 - 2/29/2024 | | |
| | 3/1/2024 - 3/31/2024 | | |

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 | 3/1/2025 | |

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 | | | |
| | | CCS006 | KITCHEN SINK 2 | A | Y | 2 | Y | |
| | | CCS007 | KINDERGARDEN | A | Y | 2 | Y | |
| | | CCS008 | ART ROOM | A | Y | 2 | Y | |
| | | CCS009 | ROOM 117 | A | Y | 2 | Y | |
| | | CCS010 | ROOM 103 | A | Y | 2 | Y | |
| | | CCS011 | ROOM 205 | A | Y | 2 | Y | |
| | | CCS012 | LIBRARY 212 | A | Y | 2 | Y | Y |
| | | CCS013 | ROOM 201 | A | Y | 2 | Y | |
| | | CCS014 | ROOM 203 | A | Y | 2 | Y | |
| | | CCS015 | ROOM 100 | A | Y | 2 | Y | |
| | | CCS016 | ROOM 102 | A | Y | 2 | Y | |
| | | CCS017 | ROOM 204 | A | Y | 2 | Y | |
| | | CCS018 | ROOM 200 | A | Y | 2 | Y | |
| | | DBB0018 | DOWN BOYS BATHROOM | A | | 2 | | |

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 | | |
|----------------------------------|------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| CT0310052 | CORNWALL CONSOLIDATED SCHOOL | NTNC | 202 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 5 CREAM HILL ROAD | | | 1 | | | | |

Towns Served: CORNWALL

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 |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | FL0019 | FACULTY LOUNGE | A | Y | 2 | Y | |
| | | KS0015 | KITCHEN SINK | A | Y | 2 | Y | |
| | | N00020 | NURSES OFFICE | A | Y | 2 | Y | |
| | | SR0016 | SCIENCE ROOM | A | Y | 2 | Y | |
| | | UBB0017 | UPSTAIRS BOYS BATHR | A | Y | 2 | Y | Y |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 52357 | WELL #2 | 2 | WELL #2 | A | | | | |
| 52359 | WELL #3 | 2 | WELL #3 | A | | | | |
| 54885 | ATMOSPHERIC STORAGE | | | | | | | |
| 62899 | TREATMENT PLANT | | | | | | | |

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 62899)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|-------------------|----------------|---|--------------------------|
| KILBOURN, ERIC M. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 12/31/2025 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2025 |

Contact Information

| | | | | | | |
|--------------------------|-----------|------------------------------|--------------|-----------------|-----------------------------|----------|
| Name | | Organization | | | Job Title | |
| Ms. Leanne Maguire | | Cornwall Consolidated School | | | | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 5 Cream Hill Road | | | | West Cornwall | CT | 06796 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 860-672-6617 | 303 | | | | lmaquire@cornwallschool.org | |

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

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 | | |
| CT0315013 | CORNWALL CHILD CENTER, INC. | NTNC | 39 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 8 CREAM HILL ROAD | | | | 1 | | | |

Towns Served: CORNWALL

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 | 10/1/23 - 12/31/23 | | Complete |
| | 1/1/24 - 3/31/24 | | Complete |
| | 4/1/24 - 6/30/24 | | |
| | 7/1/24 - 9/30/24 | | |

Lead And Copper (PBCU) 5 routine (RT) per three years

| <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 | 10/1/23 - 12/31/23 | | Complete |
| | 1/1/24 - 3/31/24 | | Complete |
| | 4/1/24 - 6/30/24 | | |
| | 7/1/24 - 9/30/24 | | |

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Inorganic Chemicals (IOCS) 1 routine (RT) per three years

| <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) | 1/1/23 - 12/31/23 | | Complete |
| | 1/1/24 - 12/31/24 | | |
| | 1/1/25 - 12/31/25 | | |

Pesticides, Herbicides and PCBs-Phase II (SOC2) 1 routine (RT) per three years

| <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 | | |

Pesticides, Herbicides and PCBs-Phase V (SOC5) 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 | | |

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 | | |

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 | | |
|----------------------------------|------------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| CT0315013 | CORNWALL CHILD CENTER, INC. | NTNC | 39 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 8 CREAM HILL ROAD | | | | 1 | | | |

Towns Served: CORNWALL

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

| 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> |
| | 1/1/26 - 12/31/28 | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|------------------------------------|------------|---------------|
| SAMPLING SITE PLAN | 7/7/2020 | |
| SUBMIT LEAD SERVICE LINE INVENTORY | 10/16/2024 | |
| COMPLETE INITIAL LSL INVENTORY | 10/16/2024 | |
| CROSS CONNECTION EXEMPTION | 3/1/2027 | |

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 | GENERIC DISTRIBUTION | A | Y | | | |
| | | CCC001 | KITCHEN SINK | A | Y | N | Y | |
| | | CCC002 | DRINKING FOUNTAIN | A | Y | N | | |
| | | CCC003 | CHILD SINK 1 | A | Y | N | | |
| | | CCC004 | CHILD SINK 2 | A | Y | N | | |
| | | CCC005 | STAFF BATHROOM | A | Y | N | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10881 | WELL #1 | 2 | WELL #1 | A | | | | |

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|--------------------|-------------------|---|--------------------------|
| KILBOURN, ERIC M. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 12/31/2025 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2025 |
| KILBOURN, JORDAN H | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2026 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 9/30/2024 |

Contact Information

| Name | | | Organization | | | Job Title | | |
|--------------------------|-----------|-----|--------------------------|-----------------|-------------------------------|---------------|-------|----------|
| Ms. Amy C. Bresson | | | Cornwall Child Center | | | Director | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 8 Cream Hill Road | | | | | | West Cornwall | CT | 06796 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-672-6989 | | | | 860-733-2233 | cornwallchildcenter@yahoo.com | | | |

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 |
|------------------|------------------------------------|----------------|------------|------------|----------------|
| CT0315013 | CORNWALL CHILD CENTER, INC. | NTNC | 39 | P | GW |

| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
|----------------------------------|---------------------|-------------|------------|------------|----------|--------------|
| 8 CREAM HILL ROAD | | | 1 | | | |

Towns Served: CORNWALL

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

| Name | Organization | Job Title |
|----------------------------------|--------------|-----------|
| Cornwall Child Center Inc | | |

| Mailing Address Line One | Mailing Address Line Two | City | State | Zip Code |
|--------------------------|--------------------------|---------------|-------|----------|
| 8 Cream Hill Rd | | West Cornwall | CT | 06796 |

| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address |
|----------------|-----------|-----|--------------|-----------------|---------------|
| | | | | | |

Contact Role(s): **Owner**

| Name | Organization | Job Title |
|-------------------------|-----------------------|-----------|
| Ms. Amy Martinez | Cornwall Child Center | |

| Mailing Address Line One | Mailing Address Line Two | City | State | Zip Code |
|--------------------------|--------------------------|---------------|-------|----------|
| 8 Cream Hill Road | | West Cornwall | CT | 06796 |

| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address |
|----------------|-----------|-----|--------------|-----------------|---------------|
| | | | | | |

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.
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

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.