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

PWS ID PWS Name C				Clas	ssification	Population	Owner Type	Primary Source
CT0340024	7-ELEVEN STORE				NC	25	Р	GW
Local Address (w	here applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
217-219 CLAPBO	OARD RIDGE ROAD	Connections			1			

Towns Served: DANBURY

Towns Served: DANBURY			
Moni	toring Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF	ID: 00600)		
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		Complete
	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		Complete
	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	0)		
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		Complete
	1/1/25 - 12/31/25		
Water System Facility: WELL (WSF ID: 20622)			
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		Complete
	. 1. 10 1 1	-	-

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.

1/1/24 - 1/31/24

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

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Pri	imary Source
CT0340024	7-ELEVEN STORE				NC	25	Р		GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commerci	al Industri	al Combin	ed	Agricultural
217-219 CLAPBO	OARD RIDGE ROAD	Connections			1				

Towns Served: DANBURY

Monitoring	Requirements
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W	ater S	System	Facility:	WELL	(WSF II	D: 20622)
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. Coli (3014)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	2/1/24 - 2/29/24		Complete
	3/1/24 - 3/31/24		Complete
	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		

Other Compliance Schedules

Compliance Schedule Activity Due Date Achieved Date

RESPOND TO SANITARY SURVEY 12/3/2021

Public Notification Requirements

	Compliance	Notice	Public Notification		PN Certification	
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received
E. Coli M&R Violation	1/1/23 - 1/31/23	3	6/8/2024		6/18/2024	
E. Coli M&R Violation	2/1/23 - 2/28/23	3	6/8/2024		6/18/2024	
E. Coli M&R Violation	3/1/23 - 3/31/23	3	6/8/2024		6/18/2024	
E. Coli M&R Violation	4/1/23 - 4/30/23	3	6/8/2024		6/18/2024	

Water System Facility and Sampling Point Inventory

Water	Makes Costes Freilites	Committee Daint	Compelies Daint		Total	Lead and			<u></u>
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper			Stage
Facility ID	0	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		4-1	FRONT HAND SINK	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α			·		
20622	WELL	2	WELL	Α					

62598 TREATMENT PLANT

_	_		_	- •
$-$ C \cap I	ntac	t In	torm	ation

Name			Organization	า		Job Title		
Mr. Jack Mitchell			G M C Ltd Pa	artnership	Owner			
Mailing Address Lin	e One		Mailing Ad	ddress Line Two		City	State	Zip Code
690 Ellington Road						South Windsor	СТ	06074
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address	·	
772-332-3186						themitch@mac.co	m	

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.

	T ELEVEN CTORE			_	-			
SID	PWS Name	Classification	Population	Owner Type	Primary			
Water Quality Monitoring and Compliance Schedule								
	Connecticut Department of Public Health	Drinking	g Water	Section				

PWS ID	PWS Name	ws name			Population	Owner Type	Primary Source
CT0340024	7-ELEVEN STORE			NC	25	Р	GW
Local Address (v	where applicable)	Service	Residen	tial Commerc	ial Industri	al Combin	ed Agricultural
217-219 CLAPB	OARD RIDGE ROAD	Connections		1			

Towns Served: DANBURY

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.

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 De	partment o	f Public H	ealth	Drinki	ng W	ater S	ection	
	Water Qu	iality Moni	toring and						
PWS ID	PWS Name				Classification	on Pop	ulation O	wner Type Pi	rimary Source
CT0340034	7-ELEVEN STORE				NC		25	Р	GW
Local Address	(where applicable)		Service	Resident	ial Comme	ercial	Industrial	Combined	Agricultural
29 MILL PLAIN	I ROAD		Connections		1				
Towns Served	: DANBURY								
		Monit	toring Requ	iremer	nts				
Water Syster	m Facility: DISTRIBUTION	SYSTEM (WSF	ID: 00600)						
Total Colifor	rm (3100)						1 re	outine (RT)	per quarter
Sampling	g Point (Sampling Point ID)			Monitorin	g Period	Collec	tion Perio	d Compli	ance Status
Select fro	om Inventory of Active Sampl	ing Points	-	10/1/23 - :	12/31/23			Co	mplete
				1/1/24 - 3	3/31/24			Co	mplete
				4/1/24 - 0	6/30/24				
				7/1/24 - 9	9/30/24				
Physical Par	ameters (PPS)						1 r	outine (RT)	per quarter
Sampling	g Point (Sampling Point ID)		ı	Monitorin	g Period	Collec	tion Perio	d Compli	ance Status
Select fro	om Inventory of Active Sampl	ing Points	-	10/1/23 - 3	12/31/23			Co	mplete
				1/1/24 - 3	3/31/24			Со	mplete
				4/1/24 -	6/30/24				
				7/1/24 - 9	9/30/24				
Water Syster	m Facility: ENTRY POINT	(WSF ID: 00700)						
Nitrate And	Nitrite (NOX)							1 routine (R	T) per year
Sampling	Point (Sampling Point ID)		1	Monitorin	g Period	Collec	tion Perio	=	ance Status
ENTRY PO	OINT (3)			1/1/23 - 1	.2/31/23			Co	mplete
				1/1/24 - 1	.2/31/24			Co	mplete
				1/1/25 - 1	.2/31/25				_
		Other (Compliance	Sched	ules				
Compliance So	chedule Activity			D	ue Date		Achieve	d Date	
RESPOND TO S	SANITARY SURVEY			11	/17/2021				•
		Public No	tification R	equire	ments				
			Compliance	Notice	Public	c Notific	cation	PN Cert	<u>ification</u>
Violation/Situ	ıation		Period	Tier	Require	ed Pe	erformed	Due to DPH	Received
Total Coliform	MCL Violation	7/:	1/15 - 9/30/15	2	12/9/20	15		12/19/2015	
	Water	System Faci	lity and San	npling	Point In	vento	ory		
Water		•	-			Total	Lead an	nd	
System Wo	nter System Facility	Sampling Poin	t Sampling Poir	nt		Coliforn	n Coppe	r	Stage
Facility ID		ID	Description		Status	Rule	Rule Ti	er Asbestos	WQP 2 DBPR
00600 DIS	TRIBUTION SYSTEM	4	DISTRIBUTION	I SYSTEM	Α	Υ			
		4-1	Store Counter	Sink	Α	Υ			
		4-2	Store Counter	Sink	Α	Υ			
		4-3	Store Counter	Sink	Α	Υ			
		4-4	Store Counter	Sink	Α	Υ			
		4-5	Store Sink		Α	Υ			
		DOWNSTREAM	WITHIN 5 SER	VICE CON	Α				
		UPSTREAM	WITHIN 5 SER	VICE CON	Α				
00700 EN	TDV DOINT	2	ENITRY DOINIT		^		-	-	

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ENTRY POINT

WELL

Α

Α

3

2

00700 ENTRY POINT

WELL

20623

Water Quality Monitoring and Compliance Schedule								
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT0340034	340034 7-ELEVEN STORE				NC	25	Р	GW
Local Address (where applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
29 MILL PLAIN	ROAD	Connections			1			

			Co	ontact Inf	ormation					
Name				Organization	l	Job Title				
Mr. Richard Murra	у			Us Trust Co,	Nat. Assoc.		Sr Vice President			
Tailing Address Line One Mailing Add			ess Line Two		City		State	Zip Code		
515 South Flower Street Suite 2700					Los Angl	es	CA	90071-2291		
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Address				
213-861-5065										
Contact Role(s): Le	egal Contact, O	wner								
Name				Organization			Job Title			
Mr. Richard M. Wa	rshany			7-Eleven Inc			Field Servic	e Rep.		
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code	
10 Columbus Blvd						Hartford	l	СТ	06106	
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ddress			
732-319-7897						Rich.Wa	rshany@Fm	FacilityMain ⁻	tenance.com	
Contact Role(s): A	dministrative (Contact			•	*				

Please note the following:

Towns Served: DANBURY

- 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 Qualit	y Monitoring an	d Con	npl	liance S	chedul	e	
PWS ID	PWS Name	PWS Name				Population	Owner Type	Primary Source
СТ0340074	AMBER ROOM				NC	25	Р	GW
Local Address (where applicable) Service Reside			Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
STACY ROAD Connections					1			

Towns Served: DANBURY

Monitoring Requirements								
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					
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete					
	1/1/24 - 12/31/24							
	1/1/25 - 12/31/25							

	Water	System Facil	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 Stage Rule Tier Asbestos WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ	
		AR001	KIT SNK SINGLE FRONT	Α	Υ	Υ
		AR002	KIT HAND SNK FRONT	Α	Υ	Υ
		AR003	KIT SNK LARGE SINGLE	Α	Υ	Υ
		AR004	KIT SNK SMALL SINGLE	Α	Υ	Υ
		AR005	KIT HAND SNK BACK	Α	Υ	Υ
		AR006	KIT SNK BACK SINGLE	Α	Υ	Υ
		AR007	RR KITCHEN	Α	Υ	Υ
		AR008	RR MENS RR	Α	Υ	Υ
		AR009	RR LADY ROOM	Α	Υ	Υ
		AR010	SERVERS STATION	Α	Υ	Υ
		AR011	BAR SINK	Α	Υ	Υ
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α		
		UPSTREAM	WITHIN 5 SERVICE CON	Α		
00700	ENTRY POINT	3	ENTRY POINT	Α		
22817	WELL1	2	WELL #1	Α		
22887	WELL2	2	WELL2	Α		
54226	ATMOSPHERIC STORAGE TANK					

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	Water Quali	ty Monitoring and	d Con	npl	iance S	, Schedul	e	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
СТ0340074	40074 AMBER ROOM				NC	25	Р	GW
Local Address (where applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
STACY ROAD		Connections			1			

				Contact Inf	Offication				
Name				Organization	l	Job Title			
Mr. Douglas Poliste	ena			Amber Room	ı	Director Operations			
Mailing Address Lin	e One		Mailing A	Address Line Two	ress Line Two			State	Zip Code
1 Stacey Road				D		Danbury		СТ	06811
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address			
203-748-3800	101	203-748-	1472		doug@theamberroom.net				
Contact Dolo/s\. A	dministrativa (Contact Loc	al Contac	+		1			
Contact Role(s): A	ullillistrative v	contact, Leg	ai Cuitat						
	unimistrative v	contact, Leg	ai Contac	Organization				Job Title	
Name	uninistrative	contact, Leg	ai Contac					Job Title	
Name Arc Properties LLC		contact, Leg			1		City	Job Title	Zip Code
Contact Role(s): A Name Arc Properties LLC Mailing Address Lin 14 Plumtrees Road		contact, Leg		Organization		Danbury	<u> </u>		Zip Code 06810

Please note the following:

Towns Served: DANBURY

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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

	Water Quality Mon				C	,		
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0340144	BUSINESS AIRCRAFT CENTER, INC.	BUSINESS AIRCRAFT CENTER, INC.				25	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
81 KENOSIA A	Connections			1				

Towns Served: DANBURY

TOWNS Served. DAINBOIN								
Monitoring Requirements								
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					
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete					
	1/1/24 - 12/31/24							
	1/1/25 - 12/31/25							
Other C	omnliance Schedules							

Other	Compliance Schedules

 Compliance Schedule Activity
 Due Date
 Achieved Date

 RESPOND TO SANITARY SURVEY
 5/24/2018

	Water Syst	em Facili	ty and Sampling I	Point Ir	ventor	Ty	
Water System Water System Facility ID	Facility Sam	pling 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	Α	Υ		
		BA001	KIT SNK LOWER LEVEL	Α	Υ	Υ	
		BA002	SLOP SNK LL HANGER	Α	Υ	Υ	
		BA003	RR LOWER LEVEL 1	Α	Υ	Υ	
		BA004	RR LOWER LEVEL 2	Α	Υ	Υ	
		BA005	RR 2ND FLOOR R	Α	Υ	Υ	
		BA006	RR 2ND FLOOR L	Α	Υ	Υ	
	DO	WNSTREAM	WITHIN 5 SERVICE CON	Α			
	U	PSTREAM	WITHIN 5 SERVICE CON	Α			
00700 ENTRY POINT		3	ENTRY POINT	Α			
20625 WELL		2	WELL	Α			

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 Monitoring and Compliance Schedule								
PWS ID	S ID PWS Name				ssification	Population	Owner Type	Primary Source	
CT0340144 BUSINESS AIRCRAFT CENTER, INC.					NC	25	Р	GW	
Local Address (w	here applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural	
81 KENOSIA AVE	NUE	Connections			1				

				Contact Inf	ormation				
Name				Organization	1			Job Title	
Mr. Scott Rousseau	ı			Business Air	craft Center, Inc.	Manager			
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code
81 Kenosia Ave						Danbury	/	СТ	06810
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address			
203-748-7000		203-790-	9000		scott@danburyaviation.net				
Contact Role(s): A	dministrative	Contact	,						
Name				Organization	1			Job Title	
Mr. Santo Silvestro)								
Mailing Address Lin	e One		Mailing A	Address Line Two			City	State	Zip Code
81 Kenosia Ave.						Danbury	/	СТ	06810
Business Phone	Extension	Fax		Mobile Phone	Mobile Phone Emergency Phone		ddress		
203-748-7000									
Contact Role(s): O	wner				1	1			

Please note the following:

Towns Served: DANBURY

- 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 Pu		
Water Quality Monitori	ing and Compliance	e Schedule
PWS ID PWS Name	Classification	on Population Owner Type Primary Source
CT0340234 184 GREAT PLAIN ROAD	NC	36 P GW
Local Address (where applicable) Ser	vice Residential Comme	ercial Industrial Combined Agricultural
184 GREAT PLAIN ROAD Cor	nnections 1	
Towns Served: DANBURY		
Monitorir	ng Requirements	
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	0600)	
Total Coliform (3100)		1 routine (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 routine (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 routine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period Compliance Status
ENTRY POINT (3)	10/1/23 - 12/31/23	Complete
	1/1/24 - 3/31/24	Complete
	4/1/24 - 6/30/24	

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Other Compliance Schedules

Compliance Schedule Activity

L1 ASSESSMENT (MULTIPLE TC+)

7/1/24 - 9/30/24

Due Date

8/19/2021

Achieved Date

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

PWS ID	WS ID PWS Name C			Cla	ssification	Population	Owner Type	Pri	mary Source
CT0340234	184 GREAT PLAIN ROAD		NC	36	Р		GW		
Local Address (w	here applicable)	Service	Resider	itial	Commercia	al Industri	al Combin	ed	Agricultural
184 GREAT PLAI	N ROAD	Connections			1				

Towns Served: DANBURY

Public Notification Requirements								
	Compliance	Notice	<u>Public No</u>	tification	PN Certification			
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received		
REVISED TOTAL COLIFORM RULE (RTCR) TT Violation	8/20/21 -	2	11/5/2021		11/15/2021			
Total Coliform M&R Violation	8/1/22 - 8/31/22	3	3/5/2024		3/15/2024			
Physical Parameters M&R Violation	8/1/22 - 8/31/22	3	3/5/2024		3/15/2024			

	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						
20628	WELL	2	WELL	Α						

			Co	ontact Inf	ormation				
Name				Organization	l	Job Title			
Mr. Bruce Arnold				Ba Holdings	LLC		President		
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
5 Cloverleaf Farm S	outh					Shermar	1	СТ	06784
Business Phone	Extension	Fax	Мо	bile Phone	Emergency Phone	Email Address			
917-681-0656		860-350-9	9213			clarendon2200@gmail.com			
Contact Role(s): Ac	dministrative	Contact, Leg	al Contact, O	wner	·				

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 Departmen				_				
	Water Quality M	onitoring and	d Com	ıpl	iance S	chedule	9		
PWS ID	PWS Name			Clas	sification F	opulation (Owner Type	Primary Source	
CT0340304	DAIRY & ENERGY STOP				NC	25	Р	GW	
Local Address (where applicable)	Service	Resident	tial	Commercia	Industria	Combine	d Agricultural	
133 PADANARA	AM ROAD	Connections			1				
Towns Served:	DANBURY								
	M	onitoring Requ	iiremei	nts					
Water System	Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)							
Total Colifori	n (3100)					1	routine (RT	per quarter	
Sampling	Point (Sampling Point ID)		Monitorii	ng P	eriod Co	llection Peri	od Comp	liance Status	
Select from	m Inventory of Active Sampling Points	:	10/1/23 -	12/3	31/23		C	omplete	
			1/1/24 -	3/3:	1/24		C	omplete	
			4/1/24 -	6/30	0/24				
			7/1/24 -	9/30	0/24				
•	meters (PPS)					1	-	per quarter	
	Point (Sampling Point ID)		Monitorii			llection Peri		liance Status	
Select from	n Inventory of Active Sampling Points		10/1/23 - 12/31/23					omplete	
			1/1/24 -				Complete		
			4/1/24 -						
			7/1/24 -	9/30	0/24				
-	Facility: ENTRY POINT (WSF ID: 0	0700)							
	Nitrite (NOX)							RT) per year	
	Point (Sampling Point ID)		Monitorii			llection Peri		liance Status	
ENTRY PO	INT (3)		1/1/23 - 3				(omplete	
			1/1/24 - 3				<u> </u>	_	
M/-1 61	Facility AMELL (MICE ID 20024)		1/1/25 - :	12/3	51/25				
-	Facility: WELL (WSF ID: 20631)						/		
E. Coli (3014	•		0.0 14 1	0	anta di Ca		-	per quarter	
	Point (Sampling Point ID)		Monitorii			llection Peri	ection Period Compliance Status		
WELL (2)		<u> </u>	10/1/23 -					omplete omplete	
			1/1/24 - 4/1/24 -					ompiete	
			7/1/24 -						
	Oth	er Compliance	· ·		·				
Compliance Sci					Date	Achiev	ed Date		
-	ANITARY SURVEY				['] 2016	71011101			
	ANITARY SURVEY				²⁰¹⁰				
		Notification R							
		Compliance	Notice	_	Public No:	tification	PN Ce	rtification	
Violation/Situa	ntion	Period	Tier		Required				
	lor MCL Violation	10/1/04 - 12/31/04			4/14/2005	- J	<i>Due to DP</i> 4/24/2005		
Distribution Tu	rbidity MCL Violation	7/1/04 - 9/30/04	2		4/22/2005		5/2/2005		
Distribution Co	lor MCL Violation	7/1/04 - 9/30/04	2	4	4/22/2005		5/2/2005		

Distribution color wice violation	7/-/	0. 3/30/0.	,	22/2005			3/2/2003		
Water System Facility and Sampling Point Inventory									
Water				То	tal L	ead and			
System Water System Facility	Sampling Point	Sampling Poir	nt	Colij	form	Copper		Stage	
Facility ID	ID	Description	St	atus Ri	ule I	Rule Tier	Asbestos	WQP 2 DBPR	

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	n
Water Quality Monitoring and Compliance Schedule	

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
СТ0340304	DAIRY & ENERGY STOP			NC	25	Р	GW
Local Address (where applicable)	Service	Residen	ntial Commerc	ial Industri	al Combine	ed Agricultural
133 PADANARA	AM ROAD	Connections		1			

Towns Served: DANBURY

	Wa	iter 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		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					
20631	WELL	2	WELL	Α					
54203	TREATMENT PLANT								

			Co	ontact Inf	ormation				
Name		Organization	l			Job Title			
Mr. Barry Connell									
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
133 Padanaram Roa	ad					Danbury		СТ	06811
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	dress		
203-798-0340									

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.

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

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

End of schedule

Schedule Generation Date: 4/3/2024

	Connecticut Departme Water Quality N			U			
PWS ID	PWS Name	<u> </u>					Primary Source
СТ0340444	FEDERAL ROAD SUNOCO			NC	25	Р	GW
Local Address	(where applicable)	Service	Residential	Commercia	l Industri	al Combine	ed Agricultural
7 FEDERAL RO	AD	Connections		1			
Towns Served:	DANBURY	1					1

Towns Served: DANBURY			
Monitor	ing Requirements		
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
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete
	1/1/24 - 12/31/24		
	1/1/25 - 12/31/25		
Public Notifi	cation Requirements		

Public Notification Requirements										
Compliance Notice <u>Public Notification</u> <u>PN Certification</u>										
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received				
Total Coliform MCL Violation	9/1/05 - 9/30/05	2	10/19/2005		10/29/2005					
Total Coliform MCL Violation	10/1/05 - 10/31/05	2	11/19/2005		11/29/2005					
Repeat Total Coliform M&R Violation	10/1/05 - 10/31/05	2	4/12/2006		4/22/2006					

	Wat	ter System Facili	ity and Sampling P	oint Ir	ventor	у	
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Charles	Total Coliform Rule		Stage estos WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	<u>Status</u> A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α			
		FRS001	RR LOWER LEVEL	Α	Υ	Y	′
		FRS002	RR LADY RM MAIN FLR	Α	Υ	Y	′
		FRS003	RR MENS RM MAIN FLR	Α	Υ	Υ	'
		FRS004	UNISEX RR MAIN FLR	Α	Υ	Υ	'
		FRS005	KIT SNK	Α	Υ	Υ	′
		UPSTREAM	WITHIN 5 SERVICE CON	Α			
00700	ENTRY POINT	3	ENTRY POINT	Α			
20636	WELL	2	WELL	Α			

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	Monitoring and	d Con	npl	iance S	Schedul	e	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0340444	FEDERAL ROAD SUNOCO				NC	25	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
7 FEDERAL RO	AD	Connections			1			

				Contact Inf	ormation					
Name				Organization	1			Job Title		
Mr. Norbert E Mito	hell			Nemco Limit	ed Partnership.		Vice-Presider	it		
Mailing Address Lin	e One		Mailing A	ddress Line Two			City State Zip C			
P.O. Box 186						Danbur	У	СТ	06813	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email A	ddress			
203-744-0600		203-743-	7978		203-948-8561	nm3@n	m3@nemitchell.com			
	*									
Contact Role(s): Le	egal Contact, C	wner								
	egal Contact, C)wner		Organization	1			Job Title		
Name	<u> </u>)wner		Organization Norbert E. N			Management			
Name Mr. Matthew J. Mi	tchell	Owner	Mailing <i>I</i>		1itchell Co.		Management City			
Contact Role(s): Le Name Mr. Matthew J. Mi Mailing Address Lin PO Box 186	tchell	Owner	Mailing A	Norbert E. N	1itchell Co.	Danbur	City		Zip Code	
Name Mr. Matthew J. Mi Mailing Address Lin	tchell	Dwner Fax	Mailing /	Norbert E. N	1itchell Co.		City	State	Zip Code	

Please note the following:

Towns Served: DANBURY

- 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 Public Health Drinking Water Section							
	Water Quality Monito	oring and	d Con	npl	liance S	chedul	e	
PWS ID	PWS Name			Cla	Classification Population Ov		Owner Type	Primary Source
CT0340614	KENTUCKY FRIED CHICKEN OF DANBURY, INC	•			NC	25	Р	GW
Local Address ((where applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
1 FEDERAL ROA	AD	Connections			1			

Towns Served: DANBURY			+
Monitori	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
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		Complete
	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		Complete
	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		
Vater 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		Complete
	1/1/25 - 12/31/25		
Vater System Facility: WELL (WSF ID: 20639)			
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		Complete
	1/1/24 - 1/31/24		Complete

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	Connectic	ut Depai	rtment of	f Public	Health	Drin	king V	Water S	ection	
	Wa	ter Qual	ity Monit	coring a	nd Com	plia	nce Sc	hedule		
PWS ID	PWS Name								wner Type Pi	rimary Source
CT0340614	KENTUCKY FRIEI	CHICKEN O	DANBURY, IN	C.		N	2	25	Р	GW
Local Address	s (where applicable)			Service	Resident	tial Cor	nmercial	Industrial	Combined	Agricultural
1 FEDERAL RO	OAD			Connection	ıs		1			
Towns Served	d: DANBURY			•		,				
			Monit	oring Req	quireme	nts				
Water Syste	em Facility: WELL	(WSF ID: 20	0639)							
E. Coli (301	L4)							1 r	outine (RT)	per month
Samplin	g Point (Sampling P	oint ID)			Monitorii	ng Perio	d Coll	ection Perio	d Compli	ance Status
					2/1/24 -	2/29/2	1		Со	mplete
					3/1/24 -	3/31/2	4		Со	mplete
					4/1/24 -					
					5/1/24 -					
					6/1/24 -					
					7/1/24 -					
					8/1/24 -					
					9/1/24 -					
					10/1/24 -		24			
			Other C	ompliand	e Sched	ules				
Compliance S	Schedule Activity					Due Dat	_	Achieve	d Date	
SANITARY DE	FECT CORRECTIVE A	CTION			9	/13/202	23			
			Public Not	tification	Require	ment	S			
			(Compliance	Notice	<u>P</u>	<u>ublic Noti</u>			<u>ification</u>
Violation/Sit				Period	Tier			Performed	Due to DPH	Received
Total Coliforn	n M&R Violation		-	/10 - 3/31/10) 2	6/9	/2010		6/19/2010	
		Matar Cu								
		water sy	stem Facil	ity and Sa	ampling	Point	Invent	tory		
Water						Point	Tota	ıl Lead an		
System W	ater System Facility		Sampling Point	Sampling P	oint		Tota Colifo	ıl Lead an rm Coppei	•	Stage
System W Facility ID	ater System Facility	S	Campling Point ID	Sampling Po	oint	Sta	Tota Colifo tus Rul	ıl Lead an rm Coppei	•	Stage WQP 2 DBPR
System W Facility ID		5	ampling Point ID 4	Sampling Po Description	oint ON SYSTEM	Sta r	Tota Colifo tus Rul	ıl Lead an rm Coppei	•	_
System W Facility ID	ater System Facility	5	Campling Point ID 4 DOWNSTREAM	Sampling Popularies Description DISTRIBUTION WITHIN 5 SI	oint ON SYSTEM ERVICE CON	Star A	Tota Colifo tus Rul Y	ıl Lead an rm Coppei	•	_
System W Facility ID 00600 DI	ater System Facility STRIBUTION SYSTEM	5	Gampling Point ID 4 DOWNSTREAM UPSTREAM	Sampling Po Description DISTRIBUTION WITHIN 5 SI WITHIN 5 SI	oint ON SYSTEM ERVICE CON ERVICE CON	Star A I A	Tota Colifo tus Rul	ıl Lead an rm Coppei	•	_
System W Facility ID 00600 DI 00700 EN	STRIBUTION SYSTEM		Campling Point ID 4 DOWNSTREAM UPSTREAM 3	Sampling Popescription DISTRIBUTION WITHIN 5 SI WITHIN 5 SI ENTRY POIN	oint ON SYSTEM ERVICE CON ERVICE CON	Star A I A I A	Tota Colifo tus Rul Y	ıl Lead an rm Coppei	•	_
System W Facility ID 00600 00700 EN 20639 W	STRIBUTION SYSTEM STRY POINT ELL		Gampling Point ID 4 DOWNSTREAM UPSTREAM	Sampling Po Description DISTRIBUTION WITHIN 5 SI WITHIN 5 SI	oint ON SYSTEM ERVICE CON ERVICE CON	Star A I A	Tota Colifo tus Rul Y	ıl Lead an rm Coppei	•	_
System W Facility ID 00600 00700 EN 20639 W	STRIBUTION SYSTEM		Campling Point ID 4 DOWNSTREAM UPSTREAM 3 2	Sampling Popescription DISTRIBUTION WITHIN 5 SI WITHIN 5 SI ENTRY POIN WELL	oint ON SYSTEM ERVICE CON ERVICE CON	Star A I A I A	Tota Colifo tus Rul Y	ıl Lead an rm Coppei	•	_
System W Facility ID 00600 DI 00700 EN 20639 W 62270 TR	STRIBUTION SYSTEM STRY POINT ELL		Cor	Sampling Popescription DISTRIBUTION WITHIN 5 SI WITHIN 5 SI ENTRY POIN WELL	oint ON SYSTEM ERVICE CON ERVICE CON	Star A I A I A	Tota Colifo tus Rul Y	ıl Lead an rm Coppei	er Asbestos	_
System W Facility ID 00600 00700 EN 20639 W 62270 TR Name	STRIBUTION SYSTEM STRY POINT ELL REATMENT	5	Cor	Sampling Popescription DISTRIBUTION WITHIN 5 SI WITHIN 5 SI ENTRY POIN WELL	oint ON SYSTEM ERVICE CON ERVICE CON	Star A I A I A	Tota Colifo tus Rul Y	ıl Lead an rm Coppei	•	_
System W Facility ID 00600 DI 00700 EN 20639 W 62270 TR Name Kentucky Frie	STRIBUTION SYSTEM STRIPUTION SYSTEM STRY POINT ELL REATMENT	ıry, Inc.	Cor	Sampling Poper Control of the Contro	oint ON SYSTEM ERVICE CON ERVICE CON	Star A I A I A	Tota Colifo tus Rul Y	I Lead an rm Copper e Rule Tie	Asbestos Job Title	WQP 2 DBPR
System W Facility ID 00600 00700 EN 20639 W 62270 TR Name	STRIBUTION SYSTEM STRIBUTION SYSTEM STRY POINT ELL REATMENT ed Chicken of Danbuess Line One	ıry, Inc.	Cor	Sampling Poper Control of the Contro	oint ON SYSTEM ERVICE CON ERVICE CON	Star A I A A A	Tota Colifo tus Rul Y	Lead an Copper e Rule Tie	er Asbestos	_

Contact Role(s): Owner

(Connecticut Department of Public Health Drinking Water Section									
	Wat	ter Quali	ty Mor	nitoring a	nd Con	nplia	nce S	Schedul	le	
PWS ID P	WS Name					Classif	ication	Population	Owner Type	Primary Source
CT0340614 K	ENTUCKY FRIED	CHICKEN OF	DANBURY,	, INC.		N	IC	25	Р	GW
Local Address (wh	ere applicable)			Service	Resider	tial Co	mmerci	al Industri	al Combine	ed Agricultural
1 FEDERAL ROAD				Connection	ns		1			
Towns Served: DA	NBURY				,			,		
Name				Organization			Job Title			
Jessie Gupta				Jmvd Realty Pa	artners LLC			Office Ma	ınager	
Mailing Address Li	ine One	N	1ailing Add	ress Line Two				City	State	Zip Code
1 Federal Road							Danbu	ry	СТ	06810
Business Phone	Extension	Fax	М	lobile Phone	Emergency	/ Phone	Email A	nail Address		
516-775-3347		516-775-33	44		646-249	-5007	kfcnyct	fcnyct@gmail.com		
Contact Role(s):	Administrative	Contact, Legal	Contact	1						

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

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
СТ0340894	RICHTER PARK GOLF COURSE				NC	25	Р	GW	
Local Address	(where applicable)	Service	Residen	tial	Commerci	al Industri	al Combin	ed Agricultural	
100 AUNT HACK ROAD Connections 1									

Towns Served: DANBURY				
Monitoring	Requirements			
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	600)			
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 routine (RT) per of				
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	
ENTRY POINT (3)	1/1/23 - 12/31/23		Complete	
	1/1/24 - 12/31/24		Complete	
	1/1/25 - 12/31/25			

Pu	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	6/28/2024		7/8/2024						
Physical Parameters M&R Violation	10/1/22 - 12/31/22	3	6/28/2024		7/8/2024						
Total Coliform M&R Violation	7/1/22 - 9/30/22	3	6/28/2024		7/8/2024						
Physical Parameters M&R Violation	7/1/22 - 9/30/22	3	6/28/2024		7/8/2024						
Physical Parameters M&R Violation	1/1/23 - 3/31/23	3	1/21/2025		1/31/2025						
Total Coliform M&R Violation	1/1/23 - 3/31/23	3	1/21/2025		1/31/2025						

		, ,	/ - / -	, ,			, - ,					
	Water System Facility and Sampling Point Inventory											
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBP				
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								
20648	WELL	2	WELL	Α								

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 Monitoring and Compliance Schedule									
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source		
CT0340894	CT0340894 RICHTER PARK GOLF COURSE				NC	25	Р	GW		
Local Address (v	vhere applicable)	Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural		
100 AUNT HACK	Connections			1						

Contact Information

Connecticut Department of Public Health Drinking Water Section

				Contac	ינוווו	Offication				
Name				Organ	ization	1			Job Title	
Ms. Maria Sanyshy	n			Richte	er Park	Golf Course		Manager		
Mailing Address Lin	e One		Mailing A	Address Lin	e Two		City State		State	Zip Code
100 Aunt Hack Road	b						Danbury	,	СТ	06810
Business Phone	Extension	Fax		Mobile Pl	hone	Emergency Phone	Email Ac	Email Address		
203-792-2550		203-792-	4547							
Contact Role(s): A	dministrative	Contact	•							
Name				Organ	ization	1			Job Title	
Mr. Rob Dorsch				Richte	er Park	Golf Course		Superintend	dent	
Mailing Address Lin	e One		Mailing A	Address Lin	e Two			City	State	Zip Code
100 Aunt Hack Road	t						Danbury	•	СТ	06811
Business Phone	Extension	Fax		Mobile Pl	hone	Emergency Phone	Email Ac	ldress	-	
203-744-4482		203-791-	2217				ROBDORSCH@SBCBLOBAL.NET			
Contact Role(s): Le	gal Contact		1			•	-1			

Please note the following:

Towns Served: DANBURY

- 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
CT0341034	ACLS PROPERTIES INC.				NC	40	Р	GW
Local Address (v	vhere applicable)	Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural
132 FEDERAL RO)AD	Connections			3			

Towns Served: DANBURY			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	00)		
Chlorine Residual (1012)		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		Out of Service
	12/1/23 - 12/31/23		Out of Service
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		Out of Service
	12/1/23 - 12/31/23		Out of Service
	1/1/24 - 1/31/24		Out of Service
	2/1/24 - 2/29/24		Out of Service
	3/1/24 - 3/31/24		Out of Service
	4/1/24 - 4/30/24		Out of Service
	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		
Disinfectant Byproducts - TTHM & HAA5 (DBP)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/24 - 12/31/24	7/1-9/30	
	1/1/25 - 12/31/25	7/1-9/30	
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		Out of Service
	12/1/23 - 12/31/23		Out of Service
	1/1/24 - 1/31/24		Out of Service
	2/1/24 - 2/29/24		Out of Service
	3/1/24 - 3/31/24		Out of Service
	4/1/24 - 4/30/24		Out of Service
	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 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
			•

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.

CT0341034	ACLS PROPERTIES INC.	NC	40	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									

Connections

Residential Commercial

3

Industrial

Combined

Agricultural

Service

Towns Served: DANBURY

132 FEDERAL ROAD

Local Address (where applicable)

Monitoring Requirements									
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						
	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)				
Analyte	Monitoring Requirement (Summary Ty	ype)	Operating Limit	t	Samples Req/Month
Chlorine	Entry Point RDC (EPRD)	Minimum: 1.0		MG/L	Daily
Start Date: 11/1/202	23	Compliance History:		Operating Limit	Monitoring
		Monitoring	Period	Compliance Status	: Compliance Status:
		11/1/2023 -	11/30/2023	Υ	
		12/1/2023 -	12/31/2023	Υ	
		1/1/2024 - 1	1/31/2024	Υ	
		2/1/2024 - 2	2/29/2024	Υ	
		3/1/2024 - 3	3/31/2024		

Other Compliance Schedules									
Compliance Schedule Activity	Due Date	Achieved Date							
RESPOND TO SANITARY SURVEY	8/15/2021								
ADDRESS CONTAMINATION	2/15/2023								
ADDRESS CONTAMINATION	11/5/2023								

	Water System Facility and Sampling Point Inventory										
Water System	Water System Facility		Sampling Point		Total Coliform						
Facility ID		ID .	Description	Status		Rule Tier Asbestos WQP 2 DBP					
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ						
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
		RRATT	RR AT AND T	Α	Υ	Υ					
		RRSUBWAY	RR SUBWAY	Α	Υ	Υ					
		SUBHAND	SUBWAY HAND SINK	Α	Υ	Υ					
		SUBSLOP	SUBWAY SLOP SINK	Α	Υ	Υ					
		SUBTRIPLE	SUBWAY TRIPLE SINK	Α	Υ	Υ					
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							
20654	WELL	2	WELL	Α							
59903	TREATMENT PLANT										

Contact Information									
Name		Organization	Job Title						
Mr. Louis Sclafani		Acls Properties Inc		President					
Mailing Address Line One	Mailing Addr	ess Line Two		City	State	Zip Code			

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	Connecticut Department of Public Health Drinking water Section											
	Wat	ter Quality	Monit	oring ar	nd Con	nplia	nce S	Schedul	le			
PWS ID	PWS Name					Classif	ication	Population	Owner Typ	e Pr	imary Source	
CT0341034 ACLS PROPERTIES INC.							IC	40	Р		GW	
Local Address (w	Service	Residen	tial Co	mmerci	mmercial Industrial		ned	Agricultural				
132 FEDERAL ROAD				Connections	S		3					
Towns Served: D	ANBURY				·			·				
132 Federal Road	d	Suite	e 103				Danbu	ry	СТ		06811	
Business Phon	e Extension	Fax	Mobil	e Phone	Emergency	/ Phone	Email Address					
203-778-2225	203-778-2225 203-470-9156 sclafanilou57@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.

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		
CT0341044 SUBWAY (MILL PLAIN ROAD)					NC	25	Р	GW		
ocal Address (where applicable) Service Resid					Commercia	al Industria	al Combine	ed Agricultural		

Connections

1

Towns Served: DANBURY

RESPOND TO SANITARY SURVEY

71 MILL PLAIN ROAD

Towns Served: DANBURY			
Monitor	ring Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
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		Complete
	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	itine (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		Complete
	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 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 Cor	mpliance Schedules		
Compliance Schedule Activity	Due Date	Achieved D	Oate

Water System Facility and Sampling Point Inventory

12/3/2021

Page 24

WaterTotalLead andSystemWater System FacilitySampling PointColiformCopper

System Water System Facility Sampling Point Sampling Point Coliform Copper Stage

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements.

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Schedule Generation Date: 4/3/2024

	Connecticu	t Denartm	ent o	f Puhlic	Health	Drin	kino	Water	Secti	on	
		er Quality l					U			OII	
PWS ID	PWS Name	er Quality I	MOIII	toring a	iiiu Coll				_	D	winese m. Co.
		4111 DO 4 D\						•		ype P	rimary Source
CT0341044	SUBWAY (MILL PI	AIN ROAD)				N	-	25	Р		GW
•	vhere applicable)			Service Connectio	Resider	itial Co	mmercia	I Industri	ial Con	nbined	Agricultura
71 MILL PLAIN R				Connectio	ons		1				
Towns Served: [DANBURY								,		
Facility ID			ID	Descriptio	n	Sta	tus R	ule Rule	Tier Asl	bestos	WQP 2 DBP
00600 DISTE	RIBUTION SYSTEM		4	DISTRIBUT	TON SYSTEM	1 4	١	Y			
		DOWN	ISTREAM	WITHIN 5	SERVICE CO	N A	١.				
		UPS	ΓREAM	WITHIN 5	SERVICE CO	N A	١				
00700 ENTR	Y POINT		3	ENTRY PO	INT	P	١				
20655 WELL	=		2	WELL		A	١				
			Cor	ntact Info	ormation	1					
Name			О	rganization					Jok	Title	
Diya Real Estate	LLC										
Mailing Address	Line One	Mailin	g Addres	ss Line Two				City	St	tate	Zip Code
112 Allen Hill Ro	oad						Brookly	n		СТ	06234
Business Phor	e Extension	Fax	Mob	ile Phone	Emergency	/ Phone	Email A	ddress		 	
Contact Role(s):	Owner		"								
Name			0	rganization					Job	Title	
Mr. Jaymin Pate	el		D	iya Real Esta	ate LLC			Member			
Mailing Address	Line One	Mailin	g Addres	ss Line Two				City	St	tate	Zip Code
112 Allen Hill Ro	oad						Brookly	n		СТ	06234
Business Phor	ne Extension	Fax	Mob	ile Phone	Emergency	/ Phone	Email A	ddress			
Contact Role(s):	Administrative C	ontact, Legal Con	tact								

Please note the following:

- 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.
- 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

	Connections De	nantmant	Dublic Ha	alth F) win l	ring I	Mata	, Ca	otion		
	Connecticut De	•							ction		
DIAKE ID		iality Monit	oring and (_	T D		
PWS ID	PWS Name	-		CI		tion Po	-	Owr		rimary Sourc	
CT0341064			c ·		NC		28		P	GW	
	ess (where applicable)		Service Re Connections	esidentia	II Com	mercial	Industr	iai	Combined	Agricultura	
84 BALL PC			Connections			1					
Towns Serv	ved: DANBURY	Monite	oring Require	omont	tc						
Water Svs	tem Facility: DISTRIBUTION			emem	LS						
•	iform (3100)		,				:	1 rou	tine (RT)	per quarter	
Samp	ling Point (Sampling Point ID)		Monitoring Period				ection Pe	riod	Compli	iance Status	
Select	from Inventory of Active Sampl	ling Points	10/	1/23 - 12	2/31/23	1			Cc	mplete	
			1/	1/24 - 3/	/31/24				Co	mplete	
			4/	1/24 - 6/	/30/24						
			7/	1/24 - 9/	/30/24						
Physical F	Parameters (PPS)						:	1 rou	tine (RT)	per quarter	
Samp	ling Point (Sampling Point ID)		Monitoring Period				Collection Period Compliance St				
Select	from Inventory of Active Sampl	ling Points	10/1/23 - 12/31/23						Co	mplete	
			1/	1/24 - 3/	/31/24				Co	mplete	
			4/	1/24 - 6/	/30/24						
			7/	1/24 - 9/	/30/24						
Water Sys	tem Facility: ENTRY POINT	(WSF ID: 00700)									
Nitrate A	nd Nitrite (NOX)							1	routine (F	RT) per year	
Samp	ling Point (Sampling Point ID)		Monitoring Period			Coll	Collection Period			Compliance Status	
ENTR\	POINT (3)		1/1/23 - 12/31/23						Co	mplete	
			1/1	1/24 - 12	/31/24						
			1/1	1/25 - 12	/31/25						
	Water	System Facili	ity and Samp	ling P	oint I	nvent	tory				
Water						Tota	l Lead	and			
	Water System Facility		Sampling Point			Colifo		-		Stage	
Facility ID		ID	Description		Statu	s Rule	e Rule	Tier	Asbestos	WQP 2 DBP	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SY	/STEM	Α	Υ					
		DOWNSTREAM	WITHIN 5 SERVIC	CE CON	Α						
		TR001	RR LADY ROOM		Α	Υ			Υ		
		TR002	RR MENS RR		Α	Υ			Υ		
		TR003	HAND SINK		Α	Υ			Υ		
		TR004	KIT SNK TRPL SNI	K	Α	Υ			Υ		
		UPSTREAM	WITHIN 5 SERVIC	CE CON	Α						
00700	ENTRY POINT	3	ENTRY POINT		Α						
20656	WELL	2	WELL		Α						
		Con	tact Informa	ition							
Name		O	rganization						Job Title		
Ms. Gina C	larizio	Та	ormina Restaurar	nt			Owner				
Mailing Ad	dress Line One	Mailing Addres	s Line Two				City		State	Zip Code	
					_						

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.

Mobile Phone

Bethel

Emergency Phone Email Address

203-792-4408

 CT

06801

99 Hoyts Hill Road

Business Phone

203-746-1040

Extension

Contact Role(s): Legal Contact, Owner

Fax

C	onnectic	ut Departr	nent of	Public	Health	Drin	ıking	, Water	Section			
	Wat	ter Quality	Monit	oring ar	nd Com	plia	nce S	Schedul	e			
PWS ID PV	WS Name					Classifi	cation	Population	Owner Type	Primary So		
CT0341064 TA	TAORMINA RESTAURANT					N	С	28	Р	GW		
Local Address (where applicable)				Service	Residen	tial Co	ommercial Industri		al Combin	ed Agricult		
84 BALL POND ROAD				Connection	S	1						
Towns Served: DAI	NBURY								1	'		
Name			Or	Organization				Job Title				
Mr. Jose Sari			Та	ormina Resta	aurant							
Mailing Address Lir	ne One	Mai	ling Address	Line Two			City		State	Zip Code		
Taormina Restaura	ant	84 E	Ball Pond Ro	ad			New Fa	arifield	СТ	06810		
Business Phone	Extension	Fax	Mobil	e Phone	Emergency	Phone	Email A	Address	dress			
203-746-1040			203-3	13-3147			junior1	.699@aol.co	m			
Contact Role(s):	Administrative	Contact	1				-					

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.

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

End of schedule

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

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0341144	WIDOW BROWNS CAFE			NC	25	Р	GW
Local Address (where applicable)		Service	Resident	tial Commerci	al Industri	al Combine	ed Agricultural
128 FEDERAL R	OAD	Connections		1			

Towns Served: DANBURY

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 rc	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		

Water System Facility: WELL (WSF ID: 20660)

E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	10/1/23 - 12/31/23		Complete
	1/1/24 - 3/31/24		Complete
	4/1/24 - 6/30/24		
	7/1/24 - 9/20/24		

Public Notification Requirements									
	Compliance Notice <u>Public Notification</u> <u>PN Certification</u>								
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received			
Total Coliform M&R Violation	1/1/23 - 3/31/23	3	6/28/2024		7/8/2024				
E. Coli M&R Violation	1/1/23 - 3/31/23	3	6/28/2024		7/8/2024				
Physical Parameters M&R Violation	1/1/23 - 3/31/23	3	6/28/2024		7/8/2024				
E. Coli M&R Violation	10/1/22 - 12/31/22	3	6/28/2024		7/8/2024				
Total Coliform M&R Violation	10/1/22 - 12/31/22	3	6/28/2024		7/8/2024				
Physical Parameters M&R Violation	10/1/22 - 12/31/22	3	6/28/2024		7/8/2024				
Total Coliform M&R Violation	7/1/22 - 9/30/22	3	6/28/2024		7/8/2024				
Physical Parameters M&R Violation	7/1/22 - 9/30/22	3	6/28/2024		7/8/2024				
E. Coli M&R Violation	7/1/22 - 9/30/22	3	6/28/2024		7/8/2024				

Water System Facility and Sampling Point Inventory

Water			Total Lead and
System	Water System Facility	Samplina Point Samplina Point	Coliform Conner

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Stage

	Connecticut Department of Lubiic Health Drinking Water Section												
Water Quality Monitoring and Compliance Schedule													
PWS ID		PWS Name				Cla	ssification	Pol	oulation	Owr	ner Type	Primar	y Source
CT034114	14	WIDOW BROWNS CAFE					NC		25		Р	G	W
Local Add	lress (w	here applicable)		Service	Residen	tial	Commerc	ial	Industri	al	Combine	d Agr	icultural
128 FEDE	RAL RO)AD		Connections			1						
Towns Se	rved: D	DANBURY		-									
Facility IL	ס		ID	Description			Status	Rule	Rule	Tier	Asbesto	s WQF	2 DBPR
00600	DISTR	RIBUTION SYSTEM	4	DISTRIBUTION	N SYSTEM		Α	Υ					
			DOWNSTREAM	WITHIN 5 SER	VICE CON	N	Α						
			UPSTREAM	WITHIN 5 SER	VICE CON	N	Α						
00700	ENTR	Y POINT	3	ENTRY POINT			Α						
20660	WELL		2	WELL			Α						
54207	TREA	TMENT PLANT											

Contact Information											
Name					Organization				Job Title	9	
Ms. Aura Showah					Widow Brown's Cafe						
Mailing Address Lin	e One		Mailing Address Line Two				City		State	Zip Code	
41 Carlson Ridge Road					New Mil	ford	СТ	06776-2935			
Business Phone	Extension	Fax		Мо	bile Phone	Emergency Phone	Email Address				
203-743-7021		203-792-5	5138			860-671-9410	50-671-9410 widowbrown		gmail.com		
Contact Dolo/s). Administrative Contact Local Contact. Owner											

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

End of schedule

	Connecticut Departmen	nt of Public H	lealth	Dri	inking	Water	Sec	ction	
	Water Quality Mo				_				
PWS ID	PWS Name	31110311118 0111	0. 001					er Type Pr	rimary Sourc
CT0341164	18 MILL PLAIN ROAD				NC	25	-	Р	GW
Local Address	(where applicable)	Service	Resider	ntial C	Commercia	l Industri	al (Combined	Agricultura
16, 18, 22 MIL	L PLAIN ROAD	Connections			1				
Towns Served:	DANBURY					1	I I		
	M	onitoring Requ	iireme	ents					
Water Syster	m Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)							
Total Colifor	m (3100)						1 rou	utine (RT)	per month
Sampling	Point (Sampling Point ID)		Monitor	ing Pe	riod Co	llection Pe	riod	Compli	ance Status
Select fro	m Inventory of Active Sampling Points		11/1/23	- 11/30	0/23			Co	mplete
			12/1/23	- 12/3	1/23			Со	mplete
		1/1/24 - 1/31/24					Complete		
			2/1/24 - 2/29/24					Complete	
			3/1/24	- 3/31,	/24			Со	mplete
			4/1/24	- 4/30,	/24				
			5/1/24						
			6/1/24		·				
			7/1/24						
			8/1/24						
			9/1/24						
			10/1/24	- 10/3	1/24				
•	ameters (PPS)								per month
	Point (Sampling Point ID)		Monitor			llection Pe	riod		ance Status
Select fro	m Inventory of Active Sampling Points		11/1/23						mplete
			12/1/23						mplete
			1/1/24		·				mplete
			2/1/24		·				mplete
			3/1/24		·			Co	mplete
			4/1/24						
			5/1/24 6/1/24		·				
			0/1/24	- 0/30/	/ 44				

	10/1/24 - 10/31/24		
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		

7/1/24 - 7/31/24 8/1/24 - 8/31/24 9/1/24 - 9/30/24

Other Compliance Schedules								
Compliance Schedule Activity	Due Date	Achieved Date						
RESPOND TO SANITARY SURVEY	5/15/2016							
RESPOND TO SANITARY SURVEY	11/17/2021							

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.

	domine the department of Fubility Printing Water beetion										
	Water Quality Monit	oring and	d Con	npl	liance S	Schedul	e				
PWS ID	/S ID PWS Name				Classification Population		Owner Type	Primary Source			
CT0341164	18 MILL PLAIN ROAD				NC	25	Р		GW		
Local Address (where applicable) Service Resid				ntial	Commerci	al Industri	al Combin	ed	Agricultural		
16. 18. 22 MILL PLAIN ROAD Connections					1						

Towns Served: DANBURY

16. 18. 22 MILL PLAIN ROAD

	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	Α	Υ		_				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
		MPD001	KIT HAND SNK 1	Α	Υ	Υ					
		MPD002	KIT HAND SNK 2	Α	Υ	Υ					
		MPD003	KIT SNK DOUBLE	Α	Υ	Υ					
		MPD004	RR LADY ROOM	Α	Υ	Υ					
		MPD005	RR MENS RR	Α	Υ	Υ					
		MPD006	KIT SNK SINGLE SNK 1	Α	Υ	Υ					
		MPD007	KIT SNK SINGLE SNK 2	Α	Υ	Υ					
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α	· ·	·					
20661	WELL	2	WELL	Α							
54199	TREATMENT PLANT										

			(Contact Inf	ormation						
Name				Organization	1		Job Title	<u> </u>			
Emxm LLC											
Mailing Address Lin	e One	I	Mailing Ad	ldress Line Two		Cit	ty State	Zip Code			
16 Mill Plain Road	Mill Plain Road					Danbury	СТ	06811			
Business Phone	Extension	Fax	1	Mobile Phone	Emergency Phone	Email Address			ne Email Address		
Contact Role(s): O	wner										
Name				Organization	1		Job Title	9			
Mr. George Marnel	akis										
Mailing Address Lin	e One	I	Mailing Ad	ldress Line Two	dress Line Two		ty State	Zip Code			
108 Maple Tree Hill	Rd					Southbury CT		06488			
Business Phone	Extension	Fax	1	Mobile Phone	Emergency Phone	Email Addres	S				
203-417-1269		203-426-8	040		203-788-5153	gmarnelos@me.com					

Contact Role(s): Administrative Contact, Legal Contact

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

End of schedule

		ut Department o							ction	
	Wat	ter Quality Moni	itoring a							
PWS ID	PWS Name			Cl	lassifi	cation Po	pulation	Owr	ner Type I	Primary Source
CT0341194	WOOSTER MOUI	NTAIN GUN CLUB			N	С	25		S	GW
,	where applicable)		Service	Residentia	I Coi	mmercial	Industria	al	Combine	d Agricultura
DANBURY ROAD	(RT 7), DANBURY	, CT 06810	Connection	ns		2				
Towns Served: I	DANBURY									
Water System	Facility: DISTRI	Moni		quirement	s					
Total Coliforn	•	DOTTOR STOTEM (WOI	15. 00000				1	rou	ıtine (RT)	per quarter
	Point (Sampling Po	oint ID)		Monitoring	Perio	od Coll	ection Per			liance Status
		ve Sampling Points		4/1/24 - 6/						
	, , , , , , , , , , , , , , , , , , , ,			7/1/24 - 9/						
Physical Para	meters (PPS)			.,_,_,	,-		1	rou	itine (RT)	per quarter
-	Point (Sampling Po	oint ID)		Monitoring	Perio	od Coll	ection Per			liance Status
		ve Sampling Points		4/1/24 - 6/						
20.030311	,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		7/1/24 - 9/						
Water System	Facility: ENTRY	POINT (WSF ID: 00700))	7, -, - : 3,	00, =					
Nitrate And N	•	(330) 1210070	-1					1	routine (RT) per year
	Point (Sampling Po	oint ID)		Monitoring	Perio	od Coll	ection Per		-	liance Status
ENTRY POINT (3)		,		1/1/23 - 12					-	omplete
	(5)			1/1/24 - 12						····p··oto
				1/1/25 - 12						
		Other	Complian	ce Schedul						
Compliance Sch	edule Activity		oompiian.		e Dat	re	Achie	ved	Date	
	RT UP COMPLETION	N			0/202		7107770			
32,13311,1231711		Water System Faci	ility and S		•		tory			
Water		•	•	, 0		Tota		and		
System Wate	er System Facility	Sampling Poin	t Sampling F	Point		Colifo	rm Copp	er		Stage
Facility ID		ID	Description	1	Sta	tus Rul	e Rule	Tier	Asbestos	WQP 2 DBP
00600 DIST	RIBUTION SYSTEM	4	DISTRIBUTI	ON SYSTEM	Δ	Y				
		DOWNSTREAM	M WITHIN 5 S	SERVICE CON	Δ	١				
		UPSTREAM	WITHIN 5 S	SERVICE CON	Δ	١				
		WM001	KIT SNK		Δ	Υ			Υ	
		WM002	RR MENS R	lR.	Δ	Υ			Υ	
		WM003	RR LADY RO	ООМ	Δ	Y Y			Υ	
00700 ENTF	RY POINT	3	ENTRY POI	NT	Д	١				
20662 WEL	L	2	WELL		Δ	١				
		Co	ntact Info	rmation						
Name			Organization						Job Title	
Mr. Dean A. Pri	ce			ting Sports Ass	sn		Director			
Mailing Address	Line One	Mailing Addre	<u> </u>	<u> </u>			City		State	Zip Code
P O Box 7145						Wilton	-		СТ	06897-7154
Business Phor	ne Extension	Fax Mo	bile Phone	Emergency Ph	none		dress			
203-846-461		203-762-9909		203-846-46			dingdong	@ao	l.com	
						· · ·				

Contact Role(s): Administrative Contact

C	Connectic	ut Depa	rtmer	nt of	Public	Health	Dri	nking	Water	Section			
	Wat	ter Qua	lity M	onite	oring ai	nd Con	nplia	ince S	Schedu	le			
PWS ID P	WS Name						Classi	fication	Population	Owner Type	Primary Source		
CT0341194 V	VOOSTER MOU	NTAIN GUN	CLUB				1	١C	25	S	GW		
Local Address (wh	ere applicable)				Service	Resider	ntial Co	ommerci	nmercial Industrial Combined Ag				
DANBURY ROAD (I	RT 7), DANBURY	, CT 06810			Connection	S		2	2				
Towns Served: DA	NBURY								1	1			
Name				Or	ganization					Job Titl	e		
Mr. David Cooley				De	ep-Engineer	ing Unit			Supv Civil	Engineer			
Mailing Address Li	ne One		Mailing A	Address	Line Two				City	State	Zip Code		
163 Great Hill Roa	d							Portlar	nd	СТ	06480		
Business Phone	Extension	Fax		Mobil	e Phone	Emergenc	y Phone	Email A	Address				
860-342-2215		860-344-	2560	860-2	05-7552	860-424	-3333	david.c	avid.cooley@ct.gov				
Contact Role(s):	egal Contact, C	Owner						•					

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End of schedule

	Connecticut Depa	ortment of	f Dublic F	laalth D	rinkii	aσ M	Vator 9	Section	
	.								
DWC ID	Water Qua	inty Monn	ornig an						Duineau Carres
PWS ID	PWS Name	A.D.		Cla	assificatio	n Pol			Primary Source
CT0341244	REBELLION KITCHEN AND B	AK			NC		0	Р	GW
	(where applicable)		Service Connections	Residential		rcial	Industrial	Combine	d Agricultural
	ANRAM ROAD		Connections		1				
Towns Served:	DANBURY								
			oring Requ	uirement	S				
Water Systen	n Facility: DISTRIBUTION S	YSTEM (WSF I	D: 00600)						
Total Colifor	m (3100)						1	routine (R	Γ) per month
Sampling	Point (Sampling Point ID)			Monitoring	Period	Colle	ction Perio	od Comp	liance Status
Select fro	m Inventory of Active Samplin	g Points		2/1/24 - 2/2				(Complete
				3/1/24 - 3/3	31/24			C	Complete
				4/1/24 - 4/3	30/24				
				5/1/24 - 5/3	31/24				
				6/1/24 - 6/3	30/24				
				7/1/24 - 7/3	31/24				
				8/1/24 - 8/3	31/24				
				9/1/24 - 9/3	30/24				
				10/1/24 - 10	/31/24				
Physical Para	ameters (PPS)						1	routine (R	Γ) per month
Sampling	Point (Sampling Point ID)			Monitoring	Period	Colle	ction Perio	od Comp	liance Status
Select fro	m Inventory of Active Samplin	g Points		2/1/24 - 2/2	29/24			C	Complete
				3/1/24 - 3/3	31/24			C	Complete
				4/1/24 - 4/3	30/24				
				5/1/24 - 5/3	31/24	_			_
				6/1/24 - 6/3	30/24				
				7/1/24 - 7/3	31/24				
				8/1/24 - 8/3	31/24				
				9/1/24 - 9/3	30/24				
				10/1/24 - 10	/31/24				
Water Systen	n Facility: ENTRY POINT (NSF ID: 00700)							
Nitrate And	Nitrite (NOX)							1 routine	(RT) per year
Sampling	Point (Sampling Point ID)			Monitoring	Period	Colle	ction Perio		liance Status
ENTRY PC	DINT (3)			1/1/24 - 12/	31/24			C	Complete
				1/1/25 - 12/	31/25				
	Water S	ystem Facil	ity and Sai	mpling Po	oint Inv	vent	ory		
Water						Total		nd	
System Wa	ter System Facility	Sampling Point	Sampling Poi	nt	(Colifor	т Сорре	r	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					
20664	WELL	2	WELL	Α					

	Water Quality Monit				U			
PWS ID	VS ID PWS Name					Population	Owner Type	Primary Source
CT0341244	REBELLION KITCHEN AND BAR				NC	0	Р	GW
Local Address (ocal Address (where applicable) Ser				Commercia	al Industri	al Combin	ed Agricultural
129/131 PANDANRAM ROAD Connections 1								

Towns Served: DANBURY

			Co	ontact Inf	ormation				
Name	Name				1	Job Title			
Mr. Taranjit Randh	awa			Rebellion Re	sturant	Owner			
Mailing Address Line One Mailing Addr				ess Line Two			City	State	Zip Code
129 Padanaram Roa	ad					Danbury	•	СТ	06811
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ldress		
203-240-6470						randhawats@gmail.com			

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

Please note the following:

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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
CT0341294	CHUCKS STEAK HOUSE				NC	25	Р	GW
Local Address (w	here applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
20 SEGAR STREE	Т	Connections			1			

Towns Served: DANBURY

Monitoring Requirements									
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600	0)								
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								
	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								
	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)									

Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)	1 rc	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 Facili	ity and Sampling P	oint ir	ivento	r y
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Stage Rule Tier Asbestos WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ	
		CSH001	KIT SNK DOUBLE 1	Α	Υ	Υ
		CSH002	KIT SNK DOUBLE 2	Α	Υ	Υ
		CSH003	KIT HAND SNK	Α	Υ	Υ
		CSH004	SERVERS STAT H SNK	Α	Υ	Υ
		CSH005	BAR SINK	Α	Υ	Υ
		CSH006	RR LADY ROOM	Α	Υ	Υ
		CSH007	RR MENS RR	Α	Υ	Υ
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α		
		UPSTREAM	WITHIN 5 SERVICE CON	Α		
00700	ENTRY POINT	3	ENTRY POINT	Α		
22832	WELL #1	2	WELL #1	Α		
54195	TREATMENT PLANT					

	Cont	act Information	1			
Name	Org	anization			Job Title	
Mr. Hank Zaccara	Chu	icks Steakhouse		Owner		
Mailing Address Line One	Mailing Address	Line Two		City	State	Zip Code
20 Segar Street			Danbury	1	СТ	06810

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(Connectic	ut Depa	rtment	of	Public	Health	Dri	nking	Water	Section	l	
	Wa	ter Qua	lity Mo	nite	oring a	nd Con	nplia	ince S	Schedul	e		
PWS ID I	PWS Name						Classi	fication	Population	Owner Type	Prim	ary Source
CT0341294	CHUCKS STEAK I	HOUSE					1	١C	25	Р		GW
Local Address (wh	nere applicable)				Service	Resider	ntial Co	ommerci	al Industri	al Combin	ed A	gricultural
20 SEGAR STREET	-				Connection	ns		1				
Towns Served: DA	ANBURY					,	'			'		
Business Phone	Extension	Fax	N	Лobil	e Phone	Emergence	y Phone	e Email /	Address	l .		
203-792-5555		203-792-	5246			860-210	-1982					
Contact Role(s):	Legal Contact, (Owner						· ·				
Name				Or	ganization					Job Tit	е	
Mr. Edward Stoc	k			Ch	uck's Steak	House			General N	/lanager		
Mailing Address L	ine One		Mailing Add	dress	Line Two				City	State	Zi	p Code
20 Segar St								Danbu	ry	СТ	(06810
Business Phone	Extension	Fax	N	∕lobil	e Phone	Emergenc	y Phone	e Email /	Address			
203-792-5555						203-470	-8800	edstoc	k@chucksda	nbury.com		
Contact Dolo(s)	A almaimintunting	Contact	,									

Contact Role(s): Administrative Contact

Please note the following:

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

End of schedule

Connecticut Dep	artment of	Public Health I)rinki	ng Wa	iter Se	ction
*		oring and Com				Ction
	anty Monit					T 0:
PWS ID PWS Name		C	lassificati			er Type Primary Source
CT0341314 120 CLAPBOARD RIDGE RO	AD		NC	4	_	P GW
Local Address (where applicable)		Service Residentia Connections			dustrial	Combined Agricultural
Tourse Control DANIBURY		Connections	4			
Towns Served: DANBURY	20	• •	•			
Website Colored Street Colored Street		oring Requiremen	ts			
Water System Facility: DISTRIBUTION	SYSTEM (WSFT	D: 00600)			4	1' (DT) 1
Total Coliform (3100)		A. d. a. a. th. a. article	Davida d	C-114		tine (RT) per quarter
Sampling Point (Sampling Point ID)	B : .	Monitoring		Collecti	on Period	Compliance Status
Select from Inventory of Active Samplin	g Points	10/1/23 - 1				Complete
		1/1/24 - 3	•			Complete
		4/1/24 - 6	•			
		7/1/24 - 9	/30/24			
Physical Parameters (PPS)						tine (RT) per quarter
Sampling Point (Sampling Point ID)		Monitoring		Collecti	on Period	Compliance Status
Select from Inventory of Active Samplin	g Points	10/1/23 - 1				Complete
		1/1/24 - 3	-			Complete
		4/1/24 - 6				
		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	Collecti	on Period	Compliance Status
ENTRY POINT (3)		1/1/23 - 12	2/31/23			Complete
		1/1/24 - 12	2/31/24			Complete
		1/1/25 - 12	2/31/25			
Water System Facility: WELL #1 (WSF	ID: 22958)					
E. Coli (3014)					1 rou	tine (RT) per quarter
Sampling Point (Sampling Point ID)		Monitoring	Period	Collecti	on Period	Compliance Status
WELL (2)		10/1/23 - 1	2/31/23			Complete
		1/1/24 - 3	/31/24			Complete
		4/1/24 - 6	/30/24			
		7/1/24 - 9	/30/24			
Water 9	System Facili	ty and Sampling P	oint In	ventor	У	
Water S	System Facili	ty and Sampling P	oint In		Y Lead and	
Water System Water System Facility	System Facili Sampling Point	Sampling Point			Lead and Copper	Stage
Water	-	, , ,		Total	Lead and Copper	Stage Asbestos WQP 2 DBPR
Water System Water System Facility	Sampling Point	Sampling Point		Total Coliform	Lead and Copper	_
Water System Water System Facility Facility ID	Sampling Point ID 4	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper	_
Water System Water System Facility Facility ID	Sampling Point ID 4	Sampling Point Description DISTRIBUTION SYSTEM	Status A	Total Coliform Rule	Lead and Copper	_
Water System Water System Facility Facility ID	Sampling Point ID 4 DOWNSTREAM	Sampling Point Description DISTRIBUTION SYSTEM WITHIN 5 SERVICE CON	Status A A	Total Coliform Rule	Lead and Copper	_
Water System Water System Facility Facility ID 00600 DISTRIBUTION SYSTEM	Sampling Point ID 4 DOWNSTREAM UPSTREAM	Sampling Point Description DISTRIBUTION SYSTEM WITHIN 5 SERVICE CON WITHIN 5 SERVICE CON	Status A A A	Total Coliform Rule	Lead and Copper	

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.

54191 ATMOSPHERIC STORAGE TANK

	Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name			Cla	ssification	Population	Ov	wner Type	Prin	nary Source	
CT0341314	120 CLAPBOARD RIDGE ROAD				NC	40		Р		GW	
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industr	ial	Combine	ed /	Agricultural	
		Connections			4						

Towns Served: DANBURY

		C	ontact Inf	ormation				
			Organization	l		J	lob Title	
					F	Property Owner	•	
e One		Mailing Add	ress Line Two			City	State	Zip Code
e Road					Danbury		СТ	06810
Extension	Fax	M	obile Phone	Emergency Phone	Email Add	Iress		
	230-797-0	3865 20)3-264-9628	203-744-5947	giulianod	ds@gmail.com		
	e Road	e Road Extension Fax	e One Mailing Add e Road Extension Fax M	Organization e One Mailing Address Line Two e Road Extension Fax Mobile Phone	e Road Extension Fax Mobile Phone Emergency Phone	Organization Fax Mobile Phone Emergency Phone Email Addresses In a control of the control of th	Organization Property Owner e One Mailing Address Line Two City e Road Danbury Extension Fax Mobile Phone Emergency Phone Email Address	Organization Job Title Property Owner One Mailing Address Line Two Road Extension Fax Mobile Phone Emergency Phone Email Address

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.

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 H	lealth	D	rinkin	g V	Vater	Se	ection	
	Water Quality Monit	oring an	d Con	npl	liance	Scl	hedul	e		
PWS ID	PWS Name			Cla	ssification	Ро	pulation	Ow	ner Type P	rimary Sourc
CT0340013	UNITED METHODIST CHURCH OF DANBURY				NC		25		Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerc	cial	Industria	al	Combined	Agricultura
5 CLAPBOARD	RIDGE ROAD	Connections			1					
Towns Served:	: DANBURY									
	Monito	oring Requ	iireme	ents	5					
Water Syster	m Facility: DISTRIBUTION SYSTEM (WSF I	D: 00600)								
Total Colifor	rm (3100)						1	. ro	utine (RT)	per quarter
Sampling	Point (Sampling Point ID)		Monitor	ing F	Period (Colle	ection Per	rioa	l Compli	ance Status
Select fro	om Inventory of Active Sampling Points		10/1/23	- 12/	/31/23				Сс	mplete
Total Colifor	rm (3100)						:	1 r	outine (RT)	per month
Sampling	Point (Sampling Point ID)		Monitor			Colle	ection Per	rioa	l Compli	ance Status
Select fro	om Inventory of Active Sampling Points		1/1/24							mplete
			2/1/24 - 2/29/24							mplete
			3/1/24						Co	mplete
			4/1/24							
			5/1/24							
			6/1/24							
			7/1/24							
			8/1/24							
			9/1/24							
n! ! ! n	. (226)		10/1/24	- 10/	/31/24		_		.: (5=)	
•	ameters (PPS)		0.0		Davida al	C- II-				per quarter
	Point (Sampling Point ID)		Monitor			Colle	ection Per	rioa		ance Status
	om Inventory of Active Sampling Points		10/1/23	- 12/	31/23			1		mplete
-	ameters (PPS)		Monitor	ina I	Dariad (Calla	ection Per			per month
	m Inventory of Active Sampling Points		1/1/24			Cone	ction Per	iiou		mplete
Select II o	on inventory of Active Sampling Points		2/1/24							mplete
			3/1/24							mplete
			4/1/24							pictc
			5/1/24		-					
			6/1/24							
			7/1/24							

Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)		1 rc	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		

8/1/24 - 8/31/24 9/1/24 - 9/30/24 10/1/24 - 10/31/24

Pu	Public Notification Requirements										
	Compliance Notice <u>Public Notification</u> <u>PN Certification</u>										
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received					
Total Coliform M&R Violation	7/1/04 - 7/31/04	2	4/29/2005		5/9/2005						

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 Water Quality Monitor				U			
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT0340013	UNITED METHODIST CHURCH OF DANBURY				NC	25	Р	GW
Incal Address	(where applicable)	Service	Residen	tial	Commercia	al Industria	al Combine	d Agricultural

1

Connections

5 CLAPBOARD RIDGE ROAD
Towns Served: DANBURY

Public Notification Requirements											
	Public No	<u>tification</u>	PN Certification								
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received					
Monochlorobenzene M&R Violation	1/1/05 - 3/31/05	3	10/17/2006		10/27/2006						
Chlorodibromomethane M&R Violation	1/1/05 - 3/31/05	3	10/17/2006		10/27/2006						
Total Coliform MCL Violation	10/1/06 - 12/31/06	2	11/25/2006		12/5/2006						
REVISED TOTAL COLIFORM RULE (RTCR) TT Violation	9/5/23 - 4/1/24	2	1/27/2024		2/6/2024						

	Water System Facility and Sampling Point Inventory											
Water					Total	Lead and						
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper		5	tage			
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								
		KS	KIT SNK	Α	Υ		Υ					
		UM001	L RM BY OFF L SINK	Р	Υ	1						
		UM002	L RM BY OFF R SINK	Р	Υ	1						
		UM003	M RM BY OFF L SINK	Р	Υ	1						
		UM004	M RM BY OFF R SINK	Р	Υ	1						
		UM005	WF BY OFFICE	Р	Υ	1						
		UM006	L RM BY NURS L SINK	Р	Υ	1						
		UM007	L RM BY NURS R SINK	Р	Υ	1						
		UM008	M RM BY NURS SINK	Р	Υ	1						
		UM009	KITCHEN	Р	Υ	1						
		UM010	EASTSIDE M RM SINK	Р	Υ	1						
		UM011	EASTSIDE WM RM SINK	Р	Υ	1						
		UM012	WESTSIDE M RM SINK	Р	Υ	1						
		UM013	WESTSIDE WM RM SINK	Р	Υ	1						
		UPSTREAM	WITHIN 5 SERVICE CON	Α								
00700	ENTRY POINT	3	ENTRY POINT	Α								
11027	WELL	2	WELL	Α								

			_		•	•					
Contact Information											
Name			Organization			Job Title					
United Methodist	Church of Dan	bury									
Mailing Address Line One Mailing Addr				ess Line Two		City		State	Zip Code		
5 Clapboard Ridge Rd							СТ	06811-4525			
Business Phone	Extension	Extension Fax		bile Phone	Emergency Phone	Email Address					
Contact Role(s):	egal Contact, (Owner									

C	onnectici	ut Depa	irtment (of Public	Health	n Drii	nking	, Water	Section		
	Wat	ter Qua	lity Mon	itoring a	nd Cor	nplia	nce S	Schedul	le		
PWS ID PV	PWS Name						fication	Population	Owner Type	Primary Sour	
CT0340013 U	NITED METHO	DIST CHURC	H OF DANBUR	Υ		l	1C	25	Р	GW	
Local Address (whe		Service	Reside	ntial Co	ommerci	al Industri	al Combin	ed Agricultur			
5 CLAPBOARD RIDGE ROAD				Connectio	ns		1				
Towns Served: DAI	NBURY			<u>'</u>	,	,					
Name		Organization			Job Title						
Ms. Sue Teer		United Methodist Church of Dan				Trustee					
Mailing Address Lir	Mailing Addre	ress Line Two			City		State	Zip Code			
5 Clapboard Ridge Rd							Danbury		СТ	06811	
Business Phone	Extension	Fax	Mo	bile Phone	Emergeno	y Phone	Email A	Email Address			
203-512-3288							eventlady@att.net				
Contact Role(s):	dministrative (Contact	<u> </u>		1		1				

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End of schedule