

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|----------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0690272 | KILLINGLY HWY DEPT GARAGE | NTNC | 68 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 79 PUTNAM PIKE | | | 1 | | | | |

Towns Served: KILLINGLY

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 | 1/1/21 - 12/31/23 | 6/1-9/30 | Complete | | |
| | 1/1/24 - 12/31/26 | 6/1-9/30 | | | |
| | 1/1/27 - 12/31/29 | 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 | | 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 | | | | |
| | 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> | | |

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 | | |
|----------------------------------|----------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| CT0690272 | KILLINGLY HWY DEPT GARAGE | NTNC | 68 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 79 PUTNAM PIKE | | | 1 | | | | |

Towns Served: KILLINGLY

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> |
| ENTRY POINT (3) | 1/1/21 - 12/31/23 | | Complete |
| | 1/1/24 - 12/31/26 | | |
| | 1/1/27 - 12/31/29 | | |

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 EXEMPTION | 3/1/2029 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | KGAR001 | UPSTAIRS SINK LEFT | A | Y | N | | |
| | | KGAR002 | UPSTAIRS SINK RIGHT | A | Y | N | Y | |
| | | KGAR003 | MENS BTHRM SINK DOWN | A | Y | N | | |
| | | KGAR004 | WOMENS BTHRM SINK UP | A | Y | N | | |
| | | KGAR005 | KITCHEN | A | | N | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10301 | WELL | 2 | WELL | 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 |
|-----------------|----------------|--|--------------------------|
| WILCOX, MELISSA | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS I | 9/30/2025 |

Contact Information

| Name | | Organization | | | Job Title | | |
|--|-----------|--------------------------|--------------|-----------------|------------------------------|-------|----------|
| Mr. David Capacchione | | Killingly Hwy Dept | | | Director | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 79 Putnam Pike | | | | | Killingly | CT | 06239 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 860-779-5360 | | | | 860-234-4287 | dcapacchione@killinglyct.org | | |
| Contact Role(s): Administrative Contact | | | | | | | |

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 | | | |
| CT0690272 | KILLINGLY HWY DEPT GARAGE | NTNC | 68 | L | GW | | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural | |
| 79 PUTNAM PIKE | | | 1 | | | | | |
| Towns Served: KILLINGLY | | | | | | | | |
| Name | | | Organization | | | Job Title | | |
| Ms. Jennifer Hawkins | | | Town of Killingly | | | Finance Director | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| Town of Killingly, Finance Dept | | | 172 Main Street | | | Killingly | CT | 06239 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-779-5339 | | | | | JHAWKINS@KILLINGLYCT.GOV | | | |
| 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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|----------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0691102 | ROGERS CORP - ROGERS WELL | NTNC | 250 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| ONE TECHNOLOGY DRIVE - KILLINGLY | | | 1 | | | | |

Towns Served: KILLINGLY

Monitoring Requirements

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

Asbestos (1094) 1 routine (RT) per nine years

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|---|-------------------|-------------------|-------------------|
| Select from Inventory of Active Sampling Points | 1/1/20 - 12/31/28 | | |

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 | | 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 | | |

Total Coliform (3100) 3 repeat (RP) per period

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|---|---------------------|-------------------|-------------------|
| Select from Inventory of Active Sampling Points | 12/12/23 - 12/17/23 | | Complete |
| | 12/15/23 - 12/20/23 | | |

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

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|---|-------------------|-------------------|-------------------|
| 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 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)**

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 | | |
|----------------------------------|----------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| CT0691102 | ROGERS CORP - ROGERS WELL | NTNC | 250 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| ONE TECHNOLOGY DRIVE - KILLINGLY | | | 1 | | | | |

Towns Served: KILLINGLY

Monitoring Requirements

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

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

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/21 - 12/31/23 | | Complete |
| | 1/1/24 - 12/31/26 | | |
| | 1/1/27 - 12/31/29 | | |

Nitrate And Nitrite (NOX) 1 routine (RT) per year

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/23 - 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

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| 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

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/23 - 12/31/25 | | |
| | 1/1/26 - 12/31/28 | | |

Organic Chemicals (VOCS) 1 routine (RT) per three years

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/23 - 12/31/25 | | |
| | 1/1/26 - 12/31/28 | | |

Water System Facility: **WELL (WSF ID: 10303)**

E. Coli (3014) 1 triggered (TG) per period

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|---------------------|-------------------|-------------------|
| WELL (2) | 12/11/23 - 12/17/23 | | Complete |

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 | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | RC | BLDG 20A, 1ST FLOOR | A | Y | 2 | | |
| | | RC-RW | RC-RW-003 | A | Y | 2 | | |

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

| | | | | | | | |
|----------------------------------|----------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0691102 | ROGERS CORP - ROGERS WELL | NTNC | 250 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| ONE TECHNOLOGY DRIVE - KILLINGLY | | | 1 | | | | |

Towns Served: KILLINGLY

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 |
|--------------------------|------------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | RC-RW001 | SP1-WELL #3 HOUSE | I | | | | |
| | | RC-RW002 | SP2-BLDG. 1, 3FL KIT | I | Y | | | |
| | | RCRW003 | SP3-BLDG. 24 R&D BR | I | Y | 1 | | |
| | | RC-RW003 | SP3-BLDG.24 R&D BR | A | Y | 2 | Y | Y |
| | | RC-RW004 | SP4-BLD 20A BR | A | Y | 2 | | |
| | | RC-RW005 | SP5- BLD 4, 2 FL BR | P | Y | 2 | | |
| | | RC-RW006 | SP6- BLD 13, WH-BR | A | Y | 2 | | |
| | | RCRWBU001 | BSP1-BLD 2, 4 FL BR | I | Y | N | | |
| | | RCRWBU002 | BSP2-BLD 21 2 FL KIT | A | Y | 2 | | |
| | | RCRWBU003 | BLD 24, R&D BR-02 | A | | 2 | | |
| | | RC-RW-BU003 | BSP3-BLD 23 M RM | I | | | | |
| | | RCRWBU004 | BSP4-BLD 1 HOURLY BR | P | Y | 2 | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10303 | WELL | 2 | WELL | A | | | | |
| 62126 | 100K GALLON ATM STORAGE TANK | | | | | | | |

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|------------------|----------------|-----------------------------|--------------------------|
| WERBECKI, MICHAL | CHIEF OPERATOR | SMALL WATER SYSTEM OPERATOR | 9/30/2024 |

Contact Information

| | | | | | | |
|----------------------------|-----------|--------------------------|--------------|-----------------|---------------------------------------|-------|
| Name | | Organization | | | Job Title | |
| Mr. Michal Werbecki | | Rogers Corporation | | | Ehs Engineer | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State |
| One Technology Drive | | | | | Rogers | CT |
| Zip Code | | 06263 | | | | |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 860-779-4765 | | | | | michal.werbecki@rogerscorporation.com | |

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

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0691203 | FRITO-LAY | NTNC | 903 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1886 UPPER MAPLE STREET | | | 1 | | | | |

Towns Served: KILLINGLY

Monitoring Requirements

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

| Chlorine Residual (1012) | 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 | | |

| 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> |
| CAFETERIA SINK (2FL105) | 1/1/23 - 12/31/23 | 7/1-7/31 | |
| | 1/1/24 - 12/31/24 | 7/1-7/31 | |
| | 1/1/25 - 12/31/25 | 7/1-7/31 | |

| 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> |
| MAINTENANCE SINK (FLDAC-116) | 1/1/23 - 12/31/23 | 7/1-7/31 | Complete |
| | 1/1/24 - 12/31/24 | 7/1-7/31 | |
| | 1/1/25 - 12/31/25 | 7/1-7/31 | |

| 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) | 20 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 | 7/1/23 - 12/31/23 | | Complete |
| | 1/1/24 - 6/30/24 | | |
| | 7/1/24 - 12/31/24 | | |

| 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 | | |

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

| | | | | | | | |
|----------------------------------|------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0691203 | FRITO-LAY | NTNC | 903 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1886 UPPER MAPLE STREET | | | 1 | | | | |

Towns Served: KILLINGLY

Monitoring Requirements

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> |
| | 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) | 1/1/22 - 12/31/24 | | Complete |
| | 1/1/25 - 12/31/27 | | |

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: .2 MG/L | Daily |
| Start Date: 12/1/2002 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 11/1/2023 - 11/30/2023 | Y | |
| | 12/1/2023 - 12/31/2023 | Y | |
| | 1/1/2024 - 1/31/2024 | Y | |
| | 2/1/2024 - 2/29/2024 | Y | |
| | 3/1/2024 - 3/31/2024 | | |
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
| Chlorine | Entry Point RDC (EPRD) | Minimum: 0.25 MG/L | Daily |
| Start Date: 4/1/2013 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 11/1/2023 - 11/30/2023 | Y | |
| | 12/1/2023 - 12/31/2023 | Y | |
| | 1/1/2024 - 1/31/2024 | Y | |
| | 2/1/2024 - 2/29/2024 | Y | |

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 | | |
| CT0691203 | FRITO-LAY | NTNC | 903 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1886 UPPER MAPLE STREET | | | 1 | | | | |

Towns Served: KILLINGLY

Water System Facility: ENTRY POINT (WSFID: 00700)

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---|----------------------------|--------------------------------------|
| Chlorine | Entry Point RDC (EPRD) | Minimum: 0.25 MG/L | Daily |
| Start Date: 4/1/2013 | | Compliance History: | Monitoring Compliance Status: |
| | | Monitoring Period | Compliance Status: |
| | | 3/1/2024 - 3/31/2024 | |
| Orthophosphate | Entry Point Phosphate Monitoring (PHOS) | Maximum: 3 MG/L | 2 |
| Start Date: 5/1/2018 | | Compliance History: | Monitoring Compliance Status: |
| | | Monitoring Period | Compliance Status: |
| | | 11/1/2023 - 11/30/2023 | |
| | | 12/1/2023 - 12/31/2023 | |
| | | 1/1/2024 - 1/31/2024 | |
| | | 2/1/2024 - 2/29/2024 | |
| | | 3/1/2024 - 3/31/2024 | |
| Orthophosphate | Entry Point Phosphate Monitoring (PHOS) | Minimum: 2 MG/L | 2 |
| Start Date: 5/1/2018 | | Compliance History: | Monitoring Compliance Status: |
| | | Monitoring Period | Compliance Status: |
| | | 11/1/2023 - 11/30/2023 | |
| | | 12/1/2023 - 12/31/2023 | |
| | | 1/1/2024 - 1/31/2024 | |
| | | 2/1/2024 - 2/29/2024 | |
| | | 3/1/2024 - 3/31/2024 | |
| pH | Entry Point pH Monitoring (PHRD) | Minimum: 7.2 PH | Daily |
| Start Date: 5/1/2018 | | Compliance History: | Monitoring Compliance Status: |
| | | Monitoring Period | Compliance Status: |
| | | 11/1/2023 - 11/30/2023 | |
| | | 12/1/2023 - 12/31/2023 | |
| | | 1/1/2024 - 1/31/2024 | |
| | | 2/1/2024 - 2/29/2024 | |
| | | 3/1/2024 - 3/31/2024 | |
| pH | <spaces> () | Maximum: 7.8 PH | Daily |
| Start Date: 6/1/2020 | | Compliance History: | Monitoring Compliance Status: |
| | | Monitoring Period | Compliance Status: |
| | | 11/1/2023 - 11/30/2023 | |
| | | 12/1/2023 - 12/31/2023 | |
| | | 1/1/2024 - 1/31/2024 | |
| | | 2/1/2024 - 2/29/2024 | |
| | | 3/1/2024 - 3/31/2024 | |

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 | | |
|----------------------------------|-----------|---------------------|-------------|------------|----------------|----------|--------------|
| CT0691203 | FRITO-LAY | NTNC | 903 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1886 UPPER MAPLE STREET | | | 1 | | | | |

Towns Served: KILLINGLY

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|------------------------------------|------------|---------------|
| CROSS CONNECTION SURVEY REPORT | 3/1/2022 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2023 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2024 | |
| SUBMIT LEAD SERVICE LINE INVENTORY | 10/16/2024 | |
| COMPLETE INITIAL LSL INVENTORY | 10/16/2024 | |

Public Notification Requirements

| Violation/Situation | Compliance Period | Notice Tier | Public Notification | | PN Certification | |
|--------------------------------------|-------------------|-------------|---------------------|-----------|------------------|----------|
| | | | Required | Performed | Due to DPH | Received |
| Total Haloacetic Acids M&R Violation | 1/1/22 - 12/31/22 | 3 | 9/4/2024 | | 9/14/2024 | |

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 | 2FL001 | CAFETERIA SINK | A | Y | 1 | | |
| | | 2FL002 | GENERATED BY BATCH | A | Y | | | |
| | | 2FL0027 | SAMPLE #6: DISPATCH | A | Y | 1 | | |
| | | 2FL0028 | SAMPLE #13: DISPATCH | A | Y | 1 | | |
| | | 2FL003 | FRONT OFFICE KITCHEN | A | Y | 1 | | |
| | | 2FL004 | GENERATED BY BATCH | A | Y | | | |
| | | 2FL005 | DISPATCH MENS UPSTAI | A | Y | 1 | | |
| | | 2FL006 | DISPATCH WOMENS UP | A | Y | 1 | | |
| | | 2FL007 | DISPATCH OFFICE SINK | A | Y | 1 | | |
| | | 2FL008 | DISPATCH WOMEN'S DOW | A | Y | 1 | | |
| | | 2FL009 | GENERATED BY BATCH | A | Y | | | |
| | | 2FL014 | GENERATED BY BATCH | A | Y | | | |
| | | 2FL015 | GENERATED BY BATCH | A | Y | | | |
| | | 2FL017 | GENERATED BY BATCH | A | Y | | | |
| | | 2FL018 | UTC UTILITY SINK | A | Y | 1 | | |
| | | 2FL020 | SAMPLE #15: UTC WOME | A | Y | 1 | | |
| | | 2FL021 | GENERATED BY BATCH | A | Y | | | |
| | | 2FL022 | CAFETERIA WATER FOUN | A | Y | 1 | | |
| | | 2FL023 | GENERATED BY BATCH | A | Y | | | |
| | | 2FL026 | GENERATED BY BATCH | A | Y | | | |
| | | 2FL027 | GENERATED BY BATCH | A | Y | | | |
| | | 2FL028 | GENERATED BY BATCH | A | Y | | | |
| | | 2FL101 | SHIPPING KITCHEN | A | Y | 1 | | |
| | | 2FL102 | FRONT OFFICE SINK | A | | 1 | | |
| 2FL103 | OFFICE FOUNTAIN | A | Y | 1 | | | | |
| 2FL104 | OFFICE FOUNTAIN | A | Y | 1 | | | | |

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0691203 | FRITO-LAY | NTNC | 903 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1886 UPPER MAPLE STREET | | | 1 | | | | |

Towns Served: KILLINGLY

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 | WQP 2 | DBPR | Stage |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|-------|------|-------|
| | | 2FL105 | CAFETERIA SINK | A | Y | 1 | Y | Y | Y | Y |
| | | 2FL106 | PC QC LAB SINK | A | Y | 1 | | | | |
| | | 2FL107 | PKG DISHWASH SINK | A | Y | 1 | | | | |
| | | 2FL108 | MAIN QC LAB SINK | A | Y | 1 | | | | |
| | | 2FL109 | FCC KITCHEN SINK | A | Y | 1 | | | | |
| | | 2FL110 | MAINTENANCE SINK | A | Y | 1 | | | | |
| | | 2FL111 | SANI ROOM SINK- RAIL | A | Y | 1 | | | | |
| | | 2FL112 | BOILER ROOM CHEMICAL | A | Y | 1 | | | | |
| | | 2FL113 | BOILER ROOM UTILITY | A | Y | 1 | | | | |
| | | 2FL114 | CORN QC LAB SINK | A | Y | 1 | | | | |
| | | 2FL115 | CORN COOK MEZZ SINK | A | Y | 1 | | | | |
| | | 2FL116 | SMARTFOOD KITCHEN-HW | A | Y | 1 | | | | |
| | | 2FL117 | GES BREAKROOM UP | A | Y | 1 | | | | |
| | | 2FL118 | GES MAINT SHOP SINK | A | Y | 1 | | | | |
| | | 2FL119 | GES WATER FOUNTAINS | A | Y | 1 | | | | |
| | | 2FL120 | WASTEWATER LAB SINK | A | Y | 1 | | | | |
| | | 2FL121 | TRAFFIC GARAGE SINK | A | Y | 1 | | | | |
| | | 2FL122 | TRAFFIC KITCHENETTE | A | Y | 1 | | | | |
| | | 2FL123 | TRAFFIC KITCHENETTE | A | Y | 1 | | | | |
| | | 2FL124 | PKG LINE# 45 SINK | A | Y | 1 | | | | |
| | | 2FL125 | PKG LINE #3 SINK | A | Y | 1 | | | | |
| | | 4 | DISTRIBUTION SYSTEM | A | Y | | | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | 1 | | | | |
| | | FL001 | GENERATED BY BATCH | A | Y | | | | | |
| | | FL002 | WASTEWATER LAB SINK | A | | 1 | | | | |
| | | FL01 | GENERATED BY BATCH | A | Y | | | | | |
| | | FLDAC-11 | EMPLOYEE CAFE SINK | A | Y | 1 | | | | |
| | | FLDAC-110 | WWTP LAB SINK | A | | 1 | | | | |
| | | FLDAC-112 | WATER BUBBLER-CAFE | A | | 1 | | | | |
| | | FLDAC-113 | MENS LOCKER ROOM SK | A | Y | 1 | | | | |
| | | FLDAC-114 | WATER BUBBLER-OFF. | A | | 1 | | | | |
| | | FLDAC-115 | DISPATCH OFFICE SINK | A | | 1 | | | | |
| | | FLDAC-116 | MAINTENANCE SINK | A | Y | 1 | Y | Y | Y | Y |
| | | FLDAC-117 | FRT OFFICE BATHRM SK | A | | 1 | | | | |
| | | FLDAC-118 | LBCSS SINK-OLD | A | | 1 | | | | |
| | | FLDAC-119 | LADIES LOCKER RM SK | A | Y | 1 | | | | |
| | | FLDAC-12 | PC LAB SINK | A | Y | 1 | | | | |
| | | FLDAC-120 | TRUCK GARAGE SINK | A | | 1 | | | | |

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0691203 | FRITO-LAY | NTNC | 903 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1886 UPPER MAPLE STREET | | | 1 | | | | |
| Towns Served: KILLINGLY | | | | | | | |

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 |
|--------------------------|-----------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | FLDAC-13 | UTILITY SINK-ASF | A | | 1 | | |
| | | FLDAC-14 | QC LAB SINK | A | Y | 1 | | |
| | | FLDAC-15 | FCC KITCHEN SINK | A | | 1 | | |
| | | FLDAC-16 | BOILER RM-UTIL. SINK | A | Y | 1 | | |
| | | FLDAC-17 | CORN QC LAB | A | Y | 1 | | |
| | | FLDAC-18 | UTC UTILITY SINK | A | Y | 1 | | |
| | | FLDAC-19 | SHIPPING SINK-MEN RM | A | | 1 | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | Y | 1 | | |
| | | XXXFL01 | CAFETERIA SINK | A | Y | 1 | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | Y | 1 | | |
| 10307 | WELL #1 | 2 | WELL #1 | A | | 1 | | |
| 59242 | WELL #3 | 2 | WELL #3 | A | | 1 | | |
| 59244 | ATMOSPHERIC STORAGE | | | | | | | |
| 59246 | PUMP STATION | | | | | | | |
| 995 | FRITO LAY TREATMENT STATION | | | | | | | |

Certified Operator Information

Water System Facility: FRITO LAY TREATMENT STATION (WSF ID: 995)

Facility Classification: CLASS 2 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|----------------------|-------------------|---|--------------------------|
| LAFRAMBOISE, PAUL F. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 9/30/2024 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 9/30/2024 |
| NAPIERATA, KYLE | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 9/30/2024 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 9/30/2024 |

Contact Information

| | | | | | | |
|--------------------------|-----------|--------------------------|--------------|-----------------|------------------------------|----------|
| Name | | Organization | | | Job Title | |
| Ms. Heather Belanger | | Frito Lay | | | Env. Coordinator | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 1886 Upper Maple St | | | | Dayville | CT | 06241 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 860-412-1173 | | | | | heather.belanger@pepsico.com | |

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 | | |
| CT0691243 | KILLINGLY HIGH SCHOOL & AGRICULTURAL CTR | NTNC | 1,400 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 234 PUTNAM PIKE | | | | 1 | | | |
| Towns Served: KILLINGLY | | | | | | | |

Monitoring Requirements

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

Chlorine Residual (1012) 2 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 |

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 | | Complete |

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> |
|---|--------------------------|--------------------------|--------------------------|
| KITCHEN FOOD PREP SINK (1307) | 1/1/23 - 12/31/23 | 9/1-9/30 | Complete |
| | 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> |
|---|--------------------------|--------------------------|--------------------------|
| ART ROOM 3106 (3106) | 1/1/23 - 12/31/23 | 9/1-9/30 | Complete |
| | 1/1/24 - 12/31/24 | 9/1-9/30 | |
| | 1/1/25 - 12/31/25 | 9/1-9/30 | |

Total Coliform (3100) 2 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 | | |

Lead And Copper (PBCU) 10 routine (RT) per year

| <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 - 12/31/23 | 6/1-9/30 | Complete |
| | 1/1/24 - 12/31/24 | 6/1-9/30 | |
| | 1/1/25 - 12/31/25 | 6/1-9/30 | |

Physical Parameters (PPS) 2 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 |

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0691243 | KILLINGLY HIGH SCHOOL & AGRICULTURAL CTR | NTNC | 1,400 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 234 PUTNAM PIKE | | | | 1 | | | |

Towns Served: KILLINGLY

Monitoring Requirements

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

| Physical Parameters (PPS) | 2 routine (RT) per month | | |
|---|--------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 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: **TREATMENT PLANT (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 | | Complete |
| | 1/1/25 - 12/31/25 | | |

| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | 1 routine (RT) per three years | | |
|---|--------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 1/1/23 - 12/31/25 | | |
| | 1/1/26 - 12/31/28 | | |

| Organic Chemicals (VOCS) | 1 routine (RT) per quarter | | |
|---|----------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 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 | | |

Monthly Water System Facility (WSF) Level Monitoring Requirements

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 | | |
| CT0691243 | KILLINGLY HIGH SCHOOL & AGRICULTURAL CTR | NTNC | 1,400 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 234 PUTNAM PIKE | | | | 1 | | | |

Towns Served: KILLINGLY

Water System Facility: TREATMENT PLANT (WSFID: 00700)

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---|----------------------------|---------------------------|
| Chlorine | Entry Point RDC (EPRD) | Minimum: 0.5 MG/L | Continuous |
| Start Date: 9/1/2010 | | Compliance History: | Operating Limit |
| | | Monitoring Period | Compliance Status: |
| | | 11/1/2023 - 11/30/2023 | Y |
| | | 12/1/2023 - 12/31/2023 | Y |
| | | 1/1/2024 - 1/31/2024 | Y |
| | | 2/1/2024 - 2/29/2024 | Y |
| | | 3/1/2024 - 3/31/2024 | |
| pH | Entry Point pH Monitoring (PHRD) | Minimum: 6.4 PH | Daily |
| Start Date: 9/1/2010 | | Compliance History: | Operating Limit |
| | | Monitoring Period | Compliance Status: |
| | | 11/1/2023 - 11/30/2023 | |
| | | 12/1/2023 - 12/31/2023 | |
| | | 1/1/2024 - 1/31/2024 | |
| | | 2/1/2024 - 2/29/2024 | |
| | | 3/1/2024 - 3/31/2024 | |
| Phosphate (as PO4) | Entry Point Phosphate Monitoring (PHOS) | Maximum: 10 MG/L | 2 |
| Start Date: 2/1/2014 | | Compliance History: | Operating Limit |
| | | Monitoring Period | Compliance Status: |
| | | 11/1/2023 - 11/30/2023 | |
| | | 12/1/2023 - 12/31/2023 | |
| | | 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 |
|------------------------------------|------------|---------------|
| CROSS CONNECTION SURVEY REPORT | 3/1/2023 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2024 | |
| SUBMIT LEAD SERVICE LINE INVENTORY | 10/16/2024 | |
| COMPLETE INITIAL LSL INVENTORY | 10/16/2024 | |

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 | 1110 | SCI | A | Y | 1 | | |
| | | 1112 | SCI | A | Y | 1 | | |
| | | 1202 | SCI | A | Y | 1 | | |
| | | 1212 | UP LIFE SKL | A | Y | 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.

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

| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| CT0691243 | KILLINGLY HIGH SCHOOL & AGRICULTURAL CTR | NTNC | 1,400 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 234 PUTNAM PIKE | | | | 1 | | | |

Towns Served: KILLINGLY

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 |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| | | 1215 | UP-FAC DIN | A | Y | 1 | | |
| | | 1216 | ROOM 1216 | A | Y | N | | |
| | | 1307 | KITCHEN FOOD PREP SI | A | Y | N | Y | Y |
| | | 1315 | CONCESSION | A | Y | N | | |
| | | 1414 | DWN TRAIN | A | Y | N | | |
| | | 1602 | PRI-BRK | A | Y | N | | |
| | | 1810 | DWN FD SCI | A | Y | N | | |
| | | 1818 | ANML SCI | A | Y | N | | |
| | | 2207 | ROOM 2207 | A | Y | N | | |
| | | 2211 | ROOM 2211 | A | Y | N | | |
| | | 2215 | ROOM 2215 | A | Y | N | | |
| | | 3102 | CERAMIC | A | Y | 1 | | |
| | | 3106 | ART ROOM 3106 | A | Y | 1 | | Y |
| | | 3207 | ROOM 3207 | A | Y | 1 | | |
| | | 3211 | ROOM 3211 | A | Y | 1 | | |
| | | 3215 | ROOM 3215 | A | Y | 1 | | |
| | | 4 | DISTRIBUTION SYSTEM | A | | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | TREATMENT PLANT | 3 | ENTRY POINT | A | | | | |
| 57244 | WELL 1 | 2 | WELL 1 | A | | | | |
| 57246 | WELL 2 | 2 | WELL 2 | A | | | | |
| 57252 | ATMOSPHERIC TANK | | | | | | | |
| 57256 | PUMP STATION | | | | | | | |

Certified Operator Information

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

Facility Classification: CLASS 1 DISTRIBUTION SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|----------------------|-------------------|--|--------------------------|
| LAFRAMBOISE, PAUL F. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 9/30/2024 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 9/30/2024 |
| NAPIERATA, KYLE | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 9/30/2024 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 9/30/2024 |
| ENGLE, ROGER D. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2023 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2023 |
| LAFRAMBOISE, ERIC | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS III | 9/30/2026 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS III | 9/30/2026 |
| STARK, TYLER | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 3/31/2025 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 3/31/2025 |

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 | | |
| CT0691243 | KILLINGLY HIGH SCHOOL & AGRICULTURAL CTR | NTNC | 1,400 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 234 PUTNAM PIKE | | | | 1 | | | |
| Towns Served: KILLINGLY | | | | | | | |

Certified Operator Information

| | | | |
|---|----------------------|--|---------------------------------|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
| Facility Classification: CLASS 1 DISTRIBUTION SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| Water System Facility: TREATMENT PLANT (WSF ID: 00700) | | | |
| Facility Classification: CLASS 2 TREATMENT PLANT | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| LAFRAMBOISE, PAUL F. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS I | 9/30/2024 9/30/2024 |
| NAPIERATA, KYLE | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS II | 9/30/2024 9/30/2024 |
| ENGLE, ROGER D. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2023 6/30/2023 |
| LAFRAMBOISE, ERIC | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS III WATER TREATMENT PLANT OPERATOR - CLASS III | 9/30/2026 9/30/2026 |
| STARK, TYLER | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II WATER TREATMENT PLANT OPERATOR - CLASS I | 3/31/2025 3/31/2025 |

Contact Information

| | | | | | | |
|--------------------------|-----------|----------------------------|--------------|-----------------|--------------------------|----------|
| Name | | Organization | | | Job Title | |
| Ms. Mary Calorio | | Town of Killingly | | | Town Manager | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| Killingly Town Hall | | 172 Main Street, 2Nd Floor | | Killingly | CT | 06239 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 860-779-5335 | | 860-779-5382 | | | mcalorio@killinglyct.gov | |

| | | | | | | |
|---------------------------------------|-----------|--------------------------|--------------|-----------------|------------------------------|----------|
| Contact Role(s): Legal Contact | | | | | | |
| Name | | Organization | | | Job Title | |
| Mr. Michael Vassar | | Killingly Public Schools | | | Operation Supervisor | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 226 Putnam Pike | | | | Dayville | CT | 06241 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 860-779-6655 | | | | 860-455-3613 | mvassar@killinglyschools.org | |

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

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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

End of schedule

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 | | |
| CT0699213 | 60 HARTFORD PIKE | NTNC | 29 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | | 1 | | | |

Towns Served: KILLINGLY

Monitoring Requirements

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

Asbestos (1094) 1 routine (RT) per nine years

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|---|-------------------|-------------------|-------------------|
| Select from Inventory of Active Sampling Points | 1/1/16 - 12/31/24 | | Complete |
| | 1/1/25 - 12/31/33 | | |

Total Coliform (3100) 1 routine (RT) per quarter

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|---|--------------------|-------------------|-------------------|
| Select from Inventory of Active Sampling Points | 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 six months

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|---|-------------------|-------------------|-------------------|
| Select from Inventory of Active Sampling Points | 7/1/23 - 12/31/23 | | Complete |
| | 1/1/24 - 6/30/24 | | |
| | 7/1/24 - 12/31/24 | | |

Physical Parameters (PPS) 1 routine (RT) per quarter

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|---|--------------------|-------------------|-------------------|
| Select from Inventory of Active Sampling Points | 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

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/23 - 12/31/25 | | |
| | 1/1/26 - 12/31/28 | | |

Nitrate And Nitrite (NOX) 1 routine (RT) per year

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/23 - 12/31/23 | | Complete |
| | 1/1/24 - 12/31/24 | | Complete |
| | 1/1/25 - 12/31/25 | | |

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

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3) | 1/1/23 - 12/31/25 | | |
| | 1/1/26 - 12/31/28 | | |

Organic Chemicals (VOCS) 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 | | |

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 | | |
| CT0699213 | 60 HARTFORD PIKE | NTNC | 29 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | | 1 | | | |

Towns Served: KILLINGLY

Monitoring Requirements

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

| | |
|---|-----------------------------------|
| Organic Chemicals (VOCS) | 1 routine (RT) per quarter |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> |
| | <i>Collection Period</i> |
| | <i>Compliance Status</i> |
| | 7/1/24 - 9/30/24 |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|-------------------------------------|-----------------|----------------------|
| CROSS CONNECTION SURVEY REPORT | 3/1/2019 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2020 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2021 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2022 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2024 | |
| SUBMIT LEAD SERVICE LINE INVENTORY | 10/16/2024 | |
| COMPLETE INITIAL LSL INVENTORY | 10/16/2024 | |

Water System Facility and Sampling Point Inventory

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Status</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Asbestos</i> | <i>Stage WQP 2 DBPR</i> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | HPAPKIT | APT SIDE KITCHEN UP | A | | | N | |
| | | HPFOBL | FRONT OFFICE BATH L | A | | | N | |
| | | HPFOBR | FRONT OFFICE BATH R | A | | | N | |
| | | HPKITUP | KITCHEN SINK 1 UP | A | | | N | |
| | | HPMR | MEN'S ROOM | A | Y | | N | Y |
| | | HPORUP | OFFICE RESTRM UP | A | | | N | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 59709 | WELL 1 | 2 | WELL 1 | A | | | | |

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

| <i>Operator Name</i> | <i>Operator Type</i> | <i>Certification(s)</i> | <i>Certification Expiration</i> |
|----------------------|----------------------|--|---------------------------------|
| LAFRAMBOISE, PAUL F. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 9/30/2024 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 9/30/2024 |
| LAFRAMBOISE, ERIC | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS III | 9/30/2026 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS III | 9/30/2026 |
| STARK, TYLER | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 3/31/2025 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS I | 3/31/2025 |

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 | | |
| CT0699213 | 60 HARTFORD PIKE | NTNC | 29 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 1 | | | | |

Towns Served: KILLINGLY

Contact Information

| | | | | | | |
|-------------------------------|-----------|----------------------------|--------------|-----------------|------------------------------|----------|
| Name | | Organization | | Job Title | | |
| Mr. David I. Patenaude | | Northeast Management/Owner | | | | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 96 Murdock Road | | | | Pomfret Center | CT | 06259 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 860-942-3707 | | 860-973-3950 | | 860-942-3707 | DAVIDPATENAUDE@SBCGLOBAL.NET | |

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 | Classification | Population | Owner Type | Primary Source | | |
| CT0690622 | EASTCONN | NTNC | 87 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 556 WESTCOTT ROAD | | | | 1 | | | |

Towns Served: KILLINGLY

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 | 1/1/18 - 12/31/26 | | Complete |

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 year

| <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 - 12/31/23 | 6/1-9/30 | Complete |
| | 1/1/24 - 12/31/24 | 6/1-9/30 | |
| | 1/1/25 - 12/31/25 | 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 | | Complete |
| | 1/1/25 - 12/31/25 | | |

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

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/23 - 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 | | Complete |
| | 1/1/26 - 12/31/28 | | |

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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-----------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0690622 | EASTCONN | NTNC | 87 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 556 WESTCOTT ROAD | | | | 1 | | | |
| Towns Served: KILLINGLY | | | | | | | |

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 | | | | |
| | | DE-1 | ADULT ED KITCHEN SIN | A | Y | N | Y | Y |
| | | DE-10 | HOUSE KITCHEN SINK | A | Y | 3 | Y | Y |
| | | DE-2 | ADULT ED WM SINK | A | Y | N | Y | Y |
| | | DE-3 | ADULT ED - FOUNTAIN | A | Y | N | Y | Y |
| | | DE-4 | HEAD ST RM3 SINK | A | Y | N | Y | Y |
| | | DE-5 | HEAD ST RM4 SINK | A | Y | N | Y | Y |
| | | DE-6 | HEAD ST RM5 SINK | A | Y | N | Y | Y |
| | | DE-7 | HEAD ST RM6 SINK | A | Y | N | Y | Y |
| | | DE-8 | HEAD ST KITCHEN SINK | A | Y | N | Y | Y |
| | | DE-9 | FACULTY LAV SINK | A | Y | N | Y | Y |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 60409 | WELL 1 | 2 | WELL 1 - DRILLED WEL | A | | | | |

Certified Operator Information

| | | | |
|---|----------------------|--|---------------------------------|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
| Facility Classification: SMALL WATER SYSTEM | | | Certification Expiration |
| Operator Name | Operator Type | Certification(s) | |
| HELMING, TRAVIS | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS III | 9/30/2025 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS III | 9/30/2025 |
| Water System Facility: ENTRY POINT (WSF ID: 00700) | | | |
| Facility Classification: | | | Certification Expiration |
| Operator Name | Operator Type | Certification(s) | |
| HELMING, TRAVIS | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS III | 9/30/2025 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS III | 9/30/2025 |

Contact Information

| | | | | | | |
|---------------------------|----------------|----------------------------|-----------|-----|-----------------|-----------------|
| Name | | Organization | | | Job Title | |
| Mr. Craig M. Gates | | Diamonds In The Rough, LLC | | | Owner/President | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State |
| P.O. Box 130 | | | | | North Windham | CT |
| Zip Code | Business Phone | | Extension | Fax | Mobile Phone | Emergency Phone |
| 06256 | | | | | | Email Address |

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 | | | |
| CT0690622 | EASTCONN | NTNC | 87 | P | GW | | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural | |
| 556 WESTCOTT ROAD | | | | 1 | | | | |
| Towns Served: KILLINGLY | | | | | | | | |
| 860-456-0055 | | | | | | | | |
| Contact Role(s): Legal Contact, Owner | | | | | | | | |
| Name | | | Organization | | | Job Title | | |
| Ms. Kristina Smith | | | Rolgate | | | Property Manager | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| PO Box 130 | | | | | | North Windham | CT | 06256 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-942-1277 | | | | | ksmith@gatesgmcnissan.com | | | |
| Contact Role(s): Administrative Contact | | | | | | | | |

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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

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

End of schedule