

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

|                                  |   |                     |             |            |                |          |              |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID                           | PWS Name                                      | Classification      | Population  | Owner Type | Primary Source |          |              |
| <b>CT0740011</b>                 | <b>AQUARION WATER CO OF CT-LITCHFIELD SYS</b> | C                   | 3,097       | P          | SWP            |          |              |
| Local Address (where applicable) |   | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |   |                     |             |            |                | 1,157    |              |

Towns Served: GOSHEN, LITCHFIELD, TORRINGTON

### Monitoring Requirements

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

#### Chlorine Residual (1012) 3 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                 |

#### Phosphate (as PO4) (1043) 4 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        |                          |                          |

#### Orthophosphate (1044) 4 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        |                          |                          |

#### Asbestos (1094) 3 routine (RT) per nine years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| BRIDLE PATH RD SS (00812)                 | 1/1/21 - 12/31/29        |                          |                          |
| GOSHEN SS (00817)                         | 1/1/21 - 12/31/29        |                          |                          |
| PATCO-RT 202 LITCHFI (00855)              | 1/1/21 - 12/31/29        |                          |                          |

#### Total Alkalinity (1927) 4 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        |                          |                          |

#### Total Haloacetic Acids (2456) 1 routine (RT) per quarter

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| LITCHFIELD TANKS SS (00813)               | 10/1/23 - 12/31/23       | 11/1-11/30               | Complete                 |
|   | 1/1/24 - 3/31/24         | 2/1-2/28                 | Complete                 |
|   | 4/1/24 - 6/30/24         | 5/1-5/31                 |                          |
|   | 7/1/24 - 9/30/24         | 8/1-8/31                 |                          |

#### Total Trihalomethanes (2950) 1 routine (RT) per quarter

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| BIG VALUE MARKET (00856)                  | 10/1/23 - 12/31/23       | 11/1-11/30               | Complete                 |
|   | 1/1/24 - 3/31/24         | 2/1-2/28                 | Complete                 |
|   | 4/1/24 - 6/30/24         | 5/1-5/31                 |                          |
|   | 7/1/24 - 9/30/24         | 8/1-8/31                 |                          |

#### Total Coliform (3100) 3 routine (RT) per month

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

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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 |          |              |
| <b>CT0740011</b>                 | <b>AQUARION WATER CO OF CT-LITCHFIELD SYS</b> | C                   | 3,097       | P          | SWP            |          |              |
| Local Address (where applicable) |   | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |   |                     |             |            |                | 1,157    |              |

Towns Served: GOSHEN, LITCHFIELD, TORRINGTON

### Monitoring Requirements

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

#### Total Coliform (3100) 3 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) 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) 3 routine (RT) per month

| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 11/1/23 - 11/30/23       |                          | Complete                 |
|   | 12/1/23 - 12/31/23       |                          | Complete                 |
|   | 1/1/24 - 1/31/24         |                          | Complete                 |
|   | 2/1/24 - 2/29/24         |                          | Complete                 |
|   | 3/1/24 - 3/31/24         |                          |                          |
|   | 4/1/24 - 4/30/24         |                          |                          |
|   | 5/1/24 - 5/31/24         |                          |                          |
|   | 6/1/24 - 6/30/24         |                          |                          |
|   | 7/1/24 - 7/31/24         |                          |                          |
|   | 8/1/24 - 8/31/24         |                          |                          |
|   | 9/1/24 - 9/30/24         |                          |                          |
|   | 10/1/24 - 10/31/24       |                          |                          |

Water System Facility: **GOSHEN WELLFIELD TP 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> |
|---|--------------------------|--------------------------|--------------------------|
| GOSHEN WELLS EP (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> |
|---|--------------------------|--------------------------|--------------------------|
|---|--------------------------|--------------------------|--------------------------|

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## Water Quality Monitoring and Compliance Schedule

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|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID                           | PWS Name                                      | Classification      | Population  | Owner Type | Primary Source |          |              |
| <b>CT0740011</b>                 | <b>AQUARION WATER CO OF CT-LITCHFIELD SYS</b> | C                   | 3,097       | P          | SWP            |          |              |
| Local Address (where applicable) |   | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |   |                     |             |            |                | 1,157    |              |

Towns Served: GOSHEN, LITCHFIELD, TORRINGTON

### Monitoring Requirements

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

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

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| GOSHEN WELLS EP (3)                       | 1/1/23 - 12/31/23        |                          | Complete                 |
|   | 1/1/24 - 12/31/24        |                          |                          |
|   | 1/1/25 - 12/31/25        |                          |                          |

#### Radionuclides - Gross Alpha, Combined Radium & Uranium (RADA) 1 routine (RT) per six years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| GOSHEN WELLS EP (3)                       | 1/1/20 - 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> |
|---|--------------------------|--------------------------|--------------------------|
| GOSHEN WELLS EP (3)                       | 1/1/23 - 12/31/25        |                          |                          |
|   | 1/1/26 - 12/31/28        |                          |                          |

#### Organic Chemicals (VOCS) 1 routine (RT) per year

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| GOSHEN WELLS EP (3)                       | 1/1/23 - 12/31/23        |                          | Complete                 |
|   | 1/1/24 - 12/31/24        |                          |                          |
|   | 1/1/25 - 12/31/25        |                          |                          |

**Water System Facility: HAMILL WELLFIELD TP ENTRY POINT (WSF ID: 00701)**

#### 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> |
|---|--------------------------|--------------------------|--------------------------|
| EP - HAMILL (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

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| EP - HAMILL (3)                           | 1/1/23 - 12/31/23        |                          | Complete                 |
|   | 1/1/24 - 12/31/24        |                          |                          |
|   | 1/1/25 - 12/31/25        |                          |                          |

#### Radionuclides - Gross Alpha, Combined Radium & Uranium (RADA) 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> |
|---|--------------------------|--------------------------|--------------------------|
| EP - HAMILL (3)                           | 1/1/23 - 12/31/25        |                          |                          |
|   | 1/1/26 - 12/31/28        |                          |                          |

#### 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> |
|---|--------------------------|--------------------------|--------------------------|
| EP - HAMILL (3)                           | 1/1/23 - 12/31/25        |                          |                          |
|   | 1/1/26 - 12/31/28        |                          |                          |

#### Organic Chemicals (VOCS) 1 routine (RT) per year

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| EP - HAMILL (3)                           | 1/1/23 - 12/31/23        |                          | Complete                 |
|   | 1/1/24 - 12/31/24        |                          |                          |

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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 |          |              |
| <b>CT0740011</b>                 | <b>AQUARION WATER CO OF CT-LITCHFIELD SYS</b> | C                   | 3,097       | P          | SWP            |          |              |
| Local Address (where applicable) |   | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |   |                     |             |            |                | 1,157    |              |

Towns Served: GOSHEN, LITCHFIELD, TORRINGTON

## Monitoring Requirements

**Water System Facility: HAMILL WELLFIELD TP ENTRY POINT (WSF ID: 00701)**

|   |                          |                          |                          |                                |
|---|--------------------------|--------------------------|--------------------------|--------------------------------|
| <b>Organic Chemicals (VOCS)</b>           |                          |                          |                          | <b>1 routine (RT) per year</b> |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |                                |
|   | 1/1/25 - 12/31/25        |                          |                          |                                |

**Water System Facility: HAMILL WELL #2 (WSF ID: 1437)**

|   |                          |                          |                          |                                   |
|---|--------------------------|--------------------------|--------------------------|-----------------------------------|
| <b>E. Coli (3014)</b>                     |                          |                          |                          | <b>1 routine (RT) per quarter</b> |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |                                   |
| HAMILL WELL #2 (2)                        | 10/1/23 - 12/31/23       |                          | Complete                 |                                   |
|   | 1/1/24 - 3/31/24         |                          | Complete                 |                                   |
|   | 4/1/24 - 6/30/24         |                          |                          |                                   |
|   | 7/1/24 - 9/30/24         |                          |                          |                                   |

**Water System Facility: GOSHEN WELL #1-2003 (WSF ID: 48130)**

|   |                          |                          |                          |                                   |
|---|--------------------------|--------------------------|--------------------------|-----------------------------------|
| <b>E. Coli (3014)</b>                     |                          |                          |                          | <b>1 routine (RT) per quarter</b> |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |                                   |
| GOSHEN WELL #1-2003 (2)                   | 10/1/23 - 12/31/23       |                          | Complete                 |                                   |
|   | 1/1/24 - 3/31/24         |                          | Complete                 |                                   |
|   | 4/1/24 - 6/30/24         |                          |                          |                                   |
|   | 7/1/24 - 9/30/24         |                          |                          |                                   |

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

**Water System Facility: GOSHEN WELLFIELD TP ENTRY POINT (WSFID: 00700)**

| Analyte                     | Monitoring Requirement (Summary Type)           | Operating Limit           | Samples Req/Month         |
|-----------------------------|---|---------------------------|---------------------------|
| Chlorine                    | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: 0.9 MG/L         | Daily                     |
| <b>Start Date:</b> 7/1/2011 | <b>Compliance History:</b>                      | <b>Operating Limit</b>    | <b>Monitoring</b>         |
|                             | <b>Monitoring Period</b>                        | <b>Compliance Status:</b> | <b>Compliance Status:</b> |
|                             | 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                            |                           |                           |

| Analyte                     | Monitoring Requirement (Summary Type)   | Operating Limit           | Samples Req/Month         |
|-----------------------------|---|---------------------------|---------------------------|
| Orthophosphate              | Entry Point Phosphate Monitoring (PHOS) | Minimum: 0.7 MG/L         | 2                         |
| <b>Start Date:</b> 7/1/2022 | <b>Compliance History:</b>              | <b>Operating Limit</b>    | <b>Monitoring</b>         |
|                             | <b>Monitoring Period</b>                | <b>Compliance Status:</b> | <b>Compliance Status:</b> |
|                             | 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                    |                           |                           |

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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 |          |              |
| <b>CT0740011</b>                 | <b>AQUARION WATER CO OF CT-LITCHFIELD SYS</b> | C                   | 3,097       | P          | SWP            |          |              |
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|                                  |   |                     |             |            |                | 1,157    |              |

Towns Served: GOSHEN, LITCHFIELD, TORRINGTON

**Water System Facility: GOSHEN WELLFIELD TP ENTRY POINT (WSFID: 00700)**

| Analyte                     | Monitoring Requirement (Summary Type)   | Operating Limit            | Samples Req/Month         |
|-----------------------------|---|----------------------------|---------------------------|
| Orthophosphate              | <spaces> ( )                            | Maximum: 1.5 MG/L          | 2                         |
| <b>Start Date:</b> 7/1/2022 |   | <b>Compliance History:</b> | <b>Operating Limit</b>    |
|                             |   | <b>Monitoring Period</b>   | <b>Compliance Status:</b> |
|                             |   | 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                     |
| <b>Start Date:</b> 7/1/2022 |   | <b>Compliance History:</b> | <b>Operating Limit</b>    |
|                             |   | <b>Monitoring Period</b>   | <b>Compliance Status:</b> |
|                             |   | 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                     |
| <b>Start Date:</b> 7/1/2022 |   | <b>Compliance History:</b> | <b>Operating Limit</b>    |
|                             |   | <b>Monitoring Period</b>   | <b>Compliance Status:</b> |
|                             |   | 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: 1.0 MG/L          | 2                         |
| <b>Start Date:</b> 7/1/2022 |   | <b>Compliance History:</b> | <b>Operating Limit</b>    |
|                             |   | <b>Monitoring Period</b>   | <b>Compliance Status:</b> |
|                             |   | 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)          | <spaces> ( )                            | Maximum: 2.5 MG/L          | 2                         |
| <b>Start Date:</b> 7/1/2022 |   | <b>Compliance History:</b> | <b>Operating Limit</b>    |
|                             |   | <b>Monitoring Period</b>   | <b>Compliance Status:</b> |
|                             |   | 11/1/2023 - 11/30/2023     |                           |

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|                                  |   |                     |             |            |                | 1,157    |              |

Towns Served: GOSHEN, LITCHFIELD, TORRINGTON

## Water System Facility: GOSHEN WELLFIELD TP ENTRY POINT (WSFID: 00700)

| Analyte                     | Monitoring Requirement (Summary Type) | Operating Limit            | Samples Req/Month                         |
|-----------------------------|---------------------------------------|----------------------------|---|
| Phosphate (as PO4)          | <spaces> ( )                          | Maximum: 2.5 MG/L          | 2   |
| <b>Start Date:</b> 7/1/2022 |                                       | <b>Compliance History:</b> | <b>Monitoring Compliance Status:</b>      |
|                             |                                       | <b>Monitoring Period</b>   | <b>Operating Limit Compliance Status:</b> |
|                             |                                       | 12/1/2023 - 12/31/2023     |   |
|                             |                                       | 1/1/2024 - 1/31/2024       |   |
|                             |                                       | 2/1/2024 - 2/29/2024       |   |
|                             |                                       | 3/1/2024 - 3/31/2024       |   |

## Water System Facility: HAMILL WELLFIELD TP ENTRY POINT (WSFID: 00701)

| Analyte                     | Monitoring Requirement (Summary Type)           | Operating Limit            | Samples Req/Month                         |
|-----------------------------|---|----------------------------|---|
| Chlorine                    | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: 0.2 MG/L          | Daily                                     |
| <b>Start Date:</b> 5/1/2003 |   | <b>Compliance History:</b> | <b>Monitoring Compliance Status:</b>      |
|                             |   | <b>Monitoring Period</b>   | <b>Operating Limit Compliance Status:</b> |
|                             |   | 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       |   |

| Analyte                     | Monitoring Requirement (Summary Type)   | Operating Limit            | Samples Req/Month                         |
|-----------------------------|---|----------------------------|---|
| Orthophosphate              | Entry Point Phosphate Monitoring (PHOS) | Minimum: 0.7 MG/L          | 2   |
| <b>Start Date:</b> 7/1/2022 |   | <b>Compliance History:</b> | <b>Monitoring Compliance Status:</b>      |
|                             |   | <b>Monitoring Period</b>   | <b>Operating Limit Compliance Status:</b> |
|                             |   | 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       |   |

| Analyte                     | Monitoring Requirement (Summary Type) | Operating Limit            | Samples Req/Month                         |
|-----------------------------|---------------------------------------|----------------------------|---|
| Orthophosphate              | <spaces> ( )                          | Maximum: 1.5 MG/L          | 2   |
| <b>Start Date:</b> 7/1/2022 |                                       | <b>Compliance History:</b> | <b>Monitoring Compliance Status:</b>      |
|                             |                                       | <b>Monitoring Period</b>   | <b>Operating Limit Compliance Status:</b> |
|                             |                                       | 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       |   |

| Analyte                     | Monitoring Requirement (Summary Type) | Operating Limit            | Samples Req/Month                         |
|-----------------------------|---------------------------------------|----------------------------|---|
| pH                          | Entry Point pH Monitoring (PHRD)      | Minimum: 7.2 PH            | Daily                                     |
| <b>Start Date:</b> 7/1/2022 |                                       | <b>Compliance History:</b> | <b>Monitoring Compliance Status:</b>      |
|                             |                                       | <b>Monitoring Period</b>   | <b>Operating Limit Compliance Status:</b> |
|                             |                                       | 11/1/2023 - 11/30/2023     |   |

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

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

|                                  |   |                     |             |            |                |          |              |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID                           | PWS Name                                      | Classification      | Population  | Owner Type | Primary Source |          |              |
| <b>CT0740011</b>                 | <b>AQUARION WATER CO OF CT-LITCHFIELD SYS</b> | C                   | 3,097       | P          | SWP            |          |              |
| Local Address (where applicable) |   | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |   |                     |             |            |                | 1,157    |              |

Towns Served: GOSHEN, LITCHFIELD, TORRINGTON

**Water System Facility: HAMILL WELLFIELD TP ENTRY POINT (WSFID: 00701)**

| Analyte                     | Monitoring Requirement (Summary Type)   | Operating Limit            | Samples Req/Month         |
|-----------------------------|---|----------------------------|---------------------------|
| pH                          | Entry Point pH Monitoring (PHRD)        | Minimum: 7.2 PH            | Daily                     |
| <b>Start Date:</b> 7/1/2022 |   | <b>Compliance History:</b> | <b>Operating Limit</b>    |
|                             |   | <b>Monitoring Period</b>   | <b>Compliance Status:</b> |
|                             |   | 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                     |
| <b>Start Date:</b> 7/1/2022 |   | <b>Compliance History:</b> | <b>Operating Limit</b>    |
|                             |   | <b>Monitoring Period</b>   | <b>Compliance Status:</b> |
|                             |   | 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) | Minimum: 1.0 MG/L          | 2                         |
| <b>Start Date:</b> 7/1/2022 |   | <b>Compliance History:</b> | <b>Operating Limit</b>    |
|                             |   | <b>Monitoring Period</b>   | <b>Compliance Status:</b> |
|                             |   | 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)          | <spaces> ( )                            | Maximum: 2.5 MG/L          | 2                         |
| <b>Start Date:</b> 7/1/2022 |   | <b>Compliance History:</b> | <b>Operating Limit</b>    |
|                             |   | <b>Monitoring Period</b>   | <b>Compliance Status:</b> |
|                             |   | 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     | 3/1/2024   |               |
| SUBMIT CCR TO THE DEPARTMENT       | 6/30/2024  |               |
| SUBMIT CCR CERTIFICATION FORM      | 8/9/2024   |               |
| SUBMIT LEAD SERVICE LINE INVENTORY | 10/16/2024 |               |

*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 |          |              |
|----------------------------------|--|---------------------|-------------|------------|----------------|----------|--------------|
| CT0740011                        | AQUARION WATER CO OF CT-LITCHFIELD SYS | C                   | 3,097       | P          | SWP            |          |              |
| Local Address (where applicable) |  | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |  |                     |             |            |                | 1,157    |              |

Towns Served: GOSHEN, LITCHFIELD, TORRINGTON

## Other Compliance Schedules

| Compliance Schedule Activity   | Due Date   | Achieved Date |
|--------------------------------|------------|---------------|
| 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 | WQP 2 DBPR | Stage |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------|-------|
| 00600                    | DISTRIBUTION SYSTEM   | 00812             | BRIDLE PATH RD SS          | A      | Y                   |                           | Y        |            |       |
|                          |                       | 00812D            | BRIDLE PATH RD SS -        | A      | Y                   |                           |          |            |       |
|                          |                       | 00812U            | BRIDLE PATH RD SS -        | A      | Y                   |                           |          |            |       |
|                          |                       | 00813             | LITCHFIELD TANKS SS        | A      | Y                   |                           |          |            | Y     |
|                          |                       | 00815             | 311 EAST SOUTH ST GO       | A      | Y                   |                           |          |            |       |
|                          |                       | 00816             | TORRINGTON PUMP STA        | A      | Y                   |                           |          |            |       |
|                          |                       | 00817             | GOSHEN SS                  | A      | Y                   |                           | Y        |            |       |
|                          |                       | 00850             | LITCHFIELD W.C. OFFI       | A      | Y                   |                           |          |            |       |
|                          |                       | 00855             | PATCO-RT 202 LITCHFI       | A      | Y                   |                           | Y        |            |       |
|                          |                       | 00856             | BIG VALUE MARKET           | A      | Y                   |                           |          |            | Y     |
|                          |                       | 00860             | BANTAM SHELL-LITCH         | A      | Y                   |                           |          |            |       |
|                          |                       | 00861             | LITCHFIELD HISTORICA       | A      | Y                   |                           |          |            |       |
|                          |                       | 01964             | CIRCLE DRIVE SS            | A      | Y                   |                           |          |            |       |
|                          |                       | 01964D            | CIRCLE DRIVE SS DOWN       | A      |                     |                           |          |            |       |
|                          |                       | 01964U            | CIRCLE DRIVE SS UPST       | A      |                     |                           |          |            |       |
|                          |                       | 4                 | GENERIC DISTRIBUTION       | A      | Y                   |                           |          |            |       |
|                          |                       | DOWNSTREAM        | WITHIN 5 SERVICE CON       | A      |                     |                           |          |            |       |
|                          |                       | PB5283            | 385 SOUTH LITCHFLD         | A      |                     |                           | 1        |            |       |
|                          |                       | PB5287            | 53 PUMPING STA LCD         | A      |                     |                           | 1        |            |       |
|                          |                       | PB5288            | 43 PUMPING STA LCD         | A      |                     |                           | 1        |            |       |
|                          |                       | PB5290            | 339 NORFOLD RD LCD         | A      |                     |                           | 1        |            |       |
|                          |                       | PB5291            | 335 NORFOLK LITCHFLD       | A      |                     |                           | 1        |            |       |
|                          |                       | PB5292            | 329 NORFOLK LITCHFLD       | A      |                     |                           | 1        |            |       |
|                          |                       | PB5294            | 4 BROOK HILL RD            | A      |                     |                           | 1        |            |       |
|                          |                       | PB5298            | 3 HAWTHORNE CT             | A      |                     |                           | 1        |            |       |
|                          |                       | PB5301            | 6 HAWTHORNE COURT          | A      |                     |                           | 1        |            |       |
|                          |                       | PB5312            | 1 EMERSON CT               | A      |                     |                           | 1        |            |       |
|                          |                       | PB5325            | 14 EMERSON COURT           | A      |                     |                           | 1        |            |       |
|                          |                       | PB5327            | 7 MILLAY LITCHFLD          | A      |                     |                           | 1        |            |       |
|                          |                       | PB5329            | 8 MILLAY COURT             | A      |                     |                           | 1        |            |       |
|                          |                       | PB5333            | 10 MILLAY COURT            | A      |                     |                           | 1        |            |       |
|                          |                       | PB5335            | 13 MILLAY COURT            | A      |                     |                           | 1        |            |       |
|                          |                       | PB5336            | 9 MILLAY CT                | A      |                     |                           | 1        |            |       |
|                          |                       | PB5340            | 11 EMERSON CT              | A      |                     |                           | 1        |            |       |
|                          |                       | PB5346            | 4 DICKINSON LITCHFLD       | 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 |          |              |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| <b>CT0740011</b>                 | <b>AQUARION WATER CO OF CT-LITCHFIELD SYS</b> | C                   | 3,097       | P          | SWP            |          |              |
| Local Address (where applicable) |   | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |   |                     |             |            |                | 1,157    |              |

Towns Served: GOSHEN, LITCHFIELD, TORRINGTON

### 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 |
|--------------------------|----------------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
|                          |                                  | PB5347            | 5 DICKINSON CT             | A      |                     | 1                         |          |                  |
|                          |                                  | PB5351            | 8 DICKINSON COURT          | A      |                     | 1                         |          |                  |
|                          |                                  | PB5352            | 18 BROOK HILL ROAD         | A      |                     | 3                         |          |                  |
|                          |                                  | PB5353            | 9 HAWTHORNE CT             | A      |                     | 1                         |          |                  |
|                          |                                  | PB5354            | 19 BROOK HILL ROAD         | A      |                     | 3                         |          |                  |
|                          |                                  | PB5355            | 422 NORTH LAKE ST          | A      |                     | 3                         |          |                  |
|                          |                                  | PB5356            | 138 SOUTH LAKE ST          | A      |                     | 3                         |          |                  |
|                          |                                  | PB5357            | 168 SOUTH LAKE ST          | A      |                     | 3                         |          |                  |
|                          |                                  | PB5358            | 222 MEADOW ST              | A      |                     | 3                         |          |                  |
|                          |                                  | PB5365            | 27 LITCHFLD PND LCD        | A      |                     | 1                         |          |                  |
|                          |                                  | PB5378            | 55 LITCHFLD PND LCD        | A      |                     | 1                         |          |                  |
|                          |                                  | PB5404            | 111 LITCHFLD PND LCD       | A      |                     | 1                         |          |                  |
|                          |                                  | PB5405            | 107 LITCHFLD PND LCD       | A      |                     | 1                         |          |                  |
|                          |                                  | PB5889            | 175 CIRCLE DRIVE           | A      | Y                   | 3                         |          |                  |
|                          |                                  | PB6838            | 26 PUMPING STATION R       | A      |                     | 1                         |          |                  |
|                          |                                  | PB6886            | 101 CIRCLE DRIVE           | I      | Y                   |                           |          |                  |
|                          |                                  | PB6887            | 115 CIRCLE DRIVE           | I      | Y                   |                           |          |                  |
|                          |                                  | PB6888            | 129 CIRCLE DRIVE           | A      |                     | 3                         |          |                  |
|                          |                                  | PB6889            | 175 CIRCLE DRIVE           | A      |                     | 3                         |          |                  |
|                          |                                  | PB6890            | 158 CIRCLE DRIVE           | A      |                     | 3                         |          |                  |
|                          |                                  | PB6891            | 93 CIRCLE DRIVE            | A      |                     | 3                         |          |                  |
|                          |                                  | PB7090            | 101 CIRCLE DRIVE           | A      |                     | 3                         |          |                  |
|                          |                                  | PB7091            | 115 CIRCLE DRIVE           | A      |                     | 3                         |          |                  |
|                          |                                  | PB7142            | 10 EMERSON CT              | A      |                     | 1                         |          |                  |
|                          |                                  | PB7873            | 293 NORTH LAKE ST          | A      |                     | 1                         |          |                  |
|                          |                                  | PB7874            | 325 NORFOLK RD             | A      |                     | 1                         |          |                  |
|                          |                                  | PB7875            | 329 NORFOLK RD             | A      |                     | 1                         |          |                  |
|                          |                                  | PB7876            | 335 NORFOLK RD             | A      |                     | 1                         |          |                  |
|                          |                                  | PB7877            | 833 BANTAM RD              | A      |                     | 1                         |          |                  |
|                          |                                  | PB7878            | 159 SOUTH LAKE ST          | A      |                     | 1                         |          |                  |
|                          |                                  | PB7879            | 283 GOSHEN RD              | A      |                     | 1                         |          |                  |
|                          |                                  | PG5383            | 52 LITCHFLD PND LCD        | A      |                     | 1                         |          |                  |
|                          |                                  | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | GOSHEN WELLFIELD TP ENTRY POINT  | 3                 | GOSHEN WELLS EP            | A      |                     |                           |          |                  |
| 00701                    | HAMILL WELLFIELD TP ENTRY POINT  | 3                 | EP - HAMILL                | A      |                     |                           |          |                  |
| 133                      | GOSHEN WELLFIELD TREATMENT PLANT |                   |                            |        |                     |                           |          |                  |

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

| PWS ID                           | PWS Name                                      | Classification      | Population  | Owner Type | Primary Source |          |              |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| <b>CT0740011</b>                 | <b>AQUARION WATER CO OF CT-LITCHFIELD SYS</b> | C                   | 3,097       | P          | SWP            |          |              |
| Local Address (where applicable) |   | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |   |                     |             |            |                | 1,157    |              |

Towns Served: GOSHEN, LITCHFIELD, TORRINGTON

### 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 |
|--------------------------|--|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 1437                     | HAMILL WELL #2                         | 2                 | HAMILL WELL #2             | A      |                     |                           |          |                  |
| 37090                    | LITCHFIELD TANK                        |                   |                            |        |                     |                           |          |                  |
| 451                      | HAMILL WELLFIELD TREATMENT PLANT       |                   |                            |        |                     |                           |          |                  |
| 46047                    | INTERCONNECTION - TORRINGTON WATER CO. |                   |                            |        |                     |                           |          |                  |
| 48130                    | GOSHEN WELL #1-2003                    | 2                 | GOSHEN WELL #1-2003        | A      |                     |                           |          |                  |
| 60136                    | GOSHEN WELLFIELD TANK                  |                   |                            |        |                     |                           |          |                  |
| 60138                    | HAMILL WELLFIELD TANK #1               |                   |                            |        |                     |                           |          |                  |
| 60140                    | HAMILL WELLFIELD TANK #2               |                   |                            |        |                     |                           |          |                  |
| 60144                    | GOSHEN WELLFIELD BOOSTER PS            |                   |                            |        |                     |                           |          |                  |
| 60146                    | HAMILL WELLFIELD BOOSTER PS            |                   |                            |        |                     |                           |          |                  |

### 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 |
|--------------------|-------------------|--|--------------------------|
| COYLE, BRIAN       | CHIEF OPERATOR    | DISTRIBUTION SYSTEM OPERATOR - CLASS III   | 6/30/2024                |
|                    |                   | WATER TREATMENT PLANT OPERATOR - CLASS III | 12/31/2025               |
| PASSECK, PETER     | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS III   | 9/30/2025                |
|                    |                   | WATER TREATMENT PLANT OPERATOR - CLASS IV  | 6/30/2024                |
| LAGO, ANTHONY V.   | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS III | 6/30/2025                |
|                    |                   | DISTRIBUTION SYSTEM OPERATOR - CLASS III   | 6/30/2025                |
| OSBORN, BRADLEY E. | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR IN TRAINING | 9/30/2026                |
|                    |                   | DISTRIBUTION SYSTEM OPERATOR - CLASS III   | 9/30/2026                |

**Water System Facility: GOSHEN WELLFIELD TREATMENT PLANT (WSF ID: 133)**

**Facility Classification:** CLASS 1 TREATMENT PLANT

| Operator Name      | Operator Type     | Certification(s)                           | Certification Expiration |
|--------------------|-------------------|--|--------------------------|
| PASSECK, PETER     | CHIEF OPERATOR    | WATER TREATMENT PLANT OPERATOR - CLASS IV  | 6/30/2024                |
|                    |                   | DISTRIBUTION SYSTEM OPERATOR - CLASS III   | 9/30/2025                |
| LAGO, ANTHONY V.   | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS III | 6/30/2025                |
|                    |                   | DISTRIBUTION SYSTEM OPERATOR - CLASS III   | 6/30/2025                |
| COYLE, BRIAN       | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS III | 12/31/2025               |
|                    |                   | DISTRIBUTION SYSTEM OPERATOR - CLASS III   | 6/30/2024                |
| POUDIN, DON A.     | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS III | 6/30/2025                |
|                    |                   | DISTRIBUTION SYSTEM OPERATOR - CLASS I     | 6/30/2024                |
| OSBORN, BRADLEY E. | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR IN TRAINING | 9/30/2026                |
|                    |                   | DISTRIBUTION SYSTEM OPERATOR - CLASS III   | 9/30/2026                |

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

|                                  |   |                     |              |            |                |          |              |
|----------------------------------|---|---------------------|--------------|------------|----------------|----------|--------------|
| PWS ID                           | PWS Name                                      | Classification      | Population   | Owner Type | Primary Source |          |              |
| <b>CT0740011</b>                 | <b>AQUARION WATER CO OF CT-LITCHFIELD SYS</b> | <b>C</b>            | <b>3,097</b> | <b>P</b>   | <b>SWP</b>     |          |              |
| Local Address (where applicable) |   | Service Connections | Residential  | Commercial | Industrial     | Combined | Agricultural |
|                                  |   |                     |              |            |                | 1,157    |              |

Towns Served: GOSHEN, LITCHFIELD, TORRINGTON

### Certified Operator Information

Water System Facility: **HAMILL WELLFIELD TREATMENT PLANT (WSF ID: 451)**

Facility Classification: CLASS 2 TREATMENT PLANT

| Operator Name      | Operator Type     | Certification(s)                           | Certification Expiration |
|--------------------|-------------------|--|--------------------------|
| PASSECK, PETER     | CHIEF OPERATOR    | WATER TREATMENT PLANT OPERATOR - CLASS IV  | 6/30/2024                |
|                    |                   | DISTRIBUTION SYSTEM OPERATOR - CLASS III   | 9/30/2025                |
| LAGO, ANTHONY V.   | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS III | 6/30/2025                |
|                    |                   | DISTRIBUTION SYSTEM OPERATOR - CLASS III   | 6/30/2025                |
| COYLE, BRIAN       | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS III   | 6/30/2024                |
|                    |                   | WATER TREATMENT PLANT OPERATOR - CLASS III | 12/31/2025               |
| POUDIN, DON A.     | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I     | 6/30/2024                |
|                    |                   | WATER TREATMENT PLANT OPERATOR - CLASS III | 6/30/2025                |
| OSBORN, BRADLEY E. | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS III   | 9/30/2026                |
|                    |                   | WATER TREATMENT PLANT OPERATOR IN TRAINING | 9/30/2026                |

### Contact Information

|                          |           |                          |              |                 |                          |       |          |
|--------------------------|-----------|--------------------------|--------------|-----------------|--------------------------|-------|----------|
| Name                     |           | Organization             |              |                 | Job Title                |       |          |
| <b>Mr. John P. Walsh</b> |           | Aquarion Water Company   |              |                 | Vice President           |       |          |
| Mailing Address Line One |           | Mailing Address Line Two |              |                 | City                     | State | Zip Code |
| 835 Main Street          |           | Mail Stop 700            |              |                 | Bridgeport               | CT    | 06604    |
| Business Phone           | Extension | Fax                      | Mobile Phone | Emergency Phone | Email Address            |       |          |
| 203-337-5852             |           | 203-337-5938             |              | 781-413-6175    | jwalsh@aquarionwater.com |       |          |

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

|                              |           |                              |              |                 |                           |       |          |
|------------------------------|-----------|------------------------------|--------------|-----------------|---------------------------|-------|----------|
| Name                         |           | Organization                 |              |                 | Job Title                 |       |          |
| <b>Mr. Robert J. Ulrich</b>  |           | Aquarion Water Company of Ct |              |                 | Vp-Supply & Utility       |       |          |
| Mailing Address Line One     |           | Mailing Address Line Two     |              |                 | City                      | State | Zip Code |
| Aquarion Water Company of Ct |           | 505 Huntington St.           |              |                 | Shelton                   | CT    | 06484    |
| Business Phone               | Extension | Fax                          | Mobile Phone | Emergency Phone | Email Address             |       |          |
| 203-926-4320                 |           | 203-929-5297                 |              | 203-395-3205    | rulrich@aquarionwater.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**

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

|                                  |                           |                     |             |            |                |          |              |
|----------------------------------|---------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID                           | PWS Name                  | Classification      | Population  | Owner Type | Primary Source |          |              |
| <b>CT0740301</b>                 | <b>FERNWOOD REST HOME</b> | C                   | 107         | P          | GW             |          |              |
| Local Address (where applicable) |                           | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
| 400 TORRINGTON ROAD              |                           |                     | 2           | 9          |                |          |              |
| Towns Served: LITCHFIELD         |                           |                     |             |            |                |          |              |

### 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 | 1/1/22 - 12/31/30        |                          |                          |

**Total Coliform (3100)** **2 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 | 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 | 1/1/22 - 12/31/24        | 6/1-9/30                 |                          |
|   | 1/1/25 - 12/31/27        | 6/1-9/30                 |                          |

**Physical Parameters (PPS)** **2 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)**

**Net Gross Alpha (4000)** **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        |                          |                          |

**Uranium (4006)** **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        |                          |                          |

**Combined Radium-226/228 (4010)** **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        |                          |                          |

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

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

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

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

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

|                                  |                           |                     |             |            |                |          |              |
|----------------------------------|---------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID                           | PWS Name                  | Classification      | Population  | Owner Type | Primary Source |          |              |
| <b>CT0740301</b>                 | <b>FERNWOOD REST HOME</b> | C                   | 107         | P          | GW             |          |              |
| Local Address (where applicable) |                           | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
| 400 TORRINGTON ROAD              |                           |                     | 2           | 9          |                |          |              |
| Towns Served: LITCHFIELD         |                           |                     |             |            |                |          |              |

### Monitoring Requirements

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

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

|   |                          |                                       |                          |
|---|--------------------------|---------------------------------------|--------------------------|
| <b>Organic Chemicals (VOCS)</b>           |                          | <b>1 routine (RT) per three years</b> |                          |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i>              | <i>Compliance Status</i> |
| ENTRY POINT (3)                           | 1/1/23 - 12/31/25        |                                       |                          |
|   | 1/1/26 - 12/31/28        |                                       |                          |

**Water System Facility: ENTRY POINT- REST HOME EMERGENCY ONLY (WSF ID: 00701)**

|   |                          |                                       |                          |
|---|--------------------------|---------------------------------------|--------------------------|
| <b>Inorganic Chemicals (IOCS)</b>         |                          | <b>1 routine (RT) per three years</b> |                          |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i>              | <i>Compliance Status</i> |
| ENTRY POINT- EMERGENCY (3)                | 1/1/23 - 12/31/25        |                                       |                          |
|   | 1/1/26 - 12/31/28        |                                       |                          |

|   |                          |                                |                          |
|---|--------------------------|--------------------------------|--------------------------|
| <b>Nitrate And Nitrite (NOX)</b>          |                          | <b>1 routine (RT) per year</b> |                          |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |
| ENTRY POINT- EMERGENCY (3)                | 1/1/23 - 12/31/23        |                                | Complete                 |
|   | 1/1/24 - 12/31/24        |                                |                          |
|   | 1/1/25 - 12/31/25        |                                |                          |

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

|   |                          |                                       |                          |
|---|--------------------------|---------------------------------------|--------------------------|
| <b>Organic Chemicals (VOCS)</b>           |                          | <b>1 routine (RT) per three years</b> |                          |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i>              | <i>Compliance Status</i> |
| ENTRY POINT- EMERGENCY (3)                | 1/1/23 - 12/31/25        |                                       |                          |
|   | 1/1/26 - 12/31/28        |                                       |                          |

### Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|-------------------------------------|-----------------|----------------------|
| SUBMIT CCR TO THE DEPARTMENT        | 6/30/2024       |                      |
| SUBMIT CCR CERTIFICATION FORM       | 8/9/2024        |                      |
| SUBMIT LEAD SERVICE LINE INVENTORY  | 10/16/2024      |                      |
| COMPLETE INITIAL LSL INVENTORY      | 10/16/2024      |                      |
| CROSS CONNECTION SURVEY REPORT      | 3/1/2025        |                      |

### Public Notification Requirements

| <i>Violation/Situation</i>                            | <i>Compliance Period</i> | <i>Notice Tier</i> | <i>Public Notification</i> |                  | <i>PN Certification</i> |                 |
|---|--------------------------|--------------------|----------------------------|------------------|-------------------------|-----------------|
|   |                          |                    | <i>Required</i>            | <i>Performed</i> | <i>Due to DPH</i>       | <i>Received</i> |
| Total Coliform M&R Violation                          | 10/1/22 - 12/31/22       | 3                  | 5/1/2024                   |                  | 5/11/2024               |                 |
| Physical Parameters M&R Violation                     | 10/1/22 - 12/31/22       | 3                  | 5/1/2024                   |                  | 5/11/2024               |                 |
| Pesticides, Herbicides and PCBs - Phase M&R Violation | 1/1/20 - 12/31/22        | 3                  | 5/1/2024                   |                  | 5/11/2024               |                 |

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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 |          |              |
|----------------------------------|--------------------|---------------------|-------------|------------|----------------|----------|--------------|
| CT0740301                        | FERNWOOD REST HOME | C                   | 107         | P          | GW             |          |              |
| Local Address (where applicable) |                    | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
| 400 TORRINGTON ROAD              |                    |                     | 2           | 9          |                |          |              |

Towns Served: LITCHFIELD

### Public Notification Requirements

| Violation/Situation                                   | Compliance Period | Notice Tier | Public Notification |           | PN Certification |          |
|---|-------------------|-------------|---------------------|-----------|------------------|----------|
|   |                   |             | Required            | Performed | Due to DPH       | Received |
| Pesticides, Herbicides and PCBs - Phase M&R Violation | 1/1/20 - 12/31/22 | 3           | 5/1/2024            |           | 5/11/2024        |          |
| Inorganic Chemicals M&R Violation                     | 1/1/20 - 12/31/22 | 3           | 5/1/2024            |           | 5/11/2024        |          |
| Inorganic Chemicals M&R Violation                     | 1/1/20 - 12/31/22 | 3           | 5/1/2024            |           | 5/11/2024        |          |

### Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility                 | Sampling Point ID    | Sampling Point Description | Status | Total Coliform | Lead and Copper | Asbestos | Stage WQP 2 DBPR |
|--------------------------|---------------------------------------|----------------------|----------------------------|--------|----------------|-----------------|----------|------------------|
|                          |                                       |                      |                            |        | Rule           | Rule Tier       |          |                  |
| 00600                    | DISTRIBUTION SYSTEM                   | 383 TORRING          | GENERATED BY BATCH         | A      | Y              |                 |          |                  |
|                          |                                       | 387 TORRING          | GENERATED BY BATCH         | A      | Y              |                 |          |                  |
|                          |                                       | 394 TORRING          | GENERATED BY BATCH         | A      | Y              |                 |          |                  |
|                          |                                       | 4                    | DISTRIBUTION SYSTEM        | A      | Y              |                 |          |                  |
|                          |                                       | 400 TORRING          | GENERATED BY BATCH         | A      | Y              |                 |          |                  |
|                          |                                       | AC001                | 394-ATKINS KIT. SINK       | A      | Y              | N               |          |                  |
|                          |                                       | CC001                | 383-NW COOP BATH           | A      | Y              | 2               |          |                  |
|                          |                                       | DOWNSTREAM           | WITHIN 5 SERVICE CON       | A      |                |                 |          |                  |
|                          |                                       | FR001                | REST HOME-BLUE BATH        | A      | Y              | N               |          |                  |
|                          |                                       | FR002                | REST HOME-KIT. SINK        | A      | Y              | N               |          |                  |
|                          |                                       | RG001                | 387-REN.GIFTSHOPBATH       | A      | Y              | 2               |          |                  |
|                          |                                       | RT001                | RIPETOMATO KIT. SINK       | A      | Y              | 2               |          |                  |
|                          | UPSTREAM                              | WITHIN 5 SERVICE CON | A                          |        |                |                 |          |                  |
| 00700                    | ENTRY POINT                           | 3                    | ENTRY POINT                | A      |                |                 |          |                  |
| 00701                    | ENTRY POINT- REST HOME EMERGENCY ONLY | 3                    | ENTRY POINT- EMERGEN       | A      |                |                 |          |                  |
| 134                      | WELL# 3- REST HOME EMERGENCY ONLY     | 2                    | WELL 3                     | A      |                |                 |          |                  |
| 135                      | WELL# 2- REST HOME EMERGENCY ONLY     | 2                    | WELL 2                     | A      |                |                 |          |                  |
| 137                      | WELL# 1                               | 2                    | WELL 1                     | A      |                |                 |          |                  |

### Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

| Operator Name       | Operator Type  | Certification(s)                         | Certification Expiration |
|---------------------|----------------|--|--------------------------|
| TOMASCAK, THOMAS S. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I   | 12/31/2024               |
|                     |                | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2025                |

### Contact Information

| Name                     |  | Organization             |  | Job Title  |       |          |
|--------------------------|--|--------------------------|--|------------|-------|----------|
| Fernwood Rest Home Inc   |  |                          |  |            |       |          |
| Mailing Address Line One |  | Mailing Address Line Two |  | City       | State | Zip Code |
| P. O. Box 548            |  | 400 Torrington Rd        |  | Litchfield | CT    | 06759    |

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

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

| PWS ID           | PWS Name                  | Classification | Population | Owner Type | Primary Source |
|------------------|---------------------------|----------------|------------|------------|----------------|
| <b>CT0740301</b> | <b>FERNWOOD REST HOME</b> | <b>C</b>       | <b>107</b> | <b>P</b>   | <b>GW</b>      |

| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
|----------------------------------|---------------------|-------------|------------|------------|----------|--------------|
| 400 TORRINGTON ROAD              |                     | 2           | 9          |            |          |              |

Towns Served: LITCHFIELD

| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address |
|----------------|-----------|-----|--------------|-----------------|---------------|
| 860-567-4219   |           |     |              |                 |               |

Contact Role(s): **Owner**

| Name                    | Organization | Job Title |
|-------------------------|--------------|-----------|
| <b>Mr. James Murphy</b> |              |           |

| Mailing Address Line One | Mailing Address Line Two | City       | State | Zip Code |
|--------------------------|--------------------------|------------|-------|----------|
| 400 Torrington Rd        |                          | Litchfield | CT    | 06759    |

| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address |
|----------------|-----------|-----|--------------|-----------------|---------------|
| 860-567-9558   |           |     |              | 860-605-3998    |               |

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

| Name                  | Organization       | Job Title      |
|-----------------------|--------------------|----------------|
| <b>Nicole Bonanni</b> | Fernwood Rest Home | Office Manager |

| Mailing Address Line One | Mailing Address Line Two | City       | State | Zip Code |
|--------------------------|--------------------------|------------|-------|----------|
| 400 Torrington Road      | P.O. Box 548             | Litchfield | CT    | 06759    |

| Business Phone | Extension | Fax          | Mobile Phone | Emergency Phone | Email Address            |
|----------------|-----------|--------------|--------------|-----------------|--------------------------|
| 860-567-9558   | 1002      | 860-567-9593 |              |                 | nbonanni@fernwoodrch.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***



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

|                                  |                       |                     |             |            |                |          |              |
|----------------------------------|-----------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID                           | PWS Name              | Classification      | Population  | Owner Type | Primary Source |          |              |
| <b>CT0743011</b>                 | <b>BANTAM VILLAGE</b> | C                   | 96          | P          | GW             |          |              |
| Local Address (where applicable) |                       | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |                       |                     | 49          |            |                |          |              |

Towns Served: LITCHFIELD

## Monitoring Requirements

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

| <b>Chlorine Residual (1012)</b>                 |                          | <b>1 routine (RT) per month</b>      |                          |
|---|--------------------------|--------------------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i>             | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points | 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       |                                      |                          |
| <b>Asbestos (1094)</b>                          |                          | <b>1 routine (RT) per nine years</b> |                          |
| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i>             | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points | 1/1/22 - 12/31/30        |                                      |                          |
| <b>Total Haloacetic Acids (2456)</b>            |                          | <b>1 routine (RT) per year</b>       |                          |
| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i>             | <i>Compliance Status</i> |
| BLDG 52 APT-4A (BV005)                          | 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                             |                          |
| <b>Total Trihalomethanes (2950)</b>             |                          | <b>1 routine (RT) per year</b>       |                          |
| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i>             | <i>Compliance Status</i> |
| OFFICE KITCHEN SINK (BV001)                     | 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                             |                          |
| <b>Total Coliform (3100)</b>                    |                          | <b>3 repeat (RP) per period</b>      |                          |
| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i>             | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points | 10/3/23 - 10/8/23        |                                      | Complete                 |
| <b>Total Coliform (3100)</b>                    |                          | <b>1 routine (RT) per month</b>      |                          |
| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i>             | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points | 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         |                                      |                          |

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

|                                  |                       |                     |             |            |                |          |              |
|----------------------------------|-----------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID                           | PWS Name              | Classification      | Population  | Owner Type | Primary Source |          |              |
| <b>CT0743011</b>                 | <b>BANTAM VILLAGE</b> | C                   | 96          | P          | GW             |          |              |
| Local Address (where applicable) |                       | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |                       |                     | 49          |            |                |          |              |

Towns Served: LITCHFIELD

### Monitoring Requirements

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

| <b>Total Coliform (3100)</b>              |                          | <b>1 routine (RT) per month</b> |                          |  |  |
|---|--------------------------|---------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i>        | <i>Compliance Status</i> |  |  |
|   | 7/1/24 - 7/31/24         |                                 |                          |  |  |
|   | 8/1/24 - 8/31/24         |                                 |                          |  |  |
|   | 9/1/24 - 9/30/24         |                                 |                          |  |  |
|   | 10/1/24 - 10/31/24       |                                 |                          |  |  |

| <b>Lead And Copper (PBCU)</b>                   |                          | <b>5 routine (RT) per three years</b> |                          |  |  |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i>              | <i>Compliance Status</i> |  |  |
| Select from Inventory of Active Sampling Points | 1/1/23 - 12/31/25        | 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                              |                          |  |  |

| <b>Physical Parameters (PPS)</b>                |                          | <b>1 routine (RT) per month</b> |                          |  |  |
|---|--------------------------|---------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i>        | <i>Compliance Status</i> |  |  |
| Select from Inventory of Active Sampling Points | 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)**

| <b>Nitrate (1040)</b>                     |                          | <b>1 routine (RT) per quarter</b> |                          |  |  |
|---|--------------------------|-----------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i>          | <i>Compliance Status</i> |  |  |
| 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         |                                   |                          |  |  |

| <b>Nitrite (1041)</b>                     |                          | <b>1 routine (RT) per year</b> |                          |  |  |
|---|--------------------------|--------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i>       | <i>Compliance Status</i> |  |  |
| ENTRY POINT (3)                           | 1/1/23 - 12/31/23        |                                | Complete                 |  |  |
|   | 1/1/24 - 12/31/24        |                                | Complete                 |  |  |
|   | 1/1/25 - 12/31/25        |                                |                          |  |  |

| <b>Net Gross Alpha (4000)</b>             |                          | <b>1 routine (RT) per three years</b> |                          |  |  |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i>              | <i>Compliance Status</i> |  |  |
| ENTRY POINT (3)                           | 1/1/23 - 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 |          |              |
| <b>CT0743011</b>                 | <b>BANTAM VILLAGE</b> | C                   | 96          | P          | GW             |          |              |
| Local Address (where applicable) |                       | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |                       |                     | 49          |            |                |          |              |

Towns Served: LITCHFIELD

## Monitoring Requirements

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

| <b>Net Gross Alpha (4000)</b>                                    | <b>1 routine (RT) per three years</b> |                          |                          |
|--|---------------------------------------|--------------------------|--------------------------|
| <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                     |                          |                          |
| <b>Uranium (4006)</b>  | <b>1 routine (RT) per three years</b> |                          |                          |
| <i>Sampling Point (Sampling Point ID)</i>                        | <i>Monitoring Period</i>              | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 1/1/23 - 12/31/25                     |                          |                          |
|  | 1/1/26 - 12/31/28                     |                          |                          |
| <b>Combined Radium-226/228 (4010)</b>                            | <b>1 routine (RT) per three years</b> |                          |                          |
| <i>Sampling Point (Sampling Point ID)</i>                        | <i>Monitoring Period</i>              | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 1/1/23 - 12/31/25                     |                          |                          |
|  | 1/1/26 - 12/31/28                     |                          |                          |
| <b>Inorganic Chemicals (IOCS)</b>                                | <b>1 routine (RT) per three years</b> |                          |                          |
| <i>Sampling Point (Sampling Point ID)</i>                        | <i>Monitoring Period</i>              | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 1/1/23 - 12/31/25                     |                          |                          |
|  | 1/1/26 - 12/31/28                     |                          |                          |
| <b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b> | <b>1 routine (RT) per three years</b> |                          |                          |
| <i>Sampling Point (Sampling Point ID)</i>                        | <i>Monitoring Period</i>              | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 1/1/23 - 12/31/25                     |                          |                          |
|  | 1/1/26 - 12/31/28                     |                          |                          |
| <b>Organic Chemicals (VOCS)</b>                                  | <b>1 routine (RT) per three years</b> |                          |                          |
| <i>Sampling Point (Sampling Point ID)</i>                        | <i>Monitoring Period</i>              | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3)  | 1/1/23 - 12/31/25                     |                          |                          |
|  | 1/1/26 - 12/31/28                     |                          |                          |

Water System Facility: **WELL 1 (WSF ID: 1018)**

| <b>E. Coli (3014)</b>                     | <b>1 triggered (TG) per period</b> |                          |                          |
|---|------------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i>           | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 1 (2)                                | 10/2/23 - 10/8/23                  |                          | Complete                 |

Water System Facility: **WELL 2 (WSF ID: 1019)**

| <b>E. Coli (3014)</b>                     | <b>1 triggered (TG) per period</b> |                          |                          |
|---|------------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i>           | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 2 (2)                                | 10/2/23 - 10/8/23                  |                          | Complete                 |

## 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 RDC (EPRD)                | Minimum: 0.55 MG/L        | Daily                     |
| <b>Start Date:</b> 8/1/2016 | <b>Compliance History:</b>            | <b>Operating Limit</b>    | <b>Monitoring</b>         |
|                             | <b>Monitoring Period</b>              | <b>Compliance Status:</b> | <b>Compliance Status:</b> |
|                             | 11/1/2023 - 11/30/2023                | Y                         |                           |
|                             | 12/1/2023 - 12/31/2023                | Y                         |                           |

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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 |          |              |
| <b>CT0743011</b>                 | <b>BANTAM VILLAGE</b> | C                   | 96          | P          | GW             |          |              |
| Local Address (where applicable) |                       | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |                       |                     | 49          |            |                |          |              |

Towns Served: LITCHFIELD

## Water System Facility: ENTRY POINT (WSFID: 00700)

| Analyte                     | Monitoring Requirement (Summary Type) | Operating Limit            | Samples Req/Month                         |
|-----------------------------|---------------------------------------|----------------------------|---|
| Chlorine                    | Entry Point RDC (EPRD)                | Minimum: 0.55 MG/L         | Daily                                     |
| <b>Start Date:</b> 8/1/2016 |                                       | <b>Compliance History:</b> | <b>Monitoring Compliance Status:</b>      |
|                             |                                       | <b>Monitoring Period</b>   | <b>Operating Limit Compliance Status:</b> |
|                             |                                       | 1/1/2024 - 1/31/2024       | Y   |
|                             |                                       | 2/1/2024 - 2/29/2024       | Y   |
|                             |                                       | 3/1/2024 - 3/31/2024       |   |

## Other Compliance Schedules

| Compliance Schedule Activity       | Due Date   | Achieved Date |
|------------------------------------|------------|---------------|
| RESPOND TO SANITARY SURVEY         | 7/31/2021  |               |
| SUBMIT CCR TO THE DEPARTMENT       | 6/30/2024  |               |
| SUBMIT CCR CERTIFICATION FORM      | 8/9/2024   |               |
| SUBMIT LEAD SERVICE LINE INVENTORY | 10/16/2024 |               |
| COMPLETE INITIAL LSL INVENTORY     | 10/16/2024 |               |
| CROSS CONNECTION SURVEY REPORT     | 3/1/2026   |               |

## Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600                    | DISTRIBUTION SYSTEM   | 4                 | DISTRIBUTION SYSTEM        | A      | Y                   |                           |          |                  |
|                          |                       | BV001             | OFFICE KITCHEN SINK        | A      | Y                   | N                         |          | Y                |
|                          |                       | BV002             | BLDG 42 APT-1A             | A      | Y                   | N                         |          |                  |
|                          |                       | BV003             | BLDG 58 APT-6B             | A      | Y                   | N                         |          |                  |
|                          |                       | BV004             | BLDG 54 APT-5A             | A      | Y                   | N                         |          |                  |
|                          |                       | BV005             | BLDG 52 APT-4A             | A      | Y                   | N                         |          | Y                |
|                          |                       | BV006             | BLDG 48 COMM RM            | A      |                     | N                         |          |                  |
|                          |                       | DOWNSTREAM        | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
|                          |                       | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | ENTRY POINT           | 3                 | ENTRY POINT                | A      |                     |                           |          |                  |
| 1018                     | WELL 1                | 2                 | WELL 1                     | A      |                     |                           |          |                  |
| 1019                     | WELL 2                | 2                 | WELL 2                     | A      |                     |                           |          |                  |
| 48208                    | ATMOSPHERIC TANK      |                   |                            |        |                     |                           |          |                  |
| 48667                    | TREATMENT PLANT       |                   |                            |        |                     |                           |          |                  |

## Certified Operator Information

### Water System Facility: TREATMENT PLANT (WSF ID: 48667)

**Facility Classification:** CLASS 1 TREATMENT PLANT

| Operator Name       | Operator Type  | Certification(s)                         | Certification Expiration |
|---------------------|----------------|--|--------------------------|
| TOMASCAK, THOMAS S. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I   | 12/31/2024               |
|                     |                | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2025                |

*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 |          |              |
| <b>CT0743011</b>                 | <b>BANTAM VILLAGE</b> | <b>C</b>            | <b>96</b>   | <b>P</b>   | <b>GW</b>      |          |              |
| Local Address (where applicable) |                       | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |                       | 49                  |             |            |                |          |              |

Towns Served: LITCHFIELD

## Contact Information

|                                   |           |              |                          |                 |               |       |          |
|-----------------------------------|-----------|--------------|--------------------------|-----------------|---------------|-------|----------|
| Name                              |           | Organization |                          |                 | Job Title     |       |          |
| <b>Estate of Raymond Daddario</b> |           |              |                          |                 |               |       |          |
| Mailing Address Line One          |           |              | Mailing Address Line Two |                 | City          | State | Zip Code |
| 110 Mountain Road                 |           |              |                          |                 | Suffield      | CT    | 06078    |
| Business Phone                    | Extension | Fax          | Mobile Phone             | Emergency Phone | Email Address |       |          |
| 860-668-5342                      |           |              |                          |                 |               |       |          |

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

|                           |           |                                |                          |                 |                  |       |          |
|---------------------------|-----------|--------------------------------|--------------------------|-----------------|------------------|-------|----------|
| Name                      |           | Organization                   |                          |                 | Job Title        |       |          |
| <b>Mr. James Daddario</b> |           | Residential Management Coporat |                          |                 | Regional Manager |       |          |
| Mailing Address Line One  |           |                                | Mailing Address Line Two |                 | City             | State | Zip Code |
| 110 Mountain Rd           |           |                                |                          |                 | Suffield         | CT    | 06078    |
| Business Phone            | Extension | Fax                            | Mobile Phone             | Emergency Phone | Email Address    |       |          |
| 860-668-5342              | 723       | 860-668-9008                   |                          | 860-593-6325    | james@resman.net |       |          |

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

**Please note the following:**

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

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

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

**End of schedule**

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

|                                  |                            |                     |             |            |                |          |              |
|----------------------------------|----------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID                           | PWS Name                   | Classification      | Population  | Owner Type | Primary Source |          |              |
| <b>CT0745093</b>                 | <b>TOUCHSTONE N.A.F.I.</b> | C                   | 43          | P          | GW             |          |              |
| Local Address (where applicable) |                            | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |                            |                     |             |            |                | 7        |              |

Towns Served: LITCHFIELD

### 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 | 1/1/19 - 12/31/27        |                          |                          |

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

| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 10/26/23 - 10/31/23      |                          | Complete                 |
|   | 11/22/23 - 11/27/23      |                          | Complete                 |
|   | 12/7/23 - 12/12/23       |                          | Complete                 |

**Total Coliform (3100) 1 routine (RT) per month**

| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| Select from Inventory of Active Sampling Points | 11/1/23 - 11/30/23       |                          | Complete                 |
|   | 12/1/23 - 12/31/23       |                          | Complete                 |
|   | 1/1/24 - 1/31/24         |                          | Complete                 |
|   | 2/1/24 - 2/29/24         |                          | Complete                 |
|   | 3/1/24 - 3/31/24         |                          |                          |
|   | 4/1/24 - 4/30/24         |                          |                          |
|   | 5/1/24 - 5/31/24         |                          |                          |
|   | 6/1/24 - 6/30/24         |                          |                          |
|   | 7/1/24 - 7/31/24         |                          |                          |
|   | 8/1/24 - 8/31/24         |                          |                          |
|   | 9/1/24 - 9/30/24         |                          |                          |
|   | 10/1/24 - 10/31/24       |                          |                          |

**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 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         |                          |                          |

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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 |          |              |
| <b>CT0745093</b>                 | <b>TOUCHSTONE N.A.F.I.</b> | C                   | 43          | P          | GW             |          |              |
| Local Address (where applicable) |                            | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |                            |                     |             |            | 7              |          |              |

Towns Served: LITCHFIELD

### Monitoring Requirements

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

|   |  |
|---|--|
| <b>Physical Parameters (PPS)</b>          | <b>1 routine (RT) per month</b>  |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> <i>Collection Period</i> <i>Compliance Status</i> |
|   | 10/1/24 - 10/31/24   |

**Water System Facility: ENTRY POINT - MAIN PUMP HOUSE (WSF ID: 00701)**

|   |  |
|---|--|
| <b>Net Gross Alpha (4000)</b>             | <b>1 routine (RT) per three years</b>                                      |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> <i>Collection Period</i> <i>Compliance Status</i> |
| EP - MAIN PUMP HOUSE (3)                  | 1/1/23 - 12/31/25  |
|   | 1/1/26 - 12/31/28  |

|   |  |
|---|--|
| <b>Uranium (4006)</b>                     | <b>1 routine (RT) per three years</b>                                      |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> <i>Collection Period</i> <i>Compliance Status</i> |
| EP - MAIN PUMP HOUSE (3)                  | 1/1/23 - 12/31/25  |
|   | 1/1/26 - 12/31/28  |

|   |  |
|---|--|
| <b>Combined Radium-226/228 (4010)</b>     | <b>1 routine (RT) per three years</b>                                      |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> <i>Collection Period</i> <i>Compliance Status</i> |
| EP - MAIN PUMP HOUSE (3)                  | 1/1/23 - 12/31/25  |
|   | 1/1/26 - 12/31/28  |

|   |  |
|---|--|
| <b>Inorganic Chemicals (IOCS)</b>         | <b>1 routine (RT) per three years</b>                                      |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> <i>Collection Period</i> <i>Compliance Status</i> |
| EP - MAIN PUMP HOUSE (3)                  | 1/1/23 - 12/31/25  |
|   | 1/1/26 - 12/31/28  |

|   |  |
|---|--|
| <b>Nitrate And Nitrite (NOX)</b>          | <b>1 routine (RT) per year</b>   |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> <i>Collection Period</i> <i>Compliance Status</i> |
| EP - MAIN PUMP HOUSE (3)                  | 1/1/23 - 12/31/23  |
|   | 1/1/24 - 12/31/24  |
|   | 1/1/25 - 12/31/25  |
|   | Complete   |
|   | Complete   |

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

|   |  |
|---|--|
| <b>Organic Chemicals (VOCS)</b>           | <b>1 routine (RT) per year</b>   |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> <i>Collection Period</i> <i>Compliance Status</i> |
| EP - MAIN PUMP HOUSE (3)                  | 1/1/23 - 12/31/23  |
|   | 1/1/24 - 12/31/24  |
|   | 1/1/25 - 12/31/25  |

**Water System Facility: WELL 3 (WSF ID: 53197)**

|   |  |
|---|--|
| <b>E. Coli (3014)</b>                     | <b>1 triggered (TG) per period</b>   |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> <i>Collection Period</i> <i>Compliance Status</i> |
| WELL 3 (2)                                | 10/25/23 - 10/31/23  |
|   | 11/21/23 - 11/27/23  |
|   | 12/6/23 - 12/12/23   |
|   | Complete   |
|   | Complete   |
|   | Complete   |

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



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

|                                  |                            |                     |             |            |                |          |              |
|----------------------------------|----------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID                           | PWS Name                   | Classification      | Population  | Owner Type | Primary Source |          |              |
| <b>CT0745093</b>                 | <b>TOUCHSTONE N.A.F.I.</b> | C                   | 43          | P          | GW             |          |              |
| Local Address (where applicable) |                            | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |                            |                     |             |            |                | 7        |              |

Towns Served: LITCHFIELD

## Monitoring Requirements

Water System Facility: **WELL 4 (WSF ID: 53199)**

| E. Coli (3014)                            | 1 triggered (TG) per period |                          |                          |
|---|-----------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i>    | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 4 (2)                                | 10/25/23 - 10/31/23         |                          | Complete                 |
|   | 11/21/23 - 11/27/23         |                          | Complete                 |
|   | 12/6/23 - 12/12/23          |                          | Complete                 |

## Other Compliance Schedules

| <i>Compliance Schedule Activity</i>     | <i>Due Date</i> | <i>Achieved Date</i> |
|---|-----------------|----------------------|
| SUBMIT FISCAL AND ASSET MANAGEMENT CERT | 1/1/2021        |                      |
| SUBMIT CCR TO THE DEPARTMENT            | 6/30/2024       |                      |
| SUBMIT CCR CERTIFICATION FORM           | 8/9/2024        |                      |
| 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

| <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                        | GENERIC DISTRIBUTION              | A             | Y                          |                                  |                 |                         |
|                                 |                               | DOWNSTREAM               | WITHIN 5 SERVICE CON              | A             |                            |                                  |                 |                         |
|                                 |                               | TSTONE001                | MAIN KITCHEN                      | A             | Y                          | 2                                | Y               |                         |
|                                 |                               | TSTONE002                | SINK IN DINING ROOM               | A             |                            | 2                                | Y               |                         |
|                                 |                               | TSTONE003                | DORM SINGLE BR                    | A             |                            | 2                                | Y               |                         |
|                                 |                               | TSTONE004                | WHITE SCH HOUSE BR                | A             |                            | 2                                | Y               |                         |
|                                 |                               | TSTONE005                | BROWN SCHOOL HOUSE                | A             |                            | 2                                | Y               |                         |
|                                 | UPSTREAM                      | WITHIN 5 SERVICE CON     | A                                 |               |                            |                                  |                 |                         |
| 00701                           | ENTRY POINT - MAIN PUMP HOUSE | 3                        | EP - MAIN PUMP HOUSE              | A             |                            |                                  |                 |                         |
| 37286                           | HYDRO TANKS - MAIN PUMP HOUSE |                          |                                   |               |                            |                                  |                 |                         |
| 50167                           | ATMOSPHERIC TANK              |                          |                                   |               |                            |                                  |                 |                         |
| 53197                           | WELL 3                        | 2                        | WELL 3                            | A             |                            |                                  |                 |                         |
| 53199                           | WELL 4                        | 2                        | WELL 4                            | A             |                            |                                  |                 |                         |
| 53222                           | MAIN PUMP HOUSE               |                          |                                   |               |                            |                                  |                 |                         |

## 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> |
|----------------------|----------------------|---|---------------------------------|
| KILBOURN, ERIC M.    | CHIEF OPERATOR       | DISTRIBUTION SYSTEM OPERATOR - CLASS I    | 12/31/2025                      |
|                      |                      | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2025                      |

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

|                                  |                            |                     |             |            |                |          |              |
|----------------------------------|----------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID                           | PWS Name                   | Classification      | Population  | Owner Type | Primary Source |          |              |
| <b>CT0745093</b>                 | <b>TOUCHSTONE N.A.F.I.</b> | C                   | 43          | P          | GW             |          |              |
| Local Address (where applicable) |                            | Service Connections | Residential | Commercial | Industrial     | Combined | Agricultural |
|                                  |                            |                     |             |            |                | 7        |              |

Towns Served: LITCHFIELD

## Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

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

## Contact Information

|                          |           |                          |              |                    |                    |          |
|--------------------------|-----------|--------------------------|--------------|--------------------|--------------------|----------|
| Name                     |           | Organization             |              | Job Title          |                    |          |
| <b>Mr. Tony Muniz</b>    |           | Nafi Touchstone          |              | Maint. Coordinator |                    |          |
| Mailing Address Line One |           | Mailing Address Line Two |              | City               | State              | Zip Code |
| P.O. Box 457             |           |                          |              | Litchfield         | CT                 | 06759    |
| Business Phone           | Extension | Fax                      | Mobile Phone | Emergency Phone    | Email Address      |          |
| 860-567-3809             |           | 860-567-3846             | 203-509-7686 |                    | TONYMUNIZ@NAFI.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**