

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0120202	BOLTON HIGH SCHOOL	NTNC	304	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
72 BRANDY STREET			1				

Towns Served: BOLTON

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	1/1/11 - 12/31/19				
Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
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	1/1/16 - 12/31/18	6/1-9/30	Complete		
	1/1/17 - 12/31/19	6/1-9/30			
	1/1/20 - 12/31/22	6/1-9/30			
Physical Parameters (PPS)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
Physical Parameters (PPX)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
Water System Facility: 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>		
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete		
	1/1/17 - 12/31/19				
	1/1/20 - 12/31/22				
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)	1/1/16 - 12/31/16		Complete		
	1/1/17 - 12/31/17				
	1/1/18 - 12/31/18				
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 (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)	1/1/14 - 12/31/16	1/1-12/31	Waiver		
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>		

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

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CT0120202	BOLTON HIGH SCHOOL	NTNC	304	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
72 BRANDY STREET			1				
Towns Served: BOLTON							

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

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

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/16		Complete
	1/1/17 - 12/31/17		
	1/1/18 - 12/31/18		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2015	

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 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Y			
		BHS-1	KITCHEN HAND SINK	A	Y	2	Y	
		BHS-2	STAFF KITCHEN SINK	A	Y	2		
		BHS-3	NURSES HAND SINK	A	Y	2		
		BHS-4	RM 13 HANDICAP SINK	A	Y	2		
		BHS-5	SUPERVISOR B&G SINK	A	Y	2		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
	UPSTREAM	WITHIN 5 SERVICE CON	A					
00701	ENTRY POINT	3	ENTRY POINT	A				
57655	WELL A	2	WELL A	A				
57657	WELL B	2	WELL B	A				
57659	ATMOSPHERIC TANK							
57663	BLADDER TANK							
57665	TREATMENT PLANT							

Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 57665)**

Facility Classification:

Operator Name	Operator Type	Certification(s)	Certification Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2018
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2018
LAFRAMBOISE, JEFFREY	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	3/31/2018
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2017

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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		
CT0120202	BOLTON HIGH SCHOOL	NTNC	304	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
72 BRANDY STREET			1				
Towns Served: BOLTON							

Contact Information

Name			Organization			Job Title			
Mr. Paul K. Smith						Superintendent			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
108 Notch Road						Bolton		CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-643-1569	126	860-647-8452			paulk.smith@boltonct.org				

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

Name			Organization			Job Title			
Town of Bolton									
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
72 Brandy St						Bolton		CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				

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

Name			Organization			Job Title			
Mrs. Kristin B. Heckt			Bolton Public Schools			Superintendent			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
72 Brandy Street						Bolton		CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-643-1569	3407	860-647-8452		860-539-5029	kristin.heckt@boltonct.org				

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

Please note the following:

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

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

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

End of schedule

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0120212	BOLTON CENTER SCHOOL (K-8)	NTNC	756	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
108 NOTCH ROAD			4				

Towns Served: BOLTON

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	1/1/11 - 12/31/19				
Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16				
	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
Lead And Copper (PBCU)		10 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	1/1/14 - 12/31/16	6/1-9/30	Complete		
	1/1/17 - 12/31/19	6/1-9/30			
	1/1/20 - 12/31/22	6/1-9/30			
Physical Parameters (PPS)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
Physical Parameters (PPX)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16				
Water System Facility: ENTRY POINT (WSF ID: 00700)					
Di(2-Ethylhexyl) - Phthalate (2039)		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)	1/1/16 - 12/31/16		Complete		
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)	1/1/14 - 12/31/16		Complete		
	1/1/17 - 12/31/19				
	1/1/20 - 12/31/22				
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)	1/1/16 - 12/31/16		Complete		
	1/1/17 - 12/31/17				
	1/1/18 - 12/31/18				
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 (RT) per three years			
<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		
CT0120212	BOLTON CENTER SCHOOL (K-8)	NTNC	756	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
108 NOTCH ROAD			4				

Towns Served: BOLTON

Monitoring Requirements

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

Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 (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)	1/1/14 - 12/31/16	1/1-12/31	Waiver
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
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>
ENTRY POINT (3)	1/1/16 - 12/31/16		Complete
	1/1/17 - 12/31/17		
	1/1/18 - 12/31/18		

Other Compliance Schedules

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

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 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MW003	DISTRIBUTION	A	Y			
		MW003-S	KITCHEN SINK/STORAGE	A	Y	N		
		MW027-1	ROOM 1	A	Y	N		
		MW027-15	ROOM 15	A	Y	N		
		MW027-19	ROOM 19	A	Y	N		
		MW027-2	ROOM 2	A	Y	N		
		MW027-40	ROOM 40	A	Y	N		
		MW027-5	ROOM 5	A	Y	N		
		MW027-ELRS	STAFF LUNCH RM SINK	A	Y	N		
		MW032	HWY GARAGE	A	Y	N		
		MW033	YMCA	A	Y	N		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10049	WELL 2	2	WELL 2	A				
10050	WELL 1	2	WELL 1	A				
48176	ATMOSPHERIC STORAGE							
48178	PRESSURE STORAGE							
48713	I&M WTP							

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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		
CT0120212	BOLTON CENTER SCHOOL (K-8)	NTNC	756	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
108 NOTCH ROAD			4				
Towns Served: BOLTON							

Certified Operator Information

Water System Facility: I&M WTP (WSF ID: 48713)			
Facility Classification: CLASS 1 TREATMENT PLANT			
Operator Name	Operator Type	Certification(s)	Certification Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2018
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2018

Contact Information

Name		Organization			Job Title		
Mr. Paul K. Smith					Superintendent		
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
108 Notch Road					Bolton	CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-643-1569	126	860-647-8452			paulk.smith@boltonct.org		

Contact Role(s): Legal Contact							
Name		Organization			Job Title		
Mrs. Kristin B. Heckt		Bolton Public Schools			Superintendent		
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
72 Brandy Street					Bolton	CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-643-1569	3407	860-647-8452		860-539-5029	kristin.heckt@boltonct.org		

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

- Please note the following:**
1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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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		
CT0120302	SIMONIZ USA	NTNC	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
201 BOSTON TURNPIKE ROAD			1				

Towns Served: BOLTON

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	1/1/11 - 12/31/19				
Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
Lead And Copper (PBCU)		5 routine (RT) per year			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/16	6/1-9/30	Complete		
	1/1/17 - 12/31/17	6/1-9/30			
	1/1/18 - 12/31/18	6/1-9/30			
Physical Parameters (PPS)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
Physical Parameters (PPX)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
Water System Facility: ENTRY POINT (WSF ID: 00700)					
Inorganic Chemicals (IOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/16 - 12/31/18				
	1/1/19 - 12/31/21				
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)	1/1/16 - 12/31/16		Complete		
	1/1/17 - 12/31/17				
	1/1/18 - 12/31/18				
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete		
	1/1/17 - 12/31/19				
	1/1/20 - 12/31/22				

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		
CT0120302	SIMONIZ USA	NTNC	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
201 BOSTON TURNPIKE ROAD			1				
Towns Served: BOLTON							

Monitoring Requirements

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

Pesticides, Herbicides and PCBs-Phase V (SOC5) 1 routine (RT) per three years

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete
	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

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

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/16		Complete
	1/1/17 - 12/31/17		
	1/1/18 - 12/31/18		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2018	

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 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		SWS001	HANDICAP BATHROOM	P	Y	1		
		SWS002	MENS BATHROOM	P	Y	1		
		SWS003	LADIES BATHROOM	P	Y	1		
		SWS004	BREAK ROOM	P	Y	1		
		SWS005	CAFETERIA	P	Y	1		
		SWS006	ENTRY POINT	P				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10051	WELL 1	2	WELL	A				
54966	STORAGE TANKS							

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2017
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2018
NIGRO, SCOTT A.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2019

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0120302	SIMONIZ USA	NTNC	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
201 BOSTON TURNPIKE ROAD			1				
Towns Served: BOLTON							

Contact Information

Name			Organization			Job Title			
Mr. William Hibbard			Simoniz USA Inc.			Plant Manager			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
201 Boston Turnpike						Bolton		CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-646-0172	105	860-645-6070		860-209-0970					

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		
CT0120024	ABLE COIL	NTNC	50	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
25 HOWARD ROAD				1			

Towns Served: BOLTON

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	1/1/11 - 12/31/19				
Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
Lead And Copper (PBCU)		5 routine (RT) per year			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/16	6/1-9/30	Complete		
	1/1/17 - 12/31/17	6/1-9/30			
	1/1/18 - 12/31/18	6/1-9/30			
Physical Parameters (PPS)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
Physical Parameters (PPX)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
Water System Facility: ENTRY POINT (WSF ID: 00700)					
Inorganic Chemicals (IOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete		
	1/1/17 - 12/31/19				
	1/1/20 - 12/31/22				
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)	1/1/16 - 12/31/16		Complete		
	1/1/17 - 12/31/17				
	1/1/18 - 12/31/18				
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete		
	1/1/17 - 12/31/19				
	1/1/20 - 12/31/22				

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		
CT0120024	ABLE COIL	NTNC	50	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
25 HOWARD ROAD				1			
Towns Served: BOLTON							

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)			
Organic Chemicals (VOCS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	7/1/16 - 9/30/16		Complete
	10/1/16 - 12/31/16		Complete
	1/1/17 - 3/31/17		
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

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 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
20225	WELL	2	WELL	A				

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
Facility Classification: SMALL WATER SYSTEM			Certification Expiration
Operator Name	Operator Type	Certification(s)	Certification Expiration
STAVENS, JOEL	CHIEF OPERATOR	SMALL WATER SYSTEM OPERATOR	6/30/2017

Contact Information

Name		Organization			Job Title		
Mr. Steven Rockefeller		Able Coil & Electronics			President		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
25 Howard Road		P.O. Box 9127			Bolton	CT	06040
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-646-5686	101	860-646-5678		860-211-5006	steven@ablecoil.com		
Contact Role(s): Administrative Contact, Legal Contact, Owner							
Name		Organization			Job Title		
Howard Road Realty LLC							
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
P. O. Box 9127					Bolton	CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
Contact Role(s): Owner							

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source	
CT0120024	ABLE COIL	NTNC	50	P	GW	
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
25 HOWARD ROAD			1			
Towns Served: BOLTON						

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		
CT0120424	THE CARLYLE JOHNSON MACHINE COMPANY	NTNC	42	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
291 BOSTON TURNPIKE				1			

Towns Served: BOLTON

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	1/1/11 - 12/31/19				
Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
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	1/1/14 - 12/31/16	6/1-9/30	Complete		
	1/1/17 - 12/31/19	6/1-9/30			
	1/1/20 - 12/31/22	6/1-9/30			
Physical Parameters (PPS)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
Physical Parameters (PPX)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
Water System Facility: ENTRY POINT (WSF ID: 00700)					
Inorganic Chemicals (IOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete		
	1/1/17 - 12/31/19				
	1/1/20 - 12/31/22				
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)	1/1/16 - 12/31/16		Complete		
	1/1/17 - 12/31/17				
	1/1/18 - 12/31/18				
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 (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)	1/1/14 - 12/31/16	1/1-12/31	Waiver		
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>		

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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		
CT0120424	THE CARLYLE JOHNSON MACHINE COMPANY	NTNC	42	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
291 BOSTON TURNPIKE				1			
Towns Served: BOLTON							

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)			
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete
	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

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
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7 PH	Daily
Start Date: 1/3/2003	Compliance History:	Operating Limit	Monitoring
	Monitoring Period	Compliance Status:	Compliance Status:
	8/1/2016 - 8/31/2016		N
	9/1/2016 - 9/30/2016		N
	10/1/2016 - 10/31/2016		N
	11/1/2016 - 11/30/2016		N
	12/1/2016 - 12/31/2016		
	1/1/2017 - 1/31/2017		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	
CROSS CONNECTION EXEMPTION	3/1/2019	

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
Physical Parameters M&R Violation	3/1/11 - 5/30/11	3	2/19/2011		3/1/2011	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule	Asbestos	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		MW001-D	DOWNSTAIRS MENS ROOM	A	Y	N	Y
		MW003	KITCHEN	A	Y	N	
		MW005	BREAK ROOM	A	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		
CT0120424	THE CARLYLE JOHNSON MACHINE COMPANY	NTNC	42	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
291 BOSTON TURNPIKE				1			
Towns Served: BOLTON							

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 2 DBPR
		MW017-U	UPSTAIRS BATHROOM	A	Y	N		
		MW027-DRNB	DRESS ROOM NEW BLDG	A	Y	N		
		MW038	HANDICAP NEW BLDG	A	Y	N		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10809	WELL	2	WELL	A				
1093	POTASH INJECTION SYSTEM							

Certified Operator Information

Water System Facility: POTASH INJECTION SYSTEM (WSF ID: 1093)			
Facility Classification: CLASS 1 TREATMENT PLANT			
Operator Name	Operator Type	Certification(s)	Certification Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2018 9/30/2018

Contact Information

Name		Organization			Job Title		
Mr. Micheal Gamache		291 Boston Tpke Associates LLC			Manager		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
291 Boston Turnpike		P O Box 9546			Bolton	CT	06043-9546
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-643-1531		860-646-2645			MEG@CJMCO.COM		
Contact Role(s): Legal Contact, Owner							
Name		Organization			Job Title		
Mr. Bart Bauers Jr.					Cfo		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
291 Boston Turnpike		P.O. Box 9546			Bolton	CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-643-1531	104	860-646-2645					
Contact Role(s): Legal Contact							
Name		Organization			Job Title		
Mr. Donald J. Hartl		Carlyle Johnson Machine Co.					
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
291 Boston Tpke.		PO Box 9546			Bolton	CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-643-1531	107	860-646-2645			MAXITORQ@CJMCO.COM		
Contact Role(s): Administrative Contact							

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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	
CT0120424	THE CARLYLE JOHNSON MACHINE COMPANY	NTNC	42	P	GW	
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
291 BOSTON TURNPIKE			1			

Towns Served: BOLTON

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		
CT0120434	COMCAST CORPORATION	NTNC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
200 BOSTON TURNPIKE				1			
Towns Served: BOLTON							

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	1/1/11 - 12/31/19						
Total Coliform (3100)			1 routine (RT) per quarter				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete				
	10/1/16 - 12/31/16		Complete				
	1/1/17 - 3/31/17						
	4/1/17 - 6/30/17						
	7/1/17 - 9/30/17						
Lead And Copper (PBCU)			5 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	7/1/16 - 12/31/16						
	1/1/17 - 6/30/17						
	7/1/17 - 12/31/17						
Physical Parameters (PPS)			1 routine (RT) per quarter				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17						
	4/1/17 - 6/30/17						
	7/1/17 - 9/30/17						
Physical Parameters (PPX)			1 routine (RT) per quarter				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete				
	10/1/16 - 12/31/16		Complete				
Water System Facility: ENTRY POINT (WSF ID: 00700)							
Inorganic Chemicals (IOCS)			1 routine (RT) per three years				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
ENTRY POINT (3)	1/1/15 - 12/31/17						
	1/1/18 - 12/31/20						
Nitrate And Nitrite (NOX)			1 routine (RT) per quarter				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
ENTRY POINT (3)	7/1/16 - 9/30/16		Complete				
	10/1/16 - 12/31/16		Complete				
	1/1/17 - 3/31/17						
	4/1/17 - 6/30/17						
	7/1/17 - 9/30/17						
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)			1 routine (RT) per three years				
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>				
ENTRY POINT (3)	1/1/16 - 12/31/18						
	1/1/19 - 12/31/21						

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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		
CT0120434	COMCAST CORPORATION	NTNC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
200 BOSTON TURNPIKE				1			
Towns Served: BOLTON							

Monitoring Requirements

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

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>
ENTRY POINT (3)	1/1/16 - 12/31/16		Complete
	1/1/17 - 12/31/17		
	1/1/18 - 12/31/18		

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
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	4
Start Date: 1/1/2004	Compliance History:	Operating Limit	Monitoring
	Monitoring Period	Compliance Status:	Compliance Status:
	8/1/2016 - 8/31/2016		N
	9/1/2016 - 9/30/2016		N
	10/1/2016 - 10/31/2016		N
	11/1/2016 - 11/30/2016		N
	12/1/2016 - 12/31/2016		
	1/1/2017 - 1/31/2017		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/30/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2013	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2014	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2014	
CROSS CONNECTION SURVEY REPORT	3/1/2017	

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 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		BB100	BASEMENT BATH	P		3		
		BR400	BREAK ROOM	P		3		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		FFB200	FIRST FLOOR BATH	P	Y	3		
		OSC500	OUTSIDE SILLCOCK	P		3		
		SFB300	SECOND FLOOR BATH	P		3		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10968	WELL	2	WELL	A				
1660	WTP - PH ADJ							

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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		
CT0120434	COMCAST CORPORATION	NTNC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
200 BOSTON TURNPIKE				1			
Towns Served: BOLTON							

Certified Operator Information

Water System Facility: **WTP - PH ADJ (WSF ID: 1660)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
KLOBUKOWSKI, STEVEN J.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2017
		WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2019

Contact Information

Name		Organization			Job Title			
Mr. Robert Brown		AT&T Broadband						
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
854 Farmington Avenue						West Hartford	CT	06179
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-505-2090								

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

Name		Organization			Job Title			
Mr. Bill Johnson					Facility Mngr			
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
854 Farmington Ave						West Hartford	CT	06119
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-505-3356		860-519-1639						

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

Please note the following:

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

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

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

End of schedule

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0120343	HANS CHRISTIAN ANDERSEN MONTESSORI	NTNC	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
212 BOLTON CENTER ROAD			2				

Towns Served: BOLTON

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	1/1/11 - 12/31/19				
Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
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	1/1/14 - 12/31/16	6/1-9/30	Complete		
	1/1/17 - 12/31/19	6/1-9/30			
	1/1/20 - 12/31/22	6/1-9/30			
Physical Parameters (PPS)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
Physical Parameters (PPX)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
Water System Facility: ENTRY POINT (WSF ID: 00700)					
Inorganic Chemicals (IOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/15 - 12/31/17				
	1/1/18 - 12/31/20				
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)	1/1/16 - 12/31/16		Complete		
	1/1/17 - 12/31/17				
	1/1/18 - 12/31/18				
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete		
	1/1/17 - 12/31/19				
	1/1/20 - 12/31/22				

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		
CT0120343	HANS CHRISTIAN ANDERSEN MONTESSORI	NTNC	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
212 BOLTON CENTER ROAD			2				
Towns Served: BOLTON							

Monitoring Requirements

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

Pesticides, Herbicides and PCBs-Phase V (SOC5)			1 routine (RT) per three years
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete
	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

Organic Chemicals (VOCS)			1 routine (RT) per three years
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/16 - 12/31/18		
	1/1/19 - 12/31/21		

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION EXEMPTION	3/1/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	

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 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10717	HANS CHRISTIAN ANDERSEN MONTESSORI WELL	2	HANS CHRISTIAN ANDER	A				

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
Facility Classification: SMALL WATER SYSTEM			
<i>Operator Name</i>	<i>Operator Type</i>	<i>Certification(s)</i>	<i>Certification Expiration</i>
NAVICKIS, THOMAS L.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2018

Contact Information

Name		Organization			Job Title		
Mrs. Amanda M. Blake		H. C. A. Montessori School			Administrator		
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
212 Bolton Center Road					Bolton	CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-646-5727		860-646-5727			admin.hcams@sbcglobal.net		
Contact Role(s):		Administrative Contact					

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source			
CT0120343	HANS CHRISTIAN ANDERSEN MONTESSORI	NTNC	30	P	GW			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
212 BOLTON CENTER ROAD		2						
Towns Served: BOLTON								
Name			Organization			Job Title		
Hans Christian Anderson								
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
212 Bolton Center Rd						Bolton	CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
Contact Role(s): Legal Contact, Owner								

Please note the following:

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

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

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

End of schedule

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0121023	MUNSONS CANDY KITCHEN	NTNC	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
ROUTE 6			1				

Towns Served: BOLTON

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	1/1/11 - 12/31/19				
Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
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	1/1/14 - 12/31/16	6/1-9/30	Complete		
	1/1/17 - 12/31/19	6/1-9/30			
	1/1/20 - 12/31/22	6/1-9/30			
Physical Parameters (PPS)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
Physical Parameters (PPX)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
Water System Facility: ENTRY POINT (WSF ID: 00700)					
Chloride (1017)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
Inorganic Chemicals (IOCS)		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)	1/1/16 - 12/31/16		Complete		
	1/1/17 - 12/31/17				
	1/1/18 - 12/31/18				
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)	1/1/16 - 12/31/16		Complete		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0121023	MUNSONS CANDY KITCHEN	NTNC	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
ROUTE 6			1				
Towns Served: BOLTON							

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)			1 routine (RT) per year
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/17 - 12/31/17		
	1/1/18 - 12/31/18		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)			1 (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)	1/1/14 - 12/31/16	1/1-12/31	Waiver
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)			1 routine (RT) per three years
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
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>
ENTRY POINT (3)	1/1/16 - 12/31/16		Complete
	1/1/17 - 12/31/17		
	1/1/18 - 12/31/18		

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
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7 PH	4
Start Date: 1/1/2002	Compliance History:	Operating Limit Compliance Status:	Monitoring Compliance Status:
	Monitoring Period		
	8/1/2016 - 8/31/2016		N
	9/1/2016 - 9/30/2016		N
	10/1/2016 - 10/31/2016		N
	11/1/2016 - 11/30/2016		N
	12/1/2016 - 12/31/2016		
	1/1/2017 - 1/31/2017		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	
CROSS CONNECTION EXEMPTION	3/1/2018	

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 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MW003	KITCHEN	A	Y	3		

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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		
CT0121023	MUNSONS CANDY KITCHEN	NTNC	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
ROUTE 6			1				
Towns Served: BOLTON							

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 2 DBPR
		MW005	BREAK ROOM	A	Y	3		
		MW027-CDY	CANDY ROOM	A	Y	3		
		MW027-ERB	ENROBER ROOM	A	Y	3		
		MW027-PAC	PACKING ROOM	A	Y	3		
		MW028-E	EMPLOYEE LOUNGE	A	Y	3	Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10933	WELL #1	2	WELL #1	A				
1662	TREATMENT PLANT							
54345	BLADDER TANKS							
54347	ATMOSPHERIC TANKS							
54349	PUMP STATION							

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 1662)			
Facility Classification: CLASS 1 TREATMENT PLANT			
Operator Name	Operator Type	Certification(s)	Certification Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2018 9/30/2018

Contact Information

Name		Organization			Job Title	
Mr. Robert Munson		Munson's Candy Kitchen			Owner/President	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
P.O. Box 9217 - Route 6				Bolton	CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-649-4332		860-649-7209				
Contact Role(s): Legal Contact, Owner						
Name		Organization			Job Title	
Mr. Jim Florence		Munson's Candy Kitchen				
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
174 Hop River Road				Bolton	CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-649-4332						
Contact Role(s): Administrative Contact						

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0121023	MUNSONS CANDY KITCHEN	NTNC	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
ROUTE 6			1				

Towns Served: BOLTON

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		
CT0121073	NETSOURCE, INC.	NTNC	75	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
25 WEST STREET						1	
Towns Served: BOLTON							

Monitoring Requirements

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

Total Coliform (3100)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
	1/1/17 - 3/31/17		Complete		
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
Lead And Copper (PBCU)		5 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	7/1/16 - 12/31/16		Complete		
	1/1/17 - 6/30/17				
	7/1/17 - 12/31/17				
Physical Parameters (PPS)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17				
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				
Physical Parameters (PPX)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
Water System Facility: ENTRY POINT (WSF ID: 00700)					
Inorganic Chemicals (IOCS)		1 routine (RT) per three years			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete		
	1/1/17 - 12/31/19				
	1/1/20 - 12/31/22				
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)	1/1/16 - 12/31/16		Complete		
	1/1/17 - 12/31/17				
	1/1/18 - 12/31/18				
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per quarter			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
	1/1/17 - 3/31/17		Complete		
	4/1/17 - 6/30/17				
	7/1/17 - 9/30/17				

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		
CT0121073	NETSOURCE, INC.	NTNC	75	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
25 WEST STREET						1	
Towns Served: BOLTON							

Monitoring Requirements

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

Organic Chemicals (VOCS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	7/1/16 - 9/30/16		Complete
	10/1/16 - 12/31/16		Complete
	1/1/17 - 3/31/17		Complete
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

Other Compliance Schedules

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

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>
Nitrate And Nitrite M&R Violation	1/1/15 - 12/31/15	2	6/1/2016		6/11/2016	

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</i>	<i>Lead and Copper</i>		<i>Stage 2</i>		
					<i>Rule</i>	<i>Rule Tier</i>	<i>Asbestos</i>	<i>DBPR</i>		
00600	DISTRIBUTION SYSTEM	2	RAW WELL	A	Y	N				
		3	ENTRY POINT	A	Y	N	Y			
		4	DISTRIBUTION SYSTEM	A						
		5	TREATMENT PLANT	A		N				
		DOWNSTREAM			WITHIN 5 SERVICE CON	A				
			NS1002	STAFF KITCHEN	A	Y	1			
			NS1003	MENS #1 VIP	A	Y	1			
			NS1004	LADIES #1	A	Y	1			
			NS1005	LADIES #2	A	Y	1			
			NS1006	OFFICE KITCHEN	A	Y	1			
			NS1007	MENS #2	A	Y	1			
			NS1008	END OF BUILDING	A	Y	1			
		UPSTREAM			WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A						
58685	WELL 1	2	WELL 1	A						
58722	TREATMENT PLANT									

Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 58722)**

Facility Classification: CLASS 2 TREATMENT PLANT

<i>Operator Name</i>	<i>Operator Type</i>	<i>Certification(s)</i>	<i>Certification Expiration</i>
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2017

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		
CT0121073	NETSOURCE, INC.	NTNC	75	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
25 WEST STREET						1	
Towns Served: BOLTON							

Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 58722)**

Facility Classification: CLASS 2 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2018
NIGRO, SCOTT A.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2019

Contact Information

Name		Organization			Job Title	
Mr. Thor E. Swanson		Netsource, Inc.			Owner	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
		25 West Street		Bolton	CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-649-6000		860-649-6002			info@netsource-inc.com	

Contact Role(s): **Owner**

Name		Organization			Job Title	
Mr. Robert Giannitti		Netsource, Inc.			Vice President	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
		25 West Street		Bolton	CT	06043
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-558-5675		860-649-6002			robert@netsource-inc.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