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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0180342	**BROOKFIELD OFFICE PARK ASSOCIATION**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
304 FEDERAL ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

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

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
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 three years**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/14 - 6/30/15	1/1-6/30	Complete
	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**

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

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
CT0180342	**BROOKFIELD OFFICE PARK ASSOCIATION**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
304 FEDERAL ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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 quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
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: **WELL (WSF ID: 10064)**

E. Coli (3014) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL (2)	7/1/16 - 9/30/16		
	10/1/16 - 12/31/16		
	1/1/17 - 3/31/17		
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2011	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/30/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2013	
CROSS CONNECTION SURVEY REPORT	3/1/2016	

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			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		GFLR01	GROUND FL LADIES RM	A	Y			
		GFLR06	GROUND FLR LADIES R	A		1	Y	

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0180342	**BROOKFIELD OFFICE PARK ASSOCIATION**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
304 FEDERAL ROAD		1				

Towns Served: BROOKFIELD

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*
		SFLRLS03	2ND FLR LADIES LEFT	A		1		
		SFLRRS02	2ND FLR LADIES RIGHT	A		1		
		TFLRLS04	3RF FLR LADIES LEFT	A		1		
		TFLRRS05	3RD FLR LADIES RIGHT	A		1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10064	WELL	2	WELL	A				
59400	ATMOSPHERIC STORAGE							
936	TREATMENT SYSTEM							

Certified Operator Information

Water System Facility: **TREATMENT SYSTEM (WSF ID: 936)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
HURLBUT, ANDREW	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2017

Contact Information

Name	Organization	Job Title
Mr. John J. Scarfi	Brookfield Office Park	President

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
304 Federal Road	Suite 114	Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-8757		203-797-8706			

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

Name	Organization	Job Title
Mr. Travis Hyatt	Scalzo Property Management	

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
2 Stony Hill Road	Suite 201	Bethel	CT	06801

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-790-6888		203-790-9390		203-790-6888	thyatt@scalzoproperty.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
CT0180352	**BROOKFIELD PROFESSIONAL BLDG**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
300 FEDERAL ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

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

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	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 three years**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/14 - 6/30/16	1/1-6/30	Complete
	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**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 12/31/16		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
CT0180352	**BROOKFIELD PROFESSIONAL BLDG**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
300 FEDERAL ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

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

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 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		

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	
CROSS CONNECTION SURVEY REPORT	3/1/2017	

Public Notification Requirements

Violation/Situation	*Compliance Period*	*Notice Tier*	*Public Notification*		*PN Certification*	
			Required	*Performed*	*Due to DPH*	*Received*
Lead and Copper M&R Violation	1/1/13 - 12/31/13	3	5/15/2015		5/25/2015	

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	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10065	WELL	2	WELL	A				

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
HURLBUT, ANDREW	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	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
CT0180352	**BROOKFIELD PROFESSIONAL BLDG**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
300 FEDERAL ROAD		1				

Towns Served: BROOKFIELD

Contact Information

Name	Organization	Job Title
Mr. Craig L. Froehlich	Cff Realty, LLC	Owner

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
14 Aramon Circle		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-2500					Froballs@aol.com

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

Name	Organization	Job Title
Cff Realty, LLC		

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
14 Aramon Circle		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address

Contact Role(s): **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

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
CT0181102	**SAINT JOSEPH SCHOOL**	NTNC	200	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
159 WHISCONIER ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

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

Disinfectant Byproducts - TTHM & HAA5 (DBP) — **1 routine (RT) per year**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
NURSES SINK (SJS002)	1/1/16 - 12/31/16	9/1-9/30	Complete
	1/1/17 - 12/31/17	9/1-9/30	
	1/1/18 - 12/31/18	9/1-9/30	

Lead And Copper (PBCU) — **10 routine (RT) per six months**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	7/1/16 - 12/31/16		Complete
	1/1/17 - 6/30/17		
	7/1/17 - 12/31/17		

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
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 three years**

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

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
CT0181102	**SAINT JOSEPH SCHOOL**	NTNC	200	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
159 WHISCONIER ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
	1/1/19 - 12/31/21		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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		

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 quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
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: **SCHOOL WELL (WSF ID: 10071)**

E. Coli (3014) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL (2)	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		

Monthly Water System Facility (WSF) Level Monitoring Requirements

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0181102	**SAINT JOSEPH SCHOOL**	NTNC	200	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
159 WHISCONIER ROAD		1				

Towns Served: BROOKFIELD

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

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily

Start Date: 1/1/2005

Compliance History: Monitoring Period	Operating Limit Compliance Status:	Monitoring Compliance Status:
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		N
1/1/2017 - 1/31/2017		
2/1/2017 - 2/28/2017		

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013	
CROSS CONNECTION SURVEY REPORT	3/1/2014	
CCTS 1: PWS TO PROPOSE OCCT	3/31/2014	
CROSS CONNECTION SURVEY REPORT	3/1/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2015	
CCTS 2: DWS REVIEW OF PROPOSED OCCT	3/31/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/30/2016	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2016	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2017	

Public Notification Requirements

Violation/Situation	*Compliance Period*	*Notice Tier*	*Public Notification*		*PN Certification*	
			Required	*Performed*	*Due to DPH*	*Received*
Total Coliform MCL Violation	10/1/03 - 10/31/03	2	12/3/2003		12/13/2003	
Total Trihalomethanes M&R Violation	1/1/04 - 12/31/04	3	5/2/2006		5/12/2006	
Total Haloacetic Acids M&R Violation	1/1/04 - 12/31/04	3	5/2/2006		5/12/2006	
Total Coliform M&R Violation	11/1/05 - 11/30/05	2	5/28/2006		6/7/2006	
Lead and Copper TT Violation	4/1/14 - 6/30/15	2	9/28/2014		10/8/2014	
Total Coliform MCL Violation	7/1/15 - 9/30/15	2	10/28/2015		11/7/2015	
Lead and Copper M&R Violation	1/1/14 - 6/30/14	3	12/5/2015		12/15/2015	
Chlorine M&R Violation	10/1/14 - 10/31/14	3	1/9/2016		1/19/2016	
Chloride MCL Violation	1/1/16 - 3/31/16	2	5/13/2016		5/23/2016	
Chloride MCL Violation	7/1/16 - 9/30/16	2	12/10/2016		12/20/2016	

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			

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
CT0181102	**SAINT JOSEPH SCHOOL**	NTNC	200	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
159 WHISCONIER ROAD		1				

Towns Served: BROOKFIELD

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*
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		SJS001	KITCHEN SINK	P	Y	1		
		SJS002	NURSES SINK	A	Y	1		Y
		SJS003	B BATHROOM UPPER	P	Y	1		
		SJS004	G BATHROOM UPPER	P	Y	1		
		SJS005	UTILITY CLOSET UPPER	P	Y	1		
		SJS006	B BATHROOM LOWER	P	Y	1		
		SJS007	G BATHROOM LOWER	P	Y	1		
		SJS008	UTILITY CLOSET LOWER	P	Y	1		
		SJS009	B BATHROOM GYM	P	Y	1		
		SJS010	G BATHROOM GYM	P	Y	1		
		SJS011	T LOUNGE LOWER	P	Y	1		
		SJS012	OUTSIDE WELL PIT	P				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10071	SCHOOL WELL	2	WELL	A				
54351	HYDROPNEUMATIC STORAGE							
54353	CONTACT TANK							
938	WATER TREATMENT-CHLORINATION							

Certified Operator Information

Water System Facility: **WATER TREATMENT-CHLORINATION (WSF ID: 938)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
FOLEY, JAMES	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2017

Contact Information

Name	Organization	Job Title
Reverend George F. O'neill	Saint Joseph Church And School	Pastor

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
163 Whisconier Road	P.O. Box 5072	Brookfield	CT	06804-5072

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-1035	12	203-775-1684		203-775-5928	luke756@gmail.com

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

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
CT0181102	**SAINT JOSEPH SCHOOL**	NTNC	200	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
159 WHISCONIER ROAD		1				

Towns Served: BROOKFIELD

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
CT0181112	**WHISCONIER MIDDLE SCHOOL**	NTNC	1,010	L	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
17 WEST WHISCONIER ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	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) — **10 routine (RT) per year**

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17		Complete
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

Physical Parameters (PPX) — **1 routine (RT) per quarter**

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

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		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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		

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
CT0181112	**WHISCONIER MIDDLE SCHOOL**	NTNC	1,010	L	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
17 WEST WHISCONIER ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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		Complete
	1/1/18 - 12/31/18		

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2014	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	
CROSS CONNECTION SURVEY REPORT	3/1/2018	

Public Notification Requirements

Violation/Situation	*Compliance Period*	*Notice Tier*	*Public Notification*		*PN Certification*	
			Required	*Performed*	*Due to DPH*	*Received*
Total Coliform MCL Violation	8/1/13 - 8/31/13	2	10/12/2013		10/22/2013	
Nitrate And Nitrite M&R Violation	1/1/13 - 12/31/13	2	6/14/2014		6/24/2014	
Inorganic Chemicals M&R Violation	1/1/11 - 12/31/13	3	5/15/2015		5/25/2015	

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			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
		WMS001	TEACHERS ROOM SINK	A		1	Y	
		WMS002	BOYS LOCKER RM	A		2		
		WMS003	B WING GIRLS LAV	A		2		
		WMS004	CAFETERIA FOUNTAIN	A		2		
		WMS005	FOUNTAIN D WING	A		2		
		WMS006	NURSE CLINIC SINK	A		1		
		WMS007	A WING BOYS LAV	A		2		
		WMS008	MAIN OFFICE SINK	A		1		
		WMS009	C WING FOUNTAIN	A		2		
		WMS010	KITCHEN SINK	A		1		
		WMS011	CAFETERIA HABD SINK	A	Y			
		WMS012	MENS LAV CUST ROOM	A	Y			
00700	ENTRY POINT	3	ENTRY POINT	A				

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
CT0181112	**WHISCONIER MIDDLE SCHOOL**	NTNC	1,010	L	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
17 WEST WHISCONIER ROAD		1				

Towns Served: BROOKFIELD

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*
10072	WELL #1	2	WELL #1	A				
47596	ATMOSPHERIC STORAGE							
47598	PRESSURE STORAGE							
54093	WELL #2	2	WELL #2	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	12/31/2018
		WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2019

Contact Information

Name	Organization	Job Title
Mr. Allan Cameron	Brookfield Public Schools	Dir of Bus & Ops

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
P.O. Box 5194		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-7629		203-740-3192		203-997-7168	camerona@brookfieldps.org

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

Please note the following:

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

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

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

End of schedule

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0181122	**HUCKLEBERRY HILL ELEMENTARY SCHOOL**	NTNC	830	L	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
100 CANDLEWOOD LAKE ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	7/1/16 - 7/31/16		Complete
	10/1/16 - 10/31/16		Complete
	1/1/17 - 3/31/17		Complete
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

Total Coliform (3100) — **3 (TR) per month**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	11/1/16 - 11/30/16		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	
	1/1/19 - 12/31/21	6/1-9/30	

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17		Complete
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

Physical Parameters (PPX) — **1 routine (RT) per quarter**

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

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		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/14 - 12/31/16		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
CT0181122	**HUCKLEBERRY HILL ELEMENTARY SCHOOL**	NTNC	830	L	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
100 CANDLEWOOD LAKE ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

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

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		Complete
	1/1/18 - 12/31/18		

Water System Facility: **WELL 1 (WSF ID: 10073)**

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL (2)	10/19/16 - 10/24/16		Complete

Water System Facility: **WELL 2 (WSF ID: 11019)**

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL 2 (2)	10/19/16 - 10/24/16		Complete

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
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	GENERIC DISTRIBUTION	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		HHS001	600 WING LADIES LAV	A		1		
		HHS002	600 WING MENS LAV	A		1		
		HHS003	200 WING MENS LAV	A		2		
		HHS004	300 WING GIRLS LAV	A		2		
		HHS005	400 WING BOYS LAV	A		2		
		HHS006	100 WING BOYS LAV	A	Y	2		

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0181122	**HUCKLEBERRY HILL ELEMENTARY SCHOOL**	NTNC	830	L	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
100 CANDLEWOOD LAKE ROAD		1				

Towns Served: BROOKFIELD

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*
		HHS007	KITCHEN SINK	A	Y	2	Y	
		HHS008	MAIN OFFICE WORK SNK	A		1		
		HHS009	200 WING STAFF LAV	A		2		
		HHS010	LIBRARY SINK	A		1		
		HHS011	ROOM 204	A	Y			
		HHS012	STAFF BATH CUST RM	A	Y			
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10073	WELL 1	2	WELL	A				
11019	WELL 2	2	WELL 2	A				
47592	ATMOSPHERIC STORAGE							
47594	PRESSURE STORAGE							

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	12/31/2018
		WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2019

Contact Information

Name	Organization	Job Title
Mr. Allan Cameron	Brookfield Public Schools	Dir of Bus & Ops

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
P.O. Box 5194		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-7629		203-740-3192		203-997-7168	camerona@brookfieldps.org

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

Please note the following:

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

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

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

End of schedule

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0181132	**CENTER ELEMENTARY SCHOOL**	NTNC	527	L	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
8 OBTUSE HILL		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	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) — **10 routine (RT) per three years**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/15 - 12/31/17	6/1-9/30	
	1/1/18 - 12/31/20	6/1-9/30	

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17		Complete
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

Physical Parameters (PPX) — **1 routine (RT) per quarter**

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

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		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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		

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
CT0181132	**CENTER ELEMENTARY SCHOOL**	NTNC	527	L	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
8 OBTUSE HILL		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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		Complete
	1/1/18 - 12/31/18		

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2014	
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	GENERIC DISTRIBUTION	A	Y			
		CES001	FOUNTAIN BY GYM	A		2		
		CES002	BOYS LAV WEST	A		2		
		CES003	FOUNTAIN BOILER RM	A		2		
		CES004	GIRLS LAV WEST	A		2		
		CES005	LADIES RM BY GYM	A		2		
		CES006	FOUNTAIN BY RM 22	A		2		
		CES007	BOYS LAV EAST	A		2		
		CES008	OTPT ROOM	A		2		
		CES009	KITCHEN	A		2		
		CES010	GIRLS LAV EAST	A		2		
		CES011	TEACHERS ROOM SINK	A	Y		Y	
		CES012	TEACHERS RM LAV SINK	A	Y			
		CES013	NURSE CLINIC SINK	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10074	WELL #1	2	WELL	A				
47602	ATMOSPHERIC STORAGE							
47604	PRESSURE STORAGE							
54095	WELL #2	2	WELL #2	A				

Certified Operator Information

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
CT0181132	**CENTER ELEMENTARY SCHOOL**	NTNC	527	L	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
8 OBTUSE HILL		1				

Towns Served: BROOKFIELD

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	12/31/2018
		WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2019

Contact Information

Name	Organization	Job Title
Mr. Allan Cameron	Brookfield Public Schools	Dir of Bus & Ops

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
P.O. Box 5194		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-7629		203-740-3192		203-997-7168	camerona@brookfieldps.org

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

Please note the following:

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

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

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

End of schedule

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0181142	**BROOKFIELD HIGH SCHOOL**	NTNC	1,150	L	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
45 LONG MEADOW HILL ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	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) — **10 routine (RT) per year**

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17		Complete
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

Physical Parameters (PPX) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
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 - WELLS 2, 3, 4, & 6 (WSF ID: 00701)**

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
EP - WELLS 2, 3, 4, & 6 (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**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
EP - WELLS 2, 3, 4, & 6 (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**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
EP - WELLS 2, 3, 4, & 6 (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
CT0181142	**BROOKFIELD HIGH SCHOOL**	NTNC	1,150	L	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
45 LONG MEADOW HILL ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **ENTRY POINT - WELLS 2, 3, 4, & 6 (WSF ID: 00701)**

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
EP - WELLS 2, 3, 4, & 6 (3)	1/1/16 - 12/31/16		Complete
	1/1/17 - 12/31/17		Complete
	1/1/18 - 12/31/18		

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2010	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2011	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2011	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2014	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	
CROSS CONNECTION SURVEY REPORT	3/1/2018	

Public Notification Requirements

Violation/Situation	*Compliance Period*	*Notice Tier*	*Public Notification*		*PN Certification*	
			Required	*Performed*	*Due to DPH*	*Received*
Total Coliform MCL Violation	9/1/14 - 9/30/14	2	11/14/2014		11/24/2014	

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			
		BHS001	HOME ECONOMICS RM	A		2		
		BHS002	SAIL ROOM SINK	A		2		
		BHS003	CUSTODIAL OFFICE SNK	A		2		
		BHS004	KITCHEN SINK	A		2		
		BHS005	CAFE B FOUNTAIN	A		2		
		BHS006	600 WING GIRLS LAV	A		2		
		BHS007	MAIN OFFICE FOUNTAIN	A		2		
		BHS008	100 WING FOUNTAIN	A		2		
		BHS009	BOYS LOCKER RM SINK	A		2		
		BHS010	TEACHERS ROOM SINK	A		2	Y	
		BHS011	KITCHEN HAND WASH	A	Y			
		BHS012	BOY BATH BY ROOM 110	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				

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
CT0181142	**BROOKFIELD HIGH SCHOOL**	NTNC	1,150	L	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
45 LONG MEADOW HILL ROAD		1				

Towns Served: BROOKFIELD

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*
00701	ENTRY POINT - WELLS 2, 3, 4, & 6	3	EP - WELLS 2, 3, 4,	A				
10076	WELL #2	2	WELL #2	A				
47606	ATMOSPHERIC STORAGE							
47608	PRESSURE STORAGE							
54085	WELL #3	2	WELL #3	A				
54087	WELL #4	2	WELL #4	A				
54091	WELL #6	2	WELL #6	A				
56645	PUMP STATION							

Certified Operator Information

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

Facility Classification: CLASS 1 DISTRIBUTION SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
TOMASCAK, THOMAS S.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2018
		WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2019

Contact Information

Name	Organization	Job Title
Town of Brookfield		

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
45 Long Meadow Hill Rd. P. O. Box 5106		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address

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

Name	Organization	Job Title
Mr. Allan Cameron	Brookfield Public Schools	Dir of Bus & Ops

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
P.O. Box 5194		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-7629		203-740-3192		203-997-7168	camerona@brookfieldps.org

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

Please note the following:

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

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

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

End of schedule

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0189013	**SILVERMINE ROAD WATER SYSTEM**	NTNC	50	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
SILVERMINE ROAD			6			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

Total Haloacetic Acids (2456) — **1 routine (RT) per year**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
559A UNIT 1 FRONT OFFICE (SLVRMINE015)	1/1/16 - 12/31/16	9/1-9/30	Complete
	1/1/17 - 12/31/17	9/1-9/30	
	1/1/18 - 12/31/18	9/1-9/30	

Total Trihalomethanes (2950) — **1 routine (RT) per year**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
559B UNIT 9 KITCHENETTE (SLVRMINE024)	1/1/16 - 12/31/16	9/1-9/30	Complete
	1/1/17 - 12/31/17	9/1-9/30	
	1/1/18 - 12/31/18	9/1-9/30	

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

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

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 12/31/18		
	1/1/19 - 12/31/21		

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
CT0189013	**SILVERMINE ROAD WATER SYSTEM**	NTNC	50	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
SILVERMINE ROAD			6			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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		

Water System Facility: **WELL #4 (WSF ID: 10078)**

E. Coli (3014) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL #4 (2)	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: **WELL #3 (WSF ID: 10079)**

E. Coli (3014) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL #3 (2)	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: **WELL #1 (WSF ID: 10081)**

E. Coli (3014) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL #1 (2)	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		

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
CT0189013	**SILVERMINE ROAD WATER SYSTEM**	NTNC	50	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
SILVERMINE ROAD			6			

Towns Served: BROOKFIELD

Monthly Water System Facility (WSF) Level Monitoring Requirements

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

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily

Start Date: 12/1/2009

Compliance History: Monitoring Period	Operating Limit Compliance Status:	Monitoring Compliance Status:
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		N
1/1/2017 - 1/31/2017		
2/1/2017 - 2/28/2017		

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
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				
		SILMINE001	BLDA	P	Y	2		
		SILMINE002	TAP NEAR BALTIC LUMB	P		2		
		SILMINE003	PUMP STATION TAP	P		2		
		SILMINE004	BLD ACROSS PUMP ST	P		2		
		SILMINE005	DADE BEHRING BLB	P		2		
		SLVRMINE001	100 SLVRMINE LADIES	A	Y	2		
		SLVRMINE002	100 SLVRMINE MENS RM	A	Y	2		
		SLVRMINE003	100 SLVRMINE BREAK R	A	Y	2	Y	
		SLVRMINE004	100 SLVRMINE KIT HAN	A	Y	2		
		SLVRMINE005	100 SLVRMINE KIT DIS	A	Y	2		
		SLVRMINE006	595 FEDERAL ROAD	A	Y	2		
		SLVRMINE007	101 SLVRMINE LADIES	A	Y	2		
		SLVRMINE008	101 SLVRMINE MENS RM	A	Y	2		
		SLVRMINE009	101 SLVRMINE KITCHEN	A	Y	2		
		SLVRMINE010	559A UNIT 1 MENS LOC	A	Y	2		
		SLVRMINE011	559A UNIT 1 MENS LOC	A	Y	2		
		SLVRMINE012	559A UNIT 1 LADIES L	A	Y	2		
		SLVRMINE013	559A UNIT 1 LADIES L	A	Y	2		
		SLVRMINE014	559A UNIT 1 UNISEX B	A	Y	2		
		SLVRMINE015	559A UNIT 1 FRONT OF	A	Y	2		Y
		SLVRMINE016	559A UNIT 9 BATH 1 S	A	Y	2		

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0189013	**SILVERMINE ROAD WATER SYSTEM**	NTNC	50	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
SILVERMINE ROAD			6			

Towns Served: BROOKFIELD

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*
		SLVRMINE017	559A UNIT 9 BATH 2 S	A	Y	2		
		SLVRMINE018	559A UNIT 9 STORE FR	A	Y	2	Y	
		SLVRMINE019	559A UNIT 9 LARGE KI	A	Y	2		
		SLVRMINE020	559A UNIT 9 BACK KIT	A	Y	2		
		SLVRMINE021	559B UNIT 1 BATH	A	Y	2		
		SLVRMINE022	559B UNIT 9 LADIES R	A	Y	2		
		SLVRMINE023	559B UNIT 9 MENS ROO	A	Y	2		
		SLVRMINE024	559B UNIT 9 KITCHENE	A	Y	2		Y
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10078	WELL #4	2	WELL #4	A				
10079	WELL #3	2	WELL #3	A				
10081	WELL #1	2	WELL #1	A				
48057	ATMOSPHERIC STORAGE							
48059	PRESSURE STORAGE 1							
48061	PRESSURE STORAGE 2							
48063	PRESSURE STORAGE 3							
56542	TREATMENT PLANT							

Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 56542)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2017
GIORDANO, DAVID S.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2017

Contact Information

Name	Organization	Job Title
Mr. Roy Young	Silvermine Development Corp	

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
88 Rosehill Avenue	P.O. Box 1157	Danbury	CT	06810

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-744-2090					royy@poly-fil.com

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

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
CT0189013	**SILVERMINE ROAD WATER SYSTEM**	NTNC	50	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
SILVERMINE ROAD			6			

Towns Served: BROOKFIELD

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
CT0189093	**FELCHRIS - 61 COMMERCE DRIVE**	NTNC	25	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
61 COMMERCE DRIVE		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/14 - 12/31/16	6/1-9/30	Complete
	1/1/16 - 12/31/18	6/1-9/30	
	1/1/19 - 12/31/21	6/1-9/30	

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/15 - 12/31/17		
	1/1/18 - 12/31/20		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/14 - 12/31/16		
	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
CT0189093	**FELCHRIS - 61 COMMERCE DRIVE**	NTNC	25	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
61 COMMERCE DRIVE		1				

Towns Served: BROOKFIELD

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		

Water System Facility: **WELL (WSF ID: 10086)**

E. Coli (3014) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL (2)	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		

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
CROSS CONNECTION EXEMPTION	3/1/2021	

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				
		L001	KITCHEN SINK	P	Y	1		
		L002	LADIES RM L SINK	P	Y	1		
		L003	LADIES RM R SINK	P	Y	1		
		L004	LADIES RM M SINK	P	Y	1		
		L005	MENS RM L SINK	P	Y	1		
		L006	MENS RM R SINK	P	Y	1		
		L007	ENG RM K SINK	P	Y	1		
		L008	ENG RM R RM	P	Y	1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10086	WELL	2	WELL	A				
45012	WATER TREATMENT							

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
CT0189093	**FELCHRIS - 61 COMMERCE DRIVE**	NTNC	25	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
61 COMMERCE DRIVE		1				

Towns Served: BROOKFIELD

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
HURLBUT, PAUL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2019

Contact Information

Name	Organization	Job Title
Mr. Armando Bernardo	Felchris	Owner

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
61 Commerce Drive		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-740-2793	100	203-775-4886		203-241-6944	ab@ABELECTRONICSINC.com

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

Please note the following:

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

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

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

End of schedule

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
CT0189353	**BROOKFIELD REGIONAL YMCA**	NTNC	100	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
2 HUCKLEBERRY HILL ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	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 three years**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	
	1/1/19 - 12/31/21	6/1-9/30	

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17		Complete
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

Physical Parameters (PPX) — **1 routine (RT) per quarter**

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

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		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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		

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
CT0189353	**BROOKFIELD REGIONAL YMCA**	NTNC	100	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
2 HUCKLEBERRY HILL ROAD		1				

Towns Served: BROOKFIELD

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		Complete
	1/1/18 - 12/31/18		

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
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	GENERIC DISTRIBUTION	A	Y	N		
		BYMCA001	GIRLS BATHROOM SINK	A	Y	N		
		BYMCA002	BOYS BATHROOM SINK	A	Y	N		
		BYMCA003	I/T ROOM SINK	A	Y	N		
		BYMCA004	TWOS ROOM SINK	A	Y	N		
		BYMCA005	THREES ROOM SINK	A	Y	N		
		BYMCA006	KITCHEN SINK	A	Y	N		
		BYMCA007	MENS LOCKER SINK	A	Y	N		
		BYMCA008	WOMENS LOCKER SINK	A	Y	N		
		BYMCA009	WOMENS HEALTH SINK	A	Y	N		
		BYMCA010	MENS HEALTH SINK	A	Y	N		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10101	WELL #2	2	WELL #2	A				
10102	WELL #1	2	WELL #1	A				
937	WATER TREATMENT							

Certified Operator Information

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
CT0189353	**BROOKFIELD REGIONAL YMCA**	NTNC	100	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
2 HUCKLEBERRY HILL ROAD		1				

Towns Served: BROOKFIELD

Certified Operator Information

Water System Facility: **WATER TREATMENT (WSF ID: 937)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
TOMASCAK, THOMAS S.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2018
		WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2019

Contact Information

Name	Organization	Job Title
Regional YMCA of Western Connecticut		

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
2A Huckleberry Hill Rd		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address

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

Name	Organization	Job Title
Ms. Gail Null	Regional YMCA of Western Ct	Vip of Operations

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
2 Huckleberry Hill Rd		Brookfied	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-4444	119				gnull@regionalymca.org

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

Please note the following:

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

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

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

End of schedule

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0189393	**BROOKFIELD (E&A, LLC) - SHOPRITE PLAZA**	NTNC	50	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
143 FEDERAL ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2002	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2005	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2008	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2011	
CROSS CONNECTION SURVEY REPORT	3/1/2016	

Public Notification Requirements

Violation/Situation	*Compliance Period*	*Notice Tier*	*Public Notification*		*PN Certification*	
			Required	*Performed*	*Due to DPH*	*Received*
Chloride MCL Violation	4/1/16 - 6/30/16	2	10/16/2016		10/26/2016	
Chloride MCL Violation	7/1/16 - 9/30/16	2	12/10/2016		12/20/2016	

Contact Information

Name	Organization	Job Title
Ms. Nina M. Dolishny Regan	Edens & Avant	Property Manager

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
345 North Main Street	Suite 304	West Hartford	CT	06117

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-523-5741		860-523-5744		860-319-6388	nregan@edensandavant.com

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

Name	Organization	Job Title
Brookfield (E & A) LLC		

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
P. O. Box 528	C/O Edens And Avant	Columbia	SC	29202

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

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
CT0189483	**CANDLEWOOD LAKE SHOPPING PLAZA**	NTNC	25	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
14 CANDLEWOOD LAKE LANE			11			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

Total Haloacetic Acids (2456) — **1 routine (RT) per year**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
JOY HALLMARK BATH (CWPLAZA009)	1/1/16 - 12/31/16	9/1-9/30	Complete
	1/1/17 - 12/31/17	9/1-9/30	
	1/1/18 - 12/31/18	9/1-9/30	

Total Trihalomethanes (2950) — **1 routine (RT) per year**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
MICHAELS CLASS SINK (CWPLAZA013)	1/1/16 - 12/31/16	9/1-9/30	Complete
	1/1/17 - 12/31/17	9/1-9/30	
	1/1/18 - 12/31/18	9/1-9/30	

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	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 three years**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/15 - 12/31/17	6/1-9/30	
	1/1/18 - 12/31/20	6/1-9/30	

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17		Complete
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

Physical Parameters (PPX) — **1 routine (RT) per quarter**

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

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		

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
CT0189483	**CANDLEWOOD LAKE SHOPPING PLAZA**	NTNC	25	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
14 CANDLEWOOD LAKE LANE			11			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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

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 quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
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: **WELL #1 (WSF ID: 10804)**

E. Coli (3014) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL #1 (2)	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: **WELL #2 (WSF ID: 10805)**

E. Coli (3014) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL #2 (2)	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: **WELL #5 (WSF ID: 10808)**

E. Coli (3014) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL #5 (2)	7/1/16 - 9/30/16		Complete
	10/1/16 - 12/31/16		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
CT0189483	**CANDLEWOOD LAKE SHOPPING PLAZA**	NTNC	25	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
14 CANDLEWOOD LAKE LANE			11			

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **WELL #5 (WSF ID: 10808)**

E. Coli (3014) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
	1/1/17 - 3/31/17		
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

Monthly Water System Facility (WSF) Level Monitoring Requirements

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

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily

Start Date: 1/1/2005

Compliance History: Monitoring Period	Operating Limit Compliance Status:	Monitoring Compliance Status:
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		N
1/1/2017 - 1/31/2017		
2/1/2017 - 2/28/2017		

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
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	GENERIC DISTRIBUTION	A	Y			
		CWPLAZA001	BB&B FRONT MENS RM	A	Y	N		
		CWPLAZA002	BB&B KITCHENETTE	A	Y	N		
		CWPLAZA003	NAIL&SPA KITCHETTE	A	Y	N		
		CWPLAZA004	QUIZNOS FOOD SINK	A	Y	N		
		CWPLAZA005	GNC CUSTODIAL SINK	A	Y	N		
		CWPLAZA006	GNC BATHROOM	A	Y	N		
		CWPLAZA007	BAGELMAN SINK 1	A	Y	N		
		CWPLAZA008	BAGELMAN SINK 2	A	Y	N		
		CWPLAZA009	JOY HALLMARK BATH	A	Y	N		Y
		CWPLAZA010	CVS CUSTODIAL SINK	A	Y	N		
		CWPLAZA011	TJ MAXX CUST SINK	A	Y	N		
		CWPLAZA012	OFFICE MAX KITCHEN	A	Y	N		
		CWPLAZA013	MICHAELS CLASS SINK	A	Y	N		Y
		CWPLAZA014	RAY & FLAN LADIES RM	A	Y	N	Y	

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0189483	**CANDLEWOOD LAKE SHOPPING PLAZA**	NTNC	25	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
14 CANDLEWOOD LAKE LANE			11			

Towns Served: BROOKFIELD

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*
		CWPLAZA015	RAY & FLAN MENS RM	A	Y	N		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10804	WELL #1	2	WELL #1	A				
10805	WELL #2	2	WELL #2	A				
10808	WELL #5	2	WELL #5	A				
52779	ATMOSPHERIC STORAGE							
52787	PRESSURE STORAGE							
947	WATER TREATMENT							

Certified Operator Information

Water System Facility: **WATER TREATMENT (WSF ID: 947)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2017
GIORDANO, DAVID S.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2017

Contact Information

Name	Organization	Job Title
Mr. Neil Rube	R&F Danbury, LLC	Vice President

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
7248 Morgan Road		Liverpool	NY	13088

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
315-453-2500		315-453-2570			

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

Name	Organization	Job Title
Mr. Carl Tedeschi	Raymour & Flanigan	Directorof Property

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
7248 Morgan Rd		Liverpool	NY	13088

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
315-453-2553		315-461-3677			ctedeschi@raymourflanigan.com

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
CT0189483	**CANDLEWOOD LAKE SHOPPING PLAZA**	NTNC	25	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
14 CANDLEWOOD LAKE LANE			11			

Towns Served: BROOKFIELD

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
CT0189493	**COUNTRY KIDS PLAY FARM**	NTNC	167	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
107 OLD STATE ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	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 three years**

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17		Complete
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

Physical Parameters (PPX) — **1 routine (RT) per quarter**

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/14 - 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**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 12/31/16		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
CT0189493	**COUNTRY KIDS PLAY FARM**	NTNC	167	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
107 OLD STATE ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
	1/1/17 - 12/31/17		Complete
	1/1/18 - 12/31/18		

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

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

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 quarter**

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

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	
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				
		KIDFARM001	STAFF BATHROOM	A	Y	2		
		KIDFARM002	ROOM #2	A	Y	2		
		KIDFARM003	BOYS ROOM UPSTAIRS	A		2		
		KIDFARM004	UPSATIRS SINK	A		2		
		KIDFARM005	ROOM #3	A		2		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10110	WELL	2	WELL	A				

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
CT0189493	**COUNTRY KIDS PLAY FARM**	NTNC	167	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
107 OLD STATE ROAD		1				

Towns Served: BROOKFIELD

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2017
GIORDANO, DAVID S.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2017

Contact Information

Name	Organization	Job Title
Ms. Camille Sage	Country Kids Play Farm	Administrator

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
107 Old State Road		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-2126		203-740-1551			ckpf8888@aol.com

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

Name	Organization	Job Title
Camille		

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
Att Camille	107 Old State Rd	Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address

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

Name	Organization	Job Title
Whisconier View Inc		

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
107 State Road		Brookfield	CT	06804

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

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
CT0189513	**PRINCE OF PEACE LUTHERAN CHURCH**	NTNC	58	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
119 JUNCTION ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	
	1/1/19 - 12/31/21	6/1-9/30	

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 12/31/18		
	1/1/19 - 12/31/21		

Nitrate And Nitrite (NOX) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
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 (SOC2) — **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		

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
CT0189513	**PRINCE OF PEACE LUTHERAN CHURCH**	NTNC	58	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
119 JUNCTION ROAD		1				

Towns Served: BROOKFIELD

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 EXEMPTION	3/1/2021	

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			
		A	GREEN LOUNGE	A	Y	1		
		B	LADIES ROOM -SCHOOL	A	Y			
		C	LADIES ROOM - CHURCH	A	Y	1		
		D	KITCHEN SINK	A	Y	2		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		E	MENS ROOM - SCHOOL	A	Y	2		
		F	CLASSROOM 1	A	Y			
		G	GIRLS ROOM - SCHOOL	A	Y			
		H	BOYS ROOM - SCHOOL	A	Y	2		
		I	CLASSROOM 2	A	Y			
		J	CLASSROOM 3	A	Y			
		K	CLASSROOM 4	A	Y			
		L	CLASSROOM 5	A	Y			
		M	SACRISTY	A	Y			
		N	FRONT OFFICE	A	Y			
		P	MENS ROOM - CHURCH	A	Y			
		Q	LADIES ROOM - LOWER	A	Y			
		R	MENS ROOM - LOWER	A	Y			
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10111	WELL	2	WELL	A				

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
CT0189513	**PRINCE OF PEACE LUTHERAN CHURCH**	NTNC	58	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
119 JUNCTION ROAD		1				

Towns Served: BROOKFIELD

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
HURLBUT, PAUL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2019

Contact Information

Name	Organization	Job Title
Ms. Debra A. Nobes		Director

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
P.O. Box 5184	Route 133	Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-0140		203-775-9573			

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

Name	Organization	Job Title
Prince of Peace Lutheran Church		

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
119 Junction Rd, P. O. Box 5184		Brookfield	CT	06804

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

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
CT0189563	**LANDMARK OFFICE CONDO ASSOCIATION**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
2 OLD NEW MILFORD ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/15 - 12/31/17	6/1-9/30	Complete
	1/1/16 - 12/31/18	6/1-9/30	
	1/1/19 - 12/31/21	6/1-9/30	

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
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 three years**

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

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

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

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
CT0189563	**LANDMARK OFFICE CONDO ASSOCIATION**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
2 OLD NEW MILFORD ROAD		1				

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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		

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	3/1/2017	

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				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10113	WELL	2	WELL	A				

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
HURLBUT, ANDREW	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	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
CT0189563	**LANDMARK OFFICE CONDO ASSOCIATION**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
2 OLD NEW MILFORD ROAD		1				

Towns Served: BROOKFIELD

Contact Information

Name	Organization	Job Title
Mr. Dennis Stone	Charter Group, Inc.	Property Chairman

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
246 Federal Road		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-4333		203-740-7486			dennisstone@charterbuilt.com

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

Please note the following:

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

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

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

End of schedule

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
CT0180104	**BROOKFIELD COMMONS**	NTNC	125	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 FEDERAL ROAD			2			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

Total Haloacetic Acids (2456) — **1 routine (RT) per year**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
BROOKFIELD VISION CARE (BROOKBC006)	1/1/16 - 12/31/16	8/1-8/31	Complete
	1/1/17 - 12/31/17	8/1-8/31	
	1/1/18 - 12/31/18	8/1-8/31	

Total Trihalomethanes (2950) — **1 routine (RT) per year**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
MILLENIUM TRAVEL (BROOKBC004)	1/1/16 - 12/31/16	8/1-8/31	Complete
	1/1/17 - 12/31/17	8/1-8/31	
	1/1/18 - 12/31/18	8/1-8/31	

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	
	1/1/19 - 12/31/21	6/1-9/30	

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	7/1/16 - 9/30/16		
	10/1/16 - 12/31/16		Complete
	1/1/17 - 3/31/17		
	4/1/17 - 6/30/17		

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
CT0180104	**BROOKFIELD COMMONS**	NTNC	125	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 FEDERAL ROAD			2			

Towns Served: BROOKFIELD

Monitoring Requirements

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

Chloride (1017) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
	7/1/17 - 9/30/17		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/14 - 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**

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		

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

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

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 quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
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: **WELL B/C (WSF ID: 10861)**

E. Coli (3014) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL B/C (2)	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: **WELL D (WSF ID: 10862)**

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
CT0180104	**BROOKFIELD COMMONS**	NTNC	125	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 FEDERAL ROAD			2			

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **WELL D (WSF ID: 10862)**

E. Coli (3014) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL D (2)	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		

Monthly Water System Facility (WSF) Level Monitoring Requirements

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

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: .2 MG/L	Daily

Start Date: 10/1/2010

Compliance History: Monitoring Period	Operating Limit Compliance Status:	Monitoring Compliance Status:
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		N
1/1/2017 - 1/31/2017		
2/1/2017 - 2/28/2017		

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			
		BROOKBC001	HEALTHSOUTH	A	Y	2		
		BROOKBC002	ACCURATE OFICE MACH	A		2		
		BROOKBC003	OUT TAP NR GEROSA	A	Y	2		
		BROOKBC004	MILLENIUM TRAVEL	A		2		Y
		BROOKBC005	DR PARAVATIS OFFICE	A		2		
		BROOKBC006	BROOKFIELD VISION CA	A				Y
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10861	WELL B/C	2	WELL B/C	A				
10862	WELL D	2	WELL D	A				
1098	CHLORINATION TREATMENT							
47612	ATMOSPHERIC STORAGE							
47614	PRESSURE STORAGE							
59403	BLADDER TANK (BUILDING D)							

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
CT0180104	**BROOKFIELD COMMONS**	NTNC	125	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 FEDERAL ROAD			2			

Towns Served: BROOKFIELD

Certified Operator Information

Water System Facility: **CHLORINATION TREATMENT (WSF ID: 1098)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
HURLBUT, ANDREW	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2017

Contact Information

Name	Organization	Job Title
Ms. Peg Routhier	Rei Property Management	Vp, Association Mgr.

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
2A Ives Street		Danbury	CT	06810

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-744-8400	138	203-744-2758		203-744-8400	prouthier@reipropertymanagement.net

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

Name	Organization	Job Title
Brookfield Commons Association Inc		

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
246A Federal Road		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-885-7460					

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

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
CT0180384	**GREEN TREE TOYOTA**	NTNC	55	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
45 COMMERCE ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	7/1/16 - 8/31/16		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		

Total Coliform (3100) — **3 (TR) per month**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	9/1/16 - 9/30/16		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/14 - 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**

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

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

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		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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

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
CT0180384	**GREEN TREE TOYOTA**	NTNC	55	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
45 COMMERCE ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

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

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 quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
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: **WELL1 (WSF ID: 10066)**

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
WELL1 (2)	8/23/16 - 8/28/16		Complete

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013	
CROSS CONNECTION SURVEY REPORT	3/1/2016	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	

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				
		GTT001	MENS BATHROOM 1ST FL	P	Y	3		
		GTT002	LADIES RM 1ST FL	P	Y	3		
		GTT003	UPSTAIRS LADIES RM	P	Y	3		
		GTT004	UPSTAIRS MENS RM	P	Y	3		
		GTT005	SHOP SINK	P	Y	3		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				

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
CT0180384	**GREEN TREE TOYOTA**	NTNC	55	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
45 COMMERCE ROAD			1			

Towns Served: BROOKFIELD

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*
10066	WELL1	2	WELL1	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*
FOLEY, JAMES	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2017

Contact Information

Name	Organization	Job Title
Mr. Harold Tananbaum		Owner

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
21 Baldwin Farm Rd.		Greenwich	CT	06830

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-6221					

Contact Role(s): **Owner**

Name	Organization	Job Title
Mr. John Blank	Greentree Toyota	

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
45 Commerce Drive		Brookfield	CT	06776

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-6221					

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
CT0180694	**MCMULLIN MANUFACTURING CORPORATION**	NTNC	33	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
70 POCONO ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

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

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/15 - 12/31/17		
	1/1/18 - 12/31/20		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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		

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
CT0180694	**MCMULLIN MANUFACTURING CORPORATION**	NTNC	33	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
70 POCONO ROAD			1			

Towns Served: BROOKFIELD

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 EXEMPTION	3/1/2021	

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				
		TT001	LADIES ROOM 1ST FLR	P	Y	2		
		TT002	MENS ROOM 1ST FLR	P	Y	2		
		TT003	CAFETERIA 1ST FLR	P	Y	2		
		TT004	LADIES ROOM 2ND FLR	P	Y	2		
		TT005	MENS ROOM 2ND FLR	P	Y	2		
		TT006	CAFETERIA 2ND FLR	P	Y	2		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10988	WELL	2	WELL	A				
57388	UV TREATMENT STATION							
57390	PRESSURE STORAGE							

Certified Operator Information

Water System Facility: **UV TREATMENT STATION (WSF ID: 57388)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
HURLBUT, PAUL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2019

Contact Information

Name	Organization	Job Title
Mr. Ted R. Anson	McMullin Manufacturing Corp	Dir Risk Mangt

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0180694	**MCMULLIN MANUFACTURING CORPORATION**	NTNC	33	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
70 POCONO ROAD			1			

Towns Served: BROOKFIELD

70 Pocono Road	P.O. Box 0405	Brookfield	CT	06804-0405

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-740-3366		203-775-7953		203-733-0200	tanson@mcmullinmfg.com

Contact Role(s): **Administrative 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

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
CT0180834	**CHRISTIAN LIFE ACADEMY**	NTNC	148	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
133 JUNCTION ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/16	6/1-9/30	
	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**

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
POINT OF ENTRY (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 three years**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
POINT OF ENTRY (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**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
POINT OF ENTRY (3)	1/1/16 - 12/31/16		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
CT0180834	**CHRISTIAN LIFE ACADEMY**	NTNC	148	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
133 JUNCTION ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
POINT OF ENTRY (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 quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
POINT OF ENTRY (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		

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
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*
Chloride MCL Violation	1/1/16 - 3/31/16	2	5/13/2016		5/23/2016	
Chloride MCL Violation	7/1/16 - 9/30/16	2	10/16/2016		10/26/2016	
Chloride MCL Violation	4/1/16 - 6/30/16	2	10/16/2016		10/26/2016	

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	POINT OF ENTRY	A				
55678	WELL 1	2	WELL 1	A				
55680	WELL 2	2	WELL 2	A				
55682	TREATMENT PLANT							
55684	ATMOSPHERIC TANK							
55686	BLADDER TANK							

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
CT0180834	**CHRISTIAN LIFE ACADEMY**	NTNC	148	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
133 JUNCTION ROAD			1			

Towns Served: BROOKFIELD

Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 55682)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
BORMOLINI, STEPHEN W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2017

Contact Information

Name	Organization	Job Title
Mr. Jerry Morin	Christian Life Academy	

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
133 Junction Road		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-5191					

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

Name	Organization	Job Title
First Assembly of God		

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
379 Federal Rd		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address

Contact Role(s): **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

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
CT0180914	**ELMBROOK PLAZA**	NTNC	30	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
632-640 FEDERAL RD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

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

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

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

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 12/31/18		
	1/1/19 - 12/31/21		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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		

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
CT0180914	**ELMBROOK PLAZA**	NTNC	30	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
632-640 FEDERAL RD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2014	
CROSS CONNECTION SURVEY REPORT	3/1/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	

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			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		EP001	BAILEYS M REST RM	A	Y	1		
		EP002	BAILEYS L REST RM	A	Y	1		
		EP003	BAILEYS BAR SINK 1	A	Y	1		
		EP004	BAILEYS BAR H SINK	A	Y	1		
		EP005	BAILEYS K H SINK 1	A	Y	1		
		EP006	BAILEYS L TRPL SINK	A	Y	1		
		EP007	BAILEYS K H SINK 2	A	Y	1		
		EP008	BAILEYS K PREP SINK	A	Y	1		
		EP009	BAILEYS EMP H SINK	A	Y	1		
		EP010	BAILEYS UTIL SINK	A	Y	1		
		EP011	BAILEYS REST RM SINK	A	Y	1		
		EP012	BAILEYS BAR SINK 2	A	Y	1		
		EP013	CREDIT WORKS RESTR	A	Y	1		
		EP014	PAPERBACK REST RM	A	Y	1		
		EP015	SCOTT LIMO REST RM	A	Y	1		
		EP016	KUMON REST RM	A	Y	2		
		EP017	AIG REST RM	A	Y	1		
		EP018	AIG KITHCHEN SINK	A	Y	1		
		EP019	2ND FLR L REST RM	A	Y	1		
		EP020	2ND FLR M REST RM	A	Y	1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				

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
CT0180914	**ELMBROOK PLAZA**	NTNC	30	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
632-640 FEDERAL RD			1			

Towns Served: BROOKFIELD

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*
00700	ENTRY POINT	3	ENTRY POINT	A				
20383	WELL	2	WELL	A				

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
FOLEY, JAMES	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2017

Contact Information

Name	Organization	Job Title
Mr. Daniel D. Johnson	632-640 Federal LLC	Member/Manager

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
260 Quarry Road	Unit A	Milford	CT	06460

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-306-0222	13	203-306-0229		203-915-6211	djohnson@mjbcorp.com

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

Please note the following:

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

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

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

End of schedule

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
CT0181034	**50 POCONO ROAD**	NTNC	40	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
DISTRIBUTION SYSTEM (4)	1/1/14 - 12/31/22		

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

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

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

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

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

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		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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		

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
CT0181034	**50 POCONO ROAD**	NTNC	40	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			1			

Towns Served: BROOKFIELD

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 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		

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				
		DSA001	KITCHEN SINK	P	Y	1		
		DSA002	1ST FLR M SINK	P	Y	1		
		DSA003	1ST FLR W SINK	P	Y	1		
		DSA004	2ND FLR M SINK	P	Y	1		
		DSA005	2ND FLR W SINK	P	Y	1		
		DSA006	UTIL SINK	P	Y	1		
		DSA007	WAREHOUSE R RM SINK	P	Y	1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
20394	WELL	2	WELL	A				

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
OPERATOR ASSIGNMENT REQUIRE			

Contact Information

Name	Organization	Job Title
Ms. Lisa Buccino	Dsa Encore LLC	Controller

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
50 Pocono Road	P.O. Box 5108	Brookfield	CT	06804

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
CT0181034	**50 POCONO ROAD**	NTNC	40	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			1			

Towns Served: BROOKFIELD

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-740-4244		203-740-4231		203-740-4254	lbuccino@dsaencore.com

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

Please note the following:

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

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

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

End of schedule

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0189763	**COUNTRY KIDS CLUB**	NTNC	55	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
94 OLD STATE ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	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 three years**

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/17 - 3/31/17		Complete
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

Physical Parameters (PPX) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete
	10/1/16 - 12/31/16		Complete

Water System Facility: **TREATMENT PLANT (WSF ID: 00700)**

Chloride (1017) — **1 routine (RT) per quarter**

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

Nitrate (1040) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
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
CT0189763	**COUNTRY KIDS CLUB**	NTNC	55	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
94 OLD STATE ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

Water System Facility: **TREATMENT PLANT (WSF ID: 00700)**

Nitrite (1041) — **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		Complete
	1/1/18 - 12/31/18		

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

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

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)	1/1/14 - 12/31/16		Complete
	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

Organic Chemicals (VOCS) — **1 routine (RT) per quarter**

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

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	
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*
00500	BETWEEN GAC FILTERS							
00501	COMBINED RAW WATER DISCHARGE	5	COMBINED RAW WATER	A				
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		KIDCLUB001	KITCHEN SINK	A	Y	2		
		KIDCLUB002	WOMANS BATH UPSTRS	A		2		
		KIDCLUB003	ROOM #2	A		2		
		KIDCLUB004	MENS RM DOWNSTAIRS	A		2		
		KIDCLUB005	DWNSTRS CLASS SINK	A		2		

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0189763	**COUNTRY KIDS CLUB**	NTNC	55	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
94 OLD STATE ROAD			1			

Towns Served: BROOKFIELD

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*
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	TREATMENT PLANT	3	ENTRY POINT	A				
10120	WELL #1	2	COUNTRY KID'S CLUB	A				
10837	WELL #2	2	WELL #2	A				
52004	PRESSURE STORAGE							

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
BLACK, RON W.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2017
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2017
GIORDANO, DAVID S.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2017

Contact Information

Name	Organization	Job Title
Ms. Camille Sage	Country Kids Play Farm	Administrator

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
107 Old State Road		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-2126		203-740-1551			ckpf8888@aol.com

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

Name	Organization	Job Title
Ms. Rosanne Keller	Kids View LLC	President

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
8 Sulky Drive		Brookfield	CT	06804

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

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
CT0189823	**U. S. POST OFFICE - BROOKFIELD**	NTNC	70	F	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
115 POCONO ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

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

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/15 - 12/31/17		Complete
	1/1/18 - 12/31/20		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/14 - 12/31/16		
	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
CT0189823	**U. S. POST OFFICE - BROOKFIELD**	NTNC	70	F	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
115 POCONO ROAD			1			

Towns Served: BROOKFIELD

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		
	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*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2010	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2011	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2011	
CROSS CONNECTION SURVEY REPORT	3/1/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/30/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2013	
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	3/1/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/30/2016	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2016	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2017	

Public Notification Requirements

Violation/Situation	*Compliance Period*	*Notice Tier*	*Public Notification*		*PN Certification*	
			Required	*Performed*	*Due to DPH*	*Received*
Lead and Copper M&R Violation	1/1/16 - 6/30/16	3	9/27/2017		10/7/2017	

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			
		BP001	BREAK ROOM	P	Y	1		
		BP002	LADIES RM L SINK	P	Y	1		

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0189823	**U. S. POST OFFICE - BROOKFIELD**	NTNC	70	F	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
115 POCONO ROAD			1			

Towns Served: BROOKFIELD

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*
		BP003	LADIES RM R SINK	P	Y	1		
		BP004	MENS RM SINK 1	P	Y	1		
		BP005	MENS RM SINK 2	P	Y	1		
		BP006	MENS RM SINK 3	P	Y	1		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10945	WELL	2	WELL	A				
51811	PRESSURE STORAGE							

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
FOLEY, JAMES	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2017

Contact Information

Name	Organization	Job Title
Mr. Michael E. Garbowski	Us Postal Service	Postmaster

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
115 Pocono Road		Brookfield	CT	06804-9888

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-2717		203-775-5252		203-775-2717	

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

Please note the following:

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

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

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

End of schedule

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0189863	**1114 FEDERAL ROAD**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
				1		

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/14 - 12/31/22		

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

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

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

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

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

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		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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		

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
CT0189863	**1114 FEDERAL ROAD**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
				1		

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

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

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2014	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	
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	A				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
49180	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	12/31/2018
		WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2019

Contact Information

Name	Organization	Job Title
Mr. James J. Haydu	Trident - Itw	Envir. Qlty Engineer

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
1114 Federal Road		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-740-9333	3115	203-775-9660			jhaydu@trident-itw.com

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
CT0189863	**1114 FEDERAL ROAD**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
				1		

Towns Served: BROOKFIELD

Name	Organization	Job Title
Anne W. Rogg	Oskar Rogg Living Trust	Trustee

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
7 Treadwell Avenue		New Milford	CT	06776

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-799-7768					

Contact Role(s): **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

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
CT0189873	**PHARMCO PRODUCTS**	NTNC	33	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
58 VALE ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

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

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

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

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/15 - 12/31/17		
	1/1/18 - 12/31/20		

Organic Chemicals (VOCS) — **1 routine (RT) per quarter**

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

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
CT0189873	**PHARMCO PRODUCTS**	NTNC	33	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
58 VALE ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

Organic Chemicals (VOCS) — **1 routine (RT) per quarter**

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

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	
CROSS CONNECTION EXEMPTION	3/1/2022	

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 LOCATION	A				
		D001	RESTROOM 1	A	Y	N	Y	
		D002	RESTROOM 2	A	Y	N	Y	
		D003	RESTROOM 3	A	Y	N	Y	
		D004	LABORATORY SINK	A	Y	N	Y	
		D005	PRODUCTION TAP	A	Y	N	Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
53638	WELL	2	WELL	A				
53761	PHARMCO PRODUCTS WTP							
54290	BLADDER TANK 1							
54292	BLADDER TANK 2							

Certified Operator Information

Water System Facility: **PHARMCO PRODUCTS WTP (WSF ID: 53761)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
HURLBUT, PAUL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2019

Contact Information

Name	Organization	Job Title
Mr. Chris Ahlberg	Pharmco Products, Inc.	

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
58 Vale Road		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0189873	**PHARMCO PRODUCTS**	NTNC	33	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
58 VALE ROAD			1			

Towns Served: BROOKFIELD

203-740-5072		203-740-3481		203-790-1374	C.AHLBERG@pharmcoAAPER.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
CT0189793	**ST MARGUERITE BOURGEOYS CHURCH**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
138 CANDLEWOOD LAKE ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	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) — **5 routine (RT) per year**

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 12/31/18		
	1/1/19 - 12/31/21		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/15 - 12/31/17		
	1/1/18 - 12/31/20		

Organic Chemicals (VOCS) — **1 routine (RT) per quarter**

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

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
CT0189793	**ST MARGUERITE BOURGEOYS CHURCH**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
138 CANDLEWOOD LAKE ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

Organic Chemicals (VOCS) — **1 routine (RT) per quarter**

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

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
CROSS CONNECTION EXEMPTION	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	4	GENERIC DISTRIBUTION	A				
		D001	MENS RESTROOM	A	Y	N	Y	
		D002	WOMENS RESTROOM	A	Y	N	Y	
		D003	KITCHEN SINK 1	A	Y	N	Y	
		D004	KITCHEN SINK 2	A	Y	N	Y	
		D005	KITCHEN SINK 3	A	Y	N	Y	
		D006	SACRIST SINK	A	Y	1	Y	
		D007	SACRIST BATHROOM	A	Y	N	Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
53678	WELL	2	WELL	A				

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
RINALDI, EVELYN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2018
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2019
		WATER TREATMENT PLANT OPERATOR IN TRAINING	6/30/2019
BUTLER, JAMES	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	3/31/2019

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
CT0189793	**ST MARGUERITE BOURGEOYS CHURCH**	NTNC	35	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
138 CANDLEWOOD LAKE ROAD			1			

Towns Served: BROOKFIELD

Contact Information

Name	Organization	Job Title
Reverend Shawn Cutler		Pastor

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
138 Candlewood Lake Rd		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-5117		203-775-9254			ldiorio@stmarguerite.org

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

Please note the following:

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

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

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

End of schedule

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0189923	**125 COMMERCE DRIVE**	NTNC	37	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

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

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

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

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

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		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/14 - 12/31/16		
	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
CT0189923	**125 COMMERCE DRIVE**	NTNC	37	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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*
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	
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	125COM001	1ST FLOOR LADIES	A	Y	1		
		125COM002	1ST FLOOR MEN	A	Y	1		
		125COM003	1ST FLOOR JANITOR	A	Y	1		
		125COM004	2ND FLOOR LADIES	A	Y	1		
		125COM005	2ND FLOOR MEN	A	Y	1		
		125COM006	2ND FLOOR JANITOR	A	Y	1		
		4	DISTRIBUTION	A				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
54631	WELL	2	WELL	A				
55774	PRESSURE STORAGE							

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
OPERATOR ASSIGNMENT REQUIRE			

Contact Information

Name	Organization	Job Title
Mr. Don F. Longo	Tecor Properties	

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
3 Production Drive	Unit #1	Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-775-0604		203-775-0624	203-948-2357		

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
CT0189923	**125 COMMERCE DRIVE**	NTNC	37	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			1			

Towns Served: BROOKFIELD

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
CT0189973	**PHOTRONICS, INC. BUILDING 1**	NTNC	110	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
15 SECOR ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

Asbestos (1094)			**1 routine (RT) per nine years**
Sampling Point (Sampling Point ID)	***Monitoring Period***	***Collection Period***	***Compliance Status***
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

Total Coliform (3100)			**1 routine (RT) per quarter**
Sampling Point (Sampling Point ID)	***Monitoring Period***	***Collection Period***	***Compliance Status***
Select from Inventory of Active Sampling Points	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**
Sampling Point (Sampling Point ID)	***Monitoring Period***	***Collection Period***	***Compliance Status***
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	
	1/1/19 - 12/31/21	6/1-9/30	

Physical Parameters (PPS)			**1 routine (RT) per quarter**
Sampling Point (Sampling Point ID)	***Monitoring Period***	***Collection Period***	***Compliance Status***
Select from Inventory of Active Sampling Points	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**
Sampling Point (Sampling Point ID)	***Monitoring Period***	***Collection Period***	***Compliance Status***
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**
Sampling Point (Sampling Point ID)	***Monitoring Period***	***Collection Period***	***Compliance Status***
ENTRY POINT (3)	1/1/15 - 12/31/17		
	1/1/18 - 12/31/20		

Nitrate And Nitrite (NOX)			**1 routine (RT) per year**
Sampling Point (Sampling Point ID)	***Monitoring Period***	***Collection Period***	***Compliance Status***
ENTRY POINT (3)	1/1/16 - 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**
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 three years**
Sampling Point (Sampling Point ID)	***Monitoring Period***	***Collection Period***	***Compliance Status***

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
CT0189973	**PHOTRONICS, INC. BUILDING 1**	NTNC	110	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
15 SECOR ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

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

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
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	4	DISTRIBUTION	A				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		PHOTRB1001	LOBBY LAVATORY	A		N	Y	
		PHOTRB1002	KITCHEN	A	Y	2		
		PHOTRB1003	1ST FLOOR MENS ROOM	A	Y	2		
		PHOTRB1004	1ST FLOOR MENS ROOM	A	Y	2		
		PHOTRB1005	1ST FLOOR LADIES ROO	A	Y	2		
		PHOTRB1006	1ST FLOOR LADIES ROO	A	Y	2		
		PHOTRB1007	1ST FLOOR JANITOR CL	A	Y	2		
		PHOTRB1008	2ND FLOOR MENS ROOM	A	Y	N		
		PHOTRB1009	2ND FLOOR MENS ROOM	A	Y	N		
		PHOTRB1010	2ND FLOOR LADIES ROO	A	Y	N		
		PHOTRB1011	2ND FLOOR LADIES ROO	A	Y	N		
		PHOTRB1012	CONFERENCE ROOM SINK	A	Y	2		
		PHOTRB1013	2ND FLOOR MENS ROOM	A	Y	2		
		PHOTRB1014	2ND FLOOR MENS ROOM	A	Y	2		
		PHOTRB1015	2ND FLOOR LADIES ROO	A	Y	2		
		PHOTRB1016	2ND FLOOR LADIES ROO	A	Y	2		
		PHOTRB1017	2ND FLOOR JANITOR CL	A	Y	2		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
57906	WELL	2	WELL	A				

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
BLACK, RON W.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2017
		WATER TREATMENT PLANT OPERATOR - CLASS II	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
CT0189973	**PHOTRONICS, INC. BUILDING 1**	NTNC	110	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
15 SECOR ROAD			1			

Towns Served: BROOKFIELD

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
GIORDANO, DAVID S.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2017

Contact Information

Name	Organization	Job Title
Ms. Richelle E. Burr	Photronics, Inc	Vice Presibent

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
15 Secor Road		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-740-5285	5285	203-775-5601		203-482-1323	rburr@photronics.com

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

Name	Organization	Job Title
Mr. John Gedney	Photronics Inc	

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
15 Secor Road		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-740-5346				203-948-9526	jgedney@photronics.com

Contact Role(s): **Administrative 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

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
CT0189983	**PHOTRONICS, INC. BUILDING 2**	NTNC	110	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
15 SECOR ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	
	1/1/19 - 12/31/21	6/1-9/30	

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

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

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/15 - 12/31/17		
	1/1/18 - 12/31/20		

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

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 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**

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

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		

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
CT0189983	**PHOTRONICS, INC. BUILDING 2**	NTNC	110	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
15 SECOR ROAD			1			

Towns Served: BROOKFIELD

Monitoring Requirements

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

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

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

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	4	DISTRIBUTION	A				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		PHOTRB2001	LOBBY LAVATORY	A	Y	N		
		PHOTRB2002	KITCHENETTE SINK	A	Y	N		
		PHOTRB2003	1ST FLOOR LADIES ROO	A	Y	N		
		PHOTRB2004	1ST FLOOR LADIES ROO	A	Y	N		
		PHOTRB2005	1ST FLOOR MENS ROOM	A	Y	N	Y	
		PHOTRB2006	1ST FLOOR MENS ROOM	A	Y	N	Y	
		PHOTRB2007	CUSTODIAN CLOSET	A	Y	N		
		PHOTRB2008	2ND FLOOR LADIES ROO	A	Y	N		
		PHOTRB2009	2ND FLOOR LADIES ROO	A	Y	N		
		PHOTRB2010	2ND FLOOR MENS ROOM	A	Y	N		
		PHOTRB2011	2ND FLOOR MENS ROOM	A	Y	N		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
57935	WELL	2	WELL	A				

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	*Operator Type*	*Certification(s)*	*Certification Expiration*
BLACK, RON W.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2017
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2017
GIORDANO, DAVID S.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2017

Contact Information

Name	Organization	Job Title
Ms. Richelle E. Burr	Photronics, Inc	Vice Presibent

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
15 Secor Road		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-740-5285	5285	203-775-5601		203-482-1323	rburr@photronics.com

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0189983	**PHOTRONICS, INC. BUILDING 2**	NTNC	110	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
15 SECOR ROAD			1			

Towns Served: BROOKFIELD

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

Name	Organization	Job Title
Mr. John Gedney	Photronics Inc	

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
15 Secor Road		Brookfield	CT	06804

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-740-5346				203-948-9526	jgedney@photronics.com

Contact Role(s): **Administrative 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

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.