

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0230392</b>	<b>CHERRY BROOK SCHOOL</b>	NTNC	615	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
4 BARBOURTOWN ROAD			1				
Towns Served: CANTON							

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/15 - 12/31/17	6/1-9/30	Complete		
	1/1/16 - 12/31/18	6/1-9/30	Complete		
	1/1/17 - 12/31/19	6/1-9/30			
	1/1/20 - 12/31/22	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
<b>Physical Parameters (PPX)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete		
	1/1/17 - 12/31/19				
	1/1/20 - 12/31/22				
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	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				
	7/1/17 - 9/30/17				
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0230392</b>	<b>CHERRY BROOK SCHOOL</b>	NTNC	615	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
4 BARBOURTOWN ROAD			1				

Towns Served: CANTON

## Monitoring Requirements

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

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

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

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

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

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
CROSS CONNECTION SURVEY REPORT	3/1/2016	
RESPOND TO SANITARY SURVEY	9/14/2016	9/12/2016

## Public Notification Requirements

<i>Violation/Situation</i>	<i>Compliance Period</i>	<i>Notice Tier</i>	<i>Public Notification</i>		<i>PN Certification</i>	
			<i>Required</i>	<i>Performed</i>	<i>Due to DPH</i>	<i>Received</i>
Pesticides, Herbicides and PCBs - Phase M&R Violation	1/1/08 - 12/31/10	3	3/7/2012		3/17/2012	
Asbestos M&R Violation	1/1/02 - 12/31/10	3	3/7/2012		3/17/2012	
Inorganic Chemicals M&R Violation	1/1/11 - 12/31/13	3	5/2/2015		5/12/2015	
E. Coli	4/1/16 - 6/30/16	3	11/7/2017		11/17/2017	
Nitrate And Nitrite M&R Violation	7/1/16 - 9/30/16	3	2/7/2018		2/17/2018	

## Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		CBPS001	4 BARBOURTOWN ROAD	P	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10140	WELL 1	2	WELL 1	A				
11017	WELL 2	2	WELL 2	A				

## Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

<i>Operator Name</i>	<i>Operator Type</i>	<i>Certification(s)</i>	<i>Certification Expiration</i>
GRANT, SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2017

*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		
<b>CT0230392</b>	<b>CHERRY BROOK SCHOOL</b>	NTNC	615	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
4 BARBOURTOWN ROAD			1				
Towns Served: CANTON							

## Contact Information

Name		Organization			Job Title			
<b>Mr. Kevin D. Case</b>		Canton Public Schools			Superintendent			
Mailing Address Line One		Mailing Address Line Two			City		State	Zip Code
4 Market Street		Suite 100			Canton		CT	06019
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-693-7704	10	860-693-7706			kcase@cantonschools.org			

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

Name		Organization			Job Title			
<b>Town of Canton</b>								
Mailing Address Line One		Mailing Address Line Two			City		State	Zip Code
P. O. Box 168					Collinsville		CT	06022
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			

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

**Please note the following:**

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

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

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

**End of schedule**

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0235033	CANTON PROFESSIONAL BUILDING	NTNC	35	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
191 ALBANY TURNPIKE			1				
Towns Served: CANTON							

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/15 - 12/31/17	6/1-9/30			
	1/1/18 - 12/31/20	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
<b>Physical Parameters (PPX)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete		
	1/1/17 - 12/31/19				
	1/1/20 - 12/31/22				
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/16 - 12/31/16		Complete		
	1/1/17 - 12/31/17				
	1/1/18 - 12/31/18				
<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/14 - 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		
<b>CT0235033</b>	<b>CANTON PROFESSIONAL BUILDING</b>	NTNC	35	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
191 ALBANY TURNPIKE			1				
Towns Served: CANTON							

### Monitoring Requirements

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

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

<b>Organic Chemicals (VOCS)</b>			<b>1 routine (RT) per year</b>
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/16 - 12/31/16		Complete
	1/1/17 - 12/31/17		
	1/1/18 - 12/31/18		

### Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION SURVEY REPORT	3/1/2016	

### 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	ENTRY POINT	A				
10141	WELL	2	WELL	A				

### Certified Operator Information

<b>Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
<b>Facility Classification: SMALL WATER SYSTEM</b>			
Operator Name	Operator Type	Certification(s)	Certification Expiration
HELMING, TRAVIS	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2019
		WATER TREATMENT PLANT OPERATOR - CLASS III	9/30/2019

### Contact Information

Name			Organization			Job Title			
Ms. Amy C. Paul			4 Sisters Canton, LLC			Owner			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
26 Lofgren Road			P. O. Box 1058			Avon		CT	06001
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-798-4922				860-882-8593	Amy@4sistersllc.com				
Contact Role(s): <b>Administrative Contact, Owner</b>									

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source	
<b>CT0235033</b>	<b>CANTON PROFESSIONAL BUILDING</b>	NTNC	35	P	GW	
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
191 ALBANY TURNPIKE		1				
Towns Served: CANTON						

**Please note the following:**

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

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

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

**End of schedule**

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0230164</b>	<b>JONIS CHILD CARE</b>	NTNC	112	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
352 ALBANY TURNPIKE				2			

Towns Served: CANTON

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per six months</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 12/31/16		Complete		
	1/1/17 - 6/30/17				
	7/1/17 - 12/31/17				
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
<b>Physical Parameters (PPX)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
<b>Water System Facility: ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete		
	1/1/17 - 12/31/19				
	1/1/20 - 12/31/22				
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/16 - 12/31/16		Complete		
	1/1/17 - 12/31/17		Complete		
	1/1/18 - 12/31/18				
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16				
	1/1/17 - 3/31/17				

*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		
<b>CT0230164</b>	<b>JONIS CHILD CARE</b>	NTNC	112	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
352 ALBANY TURNPIKE				2			

Towns Served: CANTON

## Monitoring Requirements

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

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

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

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

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

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
SWTS 1: SOURCE WATER MONITORING	6/30/2010	
CCTS 1: PWS TO PROPOSE OCCT	6/30/2010	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2011	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2011	
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 EXEMPTION	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	
RESPOND TO SANITARY SURVEY	12/22/2016	12/22/2016
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2017	

## Public Notification Requirements

<i>Violation/Situation</i>	<i>Compliance Period</i>	<i>Notice Tier</i>	<i>Public Notification</i>		<i>PN Certification</i>	
			<i>Required</i>	<i>Performed</i>	<i>Due to DPH</i>	<i>Received</i>
Total Coliform M&R Violation	7/1/04 - 9/30/04	2	1/26/2005		2/5/2005	
Total Coliform M&R Violation	1/1/05 - 3/31/05	2	8/20/2005		8/30/2005	
Total Coliform M&R Violation	4/1/05 - 6/30/05	2	11/13/2005		11/23/2005	
Physical Parameters M&R Violation	7/1/04 - 9/30/04	3	12/27/2005		1/6/2006	
Physical Parameters M&R Violation	4/1/05 - 6/30/05	3	10/14/2006		10/24/2006	
Pesticides, Herbicides and PCBs - Phase M&R Violation	7/1/09 - 9/30/09	3	12/1/2010		12/11/2010	

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0230164</b>	<b>JONIS CHILD CARE</b>	NTNC	112	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
352 ALBANY TURNPIKE				2			
Towns Served: CANTON							

## Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
Organic Chemicals M&R Violation	4/1/16 - 6/30/16	3	10/6/2017		10/16/2017	
Pesticides, Herbicides and PCBs - Phase M&R Violation	4/1/16 - 6/30/16	3	10/6/2017		10/16/2017	
Physical Parameters M&R Violation	4/1/16 - 6/30/16	3	10/6/2017		10/16/2017	
Total Coliform M&R Violation	4/1/16 - 6/30/16	3	11/7/2017		11/17/2017	

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Total Coliform Status	Lead and Copper Rule 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			
20477	WELL	2	WELL	A			

## Certified Operator Information

Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
Facility Classification: SMALL WATER SYSTEM			
Operator Name	Operator Type	Certification(s)	Certification Expiration
SCHNEIDER, KEITH	CHIEF OPERATOR	SMALL WATER SYSTEM OPERATOR	3/31/2017

## Contact Information

Name			Organization			Job Title			
Mr. Robert R. Schneider			Schneiders Iv, Inc.			Owner			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
146 Juniper Drive						Avon		CT	06001
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-675-5342		860-404-0177							
Contact Role(s): <b>Owner</b>									
Name			Organization			Job Title			
Mr. Keith Schneider						Certified Operator			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
304 Spielman Hwy.						Burlington		CT	06013
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-404-0177			860-878-9953		keith_Jonischildcare@yahoo.com				
Contact Role(s): <b>Administrative Contact</b>									

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source			
<b>CT0230164</b>	<b>JONIS CHILD CARE</b>	NTNC	112	P	GW			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
352 ALBANY TURNPIKE				2				
Towns Served: CANTON								
Name			Organization			Job Title		
<b>Mr. Jesse Schneider</b>			Jonis Cld Care/Schneiders Inc.					
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
146 Juniper Drive						Avon	CT	06001
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-882-8849					kipkeller@hotmail.com			
Contact Role(s): <b>Legal Contact</b>								

**Please note the following:**

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

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

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

**End of schedule**

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0235063	STEPPING STONES EDUCATIONAL CENTER	NTNC	185	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
370 ALBANY TURNPIKE			1				

Towns Served: CANTON

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/16 - 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			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
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				
<b>Physical Parameters (PPX)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete		
	10/1/16 - 12/31/16		Complete		
<b>Water System Facility: ENTRY POINT (WSF ID: 00700)</b>					
<b>Di(2-Ethylhexyl) - Phthalate (2039)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/16 - 12/31/16		Complete		
	1/1/17 - 12/31/17		Complete		
	1/1/18 - 12/31/18				
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/16 - 12/31/18				
	1/1/19 - 12/31/21				
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/16 - 12/31/16		Complete		
	1/1/17 - 12/31/17		Complete		
	1/1/18 - 12/31/18				

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0235063</b>	<b>STEPPING STONES EDUCATIONAL CENTER</b>	NTNC	185	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
370 ALBANY TURNPIKE			1				
Towns Served: CANTON							

## Monitoring Requirements

<b>Water System Facility: ENTRY POINT (WSF ID: 00700)</b>							
<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>				<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>		<i>Collection Period</i>		<i>Compliance Status</i>	
ENTRY POINT (3)		1/1/14 - 12/31/16				Complete	
		1/1/17 - 12/31/19					
		1/1/20 - 12/31/22					
<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>				<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>		<i>Collection Period</i>		<i>Compliance Status</i>	
ENTRY POINT (3)		1/1/14 - 12/31/16				Complete	
		1/1/17 - 12/31/19					
		1/1/20 - 12/31/22					
<b>Organic Chemicals (VOCS)</b>				<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>		<i>Collection Period</i>		<i>Compliance Status</i>	
ENTRY POINT (3)		1/1/16 - 12/31/18					
		1/1/19 - 12/31/21					

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

<b>Water System Facility: ENTRY POINT (WSFID: 00700)</b>							
<b>Analyte</b>	<b>Monitoring Requirement (Summary Type)</b>	<b>Operating Limit</b>		<b>Samples Req/Month</b>			
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7 PH		4			
<b>Start Date:</b> 1/1/2002		<b>Compliance History:</b>		<b>Operating Limit</b>	<b>Monitoring</b>		
		<b>Monitoring Period</b>		<b>Compliance Status:</b>	<b>Compliance Status:</b>		
		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	12/29/2013	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016	
CROSS CONNECTION EXEMPTION	3/1/2020	

## 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	Stage 2 Asbestos 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			

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0235063</b>	<b>STEPPING STONES EDUCATIONAL CENTER</b>	NTNC	185	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
370 ALBANY TURNPIKE			1				
Towns Served: CANTON							

## 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
10725	WELL 1	2	WELL 1	A				
1150	WATER TREATMENT							

## Certified Operator Information

Water System Facility: <b>WATER TREATMENT (WSF ID: 1150)</b>			
Facility Classification: CLASS 1 TREATMENT PLANT			
			Certification Expiration
Operator Name	Operator Type	Certification(s)	Certification Expiration
CHOUINARD, THOMAS	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	12/31/2017

## Contact Information

Name		Organization			Job Title	
<b>Ms. Elaine Smith</b>		Stepping Stones Ed. Center			Co-Owner	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
370 Albany Turnpike		P.O. Box 523		Canton	CT	06019
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-693-6294		860-693-9685		860-693-2852		

Contact Role(s): **Owner**

Name		Organization			Job Title	
<b>Mr. Robert S. Amrein</b>		Stepping Stones Ed Center, Inc				
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
370 Albany Turnpike				Canton	CT	06019
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-693-2852						

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

**Please note the following:**

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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**End of schedule**