

# 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>CT0290024</b>	<b>CAMP JEWELL-HIDEAWAY</b>	NC	100	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
73 MCCLAVE ROAD				4			
Towns Served: COLEBROOK							

## Monitoring Requirements

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

<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>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: ENTRY POINT (WSF ID: 00700)**

<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				

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

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

<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: 7.0 PH	4	
<b>Start Date:</b> 4/1/2008		<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
		<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
		8/1/2016 - 8/31/2016		N
		9/1/2016 - 9/30/2016		N
		10/1/2016 - 10/31/2016		N
		11/1/2016 - 11/30/2016		N
		12/1/2016 - 12/31/2016		
		1/1/2017 - 1/31/2017		

## Water System Facility and Sampling Point Inventory

<b>Water System Facility ID</b>	<b>Water System Facility</b>	<b>Sampling Point ID</b>	<b>Sampling Point Description</b>	<b>Status</b>	<b>Total Coliform Rule</b>	<b>Lead and Copper Rule Tier</b>	<b>Asbestos</b>	<b>Stage 2 DBPR</b>
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.*

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<b>CT0290024</b>	<b>CAMP JEWELL-HIDEAWAY</b>	NC	100	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
73 MCCLAVE ROAD				4			
Towns Served: COLEBROOK							

## 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				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
23104	WELL	2	WELL	A				
48221	CALCITE FILTER							
56038	BOOSTER PUMP							

## Contact Information

Name				Organization			Job Title		
<b>Mr. Harold Sparrow</b>				YMCA Greater Hartford			Ceo		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
241 Trumbull Street			2Nd Floor			Hartford		CT	06103
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-522-9622		860-522-1314			harold.sparrow@ghymca.org				

Contact Role(s): <b>Legal Contact, Owner</b>									
Name				Organization			Job Title		
<b>Mr. Norman T. Button li</b>				Ghymca			Property Manager		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
6 Prock Hill Rd			P.O. Box 8			Colebrook		CT	06021
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-379-2782	217	860-379-8715		315-886-9199	norm.button@ghymca.org				

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

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

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

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

**End of schedule**

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0290044</b>	<b>COLEBROOK TOWN HALL COMPLEX</b>	NC	25	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
559 COLEBROOK-WINSTED ROAD				1			
Towns Served: COLEBROOK							

### Monitoring Requirements

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

<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>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				

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

<b>Nitrate (1040)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	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>Nitrite (1041)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/16 - 12/31/16		Complete		
	1/1/17 - 12/31/17				
	1/1/18 - 12/31/18				

### Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
20539	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.*

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PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0290044</b>	<b>COLEBROOK TOWN HALL COMPLEX</b>	NC	25	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
559 COLEBROOK-WINSTED ROAD				1			
Towns Served: COLEBROOK							

## Contact Information

Name			Organization			Job Title			
<b>Mr. Thomas D. McKeon</b>			Town of Colebrook			First Selectman			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
562 Colebrook			P. O. Box 5			Colebrook		CT	06021-0005
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-379-3359	202	860-379-7215		860-738-0850	TOMMCKOEN@COLEBROOKTOWNHALL.ORG				

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

Name			Organization			Job Title			
<b>Colebrook</b>									
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
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**

# 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>CT0290054</b>	<b>COLEBROOK CONGREGATIONAL CHURCH</b>	NC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
471 SMITH HILL ROAD				1			
Towns Served: COLEBROOK							

## Monitoring Requirements

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

<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>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: ENTRY POINT (WSF ID: 00700)**

<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				

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
RESPOND TO SANITARY SURVEY	4/18/2013	

## Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
20540	WELL	2	WELL	A				

## Contact Information

Name		Organization		Job Title		
Ms. Abrah G. Carroll		Colebrook Cong Churh		Committee Member		
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
		P. O. Box 32		Colebrook	CT	06021

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PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source			
<b>CT0290054</b>	<b>COLEBROOK CONGREGATIONAL CHURCH</b>	NC	25	P	GW			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
471 SMITH HILL ROAD				1				
Towns Served: COLEBROOK								
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-379-4089					mjcarroll@charter.net			
Contact Role(s): <b>Administrative Contact</b>								
Name			Organization			Job Title		
<b>Reverend Alice D. Murphy</b>			Colebrook Cong Church			Pastor		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
471 Smith Hill Road						Winsted	CT	06098
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-379-2517				860-379-6775				
Contact Role(s): <b>Legal Contact</b>								
<b>Please note the following:</b>								
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.								

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**End of schedule**