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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0745103	**LITCHFIELD MONTESSORI SCHOOL**	NTNC	120	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
5 KNIFE SHOP ROAD		1				

Towns Served: LITCHFIELD

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		
	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		

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 (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		

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Towns Served: LITCHFIELD

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 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 EXEMPTION	3/1/2019	

Public Notification Requirements

Violation/Situation	*Compliance Period*	*Notice Tier*	*Public Notification*		*PN Certification*	
			Required	*Performed*	*Due to DPH*	*Received*
Distribution Color MCL Violation	1/1/09 - 3/31/09	2	5/14/2009		5/24/2009	
Distribution Color MCL Violation	1/1/12 - 3/31/12	2	6/14/2012		6/24/2012	
Distribution Color MCL Violation	4/1/12 - 6/30/12	2	9/8/2012		9/18/2012	

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				
10351	WELL	2	WELL	A				
51745	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*
GRANT, SHANE	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2017
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2017

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Towns Served: LITCHFIELD

Contact Information

Name	Organization	Job Title
Ms. Lisa Wojcik	Litchfield Montessori School	Business Manager

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code
5 Knife Shop Road		Northfield	CT	06778

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-283-5920		860-283-0552			businessmanager@litchfieldmontessori.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

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