

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0990011	BLUE TRAILS WATER ASSOCIATION	C	228	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			57				

Towns Served: DURHAM, NORTH BRANFORD

### 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	1/1/13 - 12/31/21				
<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	1/1/16 - 12/31/18	6/1-9/30			
	1/1/19 - 12/31/21	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>Net Gross Alpha (4000)</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>Uranium (4006)</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>Combined Radium-226/228 (4010)</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				

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

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

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CT0990011	BLUE TRAILS WATER ASSOCIATION	C	228	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			57				

Towns Served: DURHAM, NORTH BRANFORD

## Monitoring Requirements

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

Inorganic Chemicals (IOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/16 - 12/31/18		
	1/1/19 - 12/31/21		
Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/16 - 12/31/16		Complete
	1/1/17 - 12/31/17		
	1/1/18 - 12/31/18		
Pesticides, Herbicides and PCBs-Phase II (SOC2)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete
	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete
	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/15 - 12/31/17		
	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 EXEMPTION	3/1/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
SUBMIT CCR TO THE DEPARTMENT	6/30/2017	
SUBMIT CCR CERTIFICATION FORM	8/9/2017	

## 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				
57739	ATMOSPHERIC TANKS							

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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>CT0990011</b>	<b>BLUE TRAILS WATER ASSOCIATION</b>	<b>C</b>	<b>228</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		57					

Towns Served: DURHAM, NORTH BRANFORD

## 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	Stage 2 Asbestos DBPR
57741	PUMP STATION					
57743	PRESSURE TANK					
723	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
DEKOEYER, JAMES	CHIEF OPERATOR	SMALL WATER SYSTEM OPERATOR CONDITIONAL	9/30/2017

## Contact Information

Name		Organization			Job Title	
<b>Blue Trails Association, Coporation</b>						
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
Barbara Lane				Durham	CT	06422
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
609-748-9186						

Contact Role(s): **Owner**

Name		Organization			Job Title	
<b>Mr. Richard Hintz</b>		Blue Trails Water Association			President	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
62 Barbara Lane				Durham	CT	06422
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-463-8547					rhintz01@comcast.net	

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

Name		Organization			Job Title	
<b>Mr. Pasquale Young</b>		Berdon, Young & Margolis, Pc			Attorney	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
350 Orange St.		2Nd Floor		New Haven	CT	06511
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-772-8414		203-492-4444				

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

**Please note the following:**

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

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

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

**End of schedule**

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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		
CT0990031	NORTHFORD GLEN CONDOMINIUM ASSOCIATION	C	84	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			21				

Towns Served: NORTH BRANFORD

## 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	1/1/13 - 12/31/21			
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</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	8/1/16 - 8/31/16		Complete	
	9/1/16 - 9/30/16		Complete	
	10/1/16 - 10/31/16		Complete	
	11/1/16 - 11/30/16		Complete	
	12/1/16 - 12/31/16		Complete	
	1/1/17 - 1/31/17			
	2/1/17 - 2/28/17			
	3/1/17 - 3/31/17			
	4/1/17 - 4/30/17			
	5/1/17 - 5/31/17			
	6/1/17 - 6/30/17			
	7/1/17 - 7/31/17			
	8/1/17 - 8/31/17			
<b>Disinfectant Byproducts - TTHM &amp; HAA5 (DBP)</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>	
BUILDINGS 1 & 2 UNITS (NGCDDBP1)	1/1/16 - 12/31/16	7/1-7/31	Complete	
	1/1/17 - 12/31/17	7/1-7/31		
	1/1/18 - 12/31/18	7/1-7/31		
<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	1/1/16 - 12/31/18	6/1-9/30		
	1/1/19 - 12/31/21	6/1-9/30		
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</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 - 1/31/17			
	2/1/17 - 2/28/17			
	3/1/17 - 3/31/17			
	4/1/17 - 4/30/17			
	5/1/17 - 5/31/17			
	6/1/17 - 6/30/17			
	7/1/17 - 7/31/17			
	8/1/17 - 8/31/17			
<b>Physical Parameters (PPX)</b>		<b>1 routine (RT) per month</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	8/1/16 - 8/31/16		Complete	

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0990031	NORTHFORD GLEN CONDOMINIUM ASSOCIATION	C	84	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			21				

Towns Served: NORTH BRANFORD

### Monitoring Requirements

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

Physical Parameters (PPX)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	9/1/16 - 9/30/16		Complete
	10/1/16 - 10/31/16		Complete
	11/1/16 - 11/30/16		Complete
	12/1/16 - 12/31/16		

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

Nitrate (1040)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	7/1/16 - 9/30/16		Complete
	10/1/16 - 12/31/16		Complete
	1/1/17 - 3/31/17		
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

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

Net Gross Alpha (4000)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete
	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

Uranium (4006)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete
	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

Combined Radium-226/228 (4010)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/16		Complete
	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

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

Pesticides, Herbicides and PCBs-Phase II (SOC2)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>

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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		
CT0990031	NORTHFORD GLEN CONDOMINIUM ASSOCIATION	C	84	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			21				

Towns Served: NORTH BRANFORD

## 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 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		

Water System Facility: **WELL #1 (WSF ID: 709)**

**E. Coli (3014) 1 routine (RT) per month**

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL #1 (2)	8/1/16 - 8/31/16		Complete
	9/1/16 - 9/30/16		Complete
	10/1/16 - 10/31/16		Complete
	11/1/16 - 11/30/16		Complete
	12/1/16 - 12/31/16		Complete
	1/1/17 - 1/31/17		
	2/1/17 - 2/28/17		
	3/1/17 - 3/31/17		
	4/1/17 - 4/30/17		
	5/1/17 - 5/31/17		
	6/1/17 - 6/30/17		
	7/1/17 - 7/31/17		
8/1/17 - 8/31/17			

## 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 Residual, Free	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily
<b>Start Date:</b> 7/1/2003	<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

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

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<b>CT0990031</b>	<b>NORTHFORD GLEN CONDOMINIUM ASSOCIATION</b>	C	84	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			21				

Towns Served: NORTH BRANFORD

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

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine Residual, Free	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily
<b>Start Date:</b> 7/1/2003	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	11/1/2016 - 11/30/2016		N
	12/1/2016 - 12/31/2016		
	1/1/2017 - 1/31/2017		

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
SUBMIT CCR TO THE DEPARTMENT	6/30/2017	
SUBMIT CCR CERTIFICATION FORM	8/9/2017	
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				
		NGCDDBP1	BUILDINGS 1 & 2 UNIT	A				Y
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
333	NORTHFORD GLEN PUMPHOUSE							
51644	ATMOSPHERIC STORAGE TANK							
51646	HYDROPNEUMATIC STORAGE TANK							
51648	BOOSTER PUMPING FACILITIES							
709	WELL #1	2	WELL #1	A				

## Certified Operator Information

**Water System Facility: NORTHFORD GLEN PUMPHOUSE (WSF ID: 333)**

**Facility Classification:** CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
LONGO, ROBERT J.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	12/31/2018
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2018

## Contact Information

Name			Organization			Job Title			
<b>Ms. Paulette Hart</b>			Northford Glen Condo Assoc.			Secretary			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
246 Reeds Gap Road			Unit #1A			Northford		CT	06472
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				

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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>CT0990031</b>	<b>NORTHFORD GLEN CONDOMINIUM ASSOCIATION</b>	<b>C</b>	<b>84</b>	<b>P</b>	<b>GW</b>			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
		21						
Towns Served: NORTH BRANFORD								
203-484-4390		203-951-4102		203-484-4390		paulette.hart@comcast.net		
Contact Role(s): <b>Legal Contact</b>								
Name				Organization		Job Title		
<b>Northford Glen Condominium Association</b>								
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
Emergency Contact						Emergency Contact	CT	06000
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-484-4869								
Contact Role(s): <b>Owner</b>								
Name				Organization		Job Title		
<b>Mr. Robert Weeden</b>				Northford Glen Condo Assn.		President		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
246 Reeds Gap Rd			Unit 1A			Northford	CT	06472
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-484-4869				203-484-4869	paulette.hart@comcast.net			
Contact Role(s): <b>Administrative Contact, Owner</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.								

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

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

**End of schedule**