

# 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>CT1020011</b>	<b>SCWA, CEDAR RIDGE DIVISION</b>	<b>C</b>	<b>370</b>	<b>L</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			123				

Towns Served: NORTH STONINGTON

## 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 Haloacetic Acids (2456)</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>
9 OAK DRIVE (CDR1T)	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>Total Trihalomethanes (2950)</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>
1 POND DRIVE (CDR1D)	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>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	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		Complete
	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>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	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 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		Complete
	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		

*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		
CT1020011	SCWA, CEDAR RIDGE DIVISION	C	370	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			123				

Towns Served: NORTH STONINGTON

### Monitoring Requirements

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

**Physical Parameters (PPS)** **1 routine (RT) per month**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	7/1/17 - 7/31/17		
	8/1/17 - 8/31/17		

**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>
Select from Inventory of Active Sampling Points	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

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		Complete
	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>

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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>CT1020011</b>	<b>SCWA, CEDAR RIDGE DIVISION</b>	<b>C</b>	<b>370</b>	<b>L</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			123				

Towns Served: NORTH STONINGTON

## Monitoring Requirements

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

<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>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)	1/1/15 - 12/31/17		
	1/1/18 - 12/31/20		

Water System Facility: **WELL 1 (WSF ID: 849)**

<b>E. Coli (3014)</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>
WELL 1 (2)	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		Complete
	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

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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>CT1020011</b>	<b>SCWA, CEDAR RIDGE DIVISION</b>	<b>C</b>	<b>370</b>	<b>L</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			123				

Towns Served: NORTH STONINGTON

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

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	Daily
<b>Start Date:</b> 7/1/2003		<b>Compliance History:</b>	<b>Monitoring Compliance Status:</b>
		<b>Monitoring Period</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	12/29/2012	
SUBMIT CCR TO THE DEPARTMENT	6/30/2017	
SUBMIT CCR CERTIFICATION FORM	8/9/2017	
CROSS CONNECTION EXEMPTION	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			
		CDR01	41 CEDAR DRIVE	A	Y			
		CDR02	57 POND DRIVE	A		3		
		CDR03	2 CEDAR DRIVE	A		3		
		CDR04	7 POND DRIVE	A		3		
		CDR05	5 POND DRIVE	A		3		
		CDR06	31 POND DRIVE	A		3		
		CDR07	11 POND DRIVE	A		3		
		CDR08	41 POND DRIVE	A	Y	3		
		CDR09	8 POND DRIVE	A	Y	3		
		CDR10	6 POND DRIVE	A	Y	3		
		CDR11	16 POND DRIVE	A	Y	3		
		CDR12	20 POND DRIVE	A	Y	3		
		CDR13	26 POND DRIVE	A	Y	3		
		CDR14	56 POND DRIVE	A	Y	3		
		CDR15	3 HICKORY LANE	A	Y	3		
		CDR16	37 POND DRIVE	A		3		Y
		CDR17	39 POND DRIVE	A	Y	3		
		CDR18	29 POND DRIVE	A	Y	3		
		CDR19	8 CEDAR DRIVE	A	Y	3		
		CDR1D	1 POND DRIVE	A		2		Y

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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>CT1020011</b>	<b>SCWA, CEDAR RIDGE DIVISION</b>	<b>C</b>	<b>370</b>	<b>L</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			123				

Towns Served: NORTH STONINGTON

## 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
		CDR1T	9 OAK DRIVE	A				Y
		CDR20	19 OAK DRIVE	A	Y	3		
		CDR21	20 OAK DRIVE	A	Y	3		
		CDR22	3 OAK DRIVE	A	Y	3		
		CDR23	40 CEDAR DRIVE	A	Y	3		
		CDR24	6 FOREST DRIVE	A	Y	3		
		CDR25	11 CEDAR DRIVE	A	Y	3		
		CDR26	28 POND DRIVE	A	Y	3		
		CDR27	55 POND DRIVE	A	Y	3		
		CDR28	60 POND DRIVE	A	Y	3		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
455	CEDAR RIDGE PUMPHOUSE							
50893	PRESSURE TANK							
849	WELL 1	2	WELL 1	A				

## Certified Operator Information

**Water System Facility: CEDAR RIDGE PUMPHOUSE (WSF ID: 455)**

<b>Facility Classification:</b> CLASS 1 TREATMENT PLANT				<b>Certification Expiration</b>
Operator Name	Operator Type	Certification(s)		
SIPULESKI, PAUL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2017	
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2017	
BELAIR, BRANDON W.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2018	
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2018	

## Contact Information

Name			Organization			Job Title			
<b>Mr. Joseph Cansler</b>			SCWA			General Manager			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
P.O. Box 415			1649 Route 12			Gales Ferry		CT	06335-0415
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-464-0232		860-464-2876	860-941-3406		j.cansler@waterauthority.org				
Contact Role(s): <b>Administrative Contact</b>									

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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>CT1020011</b>	<b>SCWA, CEDAR RIDGE DIVISION</b>	<b>C</b>	<b>370</b>	<b>L</b>	<b>GW</b>			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
			123					
Towns Served: NORTH STONINGTON								
Name			Organization			Job Title		
<b>Dr. Edward C. Monahan</b>			Southeastern CT Wtr. Authority			Chairman		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
P.O. Box 415			1649 Route 12			Gales Ferry	CT	06335-0415
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-464-0232		860-464-2876	860-941-9246		ed.monahan@comcast.net			
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		
CT1020021	SCWA, NORTH STONINGTON DIVISION (NST)	C	1,860	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			215	5			

Towns Served: NORTH STONINGTON

### 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	1/1/12 - 12/31/20				
<b>Total Coliform (3100)</b>		<b>2 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	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		Complete		
	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>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>2 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		Complete		
	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>2 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	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		
<b>Water System Facility: 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>		

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

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Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			215	5			

Towns Served: NORTH STONINGTON

### Monitoring Requirements

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

<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		
<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		
	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		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)	1/1/14 - 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		
CT1020021	SCWA, NORTH STONINGTON DIVISION (NST)	C	1,860	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			215	5			

Towns Served: NORTH STONINGTON

## 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
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	Daily
<b>Start Date:</b> 7/1/2003		<b>Compliance History:</b>	<b>Monitoring Compliance Status:</b>
		<b>Monitoring Period</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	12/29/2015	
CROSS CONNECTION SURVEY REPORT	3/1/2017	
SUBMIT CCR TO THE DEPARTMENT	6/30/2017	
SUBMIT CCR CERTIFICATION FORM	8/9/2017	

## 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				
		NST 01	31 KINGSWOOD DR	P	Y			
		NST 02	52 OLD COLONY RD	P		3		
		NST 03	6 OLD COLONY RD	P		3		
		NST 04	38 PINECREST RD	P		3		
		NST 05	33 MEADOW WOOD DR	P		3		
		NST 06	48 OLD COLONY RD	P		3		
		NST 07	19 MEADOW WOOD DR	P		3		
		NST 08	NST 8	A	Y			
		NST 10	7 RAVENWOOD DR.	A	Y			
		NST 11	NST 11	A	Y			
		NST 13	NST 13	A	Y			
		NST 18	NST 18	A	Y			
		NST 21	NST 21	A	Y			
		NST 22	25 KINGSWOOD DR	A	Y			
		NST 23	NST 23	A	Y			
		NST 24	NST 24	A	Y			
		NST 26	4 KINGSWOOD DR	A	Y			
		NST 27	5 RHONDA LA	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		
<b>CT1020021</b>	<b>SCWA, NORTH STONINGTON DIVISION (NST)</b>	<b>C</b>	1,860	<b>L</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			215	5			

Towns Served: NORTH STONINGTON

### 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
		NST 28	NST 28	A	Y			
		NST 29	NST 29	A	Y			
		NST 30	NST 30	A	Y			
		NST 31	24 PINECREST RD	A	Y			
		NST 35	NST 35 10 MEADOW WOO	A	Y			
		NST 36	NST 36 12 MEADOW WOO	A	Y			
		NST 37	NST 37 3 KINGSWOOD D	A	Y			
		NST 38	NST 38 11 OLD COLONY	A	Y			
		NST 4	66 MAIN ST	A	Y			
		NST 44	29 RAVENWOOD DR	A	Y			
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
1402	WELL 1	2	WELL 1	A				
1403	WELL 2	2	WELL 2	A				
36715	ATMOSPHERIC STORAGE TANK							
59956	NST BOOSTER STATION							
59958	BLADDER TANKS							
611	NST TREATMENT FACILITY							

### Certified Operator Information

**Water System Facility: NST TREATMENT FACILITY (WSF ID: 611)**

**Facility Classification:** CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
SIPULESKI, PAUL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2017
BELAIR, BRANDON W.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2018
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2018

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

**Facility Classification:** CLASS 1 DISTRIBUTION SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
SIPULESKI, PAUL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2017
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2017
BELAIR, BRANDON W.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2018
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2018

**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		
CT1020021	SCWA, NORTH STONINGTON DIVISION (NST)	C	1,860	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			215	5			

Towns Served: NORTH STONINGTON

## Contact Information

Name			Organization			Job Title			
Mr. Joseph Cansler			SCWA			General Manager			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
P.O. Box 415			1649 Route 12			Gales Ferry		CT	06335-0415
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-464-0232		860-464-2876	860-941-3406		j.cansler@waterauthority.org				

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

Name			Organization			Job Title			
Dr. Edward C. Monahan			Southeastern CT Wtr. Authority			Chairman			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
P.O. Box 415			1649 Route 12			Gales Ferry		CT	06335-0415
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-464-0232		860-464-2876	860-941-9246		ed.monahan@comcast.net				

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**

# 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>CT1021001</b>	<b>NORTHSTONE GARDENS</b>	<b>C</b>	<b>79</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			32				

Towns Served: NORTH STONINGTON

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>2 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	1/1/14 - 12/31/22				
<b>Total Coliform (3100)</b>		<b>2 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	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		Complete		
	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>Lead And Copper (PBCU)</b>		<b>10 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>2 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		Complete		
	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>2 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	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		
<b>Water System Facility: ENTRY POINT - WELLS 1 - 4 (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>		

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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>CT1021001</b>	<b>NORTHSTONE GARDENS</b>	<b>C</b>	<b>79</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			32				

Towns Served: NORTH STONINGTON

### Monitoring Requirements

**Water System Facility: ENTRY POINT - WELLS 1 - 4 (WSF ID: 00700)**

<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>
EP - WELLS 1 -4 (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>
EP - WELLS 1 -4 (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>
EP - WELLS 1 -4 (3)	1/1/14 - 12/31/16		Complete
	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
<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>
EP - WELLS 1 -4 (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>
EP - WELLS 1 -4 (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 &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>
EP - WELLS 1 -4 (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>
EP - WELLS 1 -4 (3)	1/1/15 - 12/31/17		
	1/1/18 - 12/31/20		
<b>Water System Facility: ENTRY POINT - HOUSE WELL (WSF ID: 00701)</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>
EP - HOUSE WELL (3)	1/1/14 - 12/31/16		Complete
	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

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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>CT1021001</b>	<b>NORTHSTONE GARDENS</b>	<b>C</b>	<b>79</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			32				

Towns Served: NORTH STONINGTON

## Monitoring Requirements

Water System Facility: **ENTRY POINT - HOUSE WELL (WSF ID: 00701)**

### 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>
EP - HOUSE WELL (3)	1/1/16 - 12/31/16		Complete
	1/1/17 - 12/31/17		
	1/1/18 - 12/31/18		

### Radionuclides - Gross Alpha, Combined Radium & Uranium (RADA) 1 routine (RT) per quarter

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - HOUSE WELL (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 & 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>
EP - HOUSE WELL (3)	7/1/16 - 9/30/16		Complete
	10/1/16 - 12/31/16		Complete

### 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>
EP - HOUSE WELL (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

### 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>
EP - HOUSE WELL (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: **HOUSE WELL (WSF ID: 59863)**

### E. Coli (3014) 1 triggered (TG) per period

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
HOUSE WELL (2)	9/15/16 - 9/20/16		Complete
	10/25/16 - 10/30/16		Complete

Water System Facility: **WELL 2 (WSF ID: 840)**

### E. Coli (3014) 1 triggered (TG) per period

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL 2 (2)	9/15/16 - 9/20/16		Complete
	10/25/16 - 10/30/16		Complete

Water System Facility: **WELL 1 (WSF ID: 848)**

### E. Coli (3014) 1 triggered (TG) per period

<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		
<b>CT1021001</b>	<b>NORTHSTONE GARDENS</b>	C	79	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			32				

Towns Served: NORTH STONINGTON

### Monitoring Requirements

Water System Facility: **WELL 1 (WSF ID: 848)**

E. Coli (3014)	Monitoring Period	Collection Period	Compliance Status
<i>Sampling Point (Sampling Point ID)</i>			<b>1 triggered (TG) per period</b>
WELL 1 (2)	9/15/16 - 9/20/16		Complete
	10/25/16 - 10/30/16		Complete

Water System Facility: **WELL 3 (WSF ID: 850)**

E. Coli (3014)	Monitoring Period	Collection Period	Compliance Status
<i>Sampling Point (Sampling Point ID)</i>			<b>1 triggered (TG) per period</b>
WELL 3 (2)	9/15/16 - 9/20/16		Complete
	10/25/16 - 10/30/16		Complete

Water System Facility: **WELL 4 (WSF ID: 851)**

E. Coli (3014)	Monitoring Period	Collection Period	Compliance Status
<i>Sampling Point (Sampling Point ID)</i>			<b>1 triggered (TG) per period</b>
WELL 4 (2)	9/15/16 - 9/20/16		Complete
	10/25/16 - 10/30/16		Complete

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2011	
CROSS CONNECTION SURVEY REPORT	3/1/2017	
SUBMIT CCR TO THE DEPARTMENT	6/30/2017	
SUBMIT CCR CERTIFICATION FORM	8/9/2017	

### 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			
		4-1	Lapointe Hilda Hous	A	Y			
		4-2	Lapointe New Home #	A	Y			
		4-3	Dimaggio # 14	A	Y			
		4-4	Devaney # 14A	A	Y			
		4-5	York #22	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT - WELLS 1 - 4	3	EP - WELLS 1 -4	A				
00701	ENTRY POINT - HOUSE WELL	3	EP - HOUSE WELL	A				
59863	HOUSE WELL	2	HOUSE WELL	A				
840	WELL 2	2	WELL 2	A				
848	WELL 1	2	WELL 1	A				
850	WELL 3	2	WELL 3	A				
851	WELL 4	2	WELL 4	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>CT1021001</b>	<b>NORTHSTONE GARDENS</b>	<b>C</b>	<b>79</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		32					

Towns Served: NORTH STONINGTON

## Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
NAPIERATA, KYLE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2018
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2018
LAFRAMBOISE, PAUL F.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2018
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2018

## Contact Information

Name		Organization		Job Title		
<b>Mr. Chuck Agapiou</b>		Garden Homes Management Corp.		Regional Manager		
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
29 Knapp Street		P.O. Box 4401		Stamford	CT	06907
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-348-2200		203-967-8372		860-672-5870	Chuck@gardenhomesmanagement.com	
Contact Role(s): <b>Administrative Contact, Legal Contact, Owner</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**

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