

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1050011 | CHADWICK HOMEOWNERS ASSN., INC. | C | 292 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 73 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

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

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <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 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <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 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <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 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <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 | | | | |
| Physical Parameters (PPX) | | 1 routine (RT) per quarter | | | |
| <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) | | | | | |
| 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 | | | | |

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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| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1050011 | CHADWICK HOMEOWNERS ASSN., INC. | C | 292 | P | GW | | |
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| | | | 73 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

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

| 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> |
| | 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 | | Complete |
| | 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) | 1/1/14 - 12/31/16 | | Complete |
| | 1/1/17 - 12/31/19 | | |
| | 1/1/20 - 12/31/22 | | |

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 |
| Start Date: 7/1/2003 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 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 | | |

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| | | | 73 | | | | |

Towns Served: OLD LYME

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|---|-----------------|----------------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2014 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2015 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2015 | |
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2016 | |
| 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 | 001 | 24 CHADWICK DR | A | Y | | | |
| | | 002 | 13 CHADWICK DR | A | | 1 | | |
| | | 003 | 18 CHAMPLAIN DR | A | | 1 | | |
| | | 004 | 13 VICTORIA LA | A | | 1 | | |
| | | 005 | 16 LEE DR | A | | 1 | | |
| | | 4 | GENERIC DISTRIBUTION | A | | Y | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| UPSTREAM | WITHIN 5 SERVICE CON | A | | | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 581 | KOH INJECTION WELLS #1 AND #2 | | | | | | | |
| 59975 | ATMOSPHERIC STORAGE | | | | | | | |
| 963 | WELL 3 | 2 | WELL 3 | A | | | | |
| 964 | WELL 1 | 2 | WELL 1 | A | | | | |
| 965 | WELL 2 | 2 | WELL 2 | A | | | | |

Certified Operator Information

Water System Facility: KOH INJECTION WELLS #1 AND #2 (WSF ID: 581)

Facility Classification: CLASS 1 TREATMENT PLANT

| <i>Operator Name</i> | <i>Operator Type</i> | <i>Certification(s)</i> | <i>Certification Expiration</i> |
|----------------------|----------------------|---|---------------------------------|
| SIMA, III, JOHN F. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 6/30/2017 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 9/30/2017 |

Contact Information

| | | | | | | | | |
|---------------------------|-----------|--|--------------------------|-----------------|---------------|----------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Mr. Norman Dickson | | Chadwick Homeowners' Assn, Inc | | | President | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 24 Chadwick Drive | | | | | | Old Lyme | CT | 06371 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-434-7762 | | | | 203-509-4769 | | | | |
| Contact Role(s): | | Administrative Contact, Legal Contact | | | | | | |

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

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|--|--|---------------------|--------------------------|-----------------|----------------|-------------------|--------------|----------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | | |
| CT1050011 | CHADWICK HOMEOWNERS ASSN., INC. | C | 292 | P | GW | | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural | |
| | | | 73 | | | | | |
| Towns Served: OLD LYME | | | | | | | | |
| Name | | | Organization | | | Job Title | | |
| Chadwick Homeowners Assn., Inc. | | | | | | | | |
| 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 | | | |
| 203-634-2481 | | | | | | | | |
| 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 | | |
| CT1050131 | MILE CREEK APARTMENTS | C | 60 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | 20 | | | | | |

Towns Served: OLD LYME

Monitoring Requirements

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

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <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 | | | | |
| Total Haloacetic Acids (2456) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| UNIT NO. 1D (GWS003) | 1/1/16 - 12/31/16 | 9/1-9/30 | Complete | | |
| | 1/1/17 - 12/31/17 | 9/1-9/30 | | | |
| | 1/1/18 - 12/31/18 | 9/1-9/30 | | | |
| Total Trihalomethanes (2950) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| UNIT NO. 2D (GWS004) | 1/1/16 - 12/31/16 | 9/1-9/30 | Complete | | |
| | 1/1/17 - 12/31/17 | 9/1-9/30 | | | |
| | 1/1/18 - 12/31/18 | 9/1-9/30 | | | |
| Total Coliform (3100) | | 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 | 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 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <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 | | | |
| 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> | | |
| 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 | | | | |

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|----------------------------------|------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1050131 | MILE CREEK APARTMENTS | C | 60 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 20 | | | | |

Towns Served: OLD LYME

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 | 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 |

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

Net Gross Alpha (4000) 1 routine (RT) per nine years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/08 - 12/31/16 | | Complete |
| | 1/1/17 - 12/31/25 | | |

Uranium (4006) 1 routine (RT) per nine years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/08 - 12/31/16 | | Complete |
| | 1/1/17 - 12/31/25 | | |

Combined Radium-226/228 (4010) 1 routine (RT) per nine years

| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
|---|--------------------------|--------------------------|--------------------------|
| ENTRY POINT (3) | 1/1/08 - 12/31/16 | | Complete |
| | 1/1/17 - 12/31/25 | | |

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 & V (SOCS) 1 (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 | 1/1-12/31 | Waiver |

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) | 1/1/17 - 12/31/19 | | |
| | 1/1/20 - 12/31/22 | | |

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| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 20 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

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

| 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 | | |

Water System Facility: **WELL 2 (WSF ID: 1732)**

| E. Coli (3014) | 1 routine (RT) per month | | |
|---|---------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 2 (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 | | | |

Water System Facility: **WELL 1 (WSF ID: 955)**

| E. Coli (3014) | 1 routine (RT) per month | | |
|---|---------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| 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

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Connecticut Department of Public Health Drinking Water Section

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| | | | | | | | |
|----------------------------------|------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1050131 | MILE CREEK APARTMENTS | C | 60 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | 20 | | | | | |

Towns Served: OLD LYME

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 | 4 |
| Start Date: 7/1/2003 | | Compliance History: | Monitoring Compliance Status: |
| | | Monitoring Period | Compliance Status: |
| | | 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 | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--------------------------------|-----------|---------------|
| CROSS CONNECTION SURVEY REPORT | 3/1/2016 | |
| 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 | | | | |
| | | GWS0002 | DISTRIBUTION | A | Y | | | |
| | | GWS002 | UNIT NO. 5A | P | Y | 1 | | |
| | | GWS003 | UNIT NO. 1D | A | | 1 | | Y |
| | | GWS004 | UNIT NO. 2D | A | | 1 | | Y |
| | | GWS005 | UNIT NO. 3D | P | | 1 | | |
| | | GWS006 | UNIT NO. 4D | P | | 1 | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 1732 | WELL 2 | 2 | WELL 2 | A | | | | |
| 364 | MILE CREEK PUMP HOUSE | | | | | | | |
| 50753 | WELL-X-TROL | | | | | | | |
| 955 | WELL 1 | 2 | WELL 1 | A | | | | |

Certified Operator Information

Water System Facility: **MILE CREEK PUMP HOUSE (WSF ID: 364)**

Facility Classification: CLASS 1 TREATMENT PLANT

| 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 | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 9/30/2018 |

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 | | |
| CT1050131 | MILE CREEK APARTMENTS | C | 60 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | 20 | | | | | |

Towns Served: OLD LYME

Certified Operator Information

Water System Facility: **MILE CREEK PUMP HOUSE (WSF ID: 364)**

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------|---------------|---|--------------------------|
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 9/30/2018 |

Contact Information

| | | | | | | | | | |
|----------------------------|-----------|-----|--------------------------|-----------------|---------------|------------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Ms. Geraldine Golet | | | Mile Creek Apartments | | | Partner | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| PO Box 2178 | | | | | | West Dover | | VT | 05356 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | | |
| 802-464-6528 | | | | | | | | | |

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

| | | | | | | | | | |
|---------------------------|-----------|-----|--------------------------|-----------------|------------------------|------------------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Ms. Carolyn Rablen | | | Mile Creek Apartments | | | Business Manager | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| 36 Uncas Street | | | | | | Norwich | | CT | 06360 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | | |
| 860-887-8344 | | | | 860-961-3108 | czrablen@sbcglobal.net | | | | |

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

| | | | | | | | | | |
|---------------------------|-----------|-----|--------------------------|-----------------|---------------|--------------------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Ms. Marjorie Tudor | | | Mile Creek Apartments | | | Partner, Co. Mngr. | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| 535 Raven Rd | | | | | | West Brattleboro | | VT | 05301 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | | |
| 802-257-7676 | | | | | | | | | |

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

| | | | | | | | | | |
|------------------------------|-----------|-----|--------------------------|-----------------|---------------|-----------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Mile Creek Apartments | | | | | | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| Carolyn Rablen | | | 36 Uncas Street | | | Norwich | | CT | 06360 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | | |
| 860-961-3108 | | | | | | | | | |

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

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 | | |
| CT1050141 | LYME REGIS, INC. | C | 32 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 14 FERRY ROAD | | | 16 | | | | |
| Towns Served: OLD LYME | | | | | | | |

Monitoring Requirements

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

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <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 | | | | |
| Total Haloacetic Acids (2456) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| UNIT NO. C1 (GWS002) | 1/1/16 - 12/31/16 | 9/1-9/30 | Complete | | |
| | 1/1/17 - 12/31/17 | 9/1-9/30 | | | |
| | 1/1/18 - 12/31/18 | 9/1-9/30 | | | |
| Total Trihalomethanes (2950) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| UNIT NO. E1 (GWS004) | 1/1/16 - 12/31/16 | 9/1-9/30 | Complete | | |
| | 1/1/17 - 12/31/17 | 9/1-9/30 | | | |
| | 1/1/18 - 12/31/18 | 9/1-9/30 | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <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 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <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 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <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 | | | | |
| Physical Parameters (PPX) | | 1 routine (RT) per quarter | | | |
| <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) | | | | | |
| 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 | | | | |

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 | | |
| CT1050141 | LYME REGIS, INC. | C | 32 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 14 FERRY ROAD | | | 16 | | | | |
| Towns Served: OLD LYME | | | | | | | |

Monitoring Requirements

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> |
| | 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 | | Complete |
| | 1/1/18 - 12/31/18 | | |
| 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 | | |
| Radionuclides - Gross Alpha, Combined Radium & Uranium (RADA) | 1 routine (RT) per six 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 - 12/31/19 | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | 1 (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 | 1/1-12/31 | Waiver |
| 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) | 1/1/17 - 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) | 1/1/14 - 12/31/16 | | Complete |
| | 1/1/17 - 12/31/19 | | |
| | 1/1/20 - 12/31/22 | | |

Water System Facility: WELL 1 (WSF ID: 968)

| E. Coli (3014) | 1 routine (RT) per quarter | | |
|---|-----------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 1 (2) | 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 | | |

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 |
| CT1050141 | LYME REGIS, INC. | C | 32 | P | GW |

| | | | | | | |
|----------------------------------|---------------------|-------------|------------|------------|----------|--------------|
| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 14 FERRY ROAD | | 16 | | | | |

Towns Served: OLD LYME

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 | 4 |
| Start Date: 7/1/2003 | | Compliance History: | Monitoring Compliance Status: |
| | | Monitoring Period | Compliance Status: |
| | | 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 | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--------------------------------|-----------|---------------|
| 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 | | | | |
| | | GWS001 | WATER ROOM | A | | 1 | | |
| | | GWS002 | UNIT NO. C1 | A | | 1 | | Y |
| | | GWS003 | UNIT NO. A1 | A | | 1 | | |
| | | GWS004 | UNIT NO. E1 | A | | 1 | | Y |
| | | GWS005 | UNIT NO. F1 | A | | 1 | | |
| | | GWS006 | UNIT NO. H1 | A | Y | 1 | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 325 | TREATMENT PLANT | | | | | | | |
| 59444 | CONTACT TANKS | | | | | | | |
| 59446 | PRESSURE STORAGE | | | | | | | |
| 968 | WELL 1 | 2 | WELL 1 | A | | | | |

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 325)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|-----------------|----------------|---|--------------------------|
| BRAIG, ALLEN L. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS IV | 6/30/2019 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 12/31/2018 |

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 | | |
| CT1050141 | LYME REGIS, INC. | C | 32 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 14 FERRY ROAD | | | 16 | | | | |
| Towns Served: OLD LYME | | | | | | | |

Contact Information

| | | | | | | | | | |
|------------------------------|-----------|-----|--------------------------|-----------------|---------------|-----------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Mr. Stanford Brainerd | | | Lyme Regis, Inc. | | | President | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| 6 Lyme Street | | | | | | Old Lyme | | CT | 06371 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | | |
| 860-434-8905 | | | | 860-434-8905 | | | | | |

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

| | | | | | | | | | |
|----------------------------|-----------|-----|--------------------------|-----------------|------------------------|-----------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Ms. Kathryn Feakins | | | Lyme Regis | | | President | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| 14 Ferry Road A-2 | | | | | | Old Lyme | | CT | 06371 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | | |
| 860-434-1470 | | | | | kathyfeakins@yahoo.com | | | | |

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

| | | | | | | | | | |
|--------------------------|-----------|-----|--------------------------|-----------------|-----------------------|-----------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Mr. Robert Godley | | | Lyme Regis Inc | | | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| P. O. Box 992 | | | | | | Old Lyme | | CT | 06371 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | | |
| | | | | | debbie@dwellescpa.com | | | | |

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 | | |
| CT1050732 | CTWC - SHORELINE REGION-SOUND VIEW | C | 2,588 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 724 | 9 | | | |

Towns Served: OLD LYME

Monitoring Requirements

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

| | | | | | |
|--|--------------------------|--|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| DISTRIBUTION SYSTEM (4) | 1/1/14 - 12/31/22 | 4/1-11/1 | | | |
| Total Coliform (3100) | | 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 | 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 | | | | |
| Total Coliform (3100) | | 2 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 | 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 | | |
| | 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 | | | | |
| Disinfectant Byproducts - TTHM & HAA5 (DBP) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| MERIDEN RD SPL STA (1253) | 1/1/16 - 12/31/16 | 9/1-9/30 | Complete | | |
| | 1/1/17 - 12/31/17 | 9/1-9/30 | | | |
| | 1/1/18 - 12/31/18 | 9/1-9/30 | | | |
| Lead And Copper (PBCU) | | 10 routine (RT) per three years | | | |
| <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 - 12/31/16 | 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) | | 2 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 | 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 | | | | |
| 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> | | |
| Select from Inventory of Active Sampling Points | 1/1/17 - 1/31/17 | | | | |

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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 | | |
| CT1050732 | CTWC - SHORELINE REGION-SOUND VIEW | C | 2,588 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 724 | 9 | | | |

Towns Served: OLD LYME

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> |
| | 2/1/17 - 2/28/17 | | |
| | 3/1/17 - 3/31/17 | | |
| 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 | 12/1/16 - 12/31/16 | | Complete |
| Physical Parameters (PPX) | 2 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 | 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 |

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

| 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) | 1/1/15 - 12/31/17 | | |
| | 1/1/18 - 12/31/20 | | |
| 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 & 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> |

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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 | | |
| CT1050732 | CTWC - SHORELINE REGION-SOUND VIEW | C | 2,588 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 724 | 9 | | | |

Towns Served: OLD LYME

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 | | Complete |
| | 1/1/17 - 12/31/19 | | |
| | 1/1/20 - 12/31/22 | | |

| | | | |
|---|--------------------------|--------------------------------|--------------------------|
| Organic Chemicals (VOCS) | | 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 | | |

Water System Facility: TOWN PROPERTY WELL 94-1 (WSF ID: 1515)

| | | | |
|---|--------------------------|------------------------------------|--------------------------|
| 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> |
| TOWN PROPERTY WELL 9 (2) | 10/18/16 - 10/23/16 | | Complete |

Water System Facility: TOWN PROPERTY WELL 94-2 (WSF ID: 1516)

| | | | |
|---|--------------------------|------------------------------------|--------------------------|
| 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> |
| TOWN PROPERTY WELL 9 (2) | 10/18/16 - 10/23/16 | | Complete |

Water System Facility: TOWN PROPERTY WELL 94-3 (WSF ID: 1517)

| | | | |
|---|--------------------------|------------------------------------|--------------------------|
| 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> |
| TOWN PROPERTY WELL 9 (2) | 10/18/16 - 10/23/16 | | Complete |

Water System Facility: WILLIAM HARTUNG WELL #6 (WSF ID: 1520)

| | | | |
|---|--------------------------|------------------------------------|--------------------------|
| 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> |
| WILLIAM HARTUNG WELL (2) | 10/18/16 - 10/23/16 | | Complete |

Water System Facility: WILLIAM HARTUNG WELL #7 (WSF ID: 1521)

| | | | |
|---|--------------------------|------------------------------------|--------------------------|
| 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> |
| WILLIAM HARTUNG WELL (2) | 10/18/16 - 10/23/16 | | Complete |

Water System Facility: WILLIAM HARTUNG WELL #8 (WSF ID: 1522)

| | | | |
|---|--------------------------|------------------------------------|--------------------------|
| 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> |
| WILLIAM HARTUNG WELL (2) | 10/18/16 - 10/23/16 | | Complete |

Water System Facility: WILLIAM HARTUNG WELL #11 (WSF ID: 1525)

| | | | |
|---|--------------------------|------------------------------------|--------------------------|
| 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> |
| WILLIAM HARTUNG WELL (2) | 10/18/16 - 10/23/16 | | Complete |

Water System Facility: WILLIAM HARTUNG WELL #12 (WSF ID: 1526)

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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 | | |
| CT1050732 | CTWC - SHORELINE REGION-SOUND VIEW | C | 2,588 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 724 | 9 | | | |

Towns Served: OLD LYME

Monitoring Requirements

Water System Facility: **WILLIAM HARTUNG WELL #12 (WSF ID: 1526)**

| | | | |
|---|--------------------------|------------------------------------|--------------------------|
| 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> |
| WILLIAM HARTUNG WELL (2) | 10/18/16 - 10/23/16 | | Complete |

Water System Facility: **WILLIAM HARTUNG WELL #13 (WSF ID: 1527)**

| | | | |
|---|--------------------------|------------------------------------|--------------------------|
| 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> |
| WILLIAM HARTUNG WELL (2) | 10/18/16 - 10/23/16 | | Complete |

Water System Facility: **WILLIAM HARTUNG WELL #14 (WSF ID: 1528)**

| | | | |
|---|--------------------------|------------------------------------|--------------------------|
| 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> |
| WILLIAM HARTUNG WELL (2) | 10/18/16 - 10/23/16 | | Complete |

Water System Facility: **MILE CREEK WELL #3 (WSF ID: 59850)**

| | | | |
|---|--------------------------|------------------------------------|--------------------------|
| 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> |
| MILE CREEK WELL #3 (2) | 10/18/16 - 10/23/16 | | Complete |

Water System Facility: **MILE CREEK WELL #5 (WSF ID: 59852)**

| | | | |
|---|--------------------------|------------------------------------|--------------------------|
| 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> |
| MILE CREEK WELL #5 (2) | 10/18/16 - 10/23/16 | | Complete |

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **HARTUNG WELLFIELD TREATMENT PLANT (WSFID: TP001)**

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|------------------------------|---------------------------------------|---|--------------------------------------|
| Chlorine | Entry Point RDC (EPRD) | Minimum: 0.25 MG/L | Continuous |
| Start Date: 11/1/2015 | Compliance History: | | |
| | Monitoring Period | Operating Limit Compliance Status: | Monitoring Compliance Status: |
| | 8/1/2016 - 8/31/2016 | Y | Y |
| | 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 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|-------------------------------------|-----------------|----------------------|
| 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

| <i>Water System</i> | <i>Water System Facility</i> | <i>Sampling Point</i> | <i>Sampling Point</i> | <i>Total Coliform</i> | <i>Lead and Copper</i> | <i>Stage 2</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 | | |
| CT1050732 | CTWC - SHORELINE REGION-SOUND VIEW | C | 2,588 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 724 | 9 | | | |

Towns Served: OLD LYME

| Facility ID | ID | Description | Status | Rule | Rule Tier | Asbestos | DBPR |
|-------------|---------------------|----------------------|--------|------|-----------|----------|------|
| 00600 | | DISTRIBUTION SYSTEM | | | | | |
| | 1250 | BILLOW LN OLSHORES | A | Y | | | |
| | 1251 | OLD COLONY RD SVD | A | Y | | | |
| | 1252 | 61 PORTLAND LAPENTA | A | Y | | | |
| | 1253 | MERIDEN RD SPL STA | A | Y | | | Y |
| | 1260 | HAWKS NEST DISTRIBUT | A | Y | | | |
| | 12801 | 40 SWAN AV | A | | | N | |
| | 12802 | 14 HARTFORD AV | A | | | 3 | |
| | 12803 | 30 OLD COLONYRD | A | | | N | |
| | 12804 | 51 OLD COLONY RD | A | | | 3 | |
| | 12805 | 54 GORTON AV | A | | | 3 | |
| | 12806 | 68 SWAN AV | A | | | 3 | |
| | 12807 | 48 SWAN AV | A | | | 3 | |
| | 12808 | 69 PORTLAND AV | A | | | 3 | |
| | 12809 | 45 GORTON AV | A | | | 3 | |
| | 12810 | 20A GORTON AV | A | | | N | |
| | 12811 | 13 SEAVIEW AV | I | | | | |
| | 12812 | 60 SEASPRAY AV | A | | | N | |
| | 12813 | 41 SPRINGFIELD RD | A | Y | | 1 | |
| | 12814 | 12 BEECHWOOD LN | A | Y | | 3 | |
| | 12815 | 13 BEECHWOOD LN | A | Y | | 3 | |
| | 12816 | 11 BELLAIRE RD | A | Y | | 3 | |
| | 12817 | 10 BILLOW RD | A | Y | | 3 | |
| | 12818 | 11 BILLOW RD | A | Y | | 3 | |
| | 12819 | 16 BILLOW RD | A | Y | | 3 | |
| | 12820 | 25 BILLOW RD | A | Y | | 3 | |
| | 12821 | 35 BILLOW RD | A | Y | | 3 | |
| | 12822 | 54 BILLOW RD | A | Y | | 3 | |
| | 12823 | 55 BILLOW RD | A | Y | | 3 | |
| | 12824 | 315 BILLOW RD | A | Y | | 3 | |
| | 12825 | 13 BREEN AVE | A | Y | | 3 | |
| | 12826 | 17 BREEN AVE | A | Y | | 3 | |
| | 12827 | 70 BREEN AVE | A | Y | | 3 | |
| 12828 | 33 BRIGHTWATER RD | A | Y | | 3 | | |
| 12829 | 59 BRIGHTWATER RD | A | Y | | 3 | | |
| 12830 | 308 BRIGHTWATER RD | A | Y | | 3 | | |
| 12831 | 10 BROUGHEL AVE | A | Y | | 3 | | |
| 12832 | 36 CENTER BEACH AVE | A | Y | | 3 | | |
| 12833 | 43 CENTER BEACH AVE | A | Y | | 3 | | |
| 12834 | 61 CENTER BEACH AVE | A | Y | | 3 | | |
| 12835 | 66 CENTER BEACH AVE | A | Y | | 3 | | |
| 12836 | 72 CENTER BEACH AVE | A | | | 3 | | |
| 12837 | 3 GORTON AVE | A | Y | | 3 | | |

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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 |
| CT1050732 | CTWC - SHORELINE REGION-SOUND VIEW | C | 2,588 | P | GW |
| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined |
| | 724 | 9 | | | |

Towns Served: OLD LYME

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 |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|--------------|
| | | 12838 | 7 GORTON AVE | A | Y | 3 | | |
| | | 12839 | 12 GORTON AVE | A | Y | 3 | | |
| | | 12840 | 21 GORTON AVE | A | Y | 3 | | |
| | | 12841 | 24 GORTON AVE | A | Y | 3 | | |
| | | 12842 | 60 GORTON AVE | A | Y | 3 | | |
| | | 12843 | 303 GORTON AVE EXT | A | Y | 3 | | |
| | | 12844 | 4 HARTFORD AVE | A | Y | 3 | | |
| | | 12845 | 6 HARTFORD AVE | A | Y | 3 | | |
| | | 12846 | 12 HARTFORD AVE | A | Y | 3 | | |
| | | 12847 | 13 HARTFORD AVE | A | Y | 3 | | |
| | | 12848 | 3A HARTUNG PL | A | Y | 3 | | |
| | | 12849 | 3B HARTUNG PL | A | Y | 3 | | |
| | | 12850 | 3C HARTUNG PL | A | Y | 3 | | |
| | | 12851 | 10 HARTUNG PL | A | | 3 | | |
| | | 12852 | 12 HARTUNG PL | A | Y | 3 | | |
| | | 12853 | 13 HARTUNG PL | A | Y | 3 | | |
| | | 12854 | 16 HARTUNG PL | A | Y | 3 | | |
| | | 12855 | 78 HAWKS NEST | A | Y | 3 | | |
| | | 12856 | 10 HOWARD RD | A | Y | 3 | | |
| | | 12857 | 22 HOWARD RD | A | Y | 3 | | |
| | | 12858 | 5 MERIDEN RD | A | Y | 3 | | |
| | | 12859 | 9 MERIDEN RD | A | Y | 3 | | |
| | | 12860 | 29 MERIDEN RD | A | Y | 3 | | |
| | | 12861 | 56 MERIDEN RD | A | Y | 3 | | |
| | | 12862 | 16 NEW BRITAIN AVE | A | Y | 3 | | |
| | | 12863 | 13 NEW BRITAIN RD | A | Y | 3 | | |
| | | 12864 | 22 NEW BRITAIN RD | A | Y | 3 | | |
| | | 12865 | 24 NEW BRITAIN RD | A | | 3 | | |
| | | 12866 | 26 NEW BRITAIN RD | A | Y | 3 | | |
| | | 12867 | 32 NEW BRITAIN RD | A | Y | 3 | | |
| | | 12868 | 26 OLD COLONY RD | A | Y | 3 | | |
| | | 12869 | 46 OLD COLONY RD | A | Y | 3 | | |
| | | 12870 | 53 OLD COLONY RD | A | Y | 3 | | |
| | | 12871 | 75 OLD COLONY RD | A | Y | 3 | | |
| | | 12872 | 31 OLD SHORE RD | A | Y | 3 | | |
| | | 12873 | 33 OLD SHORE RD | A | Y | 3 | | |
| | | 12874 | 35 OLD SHORE RD | A | Y | 3 | | |
| | | 12875 | 12 POND RD | A | Y | 3 | | |
| | | 12876 | 34 POND RD 1 | A | Y | 3 | | |

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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 | | |
| CT1050732 | CTWC - SHORELINE REGION-SOUND VIEW | C | 2,588 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 724 | 9 | | | |

Towns Served: OLD LYME

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 |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|--------------|
| | | 12877 | 36 POND RD 3 | A | Y | 3 | | |
| | | 12878 | 36 POND RD 4 | A | Y | 3 | | |
| | | 12879 | 16 PORTLAND AVE | A | Y | 3 | | |
| | | 12880 | 25 PORTLAND AVE | A | Y | 3 | | |
| | | 12881 | 34 PORTLAND AVE | A | Y | 3 | | |
| | | 12882 | 41 PORTLAND AVE | A | Y | 3 | | |
| | | 12883 | 50 PORTLAND AVE | A | Y | 3 | | |
| | | 12884 | 51 PORTLAND AVE | A | Y | 3 | | |
| | | 12885 | 55 PORTLAND AVE | A | Y | 3 | | |
| | | 12886 | 70 PORTLAND AVE | A | Y | 3 | | |
| | | 12887 | 32 RIDGEWOOD RD | A | Y | 3 | | |
| | | 12888 | 39 RIDGEWOOD RD | A | Y | 3 | | |
| | | 12889 | 5 SALTAIRE DR | A | Y | 3 | | |
| | | 12890 | 18 SALTAIRE DR | A | Y | 3 | | |
| | | 12891 | 19 SALTAIRE DR | A | Y | 3 | | |
| | | 12892 | 21 SALTAIRE DR | A | Y | 3 | | |
| | | 12893 | 25 SALTAIRE DR | A | Y | 3 | | |
| | | 12894 | 32 SALTAIRE DR | A | Y | 3 | | |
| | | 12895 | 35 SALTAIRE DR | A | Y | 3 | | |
| | | 12896 | 37 SALTAIRE DR | A | Y | 3 | | |
| | | 12897 | 41 SALTAIRE DR | A | Y | 3 | | |
| | | 12898 | 44 SALTAIRE DR | A | Y | 3 | | |
| | | 12899 | 53 SALTAIRE DR | A | Y | 3 | | |
| | | 12900 | 59 SALTAIRE DR | A | Y | 3 | | |
| | | 12901 | 305 SALTAIRE DR | A | Y | 3 | | |
| | | 12902 | 307 SALTAIRE DR | A | Y | 3 | | |
| | | 12903 | 310 SALTAIRE DR | A | Y | 3 | | |
| | | 12904 | 315 SALTAIRE DR | A | Y | 3 | | |
| | | 12905 | 1 SEA LN | A | Y | 3 | | |
| | | 12906 | 10 SEA SPRAY RD | A | Y | 3 | | |
| | | 12907 | 20 SEA SPRAY RD | A | Y | 3 | | |
| | | 12908 | 22 SEA SPRAY RD | A | Y | 3 | | |
| | | 12909 | 23 SEA SPRAY RD | A | Y | 3 | | |
| | | 12910 | 29 SEA SPRAY RD | A | Y | 3 | | |
| | | 12911 | 31 SEA SPRAY RD | A | Y | 3 | | |
| | | 12912 | 34 SEA SPRAY RD | A | Y | 3 | | |
| | | 12913 | 35 SEA SPRAY RD | A | Y | 3 | | |
| | | 12914 | 36 SEA SPRAY RD | A | Y | 3 | | |
| | | 12915 | 61 SEA SPRAY RD | A | Y | 3 | | |

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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 | | |
| CT1050732 | CTWC - SHORELINE REGION-SOUND VIEW | C | 2,588 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 724 | 9 | | | |

Towns Served: OLD LYME

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 |
|--------------------------|-------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|--------------|
| | | 12916 | 64 SEA SPRAY RD | A | Y | 3 | | |
| | | 12917 | 71 SEA SPRAY RD | A | Y | 3 | | |
| | | 12918 | 44 SEASIDE LN | A | Y | 3 | | |
| | | 12919 | 310 SHORE RD | A | Y | 3 | | |
| | | 12920 | 14 SPRINGFIELD RD | A | Y | 3 | | |
| | | 12921 | 57 SPRINGFIELD RD | A | Y | 3 | | |
| | | 12922 | 18 SWAM AVE | A | Y | 3 | | |
| | | 12923 | 29 SWAM AVE | A | Y | 3 | | |
| | | 12924 | 54 SWAM AVE | A | Y | 3 | | |
| | | 12925 | 88 SWAM AVE | A | Y | 3 | | |
| | | 12926 | 88-1 SWAM AVE | A | Y | 3 | | |
| | | 12927 | 90 A SWAM AVE | A | Y | 3 | | |
| | | 12928 | 90 B SWAM AVE | A | Y | 3 | | |
| | | 12929 | 3 WEST END DR | A | Y | 3 | | |
| | | 12930 | 20 WEST END DR | A | Y | 3 | | |
| | | 12931 | 26 WEST END DR | A | Y | 3 | | |
| | | 12932 | 28 WEST END DR | A | Y | 3 | | |
| | | 12933 | 30 WEST END DR | A | Y | 3 | | |
| | | 12934 | 37-2 WEST END DR | A | Y | 3 | | |
| | | 12935 | 54 WEST END DR | A | Y | 3 | | |
| | | 12936 | 56 WEST END DR | A | Y | 3 | | |
| | | 12937 | 82 WEST END DR | A | Y | 3 | | |
| | | 12938 | 12 WHITE SAND BEACH | A | Y | 3 | | |
| | | 12939 | 20 WHITE SAND BEACH | A | Y | 3 | | |
| | | 12940 | 33 WHITE SAND BEACH | A | Y | 3 | | |
| | | 12941 | 43 WHITE SAND BEACH | A | Y | 3 | | |
| | | 12942 | 47 WHITE SAND BEACH | A | Y | 3 | | |
| | | 12943 | 50 WHITE SAND BEACH | A | Y | 3 | | |
| | | 12944 | 52 WHITE SAND BEACH | A | Y | 3 | | |
| | | 12945 | 54 WHITE SAND BEACH | A | Y | 3 | | |
| | | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | 4150 | MERIDEN RD SAMPLE ST | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 1515 | TOWN PROPERTY WELL 94-1 | 2 | TOWN PROPERTY WELL 9 | A | | | | |
| 1516 | TOWN PROPERTY WELL 94-2 | 2 | TOWN PROPERTY WELL 9 | A | | | | |
| 1517 | TOWN PROPERTY WELL 94-3 | 2 | TOWN PROPERTY WELL 9 | 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.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT1050732 | CTWC - SHORELINE REGION-SOUND VIEW | C | 2,588 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 724 | 9 | | | |

Towns Served: OLD LYME

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 |
|--------------------------|-----------------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|--------------|
| 1520 | WILLIAM HARTUNG WELL #6 | 2 | WILLIAM HARTUNG WELL | A | | | | |
| 1521 | WILLIAM HARTUNG WELL #7 | 2 | WILLIAM HARTUNG WELL | A | | | | |
| 1522 | WILLIAM HARTUNG WELL #8 | 2 | WILLIAM HARTUNG WELL | A | | | | |
| 1525 | WILLIAM HARTUNG WELL #11 | 2 | WILLIAM HARTUNG WELL | A | | | | |
| 1526 | WILLIAM HARTUNG WELL #12 | 2 | WILLIAM HARTUNG WELL | A | | | | |
| 1527 | WILLIAM HARTUNG WELL #13 | 2 | WILLIAM HARTUNG WELL | A | | | | |
| 1528 | WILLIAM HARTUNG WELL #14 | 2 | WILLIAM HARTUNG WELL | A | | | | |
| 47765 | COMBINED TOWN PROPERTY WELLS | 9 | COMBINED TPW | A | | | | |
| 47767 | COMBINED WILLIAM HARTUNG WELLS | 9 | COMBINED WHW | A | | | | |
| 52066 | HARTUNG CLEARWELL | | | | | | | |
| 52068 | SOUND VIEW BOOSTER STATION | | | | | | | |
| 52919 | HYDROPNEUMATIC STORAGE FACILITIES | | | | | | | |
| 55055 | CROSS LANE TANK | | | | | | | |
| 59850 | MILE CREEK WELL #3 | 2 | MILE CREEK WELL #3 | A | | | | |
| 59852 | MILE CREEK WELL #5 | 2 | MILE CREEK WELL #5 | A | | | | |
| TP001 | HARTUNG WELLFIELD TREATMENT PLANT | | | | | | | |

Certified Operator Information

| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
|---|-------------------|--|--------------------------|
| Facility Classification: CLASS 1 DISTRIBUTION SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| ANDREWS, PAUL M. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS IV DISTRIBUTION SYSTEM OPERATOR - CLASS II | 12/31/2018 6/30/2017 |
| FUNK, CHRISTOPHER B. | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2019 6/30/2019 |
| SUITER, CARL | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2019 12/31/2018 |
| Water System Facility: HARTUNG WELLFIELD TREATMENT PLANT (WSF ID: TP001) | | | |
| Facility Classification: CLASS 2 TREATMENT PLANT | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| ANDREWS, PAUL M. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS IV DISTRIBUTION SYSTEM OPERATOR - CLASS II | 12/31/2018 6/30/2017 |
| FUNK, CHRISTOPHER B. | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2019 6/30/2019 |

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 | | |
| CT1050732 | CTWC - SHORELINE REGION-SOUND VIEW | C | 2,588 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 724 | 9 | | | |

Towns Served: OLD LYME

Certified Operator Information

Water System Facility: **HARTUNG WELLFIELD TREATMENT PLANT (WSF ID: TP001)**

Facility Classification: CLASS 2 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------|-------------------|---|--------------------------|
| SUITER, CARL | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 12/31/2019 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2018 |

Contact Information

| | | | | | | |
|---------------------------|-----------|---------------------------|--------------|-----------------|-------------------|----------|
| Name | | Organization | | | Job Title | |
| Mr. Robert F. Ross | | Connecticut Water Company | | | Superintendent | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 93 West Main Street | | | | Clinton | CT | 06413 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 860-664-6120 | | 860-669-7899 | 860-391-3356 | 800-286-5700 | rross@ctwater.com | |

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

| | | | | | | |
|------------------------------|-----------|---------------------------|--------------|-----------------|------------------------|----------|
| Name | | Organization | | | Job Title | |
| Mr. Eric W. Thornburg | | Connecticut Water Company | | | President/Ceo | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 93 West Main Street | | | | Clinton | CT | 06413 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 800-428-6008 | | 860-669-9326 | | 800-286-3985 | ethornburg@ctwater.com | |

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 | | |
| CT1050752 | CTWC - SHORELINE REGION-POINT O WOODS | C | 1,068 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 400 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

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

| | | | | | |
|--|--------------------------|--|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <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 | | Complete | | |
| Total Coliform (3100) | | 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 | 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 | | | | |
| Total Coliform (3100) | | 2 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 | 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 | | |
| | 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 | | | | |
| Disinfectant Byproducts - TTHM & HAA5 (DBP) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| MASS RD JFFRE SPLSTA (1350) | 1/1/16 - 12/31/16 | 9/1-9/30 | Complete | | |
| | 1/1/17 - 12/31/17 | 9/1-9/30 | | | |
| | 1/1/18 - 12/31/18 | 9/1-9/30 | | | |
| Lead And Copper (PBCU) | | 10 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| GENERIC DISTRIBUTION (4) | 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) | | 2 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 | 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 | | | | |
| 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> | | |
| Select from Inventory of Active Sampling Points | 1/1/17 - 1/31/17 | | | | |

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 | | |
| CT1050752 | CTWC - SHORELINE REGION-POINT O WOODS | C | 1,068 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 400 | | | | |

Towns Served: OLD LYME

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> |
|---|--------------------------|--------------------------|--------------------------|
| | 2/1/17 - 2/28/17 | | |
| | 3/1/17 - 3/31/17 | | |

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 | 12/1/16 - 12/31/16 | | Complete |

Physical Parameters (PPX) **2 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 | 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 |

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

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 | | |

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> |
|---|--------------------------|--------------------------|--------------------------|
| | | | |

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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 | | |
| CT1050752 | CTWC - SHORELINE REGION-POINT O WOODS | C | 1,068 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 400 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

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

| 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 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 | | |

Water System Facility: **WELL 5 (WSF ID: 1605)**

| E. Coli (3014) | 1 routine (RT) per month | | |
|---|---------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 5 (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 | | 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 | | |

Water System Facility: **WELL 2 (WSF ID: 1606)**

| E. Coli (3014) | 1 routine (RT) per month | | |
|---|---------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 2 (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 | | 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 | | |
| CT1050752 | CTWC - SHORELINE REGION-POINT O WOODS | C | 1,068 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 400 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

Water System Facility: WELL 2 (WSF ID: 1606)

| E. Coli (3014) | 1 routine (RT) per month | | |
|---|---------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 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 | | |

Water System Facility: WELL 4 (WSF ID: 1607)

| E. Coli (3014) | 1 routine (RT) per month | | |
|---|---------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 4 (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 | | 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 | | |

Water System Facility: WELL 6 (WSF ID: 1608)

| E. Coli (3014) | 1 routine (RT) per month | | |
|---|---------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 6 (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 | | 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 | | |

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 | | |
| CT1050752 | CTWC - SHORELINE REGION-POINT O WOODS | C | 1,068 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 400 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

Water System Facility: **WELL 6 (WSF ID: 1608)**

| | | | |
|---|---------------------------------|--------------------------|--------------------------|
| E. Coli (3014) | 1 routine (RT) per month | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 8/1/17 - 8/31/17 | | |

Water System Facility: **WELL 7 (WSF ID: 1609)**

| | | | |
|---|---------------------------------|--------------------------|--------------------------|
| E. Coli (3014) | 1 routine (RT) per month | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 7 (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 | | 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

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

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|------------------------------|---|---------------------------|---------------------------|
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: 0.2 MG/L | Daily |
| Start Date: 11/1/2008 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 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 | Y | |
| | 1/1/2017 - 1/31/2017 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|-------------------------------------|-----------------|----------------------|
| 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

| <i>Water System Facility ID</i> | <i>Water System Facility</i> | <i>Sampling Point ID</i> | <i>Sampling Point Description</i> | <i>Total Coliform Rule</i> | <i>Lead and Copper Rule Tier</i> | <i>Stage 2 Disinfection Byproduct Rule</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 | | |
| CT1050752 | CTWC - SHORELINE REGION-POINT O WOODS | C | 1,068 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 400 | | | | |

Towns Served: OLD LYME

| Facility ID | ID | Description | Status | Rule | Rule Tier | Asbestos | DBPR |
|-------------|-------|----------------------|--------|------|-----------|----------|------|
| 00600 | | DISTRIBUTION SYSTEM | | | | | Y |
| | 1350 | MASS RD JFFRE SPLSTA | A | Y | | | |
| | 1351 | CARRINGTON RD SPLSTA | A | Y | | | |
| | 1365 | 3 WILDWOOD DR | A | Y | | | |
| | 13801 | 2 RIDGEWOOD RD | A | | 3 | | |
| | 13802 | 23 RIDGEWOOD RD | A | | 3 | | |
| | 13803 | 13 RIDGEWOOD RD | A | | 3 | | |
| | 13804 | 33 RIDGEWOOD RD | A | | 3 | | |
| | 13805 | 44 CONNECTICUT AV | A | | 3 | | |
| | 13806 | 5 SARGENT RD | A | | 3 | | |
| | 13807 | 113 HILLCREST RD | A | | N | | |
| | 13808 | 50 HILLCREST RD | A | | 3 | | |
| | 13809 | 62 COVENTRY AV | I | | 3 | | |
| | 13810 | 5 SARGENT RD | A | | 3 | | |
| | 13811 | 4 SEAVIEW RD | A | Y | 3 | | |
| | 13812 | 11 SEAVIEW RD | A | Y | 3 | | |
| | 13813 | 13 SEAVIEW RD | A | Y | 3 | | |
| | 13814 | 15 SEAVIEW RD | A | Y | 3 | | |
| | 13815 | 18 SEAVIEW RD | A | Y | 3 | | |
| | 13816 | 19 SEAVIEW RD | A | Y | 3 | | |
| | 13817 | 21 SEAVIEW RD | A | Y | 3 | | |
| | 13818 | 23 SEAVIEW RD | A | Y | 3 | | |
| | 13819 | 25 SEAVIEW RD | A | Y | 3 | | |
| | 13820 | 26 SEAVIEW RD | A | Y | 3 | | |
| | 13821 | 30 SEAVIEW RD | A | Y | 3 | | |
| | 13822 | 31 SEAVIEW RD | A | Y | 3 | | |
| | 13823 | 34 SEAVIEW RD | A | Y | 3 | | |
| | 13824 | 38 SEAVIEW RD | A | Y | 3 | | |
| | 13825 | 40 SEAVIEW RD | A | Y | 3 | | |
| | 13826 | 43 SEAVIEW RD | A | Y | 3 | | |
| | 13827 | 44 SEAVIEW RD | A | Y | 3 | | |
| | 13828 | 45 SEAVIEW RD | A | Y | 3 | | |
| | 13829 | 47 SEAVIEW RD | A | Y | 3 | | |
| | 13830 | 50 SEAVIEW RD | A | Y | 3 | | |
| | 13831 | 54 SEAVIEW RD | A | Y | 3 | | |
| | 13832 | 55 SEAVIEW RD | A | Y | 3 | | |
| | 13833 | 67 SEAVIEW RD | A | Y | 3 | | |
| | 13834 | 69 SEAVIEW RD | A | Y | 3 | | |
| | 13835 | 18 HILLCREST RD | A | Y | 3 | | |
| | 13836 | 24 HILLCREST RD | A | Y | 3 | | |
| | 13837 | 28 HILLCREST RD | A | Y | 3 | | |
| | 13838 | 30 HILLCREST RD | A | Y | 3 | | |
| | 13839 | 32 HILLCREST RD | A | Y | 3 | | |

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 | | |
| CT1050752 | CTWC - SHORELINE REGION-POINT O WOODS | C | 1,068 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 400 | | | | |

Towns Served: OLD LYME

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 |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|--------------|
| | | 13840 | 47 HILLCREST RD | A | Y | 3 | | |
| | | 13841 | 52 HILLCREST RD | A | Y | 3 | | |
| | | 13842 | 55 HILLCREST RD | A | Y | 3 | | |
| | | 13843 | 59 HILLCREST RD | A | Y | 3 | | |
| | | 13844 | 62 HILLCREST RD | A | Y | 3 | | |
| | | 13845 | 72 HILLCREST RD | A | Y | 3 | | |
| | | 13846 | 73 HILLCREST RD | A | Y | 3 | | |
| | | 13847 | 92 HILLCREST RD | A | Y | 3 | | |
| | | 13848 | 93 HILLCREST RD | A | Y | 3 | | |
| | | 13849 | 4 CARRINGTON RD | A | Y | 3 | | |
| | | 13850 | 8 CARRINGTON RD | A | Y | 3 | | |
| | | 13851 | 36 CARRINGTON RD | A | Y | 3 | | |
| | | 13852 | 9 CONNECTICUT RD | A | Y | 3 | | |
| | | 13853 | 38 CONNECTICUT RD | A | Y | 3 | | |
| | | 13854 | 45 CONNECTICUT RD | A | Y | 3 | | |
| | | 13855 | 46 CONNECTICUT RD | A | Y | 3 | | |
| | | 13856 | 59 CONNECTICUT RD | A | Y | 3 | | |
| | | 13857 | 70 CONNECTICUT RD | A | Y | 3 | | |
| | | 13858 | 71 CONNECTICUT RD | A | Y | 3 | | |
| | | 13859 | 72 CONNECTICUT RD | A | Y | 3 | | |
| | | 13860 | 73 CONNECTICUT RD | A | Y | 3 | | |
| | | 13861 | 74 CONNECTICUT RD | A | Y | 3 | | |
| | | 13862 | 83 CONNECTICUT RD | A | Y | 3 | | |
| | | 13863 | 12 WALNUT RD | A | Y | 3 | | |
| | | 13864 | 13 WALNUT RD | A | Y | 3 | | |
| | | 13865 | 14 WALNUT RD | A | Y | 3 | | |
| | | 13866 | 21 WALNUT RD | A | Y | 3 | | |
| | | 13867 | 25 WALNUT RD | A | Y | 3 | | |
| | | 13868 | 27 WALNUT RD | A | Y | 3 | | |
| | | 13869 | 32 WALNUT RD | A | Y | 3 | | |
| | | 13870 | 6 RIDGEWOOD RD | A | Y | 3 | | |
| | | 13871 | 9 RIDGEWOOD RD | A | Y | 3 | | |
| | | 13872 | 10 RIDGEWOOD RD | A | Y | 3 | | |
| | | 13873 | 11 RIDGEWOOD RD | A | Y | 3 | | |
| | | 13874 | 14 RIDGEWOOD RD | A | Y | 3 | | |
| | | 13875 | 16 RIDGEWOOD RD | A | Y | 3 | | |
| | | 13876 | 17 RIDGEWOOD RD | A | Y | 3 | | |
| | | 13877 | 24 RIDGEWOOD RD | A | Y | 3 | | |
| | | 13878 | 28 RIDGEWOOD RD | A | Y | 3 | | |

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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 | | |
| CT1050752 | CTWC - SHORELINE REGION-POINT O WOODS | C | 1,068 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 400 | | | | |

Towns Served: OLD LYME

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 |
|--------------------------|-----------------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|--------------|
| | | 13879 | 30 RIDGEWOOD RD | A | Y | 3 | | |
| | | 13880 | 50 RIDGEWOOD RD | A | Y | 3 | | |
| | | 13881 | 6 MASSACHUSETTS RD | A | Y | 3 | | |
| | | 13882 | 14 MASSACHUSETTS RD | A | Y | 3 | | |
| | | 13883 | 18 MASSACHUSETTS RD | A | Y | 3 | | |
| | | 13884 | 35 MASSACHUSETTS RD | A | Y | 3 | | |
| | | 13885 | 1 SARGENT RD | A | Y | 3 | | |
| | | 13886 | 2 SARGENT RD | A | Y | 3 | | |
| | | 13887 | 4 SARGENT RD | A | Y | 3 | | |
| | | 13888 | 10 SARGENT RD | A | Y | 3 | | |
| | | 13889 | 12 SARGENT RD | A | Y | 3 | | |
| | | 13890 | 19 SARGENT RD | A | Y | 3 | | |
| | | 13891 | 20 SARGENT RD | A | Y | 3 | | |
| | | 13892 | 21 SARGENT RD | A | Y | 3 | | |
| | | 13893 | 25 SARGENT RD | A | Y | 3 | | |
| | | 4 | GENERIC DISTRIBUTION | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 1605 | WELL 5 | 2 | WELL 5 | A | | | | |
| 1606 | WELL 2 | 2 | WELL 2 | A | | | | |
| 1607 | WELL 4 | 2 | WELL 4 | A | | | | |
| 1608 | WELL 6 | 2 | WELL 6 | A | | | | |
| 1609 | WELL 7 | 2 | WELL 7 | A | | | | |
| 222 | POINT O WOODS TREATMENT PLANT | | | | | | | |
| 47759 | COMBINED RAW WATER | 9 | COMBINED RAW WATER | A | | | | |
| 52070 | POINT O WOODS CLEARWELL | | | | | | | |
| 52072 | POINT O WOODS BOOSTER STATION | | | | | | | |
| 52907 | HYDROPNEUMATIC STORAGE FACILITIES | | | | | | | |

Certified Operator Information

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

Facility Classification: CLASS 1 DISTRIBUTION SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|------------------|----------------|--|--------------------------|
| ANDREWS, PAUL M. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS IV DISTRIBUTION SYSTEM OPERATOR - CLASS II | 12/31/2018 6/30/2017 |

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 | | |
| CT1050752 | CTWC - SHORELINE REGION-POINT O WOODS | C | 1,068 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 400 | | | | |

Towns Served: OLD LYME

Certified Operator Information

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

Facility Classification: CLASS 1 DISTRIBUTION SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|----------------------|-------------------|---|--------------------------|
| FUNK, CHRISTOPHER B. | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2019 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2019 |
| SUITER, CARL | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 12/31/2019 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2018 |

Water System Facility: POINT O WOODS TREATMENT PLANT (WSF ID: 222)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|----------------------|-------------------|---|--------------------------|
| ANDREWS, PAUL M. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS IV | 12/31/2018 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2017 |
| FUNK, CHRISTOPHER B. | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2019 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2019 |
| SUITER, CARL | ASSIGNED OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 12/31/2019 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2018 |

Contact Information

| | | | | | | |
|---------------------------|-----------|---------------------------|--------------|-----------------|-------------------|----------|
| Name | | Organization | | | Job Title | |
| Mr. Robert F. Ross | | Connecticut Water Company | | | Superintendent | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 93 West Main Street | | | | Clinton | CT | 06413 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 860-664-6120 | | 860-669-7899 | 860-391-3356 | 800-286-5700 | rross@ctwater.com | |

Contact Role(s): Administrative Contact

| | | | | | | |
|------------------------------|-----------|---------------------------|--------------|-----------------|------------------------|----------|
| Name | | Organization | | | Job Title | |
| Mr. Eric W. Thornburg | | Connecticut Water Company | | | President/Ceo | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 93 West Main Street | | | | Clinton | CT | 06413 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 800-428-6008 | | 860-669-9326 | | 800-286-3985 | ethornburg@ctwater.com | |

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

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 | | |
| CT1051011 | BOXWOOD CONDOMINIUM ASSOCIATION | C | 28 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 9 LYME STREET | | | 12 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

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

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <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 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <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 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <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 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <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 | | | | |
| Physical Parameters (PPX) | | 1 routine (RT) per quarter | | | |
| <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) | | | | | |
| 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 | | | | |

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 | | |
| CT1051011 | BOXWOOD CONDOMINIUM ASSOCIATION | C | 28 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 9 LYME STREET | | | 12 | | | | |
| Towns Served: OLD LYME | | | | | | | |

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 & V (SOCS) | 1 (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 | 1/1-12/31 | Waiver |
| 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) | 1/1/17 - 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) | 1/1/14 - 12/31/16 | | Complete |
| | 1/1/17 - 12/31/19 | | |
| | 1/1/20 - 12/31/22 | | |

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 |
| Start Date: 1/1/2005 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 8/1/2016 - 8/31/2016 | | N |
| | 9/1/2016 - 9/30/2016 | | N |
| | 10/1/2016 - 10/31/2016 | Y | Y |
| | 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 |
|--------------------------------|-----------|---------------|
| CROSS CONNECTION SURVEY REPORT | 3/1/2017 | |
| SUBMIT CCR TO THE DEPARTMENT | 6/30/2017 | |
| SUBMIT CCR CERTIFICATION FORM | 8/9/2017 | |

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 | | |
| CT1051011 | BOXWOOD CONDOMINIUM ASSOCIATION | C | 28 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 9 LYME STREET | | | 12 | | | | |
| Towns Served: OLD LYME | | | | | | | |

Public Notification Requirements

| Violation/Situation | Compliance Period | Notice Tier | Public Notification | | PN Certification | |
|-------------------------------|-------------------|-------------|---------------------|-----------|------------------|----------|
| | | | Required | Performed | Due to DPH | Received |
| Lead and Copper M&R Violation | 1/1/13 - 12/31/15 | 3 | 6/30/2017 | | 7/10/2017 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total | Lead and | Stage 2 | |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------|------------------|----------|------|
| | | | | | Coliform Rule | Copper Rule Tier | Asbestos | DBPR |
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | | BLD7 | WS2712-22 | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UNIT | WS2712-19 | A | Y | | | |
| | | UNIT-1 | GENERATED BY BATCH | A | Y | | | |
| | | UNIT-3 | GENERATED BY BATCH | A | Y | | | |
| | | UNIT-4 | GENERATED BY BATCH | A | Y | | | |
| | | UNIT-7 | GENERATED BY BATCH | A | Y | | | |
| UNIT-7B | GENERATED BY BATCH | A | Y | | | | | |
| UPSTREAM | WITHIN 5 SERVICE CON | A | | | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 321 | TREATMENT PLANT | | | | | | | |
| 58981 | ATMOPSHERIC STORAGE | | | | | | | |
| 969 | WELL 1 | 2 | WELL 1 | A | | | | |

Certified Operator Information

| Water System Facility: TREATMENT PLANT (WSF ID: 321) | | | |
|---|----------------|---|--------------------------|
| Facility Classification: CLASS 1 TREATMENT PLANT | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| O'SHAUGHNESSY, WILLIAM J. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2018 |

Contact Information

| | | | | | | | | |
|--|-----------|---------------------------|--------------------------|-----------------|---------------------|----------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Mr. Craig Silver | | Boxwood Condominium Assoc | | | President | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 9 Lyme Street Unit 4 | | | | | | Old Lyme | CT | 06371 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-434-8319 | | 860-434-7669 | | 860-460-1391 | csilver21@yahoo.com | | | |
| Contact Role(s): Administrative Contact, Legal Contact, Owner | | | | | | | | |

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 | | | |
| CT1051011 | BOXWOOD CONDOMINIUM ASSOCIATION | C | 28 | P | GW | | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural | |
| 9 LYME STREET | | | 12 | | | | | |
| Towns Served: OLD LYME | | | | | | | | |
| Name | | | Organization | | | Job Title | | |
| Cedar Crest Development Corp. | | | | | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 9 Lyme Street | | | | | | Old Lyme | CT | 06371 |
| 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 | | |
| CT1051021 | MIAMI BEACH WATER COMPANY | C | 440 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 110 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

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

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <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 | | | | |
| Total Haloacetic Acids (2456) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| DISTRIBUTION SYSTEM (12FLAGLERAV) | 1/1/16 - 12/31/16 | 8/1-8/31 | Complete | | |
| | 1/1/17 - 12/31/17 | 8/1-8/31 | | | |
| | 1/1/18 - 12/31/18 | 8/1-8/31 | | | |
| Total Trihalomethanes (2950) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| 2 HAWKSNEST RD (2HAWKSNEST) | 1/1/16 - 12/31/16 | 8/1-8/31 | Complete | | |
| | 1/1/17 - 12/31/17 | 8/1-8/31 | | | |
| | 1/1/18 - 12/31/18 | 8/1-8/31 | | | |
| Total Coliform (3100) | | 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 | 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 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <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 - 12/31/16 | 6/1-9/30 | | | |
| | 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 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 | 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 | | | | |

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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 | | |
| CT1051021 | MIAMI BEACH WATER COMPANY | C | 440 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | 110 | | | | | |

Towns Served: OLD LYME

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> |
| | 6/1/17 - 6/30/17 | | |
| | 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 | 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 |

Water System Facility: DRILLED WELL ENTRY POINT #1 (WSF ID: 00700)

| 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 | | |

| 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 |

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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 | | |
| CT1051021 | MIAMI BEACH WATER COMPANY | C | 440 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 110 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

Water System Facility: DRILLED WELL ENTRY POINT #1 (WSF ID: 00700)

| 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> |
| | 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) | 1/1/16 - 12/31/18 | | |
| | 1/1/19 - 12/31/21 | | |

Water System Facility: COLUMBUS WELLS ENTRY POINT #2 (WSF ID: 00701)

| 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 #2 (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 #2 (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 #2 (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 #2 (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 #2 (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> |

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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 | | |
| CT1051021 | MIAMI BEACH WATER COMPANY | C | 440 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 110 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

Water System Facility: COLUMBUS WELLS ENTRY POINT #2 (WSF ID: 00701)

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 #2 (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 #2 (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 #2 (3) | 1/1/16 - 12/31/18 | | |
| | 1/1/19 - 12/31/21 | | |

Water System Facility: CORSINO WELL ENTRY POINT #3 (WSF ID: 00702)

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 (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 (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 (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 (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 (3) | 1/1/16 - 12/31/16 | | Complete |
| | 1/1/17 - 12/31/17 | | |
| | 1/1/18 - 12/31/18 | | |

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 | | |
| CT1051021 | MIAMI BEACH WATER COMPANY | C | 440 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 110 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

Water System Facility: CORSINO WELL ENTRY POINT #3 (WSF ID: 00702)

| 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 (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 (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 (3) | 1/1/16 - 12/31/18 | | | |
| | 1/1/19 - 12/31/21 | | | |

Water System Facility: WELL 3 CORSINO AVE (WSF ID: 949)

| E. Coli (3014) | | 1 routine (RT) per month | | |
|---|--------------------------|---------------------------------|--------------------------|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| WELL 3 CORSINO AVE (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 | | | |

Water System Facility: WELL 1 COLUMBUS AVE (WSF ID: 950)

| E. Coli (3014) | | 1 routine (RT) per month | | |
|---|--------------------------|---------------------------------|--------------------------|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| WELL 1 COLUMBUS AVE (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 | | | |

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 | | |
| CT1051021 | MIAMI BEACH WATER COMPANY | C | 440 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 110 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

Water System Facility: WELL 1 COLUMBUS AVE (WSF ID: 950)

| E. Coli (3014) | 1 routine (RT) per month | | |
|---|---------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 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 | | |

Water System Facility: WELL 2 COLUMBUS AVE (WSF ID: 951)

| E. Coli (3014) | 1 routine (RT) per month | | |
|---|---------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 2 COLUMBUS AVE (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: COLUMBUS WELLS ENTRY POINT #2 (WSFID: 00701)

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---|---------------------------|---------------------------|
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: 0.2 MG/L | Daily |
| Start Date: 4/1/2004 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 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 | | |

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 | | |
| CT1051021 | MIAMI BEACH WATER COMPANY | C | 440 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 110 | | | | |

Towns Served: OLD LYME

Water System Facility: **CORSINO WELL ENTRY POINT #3 (WSFID: 00702)**

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---|---------------------------|---------------------------|
| Chlorine | Entry Point Chlorine Residual Monitoring (CHLR) | Minimum: 0.2 MG/L | Daily |
| Start Date: 4/1/2004 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 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 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|-------------------------------------|-----------------|----------------------|
| SUBMIT CCR CERTIFICATION FORM | 8/9/2010 | |
| SUBMIT CCR CERTIFICATION FORM | 8/9/2011 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2015 | |
| SUBMIT CCR TO THE DEPARTMENT | 6/30/2016 | |
| SUBMIT CCR CERTIFICATION FORM | 8/9/2016 | |
| SUBMIT CCR TO THE DEPARTMENT | 6/30/2017 | |
| SUBMIT CCR CERTIFICATION FORM | 8/9/2017 | |

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> |
| Net Gross Alpha M&R Violation | 1/1/04 - 3/31/04 | 3 | 8/1/2006 | | 8/11/2006 | |
| Net Gross Alpha M&R Violation | 1/1/04 - 3/31/04 | 3 | 8/1/2006 | | 8/11/2006 | |
| Uranium M&R Violation | 1/1/04 - 3/31/04 | 3 | 8/1/2006 | | 8/11/2006 | |
| Uranium M&R Violation | 1/1/04 - 3/31/04 | 3 | 8/1/2006 | | 8/11/2006 | |
| Uranium M&R Violation | 1/1/04 - 3/31/04 | 3 | 8/1/2006 | | 8/11/2006 | |
| Combined Radium-226/228 M&R Violation | 1/1/04 - 3/31/04 | 3 | 8/1/2006 | | 8/11/2006 | |
| Combined Radium-226/228 M&R Violation | 1/1/04 - 3/31/04 | 3 | 8/1/2006 | | 8/11/2006 | |
| Combined Radium-226/228 M&R Violation | 1/1/04 - 3/31/04 | 3 | 8/1/2006 | | 8/11/2006 | |
| Net Gross Alpha M&R Violation | 1/1/04 - 3/31/04 | 3 | 8/1/2006 | | 8/11/2006 | |
| Total Coliform M&R Violation | 12/1/07 - 12/31/07 | 2 | 4/16/2008 | | 4/26/2008 | |
| Lead and Copper M&R Violation | 1/1/05 - 12/31/07 | 3 | 3/17/2009 | | 3/27/2009 | |
| Chlorine M&R Violation | 12/1/07 - 12/31/07 | 3 | 3/17/2009 | | 3/27/2009 | |
| Physical Parameters M&R Violation | 12/1/07 - 12/31/07 | 3 | 3/17/2009 | | 3/27/2009 | |
| pH M&R Violation | 7/1/11 - 7/31/11 | 3 | 9/6/2013 | | 9/16/2013 | |
| pH M&R Violation | 6/1/11 - 6/30/11 | 3 | 9/6/2013 | | 9/16/2013 | |
| Chlorine M&R Violation | 9/1/11 - 9/30/11 | 3 | 9/6/2013 | | 9/16/2013 | |
| Chlorine M&R Violation | 7/1/11 - 7/31/11 | 3 | 9/6/2013 | | 9/16/2013 | |
| pH M&R Violation | 9/1/11 - 9/30/11 | 3 | 9/6/2013 | | 9/16/2013 | |
| Chlorine M&R Violation | 6/1/11 - 6/30/11 | 3 | 9/6/2013 | | 9/16/2013 | |

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 | | |
| CT1051021 | MIAMI BEACH WATER COMPANY | C | 440 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 110 | | | | |

Towns Served: OLD LYME

Public Notification Requirements

| Violation/Situation | Compliance Period | Notice Tier | Public Notification | | PN Certification | |
|-------------------------------|--------------------|-------------|---------------------|-----------|------------------|----------|
| | | | Required | Performed | Due to DPH | Received |
| pH M&R Violation | 5/1/12 - 5/31/12 | 3 | 9/6/2013 | | 9/16/2013 | |
| Chlorine M&R Violation | 9/1/11 - 9/30/11 | 3 | 9/6/2013 | | 9/16/2013 | |
| pH M&R Violation | 12/1/11 - 12/31/11 | 3 | 9/6/2013 | | 9/16/2013 | |
| pH M&R Violation | 12/1/11 - 12/31/11 | 3 | 9/6/2013 | | 9/16/2013 | |
| pH M&R Violation | 9/1/11 - 9/30/11 | 3 | 9/6/2013 | | 9/16/2013 | |
| Chlorine M&R Violation | 2/1/13 - 2/28/13 | 3 | 4/1/2014 | | 4/11/2014 | |
| pH M&R Violation | 2/1/13 - 2/28/13 | 3 | 4/1/2014 | | 4/11/2014 | |
| Chlorine M&R Violation | 2/1/13 - 2/28/13 | 3 | 4/1/2014 | | 4/11/2014 | |
| pH M&R Violation | 2/1/13 - 2/28/13 | 3 | 4/1/2014 | | 4/11/2014 | |
| Chlorine M&R Violation | 3/1/13 - 3/31/13 | 3 | 5/23/2014 | | 6/2/2014 | |
| Chlorine M&R Violation | 4/1/13 - 4/30/13 | 3 | 6/19/2014 | | 6/29/2014 | |
| pH M&R Violation | 4/1/13 - 4/30/13 | 3 | 6/19/2014 | | 6/29/2014 | |
| Lead and Copper M&R Violation | 1/1/11 - 12/31/13 | 3 | 5/8/2015 | | 5/18/2015 | |
| Chlorine M&R Violation | 6/1/15 - 6/30/15 | 3 | 8/3/2016 | | 8/13/2016 | |
| pH M&R Violation | 6/1/15 - 6/30/15 | 3 | 8/3/2016 | | 8/13/2016 | |
| Chlorine M&R Violation | 7/1/15 - 7/31/15 | 3 | 9/16/2016 | | 9/26/2016 | |
| pH M&R Violation | 7/1/15 - 7/31/15 | 3 | 9/16/2016 | | 9/26/2016 | |
| Chlorine M&R Violation | 7/1/15 - 7/31/15 | 3 | 1/6/2017 | | 1/16/2017 | |

Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform | Lead and Copper | | Asbestos | Stage 2 DBPR | |
|--------------------------|-----------------------|-------------------|----------------------------|--------|----------------|-----------------|---|----------|--------------|---|
| | | | | | Rule | Rule Tier | | | | |
| 00600 | DISTRIBUTION SYSTEM | 11MIAMI | 11 MIAMI AVE | A | Y | | | Y | | |
| | | 12FLAGLER | GENERATED BY BATCH | A | Y | | | | | |
| | | 12FLAGLERAV | DISTRIBUTION SYSTEM | A | Y | | | | Y | |
| | | 18FIFTH | 18 FIFTH AVE | A | | | 1 | | | |
| | | 18FLAGLER | 18 FLAGLER AVE | A | | | 3 | | | |
| | | 20MIAMI | 20 MIAMI AVE | A | | | 3 | | | |
| | | 20WASHINGTON | 20 WASHINGTON AVE | A | | | 3 | | | |
| | | 2HAWKSNEST | 2 HAWKSNEST RD | A | Y | | | | Y | Y |
| | | 31FLAGLER | 31 FLAGLER AVE | A | | | 3 | | | |
| | | 4 | GENERIC DISTRIBUTION | A | Y | | | | | |
| | | 44CORSINO | 44 CORSINO AVE | A | | | 3 | | | |
| | | 48BISCAYNE | 48 BISCAYNE BLVD | A | | | 3 | | | |
| | | 59COLUMBUS | 59 COLUMBUS AVE | A | | | 3 | | | |
| | | 7BISCAYNE | 7 BISCAYNE BLVD | A | | | 3 | | | |
| | | 7CORSINO | 7 CORSINO AVE | A | | | 3 | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | 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 | | |
| CT1051021 | MIAMI BEACH WATER COMPANY | C | 440 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | 110 | | | | | |

Towns Served: OLD LYME

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 |
|--------------------------|----------------------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|--------------|
| 00700 | DRILLED WELL ENTRY POINT #1 | 3 | ENTRY POINT | A | | | | |
| 00701 | COLUMBUS WELLS ENTRY POINT #2 | 3 | ENTRY POINT #2 | A | | | | |
| 00702 | CORSINO WELL ENTRY POINT #3 | 3 | ENTRY POINT #3 | A | | | | |
| 1512 | DRILLED WELL 1 | 2 | DRILLED WELL 1 | A | | | | |
| 407 | MIAMI BEACH TREATMENT FACILITIES | | | | | | | |
| 52811 | COLUMBUS ATMOSPHERIC STORAGE | | | | | | | |
| 52813 | COLUMBUS PRESSURE STORAGE | | | | | | | |
| 949 | WELL 3 CORSINO AVE | 2 | WELL 3 CORSINO AVE | A | | | | |
| 950 | WELL 1 COLUMBUS AVE | 2 | WELL 1 COLUMBUS AVE | A | | | | |
| 951 | WELL 2 COLUMBUS AVE | 2 | WELL 2 COLUMBUS AVE | A | | | | |

Certified Operator Information

Water System Facility: MIAMI BEACH TREATMENT FACILITIES (WSF ID: 407)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|--------------------|----------------|---|--------------------------|
| SIMA, III, JOHN F. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 6/30/2017 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 9/30/2017 |

Contact Information

| | | | | | | |
|---------------------------|-----------|--------------------------|--------------|-----------------|----------------------|----------|
| Name | | Organization | | | Job Title | |
| Mr. Michael Girard | | Miami Beach Water Co. | | | President | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| P.O. Box 4115 | | | | Old Lyme | CT | 06371 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 860-434-7562 | | | | 860-434-7562 | mg7562@sbcglobal.net | |

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.
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 | | |
| CT1056221 | LYMEWOOD ELDERLY HOUSING | C | 50 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 249 BOSTON POST ROAD | | | 25 | | | | |
| Towns Served: OLD LYME | | | | | | | |

Monitoring Requirements

| | | | | | | | |
|--|--------------------------|--------------------------|---------------------------------------|--|--|--|--|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | | | | | |
| Asbestos (1094) | | | 1 routine (RT) per nine years | | | | |
| <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 - 12/31/23 | | | | | | |
| Total Coliform (3100) | | | 1 routine (RT) per quarter | | | | |
| <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 | | | | | | |
| Lead And Copper (PBCU) | | | 5 routine (RT) per three years | | | | |
| <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 | | | | | |
| Physical Parameters (PPS) | | | 1 routine (RT) per quarter | | | | |
| <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 | | | | | | |
| Physical Parameters (PPX) | | | 1 routine (RT) per quarter | | | | |
| <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) | | | | | | | |
| Net Gross Alpha (4000) | | | 1 routine (RT) per six years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/11 - 12/31/16 | | Complete | | | | |
| | 1/1/17 - 12/31/22 | | | | | | |
| Uranium (4006) | | | 1 routine (RT) per six years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/11 - 12/31/16 | | Complete | | | | |
| | 1/1/17 - 12/31/22 | | | | | | |
| Combined Radium-226/228 (4010) | | | 1 routine (RT) per six years | | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | | | |
| ENTRY POINT (3) | 1/1/11 - 12/31/16 | | Complete | | | | |
| | 1/1/17 - 12/31/22 | | | | | | |
| Gross Beta Particle Activity (4100) | | | 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 | | | | | | |

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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 | | |
| CT1056221 | LYMEWOOD ELDERLY HOUSING | C | 50 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 249 BOSTON POST ROAD | | | 25 | | | | |
| Towns Served: OLD LYME | | | | | | | |

Monitoring Requirements

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

| Gross Beta Particle Activity (4100) | 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> |
| | 1/1/20 - 12/31/22 | | |
| Man-Made Beta Particle & Photon Emitters (4101) | 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 | | |
| Tritium (4102) | 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 | | |
| Strontium-90 (4174) | 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 | | |
| 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 & 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 | | 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) | 1/1/14 - 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 | 12/29/2012 | |

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 | | |
| CT1056221 | LYMEWOOD ELDERLY HOUSING | C | 50 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 249 BOSTON POST ROAD | | 25 | | | | | |
| Towns Served: OLD LYME | | | | | | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--------------------------------|-----------|---------------|
| SUBMIT CCR CERTIFICATION FORM | 8/9/2016 | |
| 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 | | | | |
| | | GWS001 | TREATMENT ROOM | A | | | | |
| | | GWS002 | CLUB HOUSE KITCHEN | A | | 1 | | |
| | | GWS003 | UNIT NO. 6 | A | | 1 | | |
| | | GWS004 | UNIT NO. 10 | A | | 1 | | |
| | | GWS005 | UNIT NO. 17 | A | | 1 | | |
| | | GWS006 | UNIT NO. 20 | A | | 1 | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 52243 | PRESSURE STORAGE | | | | | | | |
| 547 | LYMEWOOD PUMP HOUSE | | | | | | | |
| 966 | WELL 1 | 2 | WELL 1 | A | | | | |

Certified Operator Information

| | | | |
|---|---------------|------------------|--------------------------|
| Water System Facility: LYMEWOOD PUMP HOUSE (WSF ID: 547) | | | |
| Facility Classification: CLASS 1 TREATMENT PLANT | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| OPERATOR ASSIGNMENT REQUIRE | | | |

Contact Information

| | | | | | | | | |
|--------------------------|-----------|--------------------------|--------------------------|-----------------|---------------|----------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Mr. Roger Goodnow | | Lymewood Elderly Housing | | | Administrator | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 249 Boston Post Rd | | | | | | Old Lyme | CT | 06371 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-434-2120 | | | | 860-434-2120 | | | | |
| Contact Role(s): | | Legal Contact | | | | | | |

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 | | | |
| CT1056221 | LYMEWOOD ELDERLY HOUSING | C | 50 | L | GW | | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural | |
| 249 BOSTON POST ROAD | | 25 | | | | | | |
| Towns Served: OLD LYME | | | | | | | | |
| Name | | | Organization | | | Job Title | | |
| Lymewood Elderly Housing | | | | | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 127 Washington Avenue | | | 5Th Floor East | | | North Haven | CT | 06473 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-434-5334 | | | | | | | | |
| Contact Role(s): Owner | | | | | | | | |
| Name | | | Organization | | | Job Title | | |
| Ms. Kathy Murphy | | | Lymewood Elderly Housing | | | President | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 86 Halls Road | | | PO Box 509 | | | Old Lyme | CT | 06371 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-227-1560 | | | 860-227-1560 | | kmurphy@cbmoves.com | | | |
| Contact Role(s): Administrative Contact, Legal Contact | | | | | | | | |
| Please note the following: | | | | | | | | |
| <ol style="list-style-type: none"> 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 | | |
| CT1056231 | LAUREL HEIGHTS ASSOCIATION, INC. | C | 45 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 15 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

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

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <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 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <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 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per three years | | | |
| <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 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <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 | | | | |
| Physical Parameters (PPX) | | 1 routine (RT) per quarter | | | |
| <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) | | | | | |
| 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 | | | | |

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 | | |
| CT1056231 | LAUREL HEIGHTS ASSOCIATION, INC. | C | 45 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | | 15 | | | | |

Towns Served: OLD LYME

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) | 1/1/14 - 12/31/16 | | Complete |
| | 1/1/17 - 12/31/19 | | |
| | 1/1/20 - 12/31/22 | | |
| 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 & 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 | | 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) | 1/1/14 - 12/31/16 | | Complete |
| | 1/1/17 - 12/31/19 | | |
| | 1/1/20 - 12/31/22 | | |

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 | 4 |
| Start Date: 7/1/2003 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 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 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|-------------------------------------|-----------------|----------------------|
| SUBMIT CCR CERTIFICATION FORM | 8/9/2016 | |
| CROSS CONNECTION SURVEY REPORT | 3/1/2017 | |
| SUBMIT CCR TO THE DEPARTMENT | 6/30/2017 | |
| SUBMIT CCR CERTIFICATION FORM | 8/9/2017 | |

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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 | | |
| CT1056231 | LAUREL HEIGHTS ASSOCIATION, INC. | C | 45 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | 15 | | | | | |

Towns Served: OLD LYME

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 | | | | |
| | | GWS001 | PUMPHOUSE | A | | | | |
| | | GWS002 | UNIT 1 | A | Y | 1 | | |
| | | GWS003 | UNIT 4 | A | Y | 1 | | |
| | | GWS004 | UNIT 7 | A | Y | 1 | | |
| | | GWS005 | UNIT 14 | A | Y | 1 | | |
| | | GWS006 | UNIT 10 | A | Y | 1 | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 50672 | LAUREL HEIGHTS PUMPHOUSE | | | | | | | |
| 50688 | ATMOSPHERIC STORAGE | | | | | | | |
| 50690 | HYDRONEUMATIC TANK | | | | | | | |
| 967 | WELL 1 | 2 | WELL 1 | A | | | | |

Certified Operator Information

Water System Facility: LAUREL HEIGHTS PUMPHOUSE (WSF ID: 50672)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------------------|----------------|---|--------------------------|
| O'SHAUGHNESSY, WILLIAM J. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 6/30/2018 |

Contact Information

| | | | | | | | |
|--|-----------|-----------------------------|--------------|-----------------|-----------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. Inge Hieret | | Laurel Heights Assoc., Inc. | | | President | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 14 Laurel Drive | | | | | Old Lyme | CT | 06371 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 860-434-1703 | | 860-434-6160 | | 860-464-2201 | | | |
| Contact Role(s): Legal Contact | | | | | | | |
| Name | | Organization | | | Job Title | | |
| Mr. Donald F. Tapper | | Mile Creek Apartments | | | Water Operator | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 202 Mile Creek Road | | | | | Old Lyme | CT | 06371 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 860-434-5334 | | | 860-271-9685 | 860-434-5334 | dontapperol@yahoo.com | | |
| Contact Role(s): Administrative Contact | | | | | | | |

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 | | |
| CT1056231 | LAUREL HEIGHTS ASSOCIATION, INC. | C | 45 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| | | 15 | | | | | |

Towns Served: OLD LYME

| | | | | | | | | |
|---------------------------|-----------|----------------------------|--------------------------|-----------------|---------------|----------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Ms. Sally Crawford | | Laurel Heights Assoc. Inc. | | | Secretary | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 15 Laurel Drive | | | | | | Old Lyme | CT | 06371 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-434-9214 | | | | 860-464-2201 | | | | |

| | | | | | | | | |
|--------------------------|-----------|----------------------------|--------------------------|-----------------|----------------|----------|-------|----------|
| Contact Role(s): | | Legal Contact | | | | | | |
| Name | | Organization | | | Job Title | | | |
| Mr. Paul Finan | | Laurel Heights Assoc. Inc. | | | Vice President | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 9 Laurel Dr | | | | | | Old Lyme | CT | 06371 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-434-8753 | | | | 860-464-2201 | | | | |

| | | | | | | | | |
|--------------------------|-----------|----------------------------|--------------------------|-----------------|---------------|----------|-------|----------|
| Contact Role(s): | | Legal Contact | | | | | | |
| Name | | Organization | | | Job Title | | | |
| Patsy McCook | | Laurel Heights Association | | | President | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 6 Laurel Dr | | | | | | Old Lyme | CT | 06371 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-434-3912 | | | | | | | | |

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 | | |
| CT1056241 | RYE FIELD MANOR ELDERLY HOUSING | C | 78 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1-9 RYE FIELD ROAD | | | 40 | | | | |
| Towns Served: OLD LYME | | | | | | | |

Monitoring Requirements

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

| | | | | | |
|---|--------------------------|--------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 1 routine (RT) per nine years | | | |
| <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 - 12/31/24 | | | | |
| Total Coliform (3100) | | 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 | 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 | | 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 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per year | | | |
| <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 | | | |
| 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> | | |
| 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 | | | | |
| 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 | 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 | | |

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 | | |
| CT1056241 | RYE FIELD MANOR ELDERLY HOUSING | C | 78 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1-9 RYE FIELD ROAD | | | 40 | | | | |
| Towns Served: OLD LYME | | | | | | | |

Monitoring Requirements

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

| 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 | | |
| Gross Beta Particle Activity (4100) | 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 | | |
| Man-Made Beta Particle & Photon Emitters (4101) | 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 | | |
| Tritium (4102) | 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 | | |
| Strontium-90 (4174) | 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) | 1/1/15 - 12/31/17 | | |
| | 1/1/18 - 12/31/20 | | |

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 | | |
| CT1056241 | RYE FIELD MANOR ELDERLY HOUSING | C | 78 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1-9 RYE FIELD ROAD | | | 40 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

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

| 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 | | Complete | |
| | 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) | 1/1/14 - 12/31/16 | | Complete | |
| | 1/1/17 - 12/31/19 | | | |
| | 1/1/20 - 12/31/22 | | | |

Water System Facility: **WELL 2 (WSF ID: 1509)**

| E. Coli (3014) | | 1 routine (RT) per month | | |
|---|--------------------------|---------------------------------|--------------------------|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| WELL 2 (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 | | 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 | | | | |

Water System Facility: **WELL 3 (WSF ID: 1510)**

| E. Coli (3014) | | 1 routine (RT) per month | | |
|---|--------------------------|---------------------------------|--------------------------|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| WELL 3 (2) | 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 | | |
| CT1056241 | RYE FIELD MANOR ELDERLY HOUSING | C | 78 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1-9 RYE FIELD ROAD | | | 40 | | | | |
| Towns Served: OLD LYME | | | | | | | |

Monitoring Requirements

Water System Facility: WELL 3 (WSF ID: 1510)

| E. Coli (3014) | 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 | | |
| | 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 | | |

Water System Facility: WELL 4 (WSF ID: 1511)

| E. Coli (3014) | 1 routine (RT) per month | | |
|---|---------------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| WELL 4 (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 | | |
| | 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

| Water System Facility: ENTRY POINT (WSFID: 00700) | | | |
|--|--|----------------------------|--------------------------------------|
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
| pH | Entry Point pH Monitoring (PHRD) | Minimum: 6.4 PH | 4 |
| Start Date: 8/1/2004 | | Compliance History: | Monitoring Compliance Status: |
| | | Monitoring Period | Compliance Status: |
| | | 8/1/2016 - 8/31/2016 | N |
| | | 9/1/2016 - 9/30/2016 | N |
| | | 10/1/2016 - 10/31/2016 | N |

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 |
|-----------|---------------------------------|----------------|------------|------------|----------------|
| CT1056241 | RYE FIELD MANOR ELDERLY HOUSING | C | 78 | P | GW |

| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
|----------------------------------|---------------------|-------------|------------|------------|----------|--------------|
| 1-9 RYE FIELD ROAD | | 40 | | | | |

Towns Served: OLD LYME

Water System Facility: ENTRY POINT (WSFID: 00700)

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---------------------------------------|----------------------------|--------------------------------------|
| pH | Entry Point pH Monitoring (PHRD) | Minimum: 6.4 PH | 4 |
| Start Date: 8/1/2004 | | Compliance History: | Monitoring Compliance Status: |
| | | Monitoring Period | Compliance Status: |
| | | 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 LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2016 | |
| 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 | 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 | | | | |
| | | RYEM001 | 3A | A | Y | 2 | Y | |
| | | RYEM002 | 7B | A | Y | 2 | | |
| | | RYEM003 | 15B | A | Y | 2 | | |
| | | RYEM004 | 23A | A | Y | 2 | | |
| | | RYEM005 | 31B | A | Y | 2 | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 1509 | WELL 2 | 2 | WELL 2 | A | | | | |
| 1510 | WELL 3 | 2 | WELL 3 | A | | | | |
| 1511 | WELL 4 | 2 | WELL 4 | A | | | | |
| 50812 | ATMOSPHERIC STORAGE | | | | | | | |
| 59881 | PRESSURE STORAGE | | | | | | | |
| 774 | RYE FIELD MANOR TREATMENT PLANT | 1 | COMBINED RAW | A | | | | |

Certified Operator Information

Water System Facility: RYE FIELD MANOR TREATMENT PLANT (WSF ID: 774)

Facility Classification: CLASS 2 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|-----------------|----------------|--|--------------------------|
| BRAIG, ALLEN L. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS IV DISTRIBUTION SYSTEM OPERATOR - CLASS II | 6/30/2019 12/31/2018 |

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 | | |
| CT1056241 | RYE FIELD MANOR ELDERLY HOUSING | C | 78 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 1-9 RYE FIELD ROAD | | | 40 | | | | |

Towns Served: OLD LYME

Contact Information

| | | | | | | |
|--------------------------|-----------|------------------------------|--------------|-----------------|---------------|------------|
| Name | | Organization | | | Job Title | |
| Mr. Kim J. Kaiser | | Shoreline Affordable Housing | | | President | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 183 Boston Post Road | | P.O. Box 249 | | East Lyme | CT | 06333-0249 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | |
| 860-434-0526 | | 860-691-3006 | | | | |

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

| | | | | | | |
|---|-----------|--------------------------|--------------|-----------------|---------------|----------|
| Name | | Organization | | | Job Title | |
| Shoreline Affordable Housing, Inc. | | | | | | |
| Mailing Address Line One | | Mailing Address Line Two | | City | State | Zip Code |
| 183 Boston Post Road | | | | East Lyme | CT | 06333 |
| 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 | | |
| CT1059251 | LYME ACADEMY APARTMENTS,LLC | C | 48 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 77 LYME STREET | | | 2 | | | | |

Towns Served: OLD LYME

Monitoring Requirements

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

| | | | | | |
|---|--------------------------|---------------------------------------|--------------------------|--|--|
| Asbestos (1094) | | 2 routine (RT) per nine years | | | |
| <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 | | | | |
| Total Coliform (3100) | | 2 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 | 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 | | 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 | | | | |
| Lead And Copper (PBCU) | | 10 routine (RT) per six months | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| BUILDING 1 (4-1) | 7/1/16 - 12/31/16 | | Complete | | |
| | 1/1/17 - 6/30/17 | | | | |
| | 7/1/17 - 12/31/17 | | | | |
| BUILDING 2 (4-2) | 7/1/16 - 12/31/16 | | Complete | | |
| | 1/1/17 - 6/30/17 | | | | |
| | 7/1/17 - 12/31/17 | | | | |
| Physical Parameters (PPS) | | 2 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 | 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 | | | | |
| Physical Parameters (PPX) | | 2 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 | 8/1/16 - 8/31/16 | | Complete | | |
| | 9/1/16 - 9/30/16 | | 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 | | |
| CT1059251 | LYME ACADEMY APARTMENTS,LLC | C | 48 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 77 LYME STREET | | | 2 | | | | |
| Towns Served: OLD LYME | | | | | | | |

Monitoring Requirements

| | | | | | | | |
|--|--|--------------------------|--|---------------------------------------|--|--------------------------|--|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | | | | | |
| Physical Parameters (PPX) | | | | 2 routine (RT) per month | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| | | 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 #1 (WSF ID: 00701) | | | | | | | |
| 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 #1 (3) | | 1/1/14 - 12/31/16 | | | | Complete | |
| | | 1/1/17 - 12/31/19 | | | | | |
| | | 1/1/20 - 12/31/22 | | | | | |
| 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 #1 (3) | | 1/1/16 - 12/31/16 | | | | Complete | |
| | | 1/1/17 - 12/31/17 | | | | Complete | |
| | | 1/1/18 - 12/31/18 | | | | | |
| Radionuclides - Gross Alpha, Combined Radium & Uranium (RADA) | | | | 1 routine (RT) per six years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | | <i>Monitoring Period</i> | | <i>Collection Period</i> | | <i>Compliance Status</i> | |
| ENTRY POINT #1 (3) | | 1/1/15 - 12/31/20 | | | | | |
| Pesticides, Herbicides and PCBs - Phase II & V (SOCS) | | | | 1 (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 #1 (3) | | 1/1/14 - 12/31/16 | | 1/1-12/31 | | Waiver | |
| 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 #1 (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 | | | | | |
| Water System Facility: ENTRY POINT #2 (WSF ID: 00702) | | | | | | | |
| 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 #2 (3) | | 1/1/14 - 12/31/16 | | | | Complete | |
| | | 1/1/17 - 12/31/19 | | | | | |
| | | 1/1/20 - 12/31/22 | | | | | |
| 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 #2 (3) | | 1/1/16 - 12/31/16 | | | | Complete | |
| | | 1/1/17 - 12/31/17 | | | | Complete | |
| | | 1/1/18 - 12/31/18 | | | | | |

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 | | |
| CT1059251 | LYME ACADEMY APARTMENTS,LLC | C | 48 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 77 LYME STREET | | | 2 | | | | |
| Towns Served: OLD LYME | | | | | | | |

Monitoring Requirements

Water System Facility: ENTRY POINT #2 (WSF ID: 00702)

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

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT #2 (3) | 1/1/15 - 12/31/20 | | |

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

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT #2 (3) | 1/1/14 - 12/31/16 | 1/1-12/31 | Waiver |

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

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|--------------------|-------------------|-------------------|
| ENTRY POINT #2 (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 | | |

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

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

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| WELL #1 (2-WELL1) | 8/18/16 - 8/23/16 | | Complete |
| | 8/18/16 - 8/23/16 | | Complete |
| | 8/18/16 - 8/23/16 | | Complete |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|---|-----------|---------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 3/30/2016 | |
| 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 | Lead and Copper | | Stage 2 | |
|--------------------------|-----------------------|-------------------|----------------------------|--------|----------------|-----------------|----------|---------|--|
| | | | | | Rule | Rule Tier | Asbestos | DBPR | |
| 00600 | DISTRIBUTION SYSTEM | 4 | DISTRIBUTION SYSTEM | A | Y | | | | |
| | | 4-1 | BUILDING 1 | I | Y | | | | |
| | | 4-2 | BUILDING 2 | I | Y | | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | | |
| | | LAA1A | BUILDING 1 - UNIT A | A | Y | N | Y | | |
| | | LAA1B | BUILDING 1 - UNIT B | A | Y | N | | | |
| | | LAA1C | BUILDING 1 - UNIT C | A | Y | N | | | |
| | | LAA1D | BUILDING 1 - UNIT D | A | Y | N | | | |
| | | LAA1E | BUILDING 1 - UNIT E | A | Y | N | | | |
| | | LAA1F | BUILDING 1 - UNIT F | A | Y | N | | | |

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 | | |
| CT1059251 | LYME ACADEMY APARTMENTS,LLC | C | 48 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 77 LYME STREET | | | 2 | | | | |
| Towns Served: OLD LYME | | | | | | | |

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 |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|--------------|
| | | LAA2G | BUILDING 2 - UNIT G | A | Y | N | | |
| | | LAA2H | BUILDING 2 - UNIT H | A | Y | N | | |
| | | LAA2I | BUILDING 2 - UNIT I | A | Y | N | | |
| | | LAA2J | BUILDING 2 - UNIT J | A | Y | N | | |
| | | LAA2K | BUILDING 2 - UNIT K | A | Y | N | | |
| | | LAA2L | BUILDING 2 - UNIT L | A | Y | N | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00701 | ENTRY POINT #1 | 3 | ENTRY POINT #1 | A | | | | |
| 00702 | ENTRY POINT #2 | 3 | ENTRY POINT #2 | A | | | | |
| 58647 | BUILDING #1 WTP | | | | | | | |
| 58649 | BUILDING #2 WTP | | | | | | | |
| WELL #1 | WELL #1 | 2-WELL1 | WELL #1 | A | | | | |
| WELL #2 | WELL #2 | 2-WELL2 | WELL #2 | A | | | | |

Certified Operator Information

| Water System Facility: BUILDING #1 WTP (WSF ID: 58647) | | | |
|---|----------------|---|--------------------------|
| <i>Facility Classification:</i> CLASS 1 TREATMENT PLANT | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| SUITER, CARL | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 12/31/2019 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2018 |
| Water System Facility: BUILDING #2 WTP (WSF ID: 58649) | | | |
| <i>Facility Classification:</i> CLASS 1 TREATMENT PLANT | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| SUITER, CARL | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 12/31/2019 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2018 |

Contact Information

| | | | | | | | |
|--|-----------|--------------------------|--------------|-----------------|----------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. Philip L Digennaro | | Lyme Academy Apts LLC | | | Manager/Member | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 5520 Park Ave | | Ste 201 | | | Trumbull | CT | 06611 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 203-365-0577 | | | | | | | |
| Contact Role(s): Administrative Contact, Legal Contact, Owner | | | | | | | |

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 | |
| CT1059251 | LYME ACADEMY APARTMENTS,LLC | C | 48 | P | GW | |
| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 77 LYME STREET | | 2 | | | | |
| Towns Served: OLD LYME | | | | | | |

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