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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1490174	**THE WASHINGTON CLUB**	NC	25	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
20 NORTH SHORE ROAD					1	

Towns Served: WARREN

Monitoring Requirements

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

Total Coliform (3100) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete
	4/1/17 - 6/30/17		
	7/1/17 - 9/30/17		

Physical Parameters (PPS) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	4/1/17 - 6/30/17	5/1-6/30	
	7/1/17 - 9/30/17		

Physical Parameters (PPX) — **1 routine (RT) per quarter**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
Select from Inventory of Active Sampling Points	7/1/16 - 9/30/16		Complete

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

Nitrate And Nitrite (NOX) — **1 routine (RT) per year**

Sampling Point (Sampling Point ID)	*Monitoring Period*	*Collection Period*	*Compliance Status*
ENTRY POINT (3)	1/1/16 - 12/31/16	5/1-9/30	Complete
	1/1/17 - 12/31/17	5/1-9/30	
	1/1/18 - 12/31/18	5/1-9/30	

Other Compliance Schedules

Compliance Schedule Activity	*Due Date*	*Achieved Date*
RESPOND TO SANITARY SURVEY	1/31/2010	

Public Notification Requirements

Violation/Situation	*Compliance Period*	*Notice Tier*	*Public Notification*		*PN Certification*	
			Required	*Performed*	*Due to DPH*	*Received*
Distribution Color MCL Violation	7/1/10 - 9/30/10	2	3/30/2011		4/9/2011	
Distribution Color MCL Violation	4/1/11 - 6/30/11	2	3/31/2012		4/10/2012	

Water System Facility and Sampling Point Inventory

Water System Facility ID	*Water System Facility*	*Sampling Point ID*	*Sampling Point Description*	*Status*	*Total Coliform Rule*	*Lead and Copper Rule Tier*	*Asbestos*	*Stage 2 DBPR*
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
23113	NEW WELL	2	NEW WELL	A				

Contact Information

Name	Organization	Job Title
Ms. Irene Allan	Washington Club	Business Manager

Mailing Address Line One	Mailing Address Line Two	City	State	Zip Code

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.

Schedule Generation Date: 2/20/2017

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1490174	**THE WASHINGTON CLUB**	NC	25	P	GW

Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
20 NORTH SHORE ROAD					1	

Towns Served: WARREN

P.O. Box 400	Washington	CT	06793

Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-868-0376				646-245-3682	

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

Please note the following:

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

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

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

End of schedule

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.