

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0970372</b>	<b>CURTIS PACKAGING</b>	NTNC	180	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
44 BERKSHIRE ROAD			1				
Towns Served: NEWTOWN							

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
Select from Inventory of Active Sampling Points		1/1/20 - 12/31/28			
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
Select from Inventory of Active Sampling Points		1/1/25 - 3/31/25		Complete	
		4/1/25 - 6/30/25			
		7/1/25 - 9/30/25			
		10/1/25 - 12/31/25			
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
Select from Inventory of Active Sampling Points		1/1/24 - 12/31/24	6/1-9/30	Complete	
		1/1/25 - 12/31/25	6/1-9/30		
		1/1/26 - 12/31/26	6/1-9/30		
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
Select from Inventory of Active Sampling Points		1/1/25 - 3/31/25		Complete	
		4/1/25 - 6/30/25			
		7/1/25 - 9/30/25			
		10/1/25 - 12/31/25			
<b>Water System Facility: ENTRY POINT - HILL WELL (WSF ID: 00701)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
EP - HILL WELL (3)		1/1/23 - 12/31/25		Complete	
		1/1/26 - 12/31/28			
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
EP - HILL WELL (3)		1/1/24 - 12/31/24		Complete	
		1/1/25 - 12/31/25		Complete	
		1/1/26 - 12/31/26			
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
EP - HILL WELL (3)		1/1/23 - 12/31/25		Complete	
		1/1/26 - 12/31/28			
<b>Organic Chemicals (VOCS)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>		<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
EP - HILL WELL (3)		1/1/24 - 12/31/24		Complete	
		1/1/25 - 12/31/25		Complete	
		1/1/26 - 12/31/26			

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0970372</b>	<b>CURTIS PACKAGING</b>	NTNC	180	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
44 BERKSHIRE ROAD			1				
Towns Served: NEWTOWN							

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2026	

## 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 WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		GW5001	MENS SHOP BATH	A	Y	2	Y	
		GW5002	WOMENS SHOP BATH	A	Y	2		
		GW5003	LOWER OFFICE BATH	A	Y	2		
		GW5004	UPPER MENS BATH	A	Y	2		
		GW5005	UPPER WOMENS BATH	A	Y	2		
		GWS001	MENS SHOP BATH	A	Y			
		GWS002	WOMENS SHOP BATH	A	Y			
		GWS003	LOWER OFFICE BATH	A	Y			
		GWS004	UPPER MENS BATH	A	Y			
		GWS005	UPPER WOMENS BATH	A	Y			
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00701	ENTRY POINT - HILL WELL	3	EP - HILL WELL	A				
55537	HILL WELL	2	HILL WELL	A				

## Certified Operator Information

<b>Water System Facility:</b> DISTRIBUTION SYSTEM (WSF ID: 00600)			
<b>Facility Classification:</b> SMALL WATER SYSTEM			
<b>Operator Name</b>	<b>Operator Type</b>	<b>Certification(s)</b>	<b>Certification Expiration</b>
LEMKE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2027

## Contact Information

Name		Organization			Job Title			
Mr. Donald R. Droppo, Jr		Curtis Packaging			Owner			
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
44 Berkshire Road						Sandy Hook	CT	06482
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-426-5861		203-426-2684		203-264-9795	dondroppo@curtispackaging.com			
<b>Contact Role(s):</b> Legal Contact, Owner								

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source			
<b>CT0970372</b>	<b>CURTIS PACKAGING</b>	NTNC	180	P	GW			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
44 BERKSHIRE ROAD			1					
Towns Served: NEWTOWN								
Name			Organization			Job Title		
<b>Mr. Robert Knapp</b>			Curtis Packaging			Quality Engineer		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
44 Berkshire Rd						Sandy Hook	CT	06482
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-270-5711				203-240-6476	rknapp@curtispackaging.com			

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**

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT0970462	HOUSATONIC VALLEY WALDORF SCHOOL ECC-RED	NTNC	55	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
40 DODGINGTOWN ROAD			1				
Towns Served: NEWTOWN							

## Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25		Complete		
	5/1/25 - 5/31/25		Complete		
	6/1/25 - 6/30/25		Complete		
	7/1/25 - 7/31/25				
	8/1/25 - 8/31/25				
	9/1/25 - 9/30/25				
	10/1/25 - 10/31/25				
	11/1/25 - 11/30/25				
	12/1/25 - 12/31/25				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/24 - 12/31/24	6/1-9/30	Complete		
	1/1/25 - 12/31/25	6/1-9/30			
	1/1/26 - 12/31/26	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25		Complete		
	5/1/25 - 5/31/25		Complete		
	6/1/25 - 6/30/25		Complete		
	7/1/25 - 7/31/25				
	8/1/25 - 8/31/25				
	9/1/25 - 9/30/25				
	10/1/25 - 10/31/25				
	11/1/25 - 11/30/25				
	12/1/25 - 12/31/25				
Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				

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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		
CT0970462	HOUSATONIC VALLEY WALDORF SCHOOL ECC-RED	NTNC	55	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
40 DODGINGTOWN ROAD			1				
Towns Served: NEWTOWN							

## Monitoring Requirements

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)	1/1/24 - 12/31/24		Complete	
	1/1/25 - 12/31/25		Complete	
	1/1/26 - 12/31/26			
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/23 - 12/31/25			
	1/1/26 - 12/31/28			
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/23 - 12/31/25			
	1/1/26 - 12/31/28			
Organic Chemicals (VOCS)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/23 - 12/31/25			
	1/1/26 - 12/31/28			

## 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 PH	4	
Start Date: 1/1/2015		Compliance History:	Operating Limit	Monitoring
		Monitoring Period	Compliance Status:	Compliance Status:
		2/1/2025 - 2/28/2025		
		3/1/2025 - 3/31/2025		
		4/1/2025 - 4/30/2025		
		5/1/2025 - 5/31/2025		
		6/1/2025 - 6/30/2025		

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2026	

## 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 WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		DRED007	SUNFLOWER BATHROOM	A	Y	N		
		DRED008	MAIN FLOOR BATHROOM	A	Y	N		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0970462</b>	<b>HOUSATONIC VALLEY WALDORF SCHOOL ECC-RED</b>	NTNC	55	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
40 DODGINGTOWN ROAD			1				
Towns Served: NEWTOWN							

## 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 WQP 2 DBPR
		DRED009	KITCHEN ISLAND SINK	A	Y	N		
		DRED010	KITCHEN COUNTER SINK	A	Y	N		
		DRED011	BLUEBELL BATHROOM	A	Y	N		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10470	WELL	2	WELL	A				
45142	WATER TREATMENT							
56522	ATMOSPHERIC TANKS							
56524	BOOSTER PUMPS							

## Certified Operator Information

Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
Facility Classification: SMALL WATER SYSTEM			
Operator Name	Operator Type	Certification(s)	Certification Expiration
LEMKE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2027

## Contact Information

Name		Organization			Job Title	
<b>Mr. Naveen Terway</b>		Waldorf School			Treasurer	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
40 Dodgingtown Road				Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-364-1113	103	203-361-0603			office@waldorfct.org	

Contact Role(s): <b>Legal Contact</b>						
Name		Organization			Job Title	
<b>Mr. Alexander Volage</b>		Housatonic Valley Waldorf Schl			Facilities Manager	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
40 Dodgingtown Road				Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-364-1113	105				AVOLAGE@WALDORFCT.ORG	

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

**Please note the following:**

- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 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.

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**End of schedule**

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0975033</b>	<b>HEAD O MEADOW ELEMENTARY SCHOOL</b>	NTNC	506	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
94 BOGGS HILL ROAD			1				
Towns Served: NEWTOWN							

## Monitoring Requirements

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

<b>Chlorine Residual (1012)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		Complete		
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
<b>Disinfectant Byproducts - TTHM &amp; HAA5 (DBP)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
CRS RM 415 (HOM020)	1/1/24 - 12/31/24	8/1-8/31			
	1/1/25 - 12/31/25	8/1-8/31			
	1/1/26 - 12/31/26	8/1-8/31			
<b>Lead And Copper (PBCU)</b>		<b>10 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 12/31/27	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/24 - 12/31/26				
	1/1/27 - 12/31/29				
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete		
	1/1/25 - 12/31/25		Complete		
	1/1/26 - 12/31/26				
<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25		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		
<b>CT0975033</b>	<b>HEAD O MEADOW ELEMENTARY SCHOOL</b>	NTNC	506	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
94 BOGGS HILL ROAD			1				
Towns Served: NEWTOWN							

## 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>
	1/1/26 - 12/31/28		
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)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
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)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		

Water System Facility: **WELL #3 (WSF ID: 10471)**

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 (2)	1/1/25 - 3/31/25		Complete
	4/1/25 - 6/30/25		Complete
	7/1/25 - 9/30/25		
	10/1/25 - 12/31/25		

Water System Facility: **WELL #4 (WSF ID: 10472)**

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)	1/1/25 - 3/31/25		Complete
	4/1/25 - 6/30/25		Complete
	7/1/25 - 9/30/25		
	10/1/25 - 12/31/25		

## 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
<b>Start Date:</b> 8/1/2004	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	2/1/2025 - 2/28/2025		
	3/1/2025 - 3/31/2025		
	4/1/2025 - 4/30/2025		
	5/1/2025 - 5/31/2025		
	6/1/2025 - 6/30/2025		

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
COMPLETE INITIAL LSL INVENTORY	10/16/2024	

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0975033</b>	<b>HEAD O MEADOW ELEMENTARY SCHOOL</b>	NTNC	506	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
94 BOGGS HILL ROAD			1				
Towns Served: NEWTOWN							

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2026	

## 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 WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		HOM001	K HAND SINK	A	Y	1		
		HOM002	K TRPL SINK L	A	Y	1		
		HOM003	K TRPL SINK M	A	Y	1		
		HOM004	K TRPL SINK R	A	Y	1		
		HOM005	WF CAF	A	Y	1		
		HOM006	NURSES SINK	A	Y	1		
		HOM007	WF BY NURSES OFF	A	Y	1		
		HOM008	FAC RM SINK	A	Y	1		
		HOM009	WF BY GYM	A	Y	1		
		HOM010	CRWF RM 318	A	Y	1		
		HOM011	CRWF RM 406	A	Y	1		
		HOM012	CRWF RM 212	A	Y	1		
		HOM013	G RM R SINK RM 410	A	Y	1		
		HOM014	G RM L SINK RM 410	A	Y	1		
		HOM015	CRS RM 401A	A	Y	1		
		HOM016	CRS RM 403	A	Y	1		
		HOM017	PRINC OFFICE	A	Y	1		
		HOM018	RM 401 HALL SINK	A	Y	1		
		HOM019	MATH/SCI AREA	A	Y	1		
		HOM020	CRS RM 415	A	Y	1		Y
		HOM021	BOILER ROOM 127	A	Y	N	Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10471	WELL #3	2	WELL	A				
10472	WELL #4	2	WELL 1	A				
1407	HEAD O MEADOW TREATMENT PLANT							
54286	ATMOSPHERIC STORAGE							
59071	PUMP FACILITY							

## Certified Operator Information

<b>Water System Facility:</b> HEAD O MEADOW TREATMENT PLANT (WSF ID: 1407)			
<b>Facility Classification:</b> CLASS 1 TREATMENT PLANT			
<b>Operator Name</b>	<b>Operator Type</b>	<b>Certification(s)</b>	<b>Certification Expiration</b>

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0975033</b>	<b>HEAD O MEADOW ELEMENTARY SCHOOL</b>	NTNC	506	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
94 BOGGS HILL ROAD			1				
Towns Served: NEWTOWN							

## Certified Operator Information

GRANT, SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2026
PETITTI, ANDY	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2028
		WATER TREATMENT PLANT OPERATOR - CLASS I	12/31/2025

## Contact Information

Name			Organization			Job Title			
Mr. John Barlow			Newtown Public Schools			Dir. of Facilities			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
3 Primrose Street						Newtown		CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
203-426-7614	7614			203-733-0491	barlowj@newtown.k12.ct.us				

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

Name			Organization			Job Title			
Mr. Jeffrey Capeci			Newtown Public Schools			First Selectman			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
3 Primrose St						Newtown		CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
203-270-4201				203-470-3736	jeff.capeci@newtown-ct.gov				

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

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

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

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

**End of schedule**

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0975073</b>	<b>EVERSOURCE - NEWTOWN AREA WORK CENTER</b>	NTNC	145	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
20 BARNABAS ROAD			1				
Towns Served: NEWTOWN							

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/25	6/1-9/30			
	1/1/26 - 12/31/28	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/24 - 12/31/26				
	1/1/27 - 12/31/29				
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete		
	1/1/25 - 12/31/25		Complete		
	1/1/26 - 12/31/26				
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
WELL (2)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
<b>Organic Chemicals (VOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				

### Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</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		
<b>CT0975073</b>	<b>EVERSOURCE - NEWTOWN AREA WORK CENTER</b>	NTNC	145	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
20 BARNABAS ROAD			1				
Towns Served: NEWTOWN							

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	2/4/2021	
COMPLETE INITIAL LSL INVENTORY	10/16/2024	
CROSS CONNECTION SURVEY REPORT	3/1/2026	

## 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 WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		NU001	LUNCH ROOM	A	Y	N		Y
		NU002	ENTRY REST ROOM	A	Y	N		Y
		NU003	M ROOM SINK 1	A	Y	N		Y
		NU004	M ROOM SINK 2	A	Y	N		Y
		NU005	M ROOM SINK 3	I	Y	1		
		NU006	L ROOM SINK 1	A	Y	N		Y
		NU007	L ROOM SINK 2	A	Y	N		Y
		NU008	MEN LOCKER RM SNK 1	A	Y	N		Y
		NU009	MEN LOCKER RM SNK 2	A	Y	N		Y
		NU010	MEN LOCKER RM SNK 3	A	Y	N		Y
		NU011	MEN LOCKER RM SNK 4	A	Y	N		Y
		NU012	MEN LOCKER RM SNK 5	A	Y	N		Y
		NU013	LAD LOCKER RM SNK 1	A	Y	N		Y
		NU014	LAD LOCKER RM SNK 2	A	Y	N		Y
		NU015	GARAGE REST ROOM	A	Y	N		Y
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10474	WELL	2	WELL	A				
61801	WELL 2	2	WELL 2	A				

## Certified Operator Information

Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
Facility Classification: SMALL WATER SYSTEM			
<b>Operator Name</b>	<b>Operator Type</b>	<b>Certification(s)</b>	<b>Certification Expiration</b>
NACHBAR, AARON D.	CHIEF OPERATOR	SMALL WATER SYSTEM OPERATOR	3/31/2027

## Contact Information

Name		Organization			Job Title		
Eversource Energy							
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
20 Barnabus Road					Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-370-5860							

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source			
<b>CT0975073</b>	<b>EVERSOURCE - NEWTOWN AREA WORK CENTER</b>	NTNC	145	P	GW			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
20 BARNABAS ROAD			1					
Towns Served: NEWTOWN								
860-270-5868								
Contact Role(s): <b>Owner</b>								
Name			Organization			Job Title		
<b>Ms. Rebecca L. Roberts</b>						Asso Envrmtl Spclst		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
107 Selden St						Berlin	CT	06037
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-665-3285					rebecca.roberts@eversource.com			
Contact Role(s): <b>Administrative Contact</b>								
Name			Organization			Job Title		
<b>Mr. Thomas R. McDermott</b>			Eversource Energy			Manager, F Operation		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
107 Selden Street						Berlin	CT	06037
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-665-4531				860-665-4531	thomas.r.mcdermott@eversource.com			
Contact Role(s): <b>Legal Contact, Owner</b>								
Name			Organization			Job Title		
<b>Mr. John Whelan</b>			Eversource Energy			Supervisor		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
20 Barnabas Road						Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-832-4782				860-280-4473	john.h.whelan@eversource.com			
Contact Role(s): <b>Legal Contact</b>								

**Please note the following:**

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

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

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

**End of schedule**

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0979113</b>	<b>ROCKY GLEN MILL</b>	NTNC	70	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
75 GLEN ROAD			6				

Towns Served: NEWTOWN

### Monitoring Requirements

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

<b>Chlorine Residual (1012)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
<b>Disinfectant Byproducts - TTHM &amp; HAA5 (DBP)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
THIRD FLOOR LADIES (RGM017)	1/1/24 - 12/31/24	8/1-8/31	Complete		
	1/1/25 - 12/31/25	8/1-8/31			
	1/1/26 - 12/31/26	8/1-8/31			
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per six months</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 6/30/25		Complete		
	7/1/25 - 12/31/25				
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
<b>Water Quality Parameters Orthophosphate, Total Alkalinity, T (WQP8)</b>		<b>2 routine (RT) per six months</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 6/30/25				
	7/1/25 - 12/31/25				
Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/24 - 12/31/24		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		
<b>CT0979113</b>	<b>ROCKY GLEN MILL</b>	NTNC	70	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
75 GLEN ROAD			6				

Towns Served: NEWTOWN

## Monitoring Requirements

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

<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per quarter</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/25 - 3/31/25		Complete
	4/1/25 - 6/30/25		
	7/1/25 - 9/30/25		
	10/1/25 - 12/31/25		

Water System Facility: **WELL (WSF ID: 10477)**

<b>E. Coli (3014)</b>	<b>1 routine (RT) per quarter</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL (2)	1/1/25 - 3/31/25		Complete
	4/1/25 - 6/30/25		Complete
	7/1/25 - 9/30/25		
	10/1/25 - 12/31/25		

Water System Facility: **WELL #2 (WSF ID: 51587)**

<b>E. Coli (3014)</b>	<b>1 routine (RT) per quarter</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL 2 (2)	1/1/25 - 3/31/25		Complete
	4/1/25 - 6/30/25		Complete
	7/1/25 - 9/30/25		
	10/1/25 - 12/31/25		

## 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
<b>Start Date:</b> 3/1/2006	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	2/1/2025 - 2/28/2025	Y	

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0979113</b>	<b>ROCKY GLEN MILL</b>	NTNC	70	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
75 GLEN ROAD			6				

Towns Served: NEWTOWN

### 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
<b>Start Date:</b> 3/1/2006			
	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	3/1/2025 - 3/31/2025	Y	
	4/1/2025 - 4/30/2025	Y	
	5/1/2025 - 5/31/2025	Y	
	6/1/2025 - 6/30/2025	Y	
Orthophosphate	<spaces> ( )	Maximum: 2.0 MG/L	2
<b>Start Date:</b> 8/1/2021			
	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	2/1/2025 - 2/28/2025		
	3/1/2025 - 3/31/2025		
	4/1/2025 - 4/30/2025		
	5/1/2025 - 5/31/2025		
	6/1/2025 - 6/30/2025		
Orthophosphate	Entry Point Phosphate Monitoring (PHOS)	Minimum: 1.0 MG/L	2
<b>Start Date:</b> 8/1/2021			
	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	2/1/2025 - 2/28/2025	N	
	3/1/2025 - 3/31/2025	N	
	4/1/2025 - 4/30/2025	N	
	5/1/2025 - 5/31/2025	N	
	6/1/2025 - 6/30/2025		
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	4
<b>Start Date:</b> 8/1/2021			
	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	2/1/2025 - 2/28/2025	Y	
	3/1/2025 - 3/31/2025	Y	
	4/1/2025 - 4/30/2025	Y	
	5/1/2025 - 5/31/2025	Y	
	6/1/2025 - 6/30/2025	Y	
Phosphate (as PO4)	<spaces> ( )	Maximum: 6.7 MG/L	2
<b>Start Date:</b> 2/1/2025			
	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	2/1/2025 - 2/28/2025		
	3/1/2025 - 3/31/2025		

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0979113</b>	<b>ROCKY GLEN MILL</b>	NTNC	70	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
75 GLEN ROAD			6				

Towns Served: NEWTOWN

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

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Phosphate (as PO4)	<spaces> ( )	Maximum: 6.7 MG/L	2
<b>Start Date:</b> 2/1/2025		<b>Compliance History:</b>	<b>Operating Limit</b>
		<b>Monitoring Period</b>	<b>Monitoring Compliance Status:</b>
		4/1/2025 - 4/30/2025	
		5/1/2025 - 5/31/2025	
		6/1/2025 - 6/30/2025	

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2027	

### 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 WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		RGM001	RR LADIES GROUND FLR	A	Y	2	Y Y
		RGM002	RR MENS GROUND FLR	A	Y	2	Y Y
		RGM003	RR LADY ROOM 1F	A	Y	2	Y Y
		RGM004	RR MENS RM 1F	A	Y	2	Y Y
		RGM005	RR LADY RM 2F	A	Y	2	Y Y
		RGM006	RR MENS RM 2F	A	Y	2	Y Y
		RGM007	RR LADY RM 3F	A	Y	2	Y Y
		RGM008	RR MENS RM 3F	A	Y	2	Y Y
		RGM009	EASTERN ACCT KITCHEN	A	Y	2	Y Y
		RGM010	KIT SNK RESTAURANT	A	Y	2	Y Y
		RGM011	RR LADIES RESTRONT R	A	Y	2	Y Y
		RGM012	RR LADIES RESTRONT L	A	Y	2	Y Y
		RGM013	RESTAURANT SINK	A	Y	2	Y Y
		RGM014	RESTAURANT LADIES R	A	Y	2	Y Y
		RGM015	SECOND FLOOR LADIES	A	Y	2	Y Y
		RGM016	FIRST FLOOR LADIES	A	Y	2	Y Y
		RGM017	THIRD FLOOR LADIES	A	Y	2	Y Y Y
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
10477	WELL	2	WELL	A			
50600	ATMOSPHERIC STORAGE						
51471	TREATMENT PLANT						
51587	WELL #2	2	WELL 2	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		
<b>CT0979113</b>	<b>ROCKY GLEN MILL</b>	NTNC	70	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
75 GLEN ROAD		6					
Towns Served: NEWTOWN							

## Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 51471)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
LEMKE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2027

## Contact Information

Name		Organization			Job Title	
<b>Madison Properties</b>						
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
3611 14Th Avenue		Suite 552		Brooklyn	NY	11218
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
212-596-8200						

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

Name		Organization			Job Title	
<b>Mrs. Debby Zieg</b>		Madison Properties USA LLC			Maintenance Adminstr	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
3611 14Th Ave		Suite 420		Brooklyn	NY	11218
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
212-596-8200	217	212-596-8201			debby@madisonprop.com	

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

Name		Organization			Job Title	
<b>Mr. Jacob Kohn</b>		Rocky Glen LLC			Title Holder	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
40 Oser Avenue		Suite 4		Hauppauge	NY	11788
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
917-846-1115					kohnjacob@gmail.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		
CT0979333	HOUSATONIC VALLEY WALDORF SCHOOL - WHITE	NTNC	200	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
1-3 JACKLIN ROAD			3				
Towns Served: NEWTOWN							

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/25	6/1-9/30			
	1/1/26 - 12/31/28	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete		
	1/1/25 - 12/31/25				
	1/1/26 - 12/31/26				
<b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
<b>Organic Chemicals (VOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0979333</b>	<b>HOUSATONIC VALLEY WALDORF SCHOOL - WHITE</b>	NTNC	200	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
1-3 JACKLIN ROAD			3				
Towns Served: NEWTOWN							

## Monitoring Requirements

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

<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>
	<i>Collection Period</i>
	<i>Compliance Status</i>
	1/1/26 - 12/31/28

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION SURVEY REPORT	3/1/2030	

## 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 WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A			
		HVW001	RR LOBBY ADMIN OFF	A	Y	2	Y
		HVW002	RR LOBBY BUILD 1	A	Y	2	Y
		HVW003	KIT SNK OFFICE	A	Y	2	Y
		HVW004	KITCHENETTE SNK BDL1	A	Y	2	Y
		HVW005	RR BOYS ROOM BULD 1	A	Y	2	Y
		HVW006	RR GIRLS ROOM BLD 1	A	Y	2	Y
		HVW007	RR BUILDING 1	A	Y	2	Y
		HVW008	RR BUILDING 2	A	Y	2	Y
		UPSTREAM	WITHIN 5 SERVICE CON	A			
00700	ENTRY POINT	3	ENTRY POINT	A			
10478	WELL	2	WELL	A			
45145	TREATMENT PLANT						
53128	ATMOSPHERIC TANKS						

## Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 45145)**

Facility Classification: CLASS 1 TREATMENT PLANT

<i>Operator Name</i>	<i>Operator Type</i>	<i>Certification(s)</i>	<i>Certification Expiration</i>
LEMKE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2027

## Contact Information

Name		Organization			Job Title	
Mr. Naveen Terway		Waldorf School			Treasurer	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
40 Dodgingtown Road				Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-364-1113	103	203-361-0603			office@waldorfct.org	
Contact Role(s): <b>Legal Contact</b>						

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source			
<b>CT0979333</b>	<b>HOUSATONIC VALLEY WALDORF SCHOOL - WHITE</b>	NTNC	200	P	GW			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
1-3 JACKLIN ROAD			3					
Towns Served: NEWTOWN								
Name			Organization			Job Title		
<b>Mr. Alexander Volage</b>			Housatonic Valley Waldorf Schl			Facilities Manager		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
40 Dodginton Road						Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-364-1113	105				AVOLAGE@WALDORFCT.ORG			
Contact Role(s): <b>Administrative Contact</b>								

**Please note the following:**

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

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

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

**End of schedule**

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0979343</b>	<b>7 BERKSHIRE ROAD - NEWTOWN</b>	NTNC	103	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
7 BERKSHIRE RD				1			
Towns Served: NEWTOWN							

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/20 - 11/30/23	1/1-11/30			
	1/1/24 - 12/31/32				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/25	6/1-9/30			
	1/1/26 - 12/31/28	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				

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

<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete		
	1/1/25 - 12/31/25		Complete		
	1/1/26 - 12/31/26				
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
<b>Organic Chemicals (VOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				

**Water System Facility: WELL 1 (WSF ID: 49887)**

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0979343</b>	<b>7 BERKSHIRE ROAD - NEWTOWN</b>	NTNC	103	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
7 BERKSHIRE RD				1			
Towns Served: NEWTOWN							

## Monitoring Requirements

Water System Facility: **WELL 1 (WSF ID: 49887)**

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)	1/1/25 - 3/31/25		Complete
	4/1/25 - 6/30/25		
	7/1/25 - 9/30/25		
	10/1/25 - 12/31/25		

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION EXEMPTION	3/1/2030	

## 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 WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	A				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		LE001	PRESCHOOL 1	A	Y	N	Y	
		LE002	PRESCHOOL 2	A	Y	N	Y	
		LE003	INFANTS TODDLER RM 1	A	Y	N	Y	
		LE004	INFANTS TODDLER RM 2	A	Y	N	Y	
		LE005	INFANTS TODDLER RM 3	A	Y	N	Y	
		LE006	INFANTS TODDLER RM 4	A	Y	N	Y	
		LE007	BREAKROOM STAFF	A	Y	N	Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
49887	WELL 1	2	WELL 1	A				
57214	TREATMENT PLANT							

## Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 57214)**

Facility Classification: CLASS 1 TREATMENT PLANT

<i>Operator Name</i>	<i>Operator Type</i>	<i>Certification(s)</i>	<i>Certification Expiration</i>
LEMKE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2027

## Contact Information

Name		Organization			Job Title		
<b>Mr. Bill P. Hoadley</b>		H&Y Construction, Inc			Vice President		
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
831 Federal Road					Brookfield	CT	06804
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-775-2246				203-948-5055	billh@hyconstruction.com		

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source			
<b>CT0979343</b>	<b>7 BERKSHIRE ROAD - NEWTOWN</b>	NTNC	103	P	GW			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
7 BERKSHIRE RD				1				
Towns Served: NEWTOWN								
Contact Role(s): <b>Legal Contact, Owner</b>								
Name			Organization			Job Title		
<b>Ms. Lucia Fonseca</b>			Aces International Education			Assistant Director		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
7 Berkshire Road						Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-304-1059				203-510-2636	lfonseca@aces.org			
Contact Role(s): <b>Administrative Contact</b>								

**Please note the following:**

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

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

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

**End of schedule**

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0979403</b>	<b>TURNBERRY REALTY, LLC</b>	NTNC	123	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
12 TURNBERRY LANE (LOT11)				1			
Towns Served: NEWTOWN							

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25				
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/25	6/1-9/30			
	1/1/26 - 12/31/28	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25				
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete		
	1/1/25 - 12/31/25				
	1/1/26 - 12/31/26				
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>		<b>1 (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25	1/1-12/31	Waiver		
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/26 - 12/31/28				
<b>Organic Chemicals (VOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0979403</b>	<b>TURNBERRY REALTY, LLC</b>	NTNC	123	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
12 TURNBERRY LANE (LOT11)				1			

Towns Served: NEWTOWN

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	1/19/2024	
CROSS CONNECTION SURVEY REPORT	3/1/2025	

## 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 WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	001	CAFETERIA SINK	A	Y	N		
		002	MAIN MENS ROOM RHS	A	Y	N	Y	
		003	MAIN MENS ROOM LHS	A	Y	N	Y	
		004	FITNESS CENTER MENS	A	Y	N		
		005	UPSTAIRS SINK	A	Y	N		
		006	UPSTAIRS MEN RM RH	A	Y	N		
		007	MAIN LADIES ROOM	A	Y	N		
		008	FITNESS LADIES ROOM	A	Y	N		
		009	UPSTAIRS LADIES ROOM	A	Y	N		
		4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
55637	WELL #1	2	WELL #1	A				
55641	WELL #2	2	WELL #2	A				
55643	ATMOSPHERIC TANK							

## Contact Information

Name		Organization			Job Title		
<b>Mr. David Kramer</b>					Member		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
12 Turnberry Ln					Newtown	CT	06482
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
718-677-0784	103	718-250-2278		347-279-2372	david@hilltopm.com		

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**

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0975143</b>	<b>SMT CORPORATION</b>	NTNC	73	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
14 HIGH BRIDGE RD				1			

Towns Served: NEWTOWN

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/31				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25		Complete		
	5/1/25 - 5/31/25		Complete		
	6/1/25 - 6/30/25		Complete		
	7/1/25 - 7/31/25				
	8/1/25 - 8/31/25				
	9/1/25 - 9/30/25				
	10/1/25 - 10/31/25				
	11/1/25 - 11/30/25				
	12/1/25 - 12/31/25				
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per six months</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/25 - 6/30/25		Complete		
	7/1/25 - 12/31/25				
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25		Complete		
	5/1/25 - 5/31/25		Complete		
	6/1/25 - 6/30/25		Complete		
	7/1/25 - 7/31/25				
	8/1/25 - 8/31/25				
	9/1/25 - 9/30/25				
	10/1/25 - 10/31/25				
	11/1/25 - 11/30/25				
	12/1/25 - 12/31/25				
Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				
<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0975143</b>	<b>SMT CORPORATION</b>	NTNC	73	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
14 HIGH BRIDGE RD				1			
Towns Served: NEWTOWN							

### Monitoring Requirements

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

<b>Nitrate And Nitrite (NOX)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete		
	1/1/25 - 12/31/25		Complete		
	1/1/26 - 12/31/26				
<b>Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
<b>Organic Chemicals (VOCS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				

### Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION SURVEY REPORT	3/1/2026	

### 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 WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		SMT 001	EAST MENS RM RT SNK	A	Y	2		
		SMT 002	EAST MENS RM LFT SNK	A	Y	2		
		SMT 003	EAST LAD RM RT SNK	A	Y	2		
		SMT 004	EAST LAD RM LFT SNK	A	Y	2		
		SMT 005	EAST KITCHEN SINK	A	Y	2		
		SMT 006	BLUE SLOP SINK	A	Y	2		
		SMT 007	BLUE SAFETY SINK	A	Y	2		
		SMT 008	RED SLOP SINK	A	Y	2		
		SMT 009	RED KITCHEN SINK	A	Y	2		
		SMT 010	RED LAD RM RT SNK	A	Y	2		
		SMT 011	RED LAD RM LFT SNK	A	Y	2		
		SMT 012	RED MENS RM RT SNK	A	Y	2		
		SMT 013	RED MENS RM LFT SNK	A	Y	2		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0975143</b>	<b>SMT CORPORATION</b>	NTNC	73	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
14 HIGH BRIDGE RD				1			
Towns Served: NEWTOWN							

## 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 WQP 2 DBPR
		SMT 014	RED REAR SLOP SINK	A	Y	2		
		SMT 015	TAPE AND REEL SNK	A	Y	2		
		SMT 016	DESTRUCTIBLE SNK	A	Y	2		
		SMT 017	WEST MENS RM SNK	A		2		
		SMT 018	WEST LAD RM SNK	A	Y	2		
		SMT 019	OFFICE MENS RT SNK	A	Y	2		
		SMT 020	OFFICE MENS LFT SNK	A	Y	2		
		SMT 021	OFFICE LAD RM RT SNK	A	Y	2		
		SMT 022	OFFICE LAD LFT SNK	A	Y	2		
		SMT 023	OFFICE KIT SNK	A	Y	2		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
62564	WELL 1	2	WELL 1	A				

## Certified Operator Information

Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
Facility Classification: SMALL WATER SYSTEM			
			<b>Certification Expiration</b>
Operator Name	Operator Type	Certification(s)	
LEMKE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2027

## Contact Information

Name		Organization			Job Title	
<b>Mr. Thomas Sharpe</b>		Smt Corporation			Vice President	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
206 Hattertown Rd				Newtown	CT	06470
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
204-994-9772		203-270-4798			trsharpe58@gmail.com	
Contact Role(s): <b>Legal Contact, Owner</b>						
Name		Organization			Job Title	
<b>Mr. Ciro Colelli</b>		Smt Corp			Facilities Tech	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
14 High Bridge Rd				Sandy Hook	CT	06482
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-491-5895					ccolelli@smtcorp.com	
Contact Role(s): <b>Administrative Contact</b>						

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source	
<b>CT0975143</b>	<b>SMT CORPORATION</b>	NTNC	73	P	GW	
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
14 HIGH BRIDGE RD			1			
Towns Served: NEWTOWN						

**Please note the following:**

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

**End of schedule**