

# 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>CT1140471</b>	<b>STRAWBERRY PARK</b>	NTNC	1,047	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
42 PIERCE RD			380				

Towns Served: PRESTON

## 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	1/1/17 - 12/31/25		Complete
	1/1/26 - 12/31/34		

### 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	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		

### 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	1/1/23 - 12/31/25	6/1-9/30	
	1/1/26 - 12/31/28	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	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		

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)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		

### 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)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		

### Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (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)	1/1/23 - 12/31/25	1/1-12/31	Waiver

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Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
42 PIERCE RD			380				
Towns Served: PRESTON							

## Monitoring Requirements

<b>Water System Facility: ENTRY POINT (WSF ID: 00700)</b>			
<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	4/1-10/31	
<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>
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024	
COMPLETE INITIAL LSL INVENTORY	10/16/2024	
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			
		4-1	Site #65	A	Y			
		4-2	Site #160B	A	Y			
		4-3	Site #328C	A	Y			
		4-4	Site #Stage 1	A	Y			
		4-5	Site #338	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MW021-160B	SITE 160B	P	Y	N		
		MW021-328C	SITE 328C	P	Y	N		
		MW021-338	SITE 338	P	Y	N		
		MW021-65	SITE 65	P	Y	N		
		MW021-S1	SITE STAGE 1	P	Y	N		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
1778	WELL #2	2	WELL #2	A				
1779	WELL #3	2	WELL #3	A				
50961	ATMOSPHERIC STORAGE TANK							
50967	HYDROPNEUMATIC STORAGE TANK							

## Certified Operator Information

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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>CT1140471</b>	<b>STRAWBERRY PARK</b>	NTNC	1,047	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
42 PIERCE RD			380				

Towns Served: PRESTON

## Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2027
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2027

## Contact Information

Name		Organization			Job Title		
<b>Strawberry Park Properties LLC</b>							
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
P. O. Box 5489					Salt Springs	FL	32134
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-334-9953							

Contact Role(s): **Owner**

Name		Organization			Job Title		
<b>Mr. Eduard Mayer</b>		Strawberry Park			Manager		
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
P.O. Box 5489					Salt Springs	FL	32134
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
813-335-5119					emayer@eliteresorts.com		

Contact Role(s): **Administrative Contact, 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		
CT1149033	PRESTON VETERANS MEMORIAL SCHOOL	NTNC	500	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
325 SHETUCKET TURNPIKE				1			

Towns Served: PRESTON

### 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	1/1/25 - 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: 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)	1/1/24 - 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>		
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 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				

### Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</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		
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Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
325 SHETUCKET TURNPIKE				1			
Towns Served: PRESTON							

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
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	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		PVM-1	ROOM 1	A	Y	2		
		PVM-10	ROOM 10	A	Y	2		
		PVM-11	CUSTODIANS ROOM	A	Y	2		
		PVM-12	MENS ROOM	A	Y	2		
		PVM-13	WOMENS ROOM	A	Y	2		
		PVM-14	MECHANICAL ROOM	A	Y	2		
		PVM-15	ROOM 15	A	Y	2		
		PVM-16	BOY/GIRL TEAM LAV	A	Y	2		
		PVM-17	NURSES ROOM	A	Y	2		
		PVM-18	ART ROOM	A	Y	2		
		PVM-19	MUSIC ROOM	A	Y	2		
		PVM-2	ROOM 2	A	Y	2		
		PVM-20	ROOM 20	A	Y	2		
		PVM-21	ROOM 21	A				
		PVM-22	ROOM 22	A	Y	2		
		PVM-23	ROOM 23	A	Y	2		
		PVM-24	ROOM 24	A	Y	2		
		PVM-25	KITCHEN	A	Y	2	Y	
		PVM-26	ROOM 26	A	Y	2		
		PVM-27	ROOM 27	A	Y	2		
		PVM-28	ROOM 28	A	Y	2		
		PVM-29	ROOM 29	A	Y	2		
		PVM-3	ROOM 3	A	Y	2		
		PVM-30	ROOM 30	A	Y	2		
		PVM-31	ROOM 31	A	Y	2		
		PVM-32	CUSTODIANS ROOM	A	Y	2		
		PVM-33	CUSTODIANS ROOM	A	Y	2		
		PVM-34	CUSTODIANS ROOM	A	Y	2		
		PVM-35	BOYS AND GIRLS LAV	A	Y	2		
		PVM-36	ROOM 36	A	Y	2		
		PVM-37	ROOM 37	A	Y	2		
		PVM-38	ROOM 38	A	Y	2		

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

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Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
325 SHETUCKET TURNPIKE				1			
Towns Served: PRESTON							

### 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
		PVM-39	ROOM 39	A	Y	2		
		PVM-4	ROOM 4	A	Y	2		
		PVM-40	ROOM 40	A	Y	2		
		PVM-41	TEACHERS ROOM	A	Y	2		
		PVM-42	MEN AND WOMENS LAV	A	Y	2		
		PVM-43	BOYS AND GIRLS LAV	A	Y	2		
		PVM-44	OFFICE BATHROOMS	A	Y	2		
		PVM-45	OFFICE KITCHEN	A	Y	2		
		PVM-46	CUSTODIANS CLOSET	A	Y	2		
		PVM-5	ROOM 5	A	Y	2		
		PVM-6	ROOM 6	A	Y	2		
		PVM-7	ROOM 7	A	Y	2		
		PVM-8	ROOM 8	A	Y	2		
		PVM-9	ROOM 9	A	Y	2		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
11009	WELL #1	2	WELL #1	A				
11010	WELL #2	2	WELL #2	A				
1697	PRESTON VETERANS MEMORIAL PUMPHOUSE							
53763	ATMOSPHERIC STORAGE							

### Certified Operator Information

**Water System Facility:** PRESTON VETERANS MEMORIAL PUMPHOUSE (WSF ID: 1697)

**Facility Classification:** CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
HOUSE, MICHAEL D.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2026

### Contact Information

Name		Organization			Job Title	
Dr. Roy M. Seitsinger, Jr.		Preston Board of Education			Superintendent	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
Preston Public Schools		1 Route 64		Preston	CT	06365
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-889-6098		860-889-8695		860-949-0222	seitsingerr@prestonschools.org	

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

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325 SHETUCKET TURNPIKE			1			
Towns Served: PRESTON						

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**End of schedule**