

# 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>CT1500052</b>	<b>JOHN DORR NATURE LAB</b>	NTNC	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
220 NETTLETON ROAD			1				
Towns Served: WASHINGTON							

## 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 Haloacetic Acids (2456)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
EQUIP RM 1F MN BLDG (EQ1FMB)	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>Total Trihalomethanes (2950)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
WET LAB SINK 2F BARN (WL2FBARN)	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>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				
<b>Water System Facility: 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		
CT1500052	JOHN DORR NATURE LAB	NTNC	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
220 NETTLETON ROAD			1				
Towns Served: WASHINGTON							

## 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 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					

## Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)							
<b>Analyte</b>	<b>Monitoring Requirement (Summary Type)</b>	<b>Operating Limit</b>			<b>Samples Req/Month</b>		
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L			Daily		
<b>Start Date:</b> 3/1/2012		<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

<b>Compliance Schedule Activity</b>	<b>Due Date</b>	<b>Achieved Date</b>
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			
		AP11FBARN	APT 1 SINK 1F BARN	A	Y	1		
		AP21FBARN	APT 2 SINK 1F BARN	A	Y	1		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT1500052</b>	<b>JOHN DORR NATURE LAB</b>	NTNC	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
220 NETTLETON ROAD			1				
Towns Served: WASHINGTON							

## 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
		EQ1FMB	EQUIP RM 1F MN BLDG	A	Y	1		Y
		KS2FMB	KIT SINK 2F MN BLDG	A	Y	1		
		NECK	NE CABIN KIT	A	Y	1		
		NKIT	NELLS KIT	A	Y	1		
		PKIT	PAYNE KIT	A	Y	1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
		VABATH	VAN ALSTYNE BATH	A	Y	1		
		WL2FBARN	WET LAB SINK 2F BARN	A	Y	1		Y
00700	ENTRY POINT	3	ENTRY POINT	A				
10645	WELL #3	2	WELL #3	A				
10646	WELL #2	2	WELL #2	A				
10647	WELL #1	2	WELL #1	A				
45071	TREATMENT PLANT							
51751	ATMOSPHERIC STORAGE							
52036	WELL #4	2	WELL #6	A				

## Certified Operator Information

**Water System Facility: TREATMENT PLANT (WSF ID: 45071)**

**Facility Classification:** CLASS 2 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
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			
John Dorr Nature Lab-Horace Mann School									
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
231 W 246Th St						Bronx		NY	10471-3430
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
718-432-4000									
Contact Role(s): <b>Legal Contact, Owner</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>CT1500052</b>	<b>JOHN DORR NATURE LAB</b>	NTNC	30	P	GW			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
220 NETTLETON ROAD			1					
Towns Served: WASHINGTON								
Name			Organization			Job Title		
<b>Mr. Gordon Jensen</b>			Horace Mann School			Dir Facilites Mgmt		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
231 W 246Th St						Bronx	NY	10471
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
718-432-3989		860-868-1494			gordon_jensen@horacemann.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>CT1500102</b>	<b>SHEPAUG MIDDLE/HIGH SCHOOL</b>	NTNC	770	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
159 SOUTH STREET			1				
Towns Served: WASHINGTON							

### 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>		
HANDICAP BATH MS (SVS003)	1/1/24 - 12/31/24	7/1-7/31			
	1/1/25 - 12/31/25	7/1-7/31			
	1/1/26 - 12/31/26	7/1-7/31			
<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				

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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		
CT1500102	SHEPAUG MIDDLE/HIGH SCHOOL	NTNC	770	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
159 SOUTH STREET			1				
Towns Served: WASHINGTON							

## Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)							
<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>	
		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)		1/1/24 - 12/31/26					
		1/1/27 - 12/31/29					

## Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)							
<b>Analyte</b>	<b>Monitoring Requirement (Summary Type)</b>	<b>Operating Limit</b>		<b>Samples Req/Month</b>			
Chlorine	Entry Point RDC (EPRD)	Minimum: 0.2 MG/L		Continuous			
<b>Start Date:</b> 9/1/2013		<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					
<b>Analyte</b>	<b>Monitoring Requirement (Summary Type)</b>	<b>Operating Limit</b>		<b>Samples Req/Month</b>			
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7 PH		Daily			
<b>Start Date:</b> 1/1/2002		<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
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	Total Coliform Status	Lead and Copper Rule	Asbestos Rule Tier	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y		

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT1500102</b>	<b>SHEPAUG MIDDLE/HIGH SCHOOL</b>	NTNC	770	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
159 SOUTH STREET			1				
Towns Served: WASHINGTON							

### 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
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		SVS001	KITCHEN HANDWASH	A	Y	2	Y	
		SVS002	FACULTY OFFICE	A	Y	2	Y	
		SVS003	HANDICAP BATH MS	A	Y	2	Y	Y
		SVS004	HANDICAP BATH HS	A	Y	2	Y	
		SVS005	HOME EC SINK	A	Y	2	Y	
		SVS006	KITCHEN SINK 2	A	Y	2	Y	
		SVS007	NURSES ROOM	A	Y	2	Y	
		SVS008	OFFICE BATH	A	Y	2	Y	
		SVS009	FACULTY LADIES	A	Y	2	Y	
		SVS010	FACULTY MENS	A	Y	2	Y	
		SVS011	M.S. OFFICE BATH	A	Y	2	Y	
		SVS012	FRONT OFFICE BATH	A	Y	2	Y	
		SVS013	FACULTY BATH	A	Y	2	Y	
		SVS014	CUSTODIAL BATH	A	Y	2	Y	
		SVS015	H.S. BOYS LOCKER RM	A	Y	2	Y	
		SVS016	GIRLS POOL LOCKER RM	A	Y	2	Y	
		SVS017	SCIENCE LAB SINK	A	Y	2	Y	
		SVSAG001	BOTTLE STATION	A	Y	N	Y	
		SVSAG002	AGBLDG WOMEN SINK 1	A	Y	N	Y	
		SVSAG003	AGBLDG DOG SINK 1	A	Y	N	Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10650	WELL #3	2	WELL #3	A				
10651	WELL #1	2	WELL #1	A				
10652	WELL #2	2	WELL #2	A				
53624	UPPER ATMOSPHERIC STORAGE							
53626	LOWER ATMOSPHERIC STORAGE							
62829	PRESSURE TANK							
982	SHEPAUG MHS PLANT							

### Certified Operator Information

**Water System Facility:** SHEPAUG MHS PLANT (WSF ID: 982)

**Facility Classification:** CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
KILBOURN, ERIC M.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2025
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2025
KILBOURN, JORDAN H	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2027

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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>CT1500102</b>	<b>SHEPAUG MIDDLE/HIGH SCHOOL</b>	NTNC	770	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
159 SOUTH STREET			1				
Towns Served: WASHINGTON							

## Certified Operator Information

Water System Facility: <b>SHEPAUG MHS PLANT (WSF ID: 982)</b>			
Facility Classification: CLASS 1 TREATMENT PLANT			
<b>Operator Name</b>	<b>Operator Type</b>	<b>Certification(s)</b>	<b>Certification Expiration</b>

## Contact Information

Name		Organization			Job Title		
<b>Mr. Donald J. O'leary</b>		Regional School District - 12			Facility Director		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
11A School St					Washington	CT	06794
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-868-6174		860-868-6103		860-868-6100	olearyd@region-12.org		

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

Name		Organization			Job Title		
<b>Ms. Megan Bennett</b>		Regional School District #12			Superintendent		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
11A School St					Washington Depot	CT	06794
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-868-6100		860-868-6103		860-671-9028	bennettm@region-12.org		

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>CT1500182</b>	<b>MAYFLOWER INN</b>	NTNC	109	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
118 WOODBURY ROAD			10				
Towns Served: WASHINGTON							

### Monitoring Requirements

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

<b>Chlorine Residual (1012)</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		
<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>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>		
KITCHEN SINK #2 (MAYINN009)	1/1/24 - 12/31/24	9/1-9/30	Complete		
	1/1/25 - 12/31/25	9/1-9/30			
	1/1/26 - 12/31/26	9/1-9/30			
<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 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				

*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>CT1500182</b>	<b>MAYFLOWER INN</b>	NTNC	109	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
118 WOODBURY ROAD			10				

Towns Served: WASHINGTON

### Monitoring Requirements

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

Physical Parameters (PPS)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	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: **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		Complete
	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 PCBs-Phase II (SOC2)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	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		
	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 #2 (WSF ID: 10653)**

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

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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>CT1500182</b>	<b>MAYFLOWER INN</b>	NTNC	109	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
118 WOODBURY ROAD			10				
Towns Served: WASHINGTON							

## Monitoring Requirements

Water System Facility: **WELL #2 (WSF ID: 10653)**

E. Coli (3014)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	10/1/25 - 10/31/25		
	11/1/25 - 11/30/25		
	12/1/25 - 12/31/25		

Water System Facility: **WELL #1 (WSF ID: 10654)**

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

## 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)	Maximum: 0.2 MG/L	Daily
<b>Start Date:</b> 1/1/2017	<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		
<b>Analyte</b>	<b>Monitoring Requirement (Summary Type)</b>	<b>Operating Limit</b>	<b>Samples Req/Month</b>
pH	Entry Point pH Monitoring (PHRD)	Minimum: 6.4 PH	Daily
<b>Start Date:</b> 12/1/2008	<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		

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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>CT1500182</b>	<b>MAYFLOWER INN</b>	NTNC	109	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
118 WOODBURY ROAD			10				
Towns Served: WASHINGTON							

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
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				
		MAYINN001	MAIN BLDG KITCHEN	A	Y	N		Y
		MAYINN002	MAIN BLDG BAR	A	Y	N		
		MAYINN003	SPEEDWELL HOUSE	A	Y	N	Y	
		MAYINN004	STANDISH HOUSE	A	Y	N		
		MAYINN005	BROOK HOUSE	A	Y	N		
		MAYINN006	TEA HOUSE	A	Y	N		
		MAYINN007	KITCHEN HW SINK	A	Y	N		
		MAYINN008	MN BLD PREP KIT SINK	A	Y	N		
		MAYINN009	KITCHEN SINK #2	A	Y	N		Y
		MAYINN010	KITCHEN SINK #5	A	Y	N		
		MAYINN011	LOBBY MENS ROOM	A	Y	N		
		MAYINN012	LOBBY HC BATH	A	Y	N		
		MAYINN013	LOBBY LADIES ROOM	A	Y	N		
		MAYINN014	ROOM 21 BATH	A	Y	N		
		MAYINN015	ROOM 22 BATH	A	Y	N		
		MAYINN016	ROOM 22 SINK	A	Y	N		
		MAYINN017	ROOM 23 BATH	A	Y	N		
		MAYINN018	ROOM 24 SINK	A	Y	N		
		MAYINN019	ROOM 25 SINK	A	Y	N		
		MAYINN020	ROOM 26 BATH	A	Y	N		
		MAYINN021	ROOM 27 BATH	A	Y	N		
		MAYINN022	ROOM 31 BATH	A		N		
		MAYINN023	ROOM 32 BATH	A	Y	N		
		MAYINN024	ROOM 33 BATH	A	Y	N		
		MAYINN025	ROOM 34 BATH	A	Y	N		
		MAYINN026	ROOM 35 BATH	A	Y	N		
		MAYINN027	ROOM 36 BATH	A	Y	N		
		MAYINN028	ROOM 37 BATH	A	Y	N		
		MAYINN029	ROOM 38 BATH	A	Y	N		
		MAYINN030	BASEMENT PASTRY ROOM	A	Y	N		
		MAYINN031	BASEMENT MENS ROOM	A	Y	N		
		MAYINN032	MENS FITNESS SINK	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>CT1500182</b>	<b>MAYFLOWER INN</b>	NTNC	109	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
118 WOODBURY ROAD			10				
Towns Served: WASHINGTON							

### 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
		MAYINN033	LADIES FITNESS SINK	A	Y	N		
		MAYINN034	BASEMENT LADIES ROOM	A	Y	N		
		MAYINN035	BASEMENT LOUNGE SINK	A	Y	N		
		MAYINN036	SPEEDWELL ROOM 11	A	Y	N		
		MAYINN037	SPEEDWELL ROOM 12	A	Y	N		
		MAYINN038	SPEEDWELL ROOM 14	A	Y	N		
		MAYINN039	SPEEDWELL ROOM 15	A	Y	N		
		MAYINN040	SPEEDWELL LL BATH	A		N	Y	
		MAYINN041	SPEEDWELL LL MECH RO	A	Y	N		
		MAYINN042	STANDISH ROOM 20 BAT	A	Y	N		
		MAYINN043	STANDISH ROOM 17 BAT	A	Y	N		
		MAYINN044	STANDISH ROOM 18 BAT	A	Y	N		
		MAYINN045	STANDISH ROOM 19 BAT	A	Y	N		
		MAYINN046	TEA HOUSE BATH #2	A	Y	N		
		MAYINN047	TEA HOUSE KITCHEN	A	Y	N		Y
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10653	WELL #2	2	WELL #2	A				
10654	WELL #1	2	WELL #1	A				
53320	ATMOSPHERIC STORAGE							
53322	BOOSTER PUMPS							
985	WATER TREATMENT							

### Certified Operator Information

**Water System Facility: WATER TREATMENT (WSF ID: 985)**

**Facility Classification:** CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2026
CROWNSHAW, MICHAEL L	ASSIGNED OPERATOR	SMALL WATER SYSTEM OPERATOR	3/31/2028

### Contact Information

Name		Organization			Job Title	
Mr. Sean Heslin		Auberge Resorts Collection			Engineering	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
118 Woodbury Road		Route 47		Washington	CT	06793
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-868-9466				860-868-9466	sean.heslin@aubergeresorts.com	
Contact Role(s): <b>Administrative Contact, Legal Contact, Owner</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>CT1500182</b>	<b>MAYFLOWER INN</b>	NTNC	109	P	GW	
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
118 WOODBURY ROAD		10				
Towns Served: WASHINGTON						

**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		
CT1500312	WASHINGTON PRIMARY SCHOOL	NTNC	247	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
11A SCHOOL STREET			1				
Towns Served: WASHINGTON							

## 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)	1/1/23 - 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>	
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		Complete	
	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	3/1/2026	

*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>CT1500312</b>	<b>WASHINGTON PRIMARY SCHOOL</b>	NTNC	247	L	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
11A SCHOOL STREET			1				
Towns Served: WASHINGTON							

### 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				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
		WPS001	STAFF KITCHEN	A	Y	2	Y	
		WPS002	GRADE 1	A	Y	2	Y	
		WPS003	HANDICAP BATH 2	A	Y	2	Y	
		WPS004	MAIN OFFICE	A	Y	2	Y	
		WPS005	NURSES ROOM	A	Y	2	Y	
		WPS006	ROOM 103	A	Y	2	Y	
		WPS007	BOYS MAIN	A	Y	2	Y	
		WPS008	ROOM 108	A	Y	2	Y	
		WPS009	ROOM 109	A	Y	2	Y	
		WPS010	ROOM 110	A	Y	2	Y	
		WPS011	CUSTODIAN	A	Y	2	Y	
		WPS012	ROOM 116	A	Y	2	Y	
		WPS013	BOYS LAV	A	Y	2	Y	
		WPS014	GIRLS LAV	A	Y	2	Y	
		WPS015	ROOM 118	A	Y	2	Y	
00700	ENTRY POINT	3	ENTRY POINT	A				
10655	WELL	2	WELL	A				

### Certified Operator Information

<b>Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
<b>Facility Classification: SMALL WATER SYSTEM</b>			
Operator Name	Operator Type	Certification(s)	Certification Expiration
KILBOURN, ERIC M.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2025
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2025
KILBOURN, JORDAN H	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2027

### Contact Information

Name		Organization			Job Title	
<b>Mr. Donald J. O'leary</b>		Regional School District - 12			Facility Director	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
11A School St				Washington	CT	06794
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-868-6174		860-868-6103		860-868-6100	olearyd@region-12.org	
Contact Role(s): <b>Administrative 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>CT1500312</b>	<b>WASHINGTON PRIMARY SCHOOL</b>	NTNC	247	L	GW			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
11A SCHOOL STREET			1					
Towns Served: WASHINGTON								
Name			Organization			Job Title		
<b>Ms. Megan Bennett</b>			Regional School District #12			Superintendent		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
11A School St						Washington Depot	CT	06794
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-868-6100		860-868-6103		860-671-9028	bennettm@region-12.org			
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>CT1500343</b>	<b>WASHINGTON MONTESSORI SCHOOL</b>	NTNC	350	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
240 LITCHFIELD TURNPIKE (ROUTE 202)				1			
Towns Served: WASHINGTON							

### 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 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		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>		
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				

*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>CT1500343</b>	<b>WASHINGTON MONTESSORI SCHOOL</b>	NTNC	350	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
240 LITCHFIELD TURNPIKE (ROUTE 202)				1			

Towns Served: WASHINGTON

## Monthly Water System Facility (WSF) Level Monitoring Requirements

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

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	Daily
<b>Start Date:</b> 9/1/2011	<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
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				
			UPSTREAM WITHIN 5 SERVICE CON	A				
			WASHMONT-01 LOBBY BATHROOM	A		N	Y	
			WASHMONT-02 STAFF ROOM	A	Y	N	Y	
			WASHMONT-03 YCC	A	Y	N	Y	
			WASHMONT-04 CHAUNDA'S ROOM	A	Y	N	Y	
			WASHMONT-05 NANCY'S ROOM	A	Y	N	Y	
			WASHMONT-06 AMY'S ROOM	A	Y	N	Y	
			WASHMONT-07 ART ROOM	A	Y	N	Y	
			WASHMONT-08 M.S. KITCHEN	A	Y	N	Y	
	WASHMONT-09 SHEILA'S ROOM	A	Y	N	Y			
	WASHMONT-10 KATH'S ROOM	A	Y	N	Y			
	WASHMONT-11 JEN'S ROOM	A		N	Y			
00700	ENTRY POINT	3	ENTRY POINT	A				
10942	WELL #1	2	WELL #1	A				
10943	WELL #2	2	WELL #2	A				
45959	ATMOSPHERIC STORAGE							
45961	HYDROPNEUMATIC STORAGE							
57801	TREATMENT PLANT							

## Certified Operator Information

*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>CT1500343</b>	<b>WASHINGTON MONTESSORI SCHOOL</b>	NTNC	350	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
240 LITCHFIELD TURNPIKE (ROUTE 202)				1			
Towns Served: WASHINGTON							

## Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 57801)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
KILBOURN, ERIC M.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2025
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2025

## Contact Information

Name		Organization			Job Title	
<b>Ms. Anne Fenton</b>		Washington Montessori School			Cfoo	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
240 Litchfield Turnpike				New Preston	CT	06777
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-868-0551	2041	860-868-1362		505-690-9535	afenton@washingtonmontessori.org	

Contact Role(s): **Owner**

Name		Organization			Job Title	
<b>Mr. John R. Hay</b>		Washington Montessori Assoc			Facilities Manager	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
240 Litchfield Turnpike				New Preston	CT	06777
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-868-0551				860-689-6809	jhay@washingtonmontessori.org	

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		
<b>CT1501013</b>	<b>DEVEREUX GLENHOLME SCHOOL - MAIN CAMPUS</b>	NTNC	245	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
81 SABBADAY LANE				15			
Towns Served: WASHINGTON							

### 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	1/1/22 - 12/31/30				
<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 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 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>Water System Facility: 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		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>		
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>CT1501013</b>	<b>DEVEREUX GLENHOLME SCHOOL - MAIN CAMPUS</b>	NTNC	245	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
81 SABBADAY LANE				15			
Towns Served: WASHINGTON							

### 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		Complete
	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		Complete
	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)	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
COMPLETE INITIAL LSL INVENTORY	10/16/2024	
CERTIFY LEAD SL NOTIFICATION	7/1/2025	
MAIL/HAND DELIVER NOTICE TO CONSUMERS	12/31/2025	
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			
		DEVGLEN001	BIRCHWOOD	A	Y	1		
		DEVGLEN002	CARRIAGE	A	Y	1		
		DEVGLEN003	LAUREL	A	Y	1		
		DEVGLEN004	GLENHOLM	A	Y	1		
		DEVGLEN005	PUEBLO	A	Y	1		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
1004	WELL 1	2	WELL 1	A				
45428	PRESSURE STORAGE							
60316	WELL 2	2	WELL 2	A				
60318	ATMOSPHERIC TANK							

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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>CT1501013</b>	<b>DEVEREUX GLENHOLME SCHOOL - MAIN CAMPUS</b>	NTNC	245	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
81 SABBADAY LANE				15			
Towns Served: WASHINGTON							

## 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>
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		
<b>Mr. Cj Kersten</b>		Devereux-Glenholme School		Main Contact		
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
81 Sabbaday Lane				Washington	CT	06793
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-868-7377				860-868-7377	ckersten@devereux.org	

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**

**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>CT1501143</b>	<b>MAYFLOWER SPA</b>	NTNC	72	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
118 WOODBURY ROAD				6			
Towns Served: WASHINGTON							

### 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>		
LL TREATMENT PREP (MAYSPA010)	1/1/24 - 12/31/24	9/1-9/30	Complete		
	1/1/25 - 12/31/25	9/1-9/30			
	1/1/26 - 12/31/26	9/1-9/30			
<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			
	1/1/28 - 12/31/30	6/1-9/30			
<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		
<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		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>		
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete		
	1/1/25 - 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>CT1501143</b>	<b>MAYFLOWER SPA</b>	NTNC	72	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
118 WOODBURY ROAD				6			
Towns Served: WASHINGTON							

## 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>		
	1/1/26 - 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		Complete		
	1/1/26 - 12/31/28				

Water System Facility: **WELL 1 (WSF ID: 52883)**

<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 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> 8/1/2017	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>	<b>Compliance Status:</b>
	<b>Monitoring Period</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

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
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	A				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MAYSPA001	ALLERTON BACK L BAT	A	Y	N		

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT1501143</b>	<b>MAYFLOWER SPA</b>	NTNC	72	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
118 WOODBURY ROAD				6			
Towns Served: WASHINGTON							

### 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
		MAYSPA002	ALLERTON FRT L BATH	A	Y	N		
		MAYSPA003	ALLERTON BCK R BATH	A	Y	N		
		MAYSPA004	ALLERTON FRT R BATH	A	Y	N		
		MAYSPA005	SPA LOBBY POWDER RM	A	Y	N		
		MAYSPA006	SPA BATHROOM AREA	A	Y	N		
		MAYSPA007	SPA BATHROOM AREA	A	Y	N		
		MAYSPA008	LL ALLERTON LOCKER 1	A	Y	N		Y
		MAYSPA009	LL ALLERTON LOCKER 2	A	Y	N		
		MAYSPA010	LL TREATMENT PREP	A	Y	N		Y
		MAYSPA011	LL HOUSEKEEP CLOSET	A	Y	N		
		MAYSPA012	LL POWDER RM 1	A	Y	N		
		MAYSPA013	LL POWDER RM 2	A	Y	N	Y	
		MAYSPA014	PREP KITCHEN SINK	A	Y	N		
		MAYSPA015	PREP KITCHEN HW SINK	A	Y	N		
		MAYSPA016	BARN PUMP STATION	A	Y	N		
		MAYSPA017	LAUNDRY	A	Y	N		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
		MAYSPA016	BARN PUMP STATION	A				
52883	WELL 1	2	WELL 1	A				
52889	ATMOSPHERIC TANKS							
60900	TREATMENT PLANT							

### Certified Operator Information

Water System Facility: <b>TREATMENT PLANT (WSF ID: 60900)</b>			
Facility Classification: CLASS 1 TREATMENT PLANT			
<b>Operator Name</b>	<b>Operator Type</b>	<b>Certification(s)</b>	<b>Certification Expiration</b>
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2026
CROWNSHAW, MICHAEL L	ASSIGNED OPERATOR	SMALL WATER SYSTEM OPERATOR	3/31/2028

### Contact Information

Name		Organization			Job Title	
<b>Mr. Sean Heslin</b>		Auberge Resorts Collection			Engineering	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
118 Woodbury Road		Route 47		Washington	CT	06793
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-868-9466				860-868-9466	sean.heslin@aubegeresorts.com	
Contact Role(s): <b>Administrative Contact, Legal Contact, Owner</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>CT1501143</b>	<b>MAYFLOWER SPA</b>	NTNC	72	P	GW	
Local Address (where applicable)	Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
118 WOODBURY ROAD			6			
Towns Served: WASHINGTON						

**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**