

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0820051 | POWDER RIDGE SKI LODGE-MAIN BLDG | NTNC | 100 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 99 POWDER HILL ROAD | | | | 2 | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

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 | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 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 | | | | |
| 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 | 1/1/24 - 12/31/26 | 6/1-9/30 | | | |
| | 1/1/27 - 12/31/29 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/25 - 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) | | | | | |
| 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 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 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 | | |
| 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) | 1/1/26 - 12/31/28 | | | | |

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 | | |
| CT0820051 | POWDER RIDGE SKI LODGE-MAIN BLDG | NTNC | 100 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 99 POWDER HILL ROAD | | | | 2 | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

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 | | | | |
| | | PR-2FHS1 | 2ND FL HAND SINK 1 | A | Y | N | | |
| | | PR-2FHS2 | 2ND FL HAND SINK 2 | A | Y | N | | |
| | | PR-2FM | 2ND FLOOR MENS RM | A | Y | N | | |
| | | PR-2FW | 2ND FLOOR WOMENS RM | A | Y | N | | |
| | | PR-BHS1 | BAR HAND SINK 1 | A | Y | N | | |
| | | PR-HS1 | HAND SINK #1 | A | Y | N | Y | |
| | | PR-HS2 | HAND SINK #2 | A | Y | N | Y | |
| | | PR-HS3 | HAND SINK #3 | A | Y | N | Y | |
| | | PR-MRL | MENS ROOM LEFT SINK | A | Y | N | | |
| | | PR-MRR | MENS ROOM RIGHT SINK | A | Y | N | | |
| | | PR-POTS | POT SINK | A | Y | N | | |
| | | PR-PROD | PRODUCE SINK | A | Y | N | | |
| | | PR-WRC | WOMENS ROOM CENTER S | A | Y | N | | |
| | | PR-WRL | WOMENS ROOM LEFT SIN | A | Y | N | | |
| | | PR-WRR | WOMENS ROOM RIGHT SI | A | Y | N | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 22989 | MAIN LODGE ARTESIAN WELL | 2 | WELL 1 | A | | | | |

Certified Operator Information

| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
|---|----------------|---|--------------------------|
| Facility Classification: SMALL WATER SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| RADICCHI, PAUL J. | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS III | 6/30/2027 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2027 |

Contact Information

| | | | | | | | |
|--------------------------|-----------|--------------------------------|--------------|-----------------|---------------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. Sean Hayes | | Powdr Ridge Mtn Prk&Resort,LLC | | | Owner | | |
| Mailing Address Line One | | Mailing Address Line Two | | | City | State | Zip Code |
| 161 Brownstone Avenue | | | | | Portland | CT | 06480 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 866-860-0208 | | 860-342-5017 | | | shayes@brownstonepark.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 | |
| CT0820051 | POWDER RIDGE SKI LODGE-MAIN BLDG | NTNC | 100 | P | GW | |
| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 99 POWDER HILL ROAD | | | 2 | | | |
| Towns Served: MIDDLEFIELD | | | | | | |
| Contact Role(s): Administrative Contact, Legal Contact, Owner | | | | | | |

Please note the following:

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

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

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

End of schedule

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|---|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0820072 | THE ROGERS MANUFACTURING COMPANY | NTNC | 100 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 72 MAIN STREET | | | 1 | | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

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 | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 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 | | | | |
| 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 | 1/1/24 - 12/31/26 | 6/1-9/30 | | | |
| | 1/1/27 - 12/31/29 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/25 - 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) | | | | | |
| Nitrate (1040) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 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 | | | | |
| Nitrite (1041) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/24 - 12/31/24 | | Complete | | |
| | 1/1/25 - 12/31/25 | | Complete | | |
| | 1/1/26 - 12/31/26 | | | | |
| 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) | 1/1/24 - 12/31/26 | | | | |
| | 1/1/27 - 12/31/29 | | | | |
| Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/23 - 12/31/25 | | | | |
| | 1/1/26 - 12/31/28 | | | | |

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 | | |
| CT0820072 | THE ROGERS MANUFACTURING COMPANY | NTNC | 100 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 72 MAIN STREET | | | 1 | | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

Monitoring Requirements

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

| Organic Chemicals (VOCS) | 1 routine (RT) per quarter | | |
|---|----------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| ENTRY POINT (3) | 4/1/25 - 6/30/25 | | Complete |
| | 7/1/25 - 9/30/25 | | |
| | 10/1/25 - 12/31/25 | | |

| 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 - 3/31/25 | 1/1-3/31 | Complete |

Water System Facility: **WELL (WSF ID: 10393)**

| 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 | | |

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

| <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 | | | |
| | | 5 | OFF WR SINK | A | Y | 2 | Y | Y |
| | | 6 | OFF MR SINK | A | Y | 2 | Y | Y |
| | | 7 | PLANT MR SINK | A | Y | 2 | Y | Y |
| | | 8 | PLANT LMR SINK | A | Y | 2 | | |
| | | 9 | PLANT RWR SINK | A | Y | 2 | Y | Y |
| | | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | |
| | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10393 | WELL | 2 | WELL | A | | | | |
| 47792 | UV TREATMENT | | | | | | | |

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

| <i>Operator Name</i> | <i>Operator Type</i> | <i>Certification(s)</i> | <i>Certification Expiration</i> |
|----------------------|----------------------|--|---------------------------------|
| HELMING, TRAVIS | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS III | 9/30/2025 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS III | 9/30/2025 |

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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 | | |
| CT0820072 | THE ROGERS MANUFACTURING COMPANY | NTNC | 100 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 72 MAIN STREET | | | 1 | | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

Contact Information

| | | | | | | | | |
|----------------------------|-----------|------------------------------|--------------------------|-----------------|--------------------|----------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Ms. Elizabeth Bitel | | The Rogers Manufacturing Co. | | | Hr Manager | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 72 Main St | | | PO Box 155 | | | Rockfall | CT | 06481 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-346-8648 | | | | | ebitel@rmc1891.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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0820362 | MIDDLEFIELD FEDERATED CHURCH | NTNC | 53 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 390 MAIN STREET | | | | 1 | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

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 | 1/1/20 - 12/31/28 | | | | |
| Total Alkalinity (1927) | | 2 routine (RT) per six months | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 7/1/25 - 12/31/25 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 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 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per six months | | | |
| <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 | | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/25 - 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) | | | | | |
| 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) | 1/1/24 - 12/31/26 | | | | |
| | 1/1/27 - 12/31/29 | | | | |
| 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 | | | | |
| Lead And Copper (PBCU) | | 1 routine (RT) per six months | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 7/1/25 - 12/31/25 | | | | |
| 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 | | | | |

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 | | |
| CT0820362 | MIDDLEFIELD FEDERATED CHURCH | NTNC | 53 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 390 MAIN STREET | | | | 1 | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

Monitoring Requirements

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

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) | 1/1/25 - 12/31/27 | | Complete |

Water System Facility: WELL #1 (WSF ID: 10762)

E. Coli (3014) 1 routine (RT) per quarter

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|--------------------|-------------------|-------------------|
| 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 |
|------------------------------|---------------------------------------|----------------------------|---------------------------|
| pH | Entry Point pH Monitoring (PHRD) | Minimum: 7.0 PH | 4 |
| Start Date: 10/1/2016 | | Compliance History: | Operating Limit |
| | | Monitoring Period | 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 | |

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---------------------------------------|----------------------------|---------------------------|
| pH | Entry Point pH Monitoring (PHRD) | Maximum: 7.6 PH | 4 |
| Start Date: 6/1/2025 | | Compliance History: | Operating Limit |
| | | Monitoring Period | Compliance Status: |
| | | 6/1/2025 - 6/30/2025 | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|--|-----------|---------------|
| CCTS 6: PWS MONITOR AFTER OCCT INSTALL | | |
| CCTS 6: PWS MONITOR AFTER OCCT INSTALL | | |
| CCTS 6: PWS MONITOR AFTER OCCT INSTALL | | |
| SAMPLING SITE PLAN | 6/26/2025 | |
| CCTS 5: PWS OCCT INSTALLATION | 7/12/2025 | 5/13/2025 |
| CCTS 5: PWS OCCT INSTALLATION | 7/12/2025 | 5/13/2025 |
| CCTS 5: PWS OCCT INSTALLATION | 7/12/2025 | 5/13/2025 |

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 | | |
| CT0820362 | MIDDLEFIELD FEDERATED CHURCH | NTNC | 53 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 390 MAIN STREET | | | | 1 | | | |

Towns Served: MIDDLEFIELD

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|---|-----------|---------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 9/28/2025 | |
| 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 | 10002 | KITCHEN | A | Y | | | |
| | | 10003 | 1ST FL HANDICAP | A | Y | | | |
| | | 10004 | 1ST FL SMALL BATH | A | Y | | | |
| | | 10012 | 2ND FL SMALL HANDICA | A | Y | | | |
| | | 10013 | 2ND FLOOR SMALL BATH | A | Y | | | |
| | | 20007 | 1ST FL BOYS BATH - 3 | A | Y | | | |
| | | 20008 | 1ST FL GIRLS BATH - | A | Y | | | |
| | | 20010 | 2ND FL GIRLS BATH - | A | Y | | | |
| | | 20011 | 2ND FL STAFF BATH - | A | Y | | | |
| | | 4 | DISTRIBUTION SYSTEM | A | Y | | | |
| | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | | |
| | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10762 | WELL #1 | 2 | WELL #1 | A | | | | |
| 46416 | MIDDLEFIELD FEDERATED TREATMENT STATION | | | | | | | |

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|---------------|----------------|---|--------------------------|
| SEHL, ROBERT | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS II | 3/31/2026 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 3/31/2028 |

Contact Information

| | | | | | | | | |
|---|-----------|-----------------------------|--------------------------|-----------------|----------------------|-------------|-------|----------|
| Name | | Organization | | | Job Title | | | |
| Middlefield Federated Church Inc | | | | | | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 390 Main St & Rt 157 | | | | | | Middlefield | CT | 06455 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-349-9881 | | | | | church.mfc@gmail.com | | | |
| Contact Role(s): | | Legal Contact, Owner | | | | | | |

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

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

| | | | | | | | | |
|---|-------------------------------------|---------------------|------------------------------|-----------------|---------------------------|----------------------|--------------|----------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | | |
| CT0820362 | MIDDLEFIELD FEDERATED CHURCH | NTNC | 53 | P | GW | | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural | |
| 390 MAIN STREET | | | | 1 | | | | |
| Towns Served: MIDDLEFIELD | | | | | | | | |
| Name | | | Organization | | | Job Title | | |
| Mr. Paul Bergenholtz | | | Middlefield Federated Church | | | Building And Grounds | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 402 Main Street | | | | | | Middlefield | CT | 06455 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-349-9881 | | | | 860-510-9198 | bergenholtz@sbcglobal.net | | | |
| Contact Role(s): Administrative Contact | | | | | | | | |
| Name | | | Organization | | | Job Title | | |
| Mr. John Lyman III | | | Middlefield Federated Church | | | Church Moderator | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | State | Zip Code |
| 402 Main Street | | | | | | Middlefield | CT | 06455 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-349-9881 | | | | 860-510-9198 | church.mfc@gmail.com | | | |
| Contact Role(s): Legal Contact | | | | | | | | |
| Please note the following: | | | | | | | | |
| <ol style="list-style-type: none"> 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample. 2. If a Collection Period is specified, all water quality samples must be collected during the specified period. 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule. | | | | | | | | |

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

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

End of schedule

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-----------------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0820382 | THE INDEPENDENT DAY SCHOOL | NTNC | 199 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 115 LAUREL BROOK ROAD | | | 1 | | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

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 | 1/1/20 - 12/31/28 | | | | |
| 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 | 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 | | | | |
| Lead And Copper (PBCU) | | 10 routine (RT) per six months | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/25 - 6/30/25 | | Complete | | |
| | 7/1/25 - 12/31/25 | | | | |
| 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 | 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: 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> | | |

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 | | |
| CT0820382 | THE INDEPENDENT DAY SCHOOL | NTNC | 199 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 115 LAUREL BROOK ROAD | | | 1 | | | | |

Towns Served: MIDDLEFIELD

Monitoring Requirements

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

| Nitrate And Nitrite (NOX) | | 1 routine (RT) per year | | |
|--|--------------------------|---------------------------------------|--------------------------|--|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | |
| ENTRY POINT (3) | 1/1/24 - 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 | | Complete | |
| | 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 quarter | | |
| <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 | | | |

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 | |
|-----------------------------|--|----------------------------|---------------------------|---------------------------|
| Orthophosphate | Entry Point Phosphate Monitoring (PHOS) | Minimum: 1.0 MG/L | 2 | |
| Start Date: 9/1/2022 | | Compliance History: | Operating Limit | Monitoring |
| | | Monitoring Period | Compliance Status: | Compliance Status: |
| | | 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 | | |
| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month | |
| Orthophosphate | <spaces> () | Maximum: 3.0 MG/L | 2 | |
| Start Date: 9/1/2022 | | 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 | | |

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 | | |
| CT0820382 | THE INDEPENDENT DAY SCHOOL | NTNC | 199 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 115 LAUREL BROOK ROAD | | | 1 | | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

Water System Facility: ENTRY POINT (WSFID: 00700)

| Analyte | Monitoring Requirement (Summary Type) | Operating Limit | Samples Req/Month |
|-----------------------------|---------------------------------------|---------------------------|---------------------------|
| pH | Entry Point pH Monitoring (PHRD) | Minimum: 7.0 PH | 4 |
| Start Date: 9/1/2022 | Compliance History: | Operating Limit | Monitoring |
| | Monitoring Period | Compliance Status: | Compliance Status: |
| | 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 | | |

Other Compliance Schedules

| Compliance Schedule Activity | Due Date | Achieved Date |
|---|------------|---------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2011 | |
| 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 | | | |
| | | A-11 | A-11 FACULTY RM | A | Y | 2 | Y | Y |
| | | A-18 | A-18 SCIENCE RM | A | Y | 2 | Y | Y |
| | | A-28 | A-28 BOYS RM | A | Y | 2 | Y | Y |
| | | A-32 | A-32 PHYS ED BOYS | A | Y | 2 | Y | Y |
| | | A-3B | A-3B BATHROOM | A | Y | N | Y | Y |
| | | B-2 | B-2 BOYS RM | A | Y | N | Y | Y |
| | | B-22 | B-22 HAND SINK | A | Y | N | Y | Y |
| | | B-8 | B-8 ART RM | A | Y | N | Y | Y |
| | | C-1 | C-1 STAGE SINK | A | | N | Y | Y |
| | | C-6 | C-6 JANITOR SINK | A | | N | Y | Y |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | WF-1 | WATER FOUNTAIN 1 | A | | 2 | | |
| | | WFS-1 | WATER FILL STATION 1 | A | | 2 | | |
| | | WFS-2 | WATER FILL STATION 2 | A | Y | | | |
| | | WFS-3 | WATER FILL STATION 3 | A | | N | | |
| | | WFS-4 | WATER FILL STATION 4 | A | Y | N | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10395 | WELL | 2 | WELL | A | | | | |
| 62556 | TREATMENT PLANT | | | | | | | |

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 | | |
| CT0820382 | THE INDEPENDENT DAY SCHOOL | NTNC | 199 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 115 LAUREL BROOK ROAD | | | 1 | | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

Certified Operator Information

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

Facility Classification:

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|-----------------|----------------|---|--------------------------|
| ROWLEY, BRENDAN | CHIEF OPERATOR | DISTRIBUTION SYSTEM OPERATOR - CLASS I | 12/31/2025 |
| | | WATER TREATMENT PLANT OPERATOR - CLASS II | 12/31/2025 |

Water System Facility: TREATMENT PLANT (WSF ID: 62556)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name | Operator Type | Certification(s) | Certification Expiration |
|-----------------|----------------|---|--------------------------|
| ROWLEY, BRENDAN | 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 | | |
| Dr. Rochelle Reodica | The Independent Day School | Head of School | | |

| | | | | |
|--------------------------|--------------------------|-------------|-------|----------|
| Mailing Address Line One | Mailing Address Line Two | City | State | Zip Code |
| 115 Laurel Brook Rd | | Middlefield | CT | 06455 |

| | | | | | |
|----------------|-----------|-----|--------------|-----------------|-----------------------------------|
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address |
| 860-347-7235 | | | | | reodicar@independentdayschool.org |

Contact Role(s): Legal Contact

| | | | | |
|-------------------------|----------------------------|--------------------|--|--|
| Name | Organization | Job Title | | |
| Mr. John Whitney | The Independent Day School | Facilities Manager | | |

| | | | | |
|--------------------------|--------------------------|-------------|-------|----------|
| Mailing Address Line One | Mailing Address Line Two | City | State | Zip Code |
| 115 Laurel Brook | | Middlefield | CT | 06455 |

| | | | | | |
|----------------|-----------|-----|--------------|-----------------|-----------------------------------|
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address |
| 860-347-7235 | | | | | WhitneyJ@independentdayschool.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 | | |
| CT0820392 | MEMORIAL MIDDLE SCHOOL | NTNC | 359 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 124 HUBBARD STREET | | | 1 | | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

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 | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 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 | | | | |
| 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 | 1/1/24 - 12/31/26 | 6/1-9/30 | | | |
| | 1/1/27 - 12/31/29 | 6/1-9/30 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/25 - 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) | | | | | |
| 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) | 1/1/25 - 12/31/27 | | | | |
| 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 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 | | |

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 | | |
| CT0820392 | MEMORIAL MIDDLE SCHOOL | NTNC | 359 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 124 HUBBARD STREET | | | 1 | | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

Monitoring Requirements

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

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

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

| <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> |
|---------------------------------|------------------------------|--------------------------|-----------------------------------|---------------|----------------------------|----------------------------------|-----------------|-------------------------|
| 00201 | ATM STORAGE #1 | | | | | | | |
| 00202 | ATM STORAGE #2 | | | | | | | |
| 00302 | TRANSFER PUMPS | | | | | | | |
| 00600 | DISTRIBUTION SYSTEM | 4 | GENERIC DISTRIBUTION | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | MEMSCH001 | KITCHEN SINK 1 | A | Y | 2 | Y | |
| | | MEMSCH002 | KITCHEN SINK 2 | A | Y | 2 | Y | |
| | | MEMSCH003 | KITCHEN SINK 3 | A | Y | 2 | Y | |
| | | MEMSCH004 | KITCHEN SINK 4 | A | Y | 2 | Y | |
| | | MEMSCH005 | BOYS BATHROOM | A | Y | 2 | Y | |
| | | MEMSCH006 | GIRLS BATHROOM | A | Y | 2 | Y | |
| | | MEMSCH007 | LOCKER RM | A | Y | 2 | Y | |
| | | MEMSCH008 | TEACHER LOUNGE | A | Y | 2 | Y | |
| | | MEMSCH009 | SCIENCE ROOM | A | Y | 2 | Y | |
| | | MEMSCH010 | NURSES OFFICE | A | Y | 2 | Y | |
| | | MEMSCH011 | ART ROOM | A | Y | 2 | Y | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10403 | WELL #3 | 2 | WELL #3 | A | | | | |
| 10405 | WELL #5 | 2 | WELL #5 | A | | | | |

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

| <i>Operator Name</i> | <i>Operator Type</i> | <i>Certification(s)</i> | <i>Certification Expiration</i> |
|----------------------|----------------------|--|---------------------------------|
| KORNATZ, CHRISTOPHER | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS III | 3/31/2027 |

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 | | |
| CT0820392 | MEMORIAL MIDDLE SCHOOL | NTNC | 359 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 124 HUBBARD STREET | | | 1 | | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

Contact Information

| | | | | | | | | | |
|----------------------------|-----------|-----|-----------------------------|-----------------|------------------|--------------------|--|-------|----------|
| Name | | | Organization | | | Job Title | | | |
| Mrs. Patricia Smith | | | Regional School District 13 | | | Operations Manager | | | |
| Mailing Address Line One | | | Mailing Address Line Two | | | City | | State | Zip Code |
| 135A Pickett Lane | | | | | | Durham | | CT | 06422 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | | |
| 860-349-7238 | | | | | psmith@rsd13.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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|--------------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0829013 | JOHN LYMAN SCHOOL | NTNC | 285 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 106 WAY ROAD | | | 1 | | | | |

Towns Served: MIDDLEFIELD

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 | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 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 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/24 - 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 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/25 - 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 - WELLS 1 & 3 (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 Polychlorinated Biphenyls (PCBs) (SOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/23 - 12/31/25 | | | | |
| | 1/1/26 - 12/31/28 | | | | |
| Organic Chemicals (VOCS) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/24 - 12/31/24 | | Complete | | |
| | 1/1/25 - 12/31/25 | | | | |
| | 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 | | |
| CT0829013 | JOHN LYMAN SCHOOL | NTNC | 285 | L | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 106 WAY ROAD | | | 1 | | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

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 | GENERIC DISTRIBUTION | A | Y | | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| | | JOHNLY001 | KITCHEN SINK | A | Y | 2 | Y | |
| | | JOHNLY002 | BOYS BATHROOM | A | Y | 2 | Y | |
| | | JOHNLY003 | GIRLS BATHROOM | A | Y | 2 | Y | |
| | | JOHNLY004 | ART ROOM | A | Y | 2 | Y | |
| | | JOHNLY005 | NURSES OFFICE | A | Y | 2 | Y | |
| | | JOHNLY006 | MEDIA HALLWAY | A | Y | | | |
| | | JOHNLY007 | ROOM 2B | A | Y | | | |
| | | JOHNLY008 | MEDIA BOYS | A | Y | | | |
| | | JOHNLY009 | PORTABLE #1 | A | Y | | | |
| | | JOHNLY010 | PORTABLE #4 | A | Y | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT - WELLS 1 & 3 | 3 | ENTRY POINT | A | | | | |
| 10397 | WELL #1 | 2 | WELL 1 | A | | | | |
| 58015 | WELL #3 | 2 | WELL 3 | A | | | | |
| 58022 | PUMP STATION | | | | | | | |
| ST01 | ATMOSPHERIC TANK 1 | | | | | | | |
| ST02 | ATMOSPHERIC TANK 2 | | | | | | | |

Certified Operator Information

| | | | |
|---|----------------------|--|---------------------------------|
| Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) | | | |
| Facility Classification: SMALL WATER SYSTEM | | | |
| Operator Name | Operator Type | Certification(s) | Certification Expiration |
| KORNATZ, CHRISTOPHER | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS III | 3/31/2027 |

Contact Information

| | | | | | | | |
|---|-----------|-----------------------------|--------------------------|-----------------|--------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mrs. Patricia Smith | | Regional School District 13 | | | Operations Manager | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| 135A Pickett Lane | | | | | Durham | CT | 06422 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 860-349-7238 | | | | | psmith@rsd13.org | | |
| Contact Role(s): Administrative Contact, Legal Contact | | | | | | | |

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

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

| | | | | | | |
|----------------------------------|--------------------------|----------------|------------|------------|----------------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | |
| CT0829013 | JOHN LYMAN SCHOOL | NTNC | 285 | L | GW | |
| Local Address (where applicable) | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 106 WAY ROAD | | 1 | | | | |
| Towns Served: MIDDLEFIELD | | | | | | |

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 | | |
| CT0829023 | LYMAN ORCHARD COUNTRY FARMS COMPLEX | NTNC | 84 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 32 REEDS GAP ROAD | | | 6 | | | | 4 |
| Towns Served: MIDDLEFIELD | | | | | | | |

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 | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 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 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/24 - 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 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/25 - 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) | | | | | |
| 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) | 1/1/25 - 12/31/27 | | | | |
| 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 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 | | |

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 | | |
| CT0829023 | LYMAN ORCHARD COUNTRY FARMS COMPLEX | NTNC | 84 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 32 REEDS GAP ROAD | | | 6 | | | | 4 |
| Towns Served: MIDDLEFIELD | | | | | | | |

Monitoring Requirements

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

| Organic Chemicals (VOCS) | 1 routine (RT) per year | | |
|---|--------------------------|--------------------------|--------------------------|
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> |
| | 1/1/25 - 12/31/25 | | |
| | 1/1/26 - 12/31/26 | | |

Other Compliance Schedules

| <i>Compliance Schedule Activity</i> | <i>Due Date</i> | <i>Achieved Date</i> |
|-------------------------------------|-----------------|----------------------|
| CROSS CONNECTION SURVEY REPORT | 3/1/2028 | |

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 | | | | |
| | | MW001 | MENS ROOM | A | Y | | | |
| | | MW002 | LADIES ROOM | A | Y | 2 | | |
| | | MW004 | PRODUCE SINK | A | Y | | | |
| | | MW004-B | BAKERY SINK | A | Y | 2 | | |
| | | MW004-D | DELI SINK | A | Y | 2 | | |
| | | MW004-PRO | PRODUCE SINK | A | Y | 2 | | |
| | | MW01 | MENS ROOM | A | Y | 2 | Y | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | | |
| 10398 | WELL #4 (GOLF MAINTENANCE BLDG) | 2 | WELL #4 | A | | | | |
| 10399 | WELL #3 (SOUTH WELL) | 2 | WELL #3 | A | | | | |
| 10763 | WELL #5 (CLUB HOUSE) | 2 | WELL #5 | A | | | | |
| 59360 | HYDROPNEUMATIC TANK (SOUTH WELL) | | | | | | | |
| 59362 | HYDROPNEUMATIC TANK (GOLF MAINTENANCE) | | | | | | | |

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

| <i>Operator Name</i> | <i>Operator Type</i> | <i>Certification(s)</i> | <i>Certification Expiration</i> |
|----------------------|----------------------|---|---------------------------------|
| BRAIG, ALLEN L. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS IV | 6/30/2025 |

Contact Information

| | | | | |
|--------------------------|------------------------------|-----------|-------|----------|
| Name | Organization | Job Title | | |
| Mr. John Lyman | Lyman Orchards Country Farms | Owner | | |
| Mailing Address Line One | Mailing Address Line Two | City | State | Zip Code |

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

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

| | | | | | | | | |
|----------------------------------|--|--------------|---------------------|-----------------|---------------------------|------------|----------------|--------------|
| PWS ID | PWS Name | | | Classification | Population | Owner Type | Primary Source | |
| CT0829023 | LYMAN ORCHARD COUNTRY FARMS COMPLEX | | | NTNC | 84 | P | GW | |
| Local Address (where applicable) | | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 32 REEDS GAP ROAD | | | | 6 | | | | 4 |
| Towns Served: MIDDLEFIELD | | | | | | | | |
| PO Box 453 | | | | Middlefield | | CT | 06455 | |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | | |
| 860-349-1793 | 6001 | 203-349-1424 | | | JLYMAN3@LYMANORCHARDS.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

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

| | | | | | | | |
|----------------------------------|-------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0829084 | 6 WAY ROAD | NTNC | 78 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 6 WAY ROAD | | | 1 | 1 | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

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 | 1/1/20 - 12/31/28 | | | | |
| Total Coliform (3100) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 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 | | | | |
| Lead And Copper (PBCU) | | 5 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/24 - 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 | | | |
| Physical Parameters (PPS) | | 1 routine (RT) per quarter | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| Select from Inventory of Active Sampling Points | 1/1/25 - 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) | | | | | |
| 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) | 1/1/24 - 12/31/26 | | | | |
| | 1/1/27 - 12/31/29 | | | | |
| 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 | | |
| Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS) | | 1 routine (RT) per three years | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/26 - 12/31/28 | | | | |
| Organic Chemicals (VOCS) | | 1 routine (RT) per year | | | |
| <i>Sampling Point (Sampling Point ID)</i> | <i>Monitoring Period</i> | <i>Collection Period</i> | <i>Compliance Status</i> | | |
| ENTRY POINT (3) | 1/1/24 - 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 | | |
| CT0829084 | 6 WAY ROAD | NTNC | 78 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 6 WAY ROAD | | | 1 | 1 | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

Monitoring Requirements

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

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

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

| 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 | | | |
| | | 4-1 | BATHROOM | A | 1 | | |
| | | 4-2 | LAUNDRY | A | 1 | | |
| | | 4-3 | OUTSIDE_SOUTH | A | 1 | | |
| | | 4-4 | ENTRANCE | A | 1 | | |
| | | 4-5 | KITCHEN_SINK | A | 1 | | |
| | | DOWNSTREAM | WITHIN 5 SERVICE CON | A | | | |
| | | UPSTREAM | WITHIN 5 SERVICE CON | A | | | |
| 00700 | ENTRY POINT | 3 | ENTRY POINT | A | | | |
| 59452 | WELL 1 | 2 | WELL 1 | A | | | |

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

| <i>Operator Name</i> | <i>Operator Type</i> | <i>Certification(s)</i> | <i>Certification Expiration</i> |
|----------------------|----------------------|---|---------------------------------|
| COSSETTE, EVAN J | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS IV | 6/30/2027 |
| | | DISTRIBUTION SYSTEM OPERATOR IN TRAINING | 6/30/2027 |
| | | DISTRIBUTION SYSTEM OPERATOR - CLASS II | 9/30/2027 |

Contact Information

| | | | | | | | |
|--|-----------|----------------|--------------------------|-----------------|--------------------|-------|----------|
| Name | | Organization | | | Job Title | | |
| Mr. Samuel Eddinger | | 6 Way Road LLC | | | Owner | | |
| Mailing Address Line One | | | Mailing Address Line Two | | City | State | Zip Code |
| 17 Louis Road | | | | | Middlefield | CT | 06455 |
| Business Phone | Extension | Fax | Mobile Phone | Emergency Phone | Email Address | | |
| 860-254-7343 | | 860-254-7343 | | | sam@ironcladpm.com | | |
| Contact Role(s): Administrative Contact, Legal Contact, Owner | | | | | | | |

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

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

| | | | | | | | |
|----------------------------------|-------------------|---------------------|-------------|------------|----------------|----------|--------------|
| PWS ID | PWS Name | Classification | Population | Owner Type | Primary Source | | |
| CT0829084 | 6 WAY ROAD | NTNC | 78 | P | GW | | |
| Local Address (where applicable) | | Service Connections | Residential | Commercial | Industrial | Combined | Agricultural |
| 6 WAY ROAD | | | 1 | 1 | | | |
| Towns Served: MIDDLEFIELD | | | | | | | |

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