

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

| PWS ID                           | PWS Name              |  |                     | Classification | Population | Owner Type | Primary Source |              |
|----------------------------------|-----------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT1661262                        | TYRRELL MIDDLE SCHOOL |  |                     | NTNC           | 454        | L          | GW             |              |
| Local Address (where applicable) |                       |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 500 TODD ROAD                    |                       |  |                     | 1              |            |            |                |              |
| Towns Served: WOLCOTT            |                       |  |                     |                |            |            |                |              |

### 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)                             |                          | 10 routine (RT) per three years |                          |
| <i>Sampling Point (Sampling Point ID)</i>          | <i>Monitoring Period</i> | <i>Collection Period</i>        | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points    | 1/1/23 - 12/31/25        | 6/1-9/30                        |                          |
|                                                    | 1/1/26 - 12/31/28        | 6/1-9/30                        |                          |
| Physical Parameters (PPS)                          |                          | 1 routine (RT) per 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 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 |              |
| CT1661262                        | TYRRELL MIDDLE SCHOOL |  |             | NTNC           | 454        | L          | GW             |              |
| Local Address (where applicable) |                       |  | Service     | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 500 TODD ROAD                    |                       |  | Connections | 1              |            |            |                |              |
| Towns Served: WOLCOTT            |                       |  |             |                |            |            |                |              |

### Monitoring Requirements

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

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

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

Water System Facility: ENTRY POINT (WSFID: 00700)

| Analyte              | Monitoring Requirement (Summary Type) | Operating Limit      | Samples Req/Month  |
|----------------------|---------------------------------------|----------------------|--------------------|
| pH                   | Entry Point pH Monitoring (PHRD)      | Minimum: 7 PH        | Daily              |
| Start Date: 1/1/2002 |                                       | Compliance History:  | Monitoring         |
|                      |                                       | 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 |                    |

### 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      |                     |                           |          |                  |
|                          |                       | TS001             | KITCHEN                    | A      | Y                   | 2                         |          |                  |
|                          |                       | TS002             | GIRLS ROOM NORTH           | A      | Y                   | 2                         |          |                  |
|                          |                       | TS003             | GIRLS ROOM SOUTH           | A      | Y                   | 2                         |          |                  |
|                          |                       | TS004             | BOYS ROOM DOWN 1           | A      | Y                   | 2                         |          |                  |
|                          |                       | TS005             | GIRLS LOCKER ROOM          | A      | Y                   | 2                         |          |                  |
|                          |                       | TS006             | BOYS ROOM DOWN 2           | A      | Y                   | 2                         |          |                  |
|                          |                       | TS007             | TEACHERS LOUNGE            | A      | Y                   | 2                         |          |                  |
|                          |                       | TS008             | MENS ROOM SOUTH            | A      | Y                   | 2                         |          |                  |
|                          |                       | TS009             | BOYS ROOM SOUTH            | A      | Y                   | 2                         |          |                  |
|                          |                       | TS010             | BOYS LOCKER ROOM           | A      | Y                   | 2                         |          |                  |
|                          |                       | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | ENTRY POINT           | 3                 | ENTRY POINT                | A      |                     |                           |          |                  |
| 10698                    | WELL 1                | 2                 | WELL                       | A      |                     |                           |          |                  |
| 11448                    | TREATMENT PLANT       |                   |                            |        |                     |                           |          |                  |
| 53500                    | WELL 2                | 2                 | WELL 2                     | 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 |              |
|----------------------------------|-----------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT1661262                        | TYRRELL MIDDLE SCHOOL |  |                     | NTNC           | 454        | L          | GW             |              |
| Local Address (where applicable) |                       |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 500 TODD ROAD                    |                       |  |                     | 1              |            |            |                |              |
| Towns Served: WOLCOTT            |                       |  |                     |                |            |            |                |              |

### 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 |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 60627                    | ATMOSPHERIC STORAGE   |                   |                            |        |                     |                           |          |                  |

### Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 11448)**

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      |       |          |
| Dr. Anthony Gasper       |           |     |                          | Wolcott Public Schools |                       | Superintendent |       |          |
| Mailing Address Line One |           |     | Mailing Address Line Two |                        |                       | City           | State | Zip Code |
| 1488 Woodtick Rd         |           |     |                          |                        |                       | Wolcott        | CT    | 06716    |
| Business Phone           | Extension | Fax | Mobile Phone             | Emergency Phone        | Email Address         |                |       |          |
| 203-879-9183             |           |     |                          |                        | agasper@wolcottps.org |                |       |          |

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

|                          |  |           |                          |                        |              |                 |                      |       |          |
|--------------------------|--|-----------|--------------------------|------------------------|--------------|-----------------|----------------------|-------|----------|
| Name                     |  |           |                          | Organization           |              |                 | Job Title            |       |          |
| Ms. Jessica Pepoy        |  |           |                          | Wolcott Public Schools |              |                 | Dir of Facilities    |       |          |
| Mailing Address Line One |  |           | Mailing Address Line Two |                        |              | City            |                      | State | Zip Code |
| 1488 Woodtick Road       |  |           | Business Office          |                        |              | Wolcott         |                      | CT    | 06716    |
| Business Phone           |  | Extension | Fax                      |                        | Mobile Phone | Emergency Phone | Email Address        |       |          |
| 203-879-8180             |  |           |                          |                        |              |                 | jpepoy@wolcottps.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 |
|----------------------------------|---------------------------|---------------------|-------------|----------------|------------|------------|----------------|
| CT1661282                        | FRISBIE ELEMENTARY SCHOOL |                     |             | NTNC           | 446        | L          | GW             |
| Local Address (where applicable) |                           | Service Connections | Residential | Commercial     | Industrial | Combined   | Agricultural   |
| 24 TODD ROAD                     |                           |                     | 1           |                |            |            |                |

Towns Served: WOLCOTT

### 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)                             |                          | 10 routine (RT) per three years |                          |
| <i>Sampling Point (Sampling Point ID)</i>          | <i>Monitoring Period</i> | <i>Collection Period</i>        | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points    | 1/1/23 - 12/31/25        | 6/1-9/30                        |                          |
|                                                    | 1/1/26 - 12/31/28        | 6/1-9/30                        |                          |
| Physical Parameters (PPS)                          |                          | 1 routine (RT) per 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 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                 |

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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 |              |
| CT1661282                        | FRISBIE ELEMENTARY SCHOOL |  |             | NTNC           | 446        | L          | GW             |              |
| Local Address (where applicable) |                           |  | Service     | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 24 TODD ROAD                     |                           |  | Connections | 1              |            |            |                |              |
| Towns Served: WOLCOTT            |                           |  |             |                |            |            |                |              |

### Monitoring Requirements

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

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

### 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      |                     |                           |          |                  |
|                          |                       | FS001             | KITCHEN                    | A      | Y                   | 2                         |          |                  |
|                          |                       | FS002             | TEACHERS LOUNGE            | A      | Y                   | 2                         |          |                  |
|                          |                       | FS003             | GIRLS ROOM                 | A      | Y                   | 2                         |          |                  |
|                          |                       | FS004             | MENS ROOM                  | A      | Y                   | 2                         |          |                  |
|                          |                       | FS005             | BOILER ROOM                | A      | Y                   | 2                         |          |                  |
|                          |                       | FS006             | NURSES ROOM                | A      | Y                   | 2                         |          |                  |
|                          |                       | FS007             | ROOM 12                    | A      | Y                   | 2                         |          |                  |
|                          |                       | FS008             | JANITORS ROOM              | A      | Y                   | 2                         |          |                  |
|                          |                       | FS009             | ROOM 15                    | A      | Y                   | 2                         |          |                  |
|                          |                       | FS010             | WATER FOUNTAIN             | A      | Y                   | 2                         |          |                  |
|                          |                       | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | ENTRY POINT           | 3                 | ENTRY POINT                | A      |                     |                           |          |                  |
| 53515                    | WELL 2                | 2                 | WELL 2                     | A      |                     |                           |          |                  |
| 53517                    | WELL 3                | 2                 | WELL 3                     | A      |                     |                           |          |                  |
| 60623                    | ATMOSPHERIC STORAGE   |                   |                            |        |                     |                           |          |                  |

### Certified Operator Information

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

Facility Classification:

| 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      |       |          |
|--------------------------|--------------------------|------------------------|----------------|-------|----------|
| Dr. Anthony Gasper       |                          | Wolcott Public Schools | Superintendent |       |          |
| Mailing Address Line One | Mailing Address Line Two |                        | City           | State | Zip Code |
| 1488 Woodtick Rd         |                          |                        | Wolcott        | CT    | 06716    |

**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>CT1661282</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>FRISBIE ELEMENTARY SCHOOL</b> | <b>NTNC</b>              | <b>446</b>             | <b>L</b>        | <b>GW</b>             |
| Local Address (where applicable)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                  | Service Connections      | Residential            | Commercial      | Industrial            |
| 24 TODD ROAD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                  | 1                        |                        |                 |                       |
| Towns Served: WOLCOTT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                  |                          |                        |                 |                       |
| Business Phone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Extension                        | Fax                      | Mobile Phone           | Emergency Phone | Email Address         |
| 203-879-9183                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                  |                          |                        |                 | agasper@wolcottps.org |
| Contact Role(s): <b>Legal Contact</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                  |                          |                        |                 |                       |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  |                          | Organization           |                 | Job Title             |
| <b>Ms. Jessica Pepoy</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                  |                          | Wolcott Public Schools |                 | Dir of Facilities     |
| Mailing Address Line One                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                  | Mailing Address Line Two |                        | City            | State                 |
| 1488 Woodtick Road                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                  | Business Office          |                        | Wolcott         | CT                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  |                          |                        | Zip Code        | 06716                 |
| Business Phone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Extension                        | Fax                      | Mobile Phone           | Emergency Phone | Email Address         |
| 203-879-8180                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                  |                          |                        |                 | jpepoy@wolcottps.org  |
| Contact Role(s): <b>Administrative Contact</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                  |                          |                        |                 |                       |
| <p><b>Please note the following:</b></p> <ol style="list-style-type: none"> <li>1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.</li> <li>2. If a Collection Period is specified, all water quality samples must be collected during the specified period.</li> <li>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.</li> </ol> |                                  |                          |                        |                 |                       |

***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 |              |
|----------------------------------|---------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT1661292                        | ALCOTT SCHOOL |  |                     | NTNC           | 638        | L          | GW             |              |
| Local Address (where applicable) |               |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 1490 WOODTICK ROAD               |               |  |                     | 1              |            |            |                |              |
| Towns Served: WOLCOTT            |               |  |                     |                |            |            |                |              |

### 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)                                             |                          | 10 routine (RT) per three years |                          |
| <i>Sampling Point (Sampling Point ID)</i>                          | <i>Monitoring Period</i> | <i>Collection Period</i>        | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points                    | 1/1/23 - 12/31/25        | 6/1-9/30                        |                          |
|                                                                    | 1/1/26 - 12/31/28        | 6/1-9/30                        |                          |
| Physical Parameters (PPS)                                          |                          | 1 routine (RT) per 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 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                 |
|                                                                    | 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 |              |
|----------------------------------|---------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT1661292                        | ALCOTT SCHOOL |  |                     | NTNC           | 638        | L          | GW             |              |
| Local Address (where applicable) |               |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 1490 WOODTICK ROAD               |               |  |                     | 1              |            |            |                |              |
| Towns Served: WOLCOTT            |               |  |                     |                |            |            |                |              |

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

Water System Facility: ENTRY POINT (WSFID: 00700)

| Analyte              | Monitoring Requirement (Summary Type) | Operating Limit      | Samples Req/Month                  |
|----------------------|---------------------------------------|----------------------|------------------------------------|
| pH                   | Entry Point pH Monitoring (PHRD)      | Minimum: 7 PH        | Daily                              |
| Start Date: 1/1/2002 |                                       | Compliance History:  | Monitoring Compliance Status:      |
|                      |                                       | Monitoring Period    | Operating Limit Compliance Status: |
|                      |                                       | 2/1/2025 - 2/28/2025 |                                    |
|                      |                                       | 3/1/2025 - 3/31/2025 |                                    |
|                      |                                       | 4/1/2025 - 4/30/2025 |                                    |
|                      |                                       | 5/1/2025 - 5/31/2025 |                                    |
|                      |                                       | 6/1/2025 - 6/30/2025 |                                    |

### Other Compliance Schedules

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

### Water System Facility and Sampling Point Inventory

| Water System Facility ID | Water System Facility | Sampling Point ID | Sampling Point Description | Status | Total Coliform Rule | Lead and Copper Rule Tier | Asbestos | Stage WQP 2 DBPR |
|--------------------------|-----------------------|-------------------|----------------------------|--------|---------------------|---------------------------|----------|------------------|
| 00600                    | DISTRIBUTION SYSTEM   | 4                 | DISTRIBUTION SYSTEM        | A      | Y                   |                           |          |                  |
|                          |                       | AS001             | NURSES ROOM                | A      | Y                   | 2                         |          |                  |
|                          |                       | AS002             | 3RD FLOOR BOYS ROOM        | A      | Y                   | 2                         |          |                  |
|                          |                       | AS003             | 3RD FLOOR GIRLS ROOM       | A      | Y                   | 2                         |          |                  |
|                          |                       | AS004             | WATER FOUNTAIN             | A      | Y                   | 2                         |          |                  |
|                          |                       | AS005             | FACULTY LOUNGE             | A      | Y                   | 2                         |          |                  |
|                          |                       | AS006             | 2ND FLOOR GIRLS ROOM       | A      |                     | 2                         |          |                  |
|                          |                       | AS007             | OLD HOME EC. ROOM          | A      |                     | 2                         |          |                  |
|                          |                       | AS008             | STORAGE TANK               | A      | Y                   | 2                         |          |                  |
|                          |                       | AS009             | 2ND FLOOR BOYS ROOM        | A      | Y                   | 2                         |          |                  |
|                          |                       | AS010             | KITCHEN                    | A      | Y                   | 2                         |          |                  |
|                          |                       | DOWNSTREAM        | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
|                          |                       | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | ENTRY POINT           | 3                 | ENTRY POINT                | A      |                     |                           |          |                  |
| 10600                    | WELL 1                | 2                 | WELL 1                     | A      |                     |                           |          |                  |
| 11449                    | TREATMENT PLANT       |                   |                            |        |                     |                           |          |                  |
| 59806                    | WELL 2                | 2                 | WELL 2                     | A      |                     |                           |          |                  |
| 61954                    | HYDROPNEUMATIC TANK   |                   |                            |        |                     |                           |          |                  |
| 61955                    | ATMOSPHERIC TANK      |                   |                            |        |                     |                           |          |                  |
| 61956                    | HYDROPNEUMATIC TANK   |                   |                            |        |                     |                           |          |                  |

### 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 |              |
|----------------------------------|---------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT1661292                        | ALCOTT SCHOOL |  |                     | NTNC           | 638        | L          | GW             |              |
| Local Address (where applicable) |               |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 1490 WOODTICK ROAD               |               |  |                     | 1              |            |            |                |              |
| Towns Served: WOLCOTT            |               |  |                     |                |            |            |                |              |

### Certified Operator Information

**Water System Facility:** TREATMENT PLANT (WSF ID: 11449)

**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>Dr. Anthony Gasper</b> |           | Wolcott Public Schools   |              | Superintendent  |                       |
| Mailing Address Line One  |           | Mailing Address Line Two |              | City            | State Zip Code        |
| 1488 Woodtick Rd          |           |                          |              | Wolcott         | CT 06716              |
| Business Phone            | Extension | Fax                      | Mobile Phone | Emergency Phone | Email Address         |
| 203-879-9183              |           |                          |              |                 | agasper@wolcottps.org |

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

|                          |           |                          |              |                   |                      |
|--------------------------|-----------|--------------------------|--------------|-------------------|----------------------|
| Name                     |           | Organization             |              | Job Title         |                      |
| <b>Ms. Jessica Pepoy</b> |           | Wolcott Public Schools   |              | Dir of Facilities |                      |
| Mailing Address Line One |           | Mailing Address Line Two |              | City              | State Zip Code       |
| 1488 Woodtick Road       |           | Business Office          |              | Wolcott           | CT 06716             |
| Business Phone           | Extension | Fax                      | Mobile Phone | Emergency Phone   | Email Address        |
| 203-879-8180             |           |                          |              |                   | jpepoy@wolcottps.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 |              |
|----------------------------------|---------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT1669043                        | WOLCOTT POLICE DEPT |  |                     | NTNC           | 33         | L          | GW             |              |
| Local Address (where applicable) |                     |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 225 NICHOLS ROAD                 |                     |  |                     | 1              |            |            |                |              |
| Towns Served: WOLCOTT            |                     |  |                     |                |            |            |                |              |

### 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 | 7/1/25 - 9/30/25         |                                      |                          |
|                                                 | 10/1/25 - 12/31/25       |                                      |                          |
| <b>Lead And Copper (PBCU)</b>                   |                          | <b>5 routine (RT) per six months</b> |                          |
| <i>Sampling Point (Sampling Point ID)</i>       | <i>Monitoring Period</i> | <i>Collection Period</i>             | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points | 1/1/25 - 6/30/25         |                                      | Complete                 |
|                                                 | 7/1/25 - 12/31/25        |                                      |                          |
| <b>Physical Parameters (PPS)</b>                |                          | <b>1 routine (RT) per 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 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)                                        | 1/1/23 - 12/31/25        |                                       | Complete                 |
|                                                        | 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 |              |
| CT1669043                        | WOLCOTT POLICE DEPT |  |             | NTNC           | 33         | L          | GW             |              |
| Local Address (where applicable) |                     |  | Service     | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 225 NICHOLS ROAD                 |                     |  | Connections | 1              |            |            |                |              |
| Towns Served: WOLCOTT            |                     |  |             |                |            |            |                |              |

### Other Compliance Schedules

| Compliance Schedule Activity        | Due Date  | Achieved Date |
|-------------------------------------|-----------|---------------|
| CCTS 3: PWS CC STUDY/RECOMMEND OCCT | 6/30/2017 |               |
| 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      |                     |                           |          |                  |
|                          |                       | DOWNSTREAM        | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
|                          |                       | MHR-1             | MAIN HALL RESTROOM         | A      | Y                   | N                         | Y        |                  |
|                          |                       | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
|                          |                       | WPD-1             | WOMEN'S LOCKER ROOM        | A      |                     | N                         |          |                  |
|                          |                       | WPD-2             | DISPATCH ROOM SINK         | A      |                     | N                         | Y        |                  |
|                          |                       | WPD-3             | CHIEF RESTROOM             | A      |                     | N                         |          |                  |
|                          |                       | WPD-4             | FIRE MARSHAL SINK          | A      |                     | N                         |          |                  |
|                          |                       | WPD-5             | FINGERPRINT ROOM           | A      |                     | N                         |          |                  |
| 00700                    | ENTRY POINT           | 3                 | ENTRY POINT                | A      |                     |                           |          |                  |
| 10702                    | WELL                  | 2                 | WELL                       | A      |                     |                           |          |                  |
| 50468                    | HYDRONEUMATIC TANK    |                   |                            |        |                     |                           |          |                  |
| 61684                    | TREATMENT PLANT       |                   |                            |        |                     |                           |          |                  |

### Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 61684)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name       | Operator Type  | Certification(s)                         | Certification Expiration |
|---------------------|----------------|------------------------------------------|--------------------------|
| OLMSTEAD, PHILIP J. | CHIEF OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS I | 6/30/2027                |
|                     |                | DISTRIBUTION SYSTEM OPERATOR - CLASS I   | 6/30/2026                |

### Contact Information

| Name                                                   |  |           |                          | Organization              |              | Job Title       |               |       |          |
|--------------------------------------------------------|--|-----------|--------------------------|---------------------------|--------------|-----------------|---------------|-------|----------|
| Mr. Edward Stephens                                    |  |           |                          | Wolcott Police Department |              | Police Chief    |               |       |          |
| Mailing Address Line One                               |  |           | Mailing Address Line Two |                           |              | City            |               | State | Zip Code |
| 225 Nichols Road                                       |  |           |                          |                           |              | Wolcott         |               | CT    | 06716    |
| Business Phone                                         |  | Extension | Fax                      |                           | Mobile Phone | Emergency Phone | Email Address |       |          |
| 203-879-7610                                           |  | 112       | 203-879-5243             |                           |              | 860-879-1414    |               |       |          |
| Contact Role(s): Administrative Contact, Legal Contact |  |           |                          |                           |              |                 |               |       |          |

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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 |              |
|----------------------------------|---------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT1669043                        | WOLCOTT POLICE DEPT |  |                     | NTNC           | 33         | L          | GW             |              |
| Local Address (where applicable) |                     |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 225 NICHOLS ROAD                 |                     |  |                     | 1              |            |            |                |              |
| Towns Served: WOLCOTT            |                     |  |                     |                |            |            |                |              |

**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 |              |
|----------------------------------|-------------------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT1661473                        | CHILDRENS VILLAGE - BOUNDLINE |  |                     | NTNC           | 130        | P          | GW             |              |
| Local Address (where applicable) |                               |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 545 BOUNDLINE ROAD               |                               |  |                     | 1              |            |            |                |              |
| Towns Served: WOLCOTT            |                               |  |                     |                |            |            |                |              |

### 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        | 1/1/24 - 12/31/26        | 6/1-9/30                              | Complete                 |
|                                                        | 1/1/25 - 12/31/27        | 6/1-9/30                              |                          |
|                                                        | 1/1/28 - 12/31/30        | 6/1-9/30                              |                          |
| <b>Physical Parameters (PPS)</b>                       |                          | <b>1 routine (RT) per quarter</b>     |                          |
| <i>Sampling Point (Sampling Point ID)</i>              | <i>Monitoring Period</i> | <i>Collection Period</i>              | <i>Compliance Status</i> |
| Select from Inventory of Active Sampling Points        | 1/1/25 - 3/31/25         |                                       | Complete                 |
|                                                        | 4/1/25 - 6/30/25         |                                       | Complete                 |
|                                                        | 7/1/25 - 9/30/25         |                                       |                          |
|                                                        | 10/1/25 - 12/31/25       |                                       |                          |
| Water System Facility: ENTRY POINT (WSF ID: 00700)     |                          |                                       |                          |
| <b>Inorganic Chemicals (IOCS)</b>                      |                          | <b>1 routine (RT) per three years</b> |                          |
| <i>Sampling Point (Sampling Point ID)</i>              | <i>Monitoring Period</i> | <i>Collection Period</i>              | <i>Compliance Status</i> |
| ENTRY POINT (3)                                        | 1/1/24 - 12/31/26        |                                       | Complete                 |
|                                                        | 1/1/27 - 12/31/29        |                                       |                          |
| <b>Nitrate And Nitrite (NOX)</b>                       |                          | <b>1 routine (RT) per year</b>        |                          |
| <i>Sampling Point (Sampling Point ID)</i>              | <i>Monitoring Period</i> | <i>Collection Period</i>              | <i>Compliance Status</i> |
| ENTRY POINT (3)                                        | 1/1/24 - 12/31/24        |                                       | Complete                 |
|                                                        | 1/1/25 - 12/31/25        |                                       | Complete                 |
|                                                        | 1/1/26 - 12/31/26        |                                       |                          |
| <b>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b> |                          | <b>1 routine (RT) per three years</b> |                          |
| <i>Sampling Point (Sampling Point ID)</i>              | <i>Monitoring Period</i> | <i>Collection Period</i>              | <i>Compliance Status</i> |
| ENTRY POINT (3)                                        | 1/1/23 - 12/31/25        |                                       | Complete                 |
|                                                        | 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> |

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 |              |
| CT1661473                        | CHILDRENS VILLAGE - BOUNDLINE |  |             | NTNC           | 130        | P          | GW             |              |
| Local Address (where applicable) |                               |  | Service     | Residential    | Commercial | Industrial | Combined       | Agricultural |
| 545 BOUNDLINE ROAD               |                               |  | Connections | 1              |            |            |                |              |
| Towns Served: WOLCOTT            |                               |  |             |                |            |            |                |              |

### Monitoring Requirements

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

| Organic Chemicals (VOCS)           |                   | 1 routine (RT) per three years |                   |
|------------------------------------|-------------------|--------------------------------|-------------------|
| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period              | Compliance Status |
| ENTRY POINT (3)                    | 1/1/24 - 12/31/26 |                                | Complete          |
|                                    | 1/1/27 - 12/31/29 |                                |                   |

### Other Compliance Schedules

| Compliance Schedule Activity            | Due Date   | Achieved Date |
|-----------------------------------------|------------|---------------|
| SUBMIT LEAD CONSUMER NOTICE CERTIFICATE | 12/29/2010 |               |
| SUBMIT LEAD SERVICE LINE INVENTORY      | 10/16/2024 |               |
| COMPLETE INITIAL LSL INVENTORY          | 10/16/2024 |               |
| CROSS CONNECTION EXEMPTION              | 3/1/2029   |               |

### 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                   |                           |          |                  |
|                          |                       | CV0001            | KITCHEN SINK               | A      | Y                   | 2                         |          |                  |
|                          |                       | CV0002            | BATHROOM ROOM 2            | A      | Y                   | 2                         |          |                  |
|                          |                       | CV0003            | ROOM 3 - 1ST DIST          | A      | Y                   | 2                         |          |                  |
|                          |                       | CV0004            | PRESCHOOL                  | A      | Y                   | 2                         |          |                  |
|                          |                       | CV0005            | ROOM 2                     | A      | Y                   | 2                         |          |                  |
|                          |                       | DOWNSTREAM        | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
|                          |                       | UPSTREAM          | WITHIN 5 SERVICE CON       | A      |                     |                           |          |                  |
| 00700                    | ENTRY POINT           | 3                 | ENTRY POINT                | A      |                     |                           |          |                  |
| 10797                    | WELL 1                | 2                 | WELL 1                     | A      |                     |                           |          |                  |
| 48753                    | TREATMENT PLANT       |                   |                            |        |                     |                           |          |                  |

### Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 48753)

Facility Classification: CLASS 1 TREATMENT PLANT

| Operator Name        | Operator Type     | Certification(s)                         | Certification Expiration |
|----------------------|-------------------|------------------------------------------|--------------------------|
| WEID, JEREMIAH J.    | CHIEF OPERATOR    | DISTRIBUTION SYSTEM OPERATOR - CLASS I   | 6/30/2028                |
|                      |                   | WATER TREATMENT PLANT OPERATOR - CLASS I | 12/31/2027               |
| MCCORMACK, ROBERT T. | ASSIGNED OPERATOR | WATER TREATMENT PLANT OPERATOR - CLASS I | 9/30/2025                |

### Contact Information

|                          |           |                          |              |                 |                     |          |
|--------------------------|-----------|--------------------------|--------------|-----------------|---------------------|----------|
| Name                     |           | Organization             |              | Job Title       |                     |          |
| Ms. Terri Masters        |           | Children's Village       |              | Owner, Director |                     |          |
| Mailing Address Line One |           | Mailing Address Line Two |              | City            | State               | Zip Code |
| 545 Boundline Road       |           |                          |              | Wolcott         | CT                  | 06716    |
| Business Phone           | Extension | Fax                      | Mobile Phone | Emergency Phone | Email Address       |          |
| 203-879-5300             |           | 203-879-7109             |              |                 | terrimasters@me.com |          |

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                      |                           |              |                 |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------|--------------|-----------------|-----------------|
| PWS ID                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | PWS Name                             | Classification            | Population   | Owner Type      | Primary Source  |
| <b>CT1661473</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>CHILDRENS VILLAGE - BOUNDLINE</b> | <b>NTNC</b>               | <b>130</b>   | <b>P</b>        | <b>GW</b>       |
| Local Address (where applicable)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                      | Service Connections       | Residential  | Commercial      | Industrial      |
| 545 BOUNDLINE ROAD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                      | 1                         |              |                 |                 |
| Towns Served: WOLCOTT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                      |                           |              |                 |                 |
| Contact Role(s): <b>Administrative Contact, Legal Contact</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                      |                           |              |                 |                 |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                      | Organization              |              | Job Title       |                 |
| <b>Mr. Day Rosenberg</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                      | Children's Village School |              | Owner           |                 |
| Mailing Address Line One                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                      | Mailing Address Line Two  |              | City            | State           |
| 545 Bound Line Road                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                      |                           |              | Wolcott         | CT              |
| Business Phone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Extension                            | Fax                       | Mobile Phone | Emergency Phone | Email Address   |
| 203-879-5300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                      |                           |              | 917-273-2967    | dayo5@yahoo.com |
| Contact Role(s): <b>Owner</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                      |                           |              |                 |                 |
| <p><b>Please note the following:</b></p> <ol style="list-style-type: none"> <li>1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.</li> <li>2. If a Collection Period is specified, all water quality samples must be collected during the specified period.</li> <li>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.</li> </ol> |                                      |                           |              |                 |                 |

***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 |              |
|----------------------------------|------------------|--|---------------------|----------------|------------|------------|----------------|--------------|
| CT1660584                        | 464 WOLCOTT ROAD |  |                     | NTNC           | 40         | P          | GW             |              |
| Local Address (where applicable) |                  |  | Service Connections | Residential    | Commercial | Industrial | Combined       | Agricultural |
|                                  |                  |  |                     |                |            |            | 1              |              |

Towns Served: WOLCOTT

### 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                    | 1/1/23 - 12/31/25        | 6/1-9/30                       |                          |
|                                                                    | 1/1/26 - 12/31/28        | 6/1-9/30                       |                          |
| Physical Parameters (PPS)                                          |                          | 1 routine (RT) per 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)                 |                          |                                |                          |
| Chloride (1017)                                                    |                          | 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       |                                |                          |
| 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        |                                | Complete                 |
|                                                                    | 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 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        |                                |                          |
|                                                                    |                          |                                |                          |

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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 |
| CT1660584                        | 464 WOLCOTT ROAD | NTNC                | 40          | P          | GW             |
| Local Address (where applicable) |                  | Service Connections | Residential | Commercial | Industrial     |
|                                  |                  |                     |             |            | Combined       |
|                                  |                  |                     |             | 1          | Agricultural   |

Towns Served: WOLCOTT

Monitoring Requirements

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

Organic Chemicals (VOCS)

1 routine (RT) per year

| Sampling Point (Sampling Point ID) | Monitoring Period | Collection Period | Compliance Status |
|------------------------------------|-------------------|-------------------|-------------------|
| ENTRY POINT (3)                    | 1/1/24 - 12/31/24 |                   | Complete          |
|                                    | 1/1/25 - 12/31/25 |                   | Complete          |
|                                    | 1/1/26 - 12/31/26 |                   |                   |

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                   |                           |          |                  |
|                          |                       |                   | LL ADV DERM                | LOW LEVEL ADV DERM   | A                   | Y                         | 3        |                  |
|                          |                       |                   | LL BREAK                   | LOW LEVEL BREAK RM   | A                   | Y                         | 3        |                  |
|                          |                       |                   | LL MENS                    | LOWER LEVEL MENS RM  | A                   | Y                         | 2        |                  |
|                          |                       |                   | LL PSI SINK                | LOW LEVEL PSI SINK   | A                   | Y                         | 3        |                  |
|                          |                       |                   | LL WOMENS                  | LOW LEVEL WOMENS RM  | A                   | Y                         | 2        |                  |
|                          |                       |                   | UL BREAK                   | UPPER LEVEL BREAK RM | A                   | Y                         | 3        |                  |
|                          |                       |                   | UL DRMULLEN                | UPPER LEVEL DRMULLEN | A                   | Y                         | 3        |                  |
|                          |                       |                   | UL MENS                    | UPPER LEVEL MENS RM  | A                   | Y                         | 2        |                  |
|                          |                       |                   | UL OPER #2                 | UL OPERATING #2      | A                   | Y                         | 3        |                  |
|                          |                       |                   | UL VALORTHO                | UL VALLEY ORTHO SINK | A                   | Y                         | 3        |                  |
|                          |                       |                   | UL WOMENS                  | UPPER LEVEL WOMENS R | A                   | Y                         | 2        |                  |
|                          |                       |                   | UPSTREAM                   | WITHIN 5 SERVICE CON | A                   |                           |          |                  |
|                          |                       | 00700             | ENTRY POINT                | 3                    | ENTRY POINT         | A                         |          |                  |
| 1732                     | TREATMENT PLANT       |                   |                            |                      |                     |                           |          |                  |
| 48082                    | WELL                  | 2                 | WELL                       | A                    |                     |                           |          |                  |

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 1732)

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 |
| Mr. Ali Bigi             | 458 Wolcot LLC           |           |
| Mailing Address Line One | Mailing Address Line Two | City      |
|                          |                          | State     |
|                          |                          | Zip Code  |

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Schedule Generation Date: 7/9/2025

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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>CT1660584</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>464 WOLCOTT ROAD</b> | <b>NTNC</b>         | <b>40</b>    | <b>P</b>        | <b>GW</b>                    |
| Local Address (where applicable)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                         | Service Connections | Residential  | Commercial      | Industrial                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                         |                     |              |                 | Combined                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                         |                     |              |                 | <b>1</b>                     |
| Towns Served: WOLCOTT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                         |                     |              |                 |                              |
| 144 Governors Hill Road                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                         | Oxford              |              | CT              | 06478                        |
| Business Phone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Extension               | Fax                 | Mobile Phone | Emergency Phone | Email Address                |
| 347-225-6599                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                         |                     |              |                 | ari@eastcoastgrouprealty.com |
| Contact Role(s): <b>Administrative Contact, Legal Contact, Owner</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                         |                     |              |                 |                              |
| <b>Please note the following:</b> <ol style="list-style-type: none"> <li>1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.</li> <li>2. If a Collection Period is specified, all water quality samples must be collected during the specified period.</li> <li>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.</li> </ol> |                         |                     |              |                 |                              |

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

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

**End of schedule**