

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1080112	CHRIST EPISCOPAL CHURCH			NTNC	34	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
470 QUAKER FARMS RD					1			
Towns Served: OXFORD								

Monitoring Requirements

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

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

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

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PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1080112	CHRIST EPISCOPAL CHURCH			NTNC	34	P	GW	
Local Address (where applicable)			Service	Residential	Commercial	Industrial	Combined	Agricultural
470 QUAKER FARMS RD			Connections		1			
Towns Served: OXFORD								

Monitoring Requirements

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

Nitrate And Nitrite (NOX) 1 routine (RT) per year

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

Pesticides, Herbicides and Polychlorinated Biphenyls (PCBs) (SOCS) 1 routine (RT) per three years

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		

Organic Chemicals (VOCS) 1 routine (RT) per year

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

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024	
COMPLETE INITIAL LSL INVENTORY	10/16/2024	
CROSS CONNECTION EXEMPTION	3/1/2030	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		CEC001	RR MEN RM MAIN FLR L	A	Y	2	Y	
		CEC002	RR MEN RM MAIN FLR R	A	Y	2	Y	
		CEC003	RR LADY RM MN FLR L	A	Y	2	Y	
		CEC004	RR LADY RM MN FLR R	A	Y	2	Y	
		CEC005	RR CHURCH OFFICE	A	Y	2	Y	
		CEC006	RR PRIEST OFFICE	A	Y	2	Y	
		CEC007	KIT SNK TRP LWR LEVL	A	Y	2	Y	
		CEC008	KIT SNK TRP LWR LEVR	A	Y	2	Y	
		CEC009	KIT SNK SING LWR LEV	A	Y	2	Y	
		CEC010	KIT SNK HAND LWR LEV	A	Y	2	Y	
		CEC011	RR UNISEX	A	Y	2	Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10813	WELL 1	2	WELL 1	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	
CT1080112	CHRIST EPISCOPAL CHURCH			NTNC	34	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
470 QUAKER FARMS RD					1			
Towns Served: OXFORD								

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
GRANT, SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2026
PETITTI, ANDY	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2028
		WATER TREATMENT PLANT OPERATOR - CLASS I	12/31/2025

Contact Information

Name				Organization			Job Title		
Mr. Michael Evancho				Christ Church Quaker Farms			Prop Mgr/Committee		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
470 Quaker Farms Road						Oxford		CT	06478
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
203-305-5905							FIRETECH314@YAHOO.COM		

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

Please note the following:

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

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

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

End of schedule

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1085013	144 OXFORD ROAD, LLC			NTNC	25	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
144 OXFORD ROAD					13			
Towns Served: OXFORD								

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

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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	
CT1085013	144 OXFORD ROAD, LLC			NTNC	25	P	GW	
Local Address (where applicable)			Service	Residential	Commercial	Industrial	Combined	Agricultural
144 OXFORD ROAD			Connections		13			
Towns Served: OXFORD								

Monitoring Requirements

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

Organic Chemicals (VOCS) **1 routine (RT) per three years**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/27 - 12/31/29		

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION SURVEY REPORT	3/1/2025	

Public Notification Requirements

<i>Violation/Situation</i>	<i>Compliance Period</i>	<i>Notice Tier</i>	<i>Public Notification</i>		<i>PN Certification</i>	
			<i>Required</i>	<i>Performed</i>	<i>Due to DPH</i>	<i>Received</i>
Total Coliform M&R Violation	7/1/16 - 9/30/16	3	2/10/2018		2/20/2018	

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSSTREAM	WITHIN 5 SERVICE CON	A				
		TK001	UNIT 1-A REST RM SNK	A	Y	2	Y	
		TK002	UNIT 1-B REST RM SNK	A	Y	2	Y	
		TK003	UNIT 1-C REST RM SNK	A	Y	2	Y	
		TK004	UNIT 1-D REST RM SNK	A	Y	2	Y	
		TK005	UNIT 1-D KIT SNK	A	Y	2	Y	
		TK006	UNIT E-1 REST RM SNK	A	Y	2	Y	
		TK007	UNIT E-2 REST RM SNK	A	Y	2	Y	
		TK008	UNIT 1-F REST RM SNK	A	Y	2	Y	
		TK009	UNIT 1-F RT KIT SNK	A	Y	2	Y	
		TK010	UNIT 1-F LFT KI SNK	A	Y	2	Y	
		TK011	UNIT 1-F RT WSH SNK	A	Y	2	Y	
		TK012	UNIT 1-F LFT WSH SNK	A	Y	2	Y	
		TK013	UNIT 1-G KIT SNK	A	Y	2	Y	
		TK014	UNIT 1-G MENS RM	A	Y	2	Y	
		TK015	UNIT 1-G LADIES RM	A	Y	2		
		TK016	UNIT 1-H FRONT SNK	A	Y	2		
		TK017	UNIT 1-H REAR SNK	A	Y	2		
		TK018	UNIT 1-H SINGLE SNK	A	Y	2		
		TK019	UNIT 1-H HAND SNK	A	Y	2		
		TK020	UNIT 1-H TRPL SNK	A	Y	2		
		TK021	UNIT 1-H SLOP SNK	A	Y	2		
		TK022	UNIT 2-A REST RM SNK	A	Y	2		
		TK023	UNIT 2-B REST RM SNK	A	Y	2		

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Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1085013	144 OXFORD ROAD, LLC			NTNC	25	P	GW	
Local Address (where applicable)			Service	Residential	Commercial	Industrial	Combined	Agricultural
144 OXFORD ROAD			Connections		13			
Towns Served: OXFORD								

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
		TK024	UNIT 2-C REST RM SNK	A	Y	2		
		TK025	UNIT 2-D REST RM SNK	A	Y	2		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10504	WELL #1	2	WELL #1	A				
10505	WELL #2	2	WELL #2	A				
55057	WELL #3	2	WELL #3	A				
57411	TREATMENT PLANT							

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 57411)

Facility Classification: CLASS 1 TREATMENT PLANT

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

Contact Information

Name				Organization			Job Title		
Mr. Thomas Kelleher				144 Oxford Road LLC			Member		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
1636 Dixwell Avenue						Hamden		CT	06514
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
203-281-5521		308				203-248-8313			

Contact Role(s): Legal Contact

Name				Organization			Job Title		
Mr. Edward J. Kelleher				144 Oxford Road, LLC					
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
1636 Dixwell Avenue						Hamden		CT	06514
Business Phone		Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-281-5521		307	203-288-5222		203-494-7344	ed@tommyk.com			

Contact Role(s): Administrative Contact

Name				Organization			Job Title		
144 Oxford Road LLC									
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
1636 Dixwell Ave						Hamden		CT	06514
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				

Contact Role(s): Owner

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1085013	144 OXFORD ROAD, LLC			NTNC	25	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
144 OXFORD ROAD					13			
Towns Served: OXFORD								

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.

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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	
CT1085033	PLEASANT VALLEY SHOPPING PLAZA			NTNC	89	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
248 OXFORD ROAD				15				
Towns Served: OXFORD								

Monitoring Requirements

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

Chlorine Residual (1012)		1 routine (RT) per month	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	2/1/25 - 2/28/25		Complete
	3/1/25 - 3/31/25		Complete
	4/1/25 - 4/30/25		Complete
	5/1/25 - 5/31/25		Complete
	6/1/25 - 6/30/25		Complete
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 Haloacetic Acids (2456)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
UNIT 1-2 ROSES SINK (PVSC007)	1/1/24 - 12/31/24	7/1-7/30	Complete
	1/1/25 - 12/31/25	7/1-7/30	
	1/1/26 - 12/31/26	7/1-7/30	
Total Trihalomethanes (2950)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
PLAYSCHOOL KITCHEN (PVSC004)	1/1/24 - 12/31/24	7/1-7/31	Complete
	1/1/25 - 12/31/25	7/1-7/31	
	1/1/26 - 12/31/26	7/1-7/31	
Total Coliform (3100)		1 routine (RT) per month	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	2/1/25 - 2/28/25		Complete
	3/1/25 - 3/31/25		Complete
	4/1/25 - 4/30/25		Complete
	5/1/25 - 5/31/25		Complete
	6/1/25 - 6/30/25		Complete
	7/1/25 - 7/31/25		
	8/1/25 - 8/31/25		
	9/1/25 - 9/30/25		
	10/1/25 - 10/31/25		
	11/1/25 - 11/30/25		
	12/1/25 - 12/31/25		
Lead And Copper (PBCU)		5 routine (RT) per six months	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/25 - 6/30/25		Complete
	7/1/25 - 12/31/25		
Physical Parameters (PPS)		1 routine (RT) per month	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	2/1/25 - 2/28/25		Complete

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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
CT1085033	PLEASANT VALLEY SHOPPING PLAZA			NTNC	89	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
248 OXFORD ROAD			15				
Towns Served: OXFORD							

Monitoring Requirements

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

Physical Parameters (PPS)		1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
	3/1/25 - 3/31/25		Complete	
	4/1/25 - 4/30/25		Complete	
	5/1/25 - 5/31/25		Complete	
	6/1/25 - 6/30/25		Complete	
	7/1/25 - 7/31/25			
	8/1/25 - 8/31/25			
	9/1/25 - 9/30/25			
	10/1/25 - 10/31/25			
	11/1/25 - 11/30/25			
	12/1/25 - 12/31/25			

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

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

Monthly Water System Facility (WSF) Level Monitoring Requirements

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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	
CT1085033	PLEASANT VALLEY SHOPPING PLAZA			NTNC	89	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
248 OXFORD ROAD				15				
Towns Served: OXFORD								

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point RDC (EPRD)	Minimum: 0.5 MG/L	Continuous
Start Date: 4/1/2018			
	Compliance History: Monitoring Period	Operating Limit Compliance Status:	Monitoring Compliance Status:
	2/1/2025 - 2/28/2025	Y	
	3/1/2025 - 3/31/2025	Y	
	4/1/2025 - 4/30/2025	Y	
	5/1/2025 - 5/31/2025	Y	
	6/1/2025 - 6/30/2025		

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	4
Start Date: 1/1/2004			
	Compliance History: Monitoring Period	Operating Limit Compliance Status:	Monitoring 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
SUBMIT LEAD SERVICE LINE INVENTORY	10/16/2024	
COMPLETE INITIAL LSL INVENTORY	10/16/2024	
CROSS CONNECTION SURVEY REPORT	3/1/2026	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		PVSC001	UNIT 9 NONNAS KS	A	Y	2	Y	
		PVSC002	UNIT 8 NU LOOK SINK	A	Y	2	Y	
		PVSC003	PLAYSHOOL STAFF BR	A	Y	2	Y	
		PVSC004	PLAYSCHOOL KITCHEN	A	Y	2	Y	Y
		PVSC005	UNIT 13 OXFORD PC	A	Y	2	Y	
		PVSC006	UNIT 4 OXFORD DENTAL	A	Y	2	Y	
		PVSC007	UNIT 1-2 ROSES SINK	A	Y	2	Y	Y
		PVSC008	UNIT 6-7 BAR SINK	A	Y	2	Y	
		PVSC009	UNIT 11 CUSTOM BLD	A	Y	2	Y	
		PVSC010	UNIT 14 KITCHEN SPLY	A		2	Y	
		PVSC011	UNIT 12 MTG CO SINK	A	Y	2	Y	
		PVSC012	THE OFFICE BR	A	Y	2	Y	

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1085033	PLEASANT VALLEY SHOPPING PLAZA			NTNC	89	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
248 OXFORD ROAD				15				
Towns Served: OXFORD								

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
		PVSC013	CPM KITCHEN SINK	A	Y	2	Y	
		PVSC014	KINDER CARE TOD SINK	A	Y	2	Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10506	WELL #2	2	WELL #2	A				
10507	WELL #1	2	WELL #1	A				
10513	COMBINED WELL #1 AND #2	2	COMBINED WELL #1 AND	A				
48695	PLEASANT VALLEY TREATMENT STATION							

Certified Operator Information

Water System Facility: PLEASANT VALLEY TREATMENT STATION (WSF ID: 48695)

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
GRANT, SHANE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2026
PETITTI, ANDY	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2028
		WATER TREATMENT PLANT OPERATOR - CLASS I	12/31/2025

Contact Information

Name		Organization		Job Title		
Dr. Terry Blake		T&J Realty		Owner		
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
3333 Main St				Stratford	CT	06614
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-258-2997					terryblake723@aol.com	

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

Please note the following:

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

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	
CT1085061	AQUARION-OXFORD TOWNE CENTER			NTNC	25	P	GWP	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
300 OXFORD ROAD, OXFORD				150	80			
Towns Served: OXFORD								

Monitoring Requirements

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

Asbestos (1094)		1 routine (RT) per nine years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/25		
	1/1/26 - 12/31/34		
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		
Disinfectant Byproducts - TTHM & HAA5 (DBP)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
OTC 357 OXFORD RD SS (00572)	1/1/24 - 12/31/24	9/1-9/30	Complete
	1/1/25 - 12/31/25	9/1-9/30	
	1/1/26 - 12/31/26	9/1-9/30	
Lead And Copper (PBCU)		5 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/24 - 12/31/24	6/1-9/30	Complete
	1/1/25 - 12/31/25	6/1-9/30	
	1/1/26 - 12/31/26	6/1-9/30	
Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/25 - 3/31/25		Complete
	4/1/25 - 6/30/25		Complete
	7/1/25 - 9/30/25		
	10/1/25 - 12/31/25		

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CCTS 7: DWS TO SPECIFY OPTIMAL WQPS	6/30/2019	
CROSS CONNECTION SURVEY REPORT	3/1/2025	

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	00004	OXFORD TOWNE CTR SS	A	Y			
		00572	OTC 357 OXFORD RD SS	A	Y		Y	Y
		00573	PRICE CHOPPER MARKET	A	Y			
		4	DISTRIBUTION SYSTEM	A				
		PB8053	OTC 170 OXFORD RD	A		N		

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type		Primary Source	
CT1085061	AQUARION-OXFORD TOWNE CENTER			NTNC	25	P		GWP	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
300 OXFORD ROAD, OXFORD				150	80				
Towns Served: OXFORD									

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
		PB8081	OTC 150 MAIN ST	A		N		
		PB8084	OTC 154 MAIN ST	A		N		
		PB8085	OTC 160 MAIN ST	A		N		
		PB8086	OTC 304 OXFORD RD	A		N		
		PB8087	OTC 274 OXFORD RD	A		N		
		PB8088	OTC 280 OXFORD RD	A		N		
		PB8089	OTC 159 MAIN ST	A		N		
60122	INTERCONNECTION - HERITAGE WATER CO.	00571	OXFORD TOWN CENTER M	A	Y			

Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
HORN, ROBERT	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2028
		WATER TREATMENT PLANT OPERATOR - CLASS III	6/30/2025

Contact Information

Name				Organization		Job Title			
Mr. John P. Walsh				Aquarion Water Company		Vice President			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
835 Main Street			Mail Stop 700			Bridgeport		CT	06604
Business Phone		Extension	Fax	Mobile Phone		Emergency Phone	Email Address		
203-337-5852			203-337-5938			781-413-6175	jwalsh@aquarionwater.com		

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

Name				Organization		Job Title		
Mr. Robert J. Ulrich				Aquarion Water Company of Ct		Vp-Supply & Utility		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
505 Huntington St.						Shelton	CT	06484
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address	
203-926-4320			203-929-5297			203-395-3205	rulrich@aquarionwater.com	

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

Please note the following:

- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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End of schedule

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