

# 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>CT0250233</b>	<b>CURTIS HOMESTEAD VILLAGE</b>	NTNC	94	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
908 SOUTH MERIDEN ROAD			1				
Towns Served: CHESHIRE							

### 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	10/1/24 - 12/31/24		Complete		
	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	1/1/22 - 12/31/24	6/1-9/30	Complete		
	1/1/25 - 12/31/27	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per quarter</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	10/1/24 - 12/31/24		Complete		
	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
<b>Water System Facility: ENTRY POINT (WSF ID: 00700)</b>					
<b>Inorganic Chemicals (IOCS)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/22 - 12/31/24		Complete		
	1/1/25 - 12/31/27				
<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				
	1/1/26 - 12/31/28				
<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>		<b>1 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
ENTRY POINT (3)	1/1/23 - 12/31/25				
	1/1/26 - 12/31/28				

*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>CT0250233</b>	<b>CURTIS HOMESTEAD VILLAGE</b>	NTNC	94	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
908 SOUTH MERIDEN ROAD			1				
Towns Served: CHESHIRE							

## Monitoring Requirements

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

Organic Chemicals (VOCS)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		
	1/1/26 - 12/31/26		

## Other Compliance Schedules

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

## Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		SINK #1	W/ROOM BY MP OFFICE	A	Y			
		SINK #2	ALL ACCESS BY LG OFF	A	Y			
		SINK #3	SINK IN MW AREA	A	Y			
		SINK #4	2ND FL KITCHEN SINK	A	Y			
		SINK #6	MENS ROOM 2ND FLOOR	A	Y			
		SINK #7	LADIES RM 2ND FLOOR	A	Y			
		SINK #8	MENS ROOM 1ST FLOOR	A	Y			
		SINK1	W/ROOM BY MP OFFICE	A	Y	N	Y	Y
		SINK2	ALL ACCESS LG OFFICE	A	Y	N	Y	Y
		SINK3	SINK IN MW AREA	A	Y	N	Y	Y
		SINK4	2ND FL KITCHEN SINK	A	Y	N	Y	Y
		SINK5	1ST FL KITCHEN SINK	A	Y	N	Y	Y
		SINK6	MENS RM 2ND FLOOR	A	Y	N	Y	Y
		SINK7	LADIES RM 2ND FLOOR	A	Y	N	Y	Y
		SINK8	MENS RM 1ST FLOOR	A	Y	N	Y	Y
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10144	WELL	2	WELL	A				

## Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

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

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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>CT0250233</b>	<b>CURTIS HOMESTEAD VILLAGE</b>	NTNC	94	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
908 SOUTH MERIDEN ROAD			1				
Towns Served: CHESHIRE							

## Contact Information

Name		Organization			Job Title			
<b>Mr. Matthew E. Wemple</b>		Curtis Homestead Village/Neis			President			
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
908 South Meriden Road						Cheshire	CT	06410
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-649-1050		203-272-5267		860-681-1584	mewemple@neis1.com			
Contact Role(s): <b>Administrative Contact, Legal Contact</b>								

**Please note the following:**

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

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

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

**End of schedule**

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0259053</b>	<b>CHESHIRE UNITED METHODIST</b>	NTNC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
185 ACADEMY ROAD						1	

Towns Served: CHESHIRE

### 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	10/1/24 - 12/31/24		Complete		
	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	1/1/23 - 12/31/25	6/1-9/30			
	1/1/26 - 12/31/28	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	10/1/24 - 12/31/24		Complete		
	1/1/25 - 3/31/25		Complete		
	4/1/25 - 6/30/25		Complete		
	7/1/25 - 9/30/25				
	10/1/25 - 12/31/25				
Water System Facility: <b>ENTRY POINT (WSF ID: 00700)</b>					
<b>Chloride (1017)</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>		
ENTRY POINT (3)	10/1/24 - 12/31/24		Complete		
	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>Nitrate (1040)</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>		
ENTRY POINT (3)	10/1/24 - 12/31/24		Complete		
	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>Nitrite (1041)</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				

*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>CT0259053</b>	<b>CHESHIRE UNITED METHODIST</b>	NTNC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
185 ACADEMY ROAD						1	
Towns Served: CHESHIRE							

### Monitoring Requirements

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

<b>Nitrite (1041)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/26 - 12/31/26		
<b>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>Pesticides, Herbicides and PCBs-Phase II (SOC2)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
<b>Pesticides, Herbicides and PCBs-Phase V (SOC5)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		

### Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
COMPLETE INITIAL LSL INVENTORY	10/16/2024	
CROSS CONNECTION SURVEY REPORT	3/1/2027	

### 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	11	KITCHEN	P	Y			
		12	RESTROOM1	P				
		13	RESTROOM2	P				
		14	RESTROOM3	P				
		15	RESTROOM4	P	Y			
		16	RESTROOM5	P				
		17	OUTDOORFAUCET	P				
		4	DISTRIBUTION SYSTEM	A	Y			
			DOWNSTREAM WITHIN 5 SERVICE CON		A			
	UPSTREAM WITHIN 5 SERVICE CON		A					

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0259053</b>	<b>CHESHIRE UNITED METHODIST</b>	NTNC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
185 ACADEMY ROAD						1	
Towns Served: CHESHIRE							

## 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
00700	ENTRY POINT	3	ENTRY POINT	A				
10938	WELL #1	2	WELL #1	A				
58942	TREATMENT PLANT							

## Certified Operator Information

Water System Facility: <b>TREATMENT PLANT (WSF ID: 58942)</b>			
Facility Classification: CLASS 1 TREATMENT PLANT			
Operator Name	Operator Type	Certification(s)	Certification Expiration
SIMA, III, JOHN F.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2026 6/30/2026

## Contact Information

Name		Organization			Job Title		
<b>Mr. Kenneth Kieffer</b>		Cheshire United Methodist Chur			Pastor		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
205 Academy Road					Cheshire	CT	06410
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-272-4626				203-699-6322	office@cheshireumc.com		

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

Name		Organization			Job Title		
<b>Mr. William Mariano</b>		Cheshire United Methodist Chur			Administrator		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
205 Academy Rd					Cheshire	CT	06410
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-272-4626					office@cheshireumc.com		

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.

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**End of schedule**