

# 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>CT0680011</b>	<b>AQUARION-KENT</b>	C	817	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
						360	

Towns Served: KENT

### Monitoring Requirements

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

<b>Chlorine Residual (1012)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 12/31/24		Complete		
	1/1/25 - 1/31/25		Complete		
	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
<b>Asbestos (1094)</b>		<b>2 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/22 - 12/31/30				
<b>Total Haloacetic Acids (2456)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
59 NORTH MAIN ST. SS (02816)	1/1/24 - 12/31/24	9/8-9/14	Complete		
	1/1/25 - 12/31/25	9/8-9/14			
	1/1/26 - 12/31/26	9/8-9/14			
<b>Total Trihalomethanes (2950)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
PATCO ROUTE 7 (02813)	1/1/24 - 12/31/24	9/8-9/14	Complete		
	1/1/25 - 12/31/25	9/8-9/14			
	1/1/26 - 12/31/26	9/8-9/14			
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 12/31/24		Complete		
	1/1/25 - 1/31/25		Complete		
	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25				
	5/1/25 - 5/31/25				
	6/1/25 - 6/30/25				
	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				
<b>Lead And Copper (PBCU)</b>		<b>10 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/22 - 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 month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 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.*

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## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0680011</b>	<b>AQUARION-KENT</b>	C	817	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
						360	

Towns Served: KENT

### Monitoring Requirements

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

Physical Parameters (PPS)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/25 - 1/31/25		Complete
	2/1/25 - 2/28/25		Complete
	3/1/25 - 3/31/25		Complete
	4/1/25 - 4/30/25		
	5/1/25 - 5/31/25		
	6/1/25 - 6/30/25		
	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		

Water System Facility: **WELL #2 TP ENTRY POINT (WSF ID: 00700)**

Net Gross Alpha (4000)	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>
EP - WELL #2 TP (3)	1/1/17 - 12/31/25		Complete
Uranium (4006)	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>
EP - WELL #2 TP (3)	1/1/17 - 12/31/25		Complete
Combined Radium-226/228 (4010)	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>
EP - WELL #2 TP (3)	1/1/17 - 12/31/25		Complete
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>
EP - WELL #2 TP (3)	1/1/22 - 12/31/24		Complete
	1/1/25 - 12/31/27		
Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - WELL #2 TP (3)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
Radionuclides - Gross Alpha, Combined Radium & Uranium (RADA)	1 routine (RT) per six years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - WELL #2 TP (3)	1/1/26 - 12/31/31		
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>
EP - WELL #2 TP (3)	1/1/22 - 12/31/24		Complete
	1/1/25 - 12/31/27		

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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		
CT0680011	AQUARION-KENT	C	817	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
						360	

Towns Served: KENT

### Monitoring Requirements

Water System Facility: WELL #2 TP ENTRY POINT (WSF ID: 00700)

**Pesticides, Herbicides and PCBs-Phase V (SOC5)** **1 routine (RT) per three years**

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELL #2 TP (3)	1/1/22 - 12/31/24		Complete
	1/1/25 - 12/31/27		

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

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELL #2 TP (3)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		

Water System Facility: WELL #3 TP ENTRY POINT (WSF ID: 00701)

**Inorganic Chemicals (IOCS)** **1 routine (RT) per three years**

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELL #3 TP (3)	1/1/22 - 12/31/24		Complete
	1/1/25 - 12/31/27		

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

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELL #3 TP (3)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		

**Radionuclides - Gross Alpha, Combined Radium & Uranium (RADA)** **1 routine (RT) per six years**

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELL #3 TP (3)	1/1/20 - 12/31/25		Complete
	1/1/26 - 12/31/31		

**Pesticides, Herbicides and PCBs-Phase II (SOC2)** **1 routine (RT) per three years**

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELL #3 TP (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		

**Pesticides, Herbicides and PCBs-Phase V (SOC5)** **1 routine (RT) per three years**

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELL #3 TP (3)	1/1/23 - 12/31/25		Complete
	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
EP - WELL #3 TP (3)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		

Water System Facility: WELL #2 (WSF ID: 990)

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

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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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>CT0680011</b>	<b>AQUARION-KENT</b>	C	817	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
						360	

Towns Served: KENT

## Monitoring Requirements

Water System Facility: **WELL #2 (WSF ID: 990)**

E. Coli (3014)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL #2 (2)	10/1/24 - 12/31/24		Complete
	1/1/25 - 3/31/25		Complete
	4/1/25 - 6/30/25		
	7/1/25 - 9/30/25		
	10/1/25 - 12/31/25		

Water System Facility: **WELL #3 (WSF ID: 991)**

E. Coli (3014)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL #3 (2)	10/1/24 - 12/31/24		Complete
	1/1/25 - 3/31/25		Complete
	4/1/25 - 6/30/25		
	7/1/25 - 9/30/25		
	10/1/25 - 12/31/25		

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

Water System Facility: **WELL #2 TP ENTRY POINT (WSFID: 00700)**

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily
<b>Start Date:</b> 1/1/2003	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	12/1/2024 - 12/31/2024		
	1/1/2025 - 1/31/2025		
	2/1/2025 - 2/28/2025		
	3/1/2025 - 3/31/2025		
	4/1/2025 - 4/30/2025		

Water System Facility: **WELL #3 TP ENTRY POINT (WSFID: 00701)**

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily
<b>Start Date:</b> 1/1/2003	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	12/1/2024 - 12/31/2024		
	1/1/2025 - 1/31/2025		
	2/1/2025 - 2/28/2025		
	3/1/2025 - 3/31/2025		
	4/1/2025 - 4/30/2025		

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
COMPLETE INITIAL LSL INVENTORY	10/16/2024	

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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>CT0680011</b>	<b>AQUARION-KENT</b>	C	817	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
						360	

Towns Served: KENT

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2025	
SUBMIT CCR TO THE DEPARTMENT	6/30/2025	
SUBMIT CCR CERTIFICATION FORM	8/9/2025	

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR		
00600	DISTRIBUTION SYSTEM	02804	KENT TANKS SS	A	Y					
		02812	KENT FABRICS RT 7	A	Y					
		02813	PATCO ROUTE 7	A	Y			Y		
		02815	KENT TANK SS	A	Y					
		02816	59 NORTH MAIN ST. SS	A					Y	
		02816D	59 N MAIN ST SS - KE	A		Y				
		02816U	59 N MAIN ST SS - KE	A		Y				
		4	DISTRIBUTION SYSTEM	A		Y				
				DOWNSTREAM	WITHIN 5 SERVICE CON	A				
				PB5701	46 N MAIN ST. P.O. B	A		3		
				PB5704	92 N MAIN ST	A		3		
				PB5706	10 S MAIN KENT	A		3		
				PB5707	41 ELIZABETH STREET	A		3		
				PB5708	9 MAPLE ST EXT KENT	A		3		
				PB5709	43 MAPLE ST EXT KENT	A		3		
				PB5710	30 ELIZBETH KENT	A		3		
				PB5836	80 NO. MAIN ST. UNIT	A		N		
				PB5966	4 BLUFF KENT	A		3		
				PB5967	6 BLUFF ST	A		3		
				PB5968	8 BLUFF KENT	A		3		
				PB5969	1 BRIDGE ST	A		3		
				PB5971	52 ELIZABETH ST	A		3		
				PB5972	14 JUDD AVE	A		3		
				PB5973	8 JUDD AVE	A		3		
				PB6347	19 MAPLE ST	A	Y	3		
				PB6348	27 ELIZABETH STREET	A	Y	3		
				PB6349	27 LANE STREET	A	Y	3		
				PB7042	23 LANE STREET	A		3		
				PB7043	8 ELIZABETH STREET	A		3		
				UPSTREAM	WITHIN 5 SERVICE CON	A				
		00700	WELL #2 TP ENTRY POINT	3	EP - WELL #2 TP	A				
		00701	WELL #3 TP ENTRY POINT	3	EP - WELL #3 TP	A				
1609	WELL #3 TREATMENT PLANT									

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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>CT0680011</b>	<b>AQUARION-KENT</b>	C	817	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
						360	

Towns Served: KENT

### 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
510	WELL #2 TREATMENT PLANT							
56640	CONCRETE ATMOSPHERIC STORAGE TANK							
990	WELL #2	2	WELL #2	A				
991	WELL #3	2	WELL #3	A				

### Certified Operator Information

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

Facility Classification: DISTRIBUTION SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
PASSECK, PETER	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2025
		WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2027
LAGO, ANTHONY V.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	6/30/2025
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2025

Water System Facility: **WELL #2 TREATMENT PLANT (WSF ID: 510)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
COYLE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	12/31/2025
PASSECK, PETER	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2027
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2025
LAGO, ANTHONY V.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	6/30/2025
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2025
OSBORN, BRADLEY E.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2026
		WATER TREATMENT PLANT OPERATOR - CLASS III	9/30/2026
		WATER TREATMENT PLANT OPERATOR IN TRAINING	9/30/2026

Water System Facility: **WELL #3 TREATMENT PLANT (WSF ID: 1609)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
COYLE, BRIAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	12/31/2025
PASSECK, PETER	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2027
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2025
LAGO, ANTHONY V.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	6/30/2025
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2025
OSBORN, BRADLEY E.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	9/30/2026
		WATER TREATMENT PLANT OPERATOR IN TRAINING	9/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2026

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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>CT0680011</b>	<b>AQUARION-KENT</b>	<b>C</b>	<b>817</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
						360	

Towns Served: KENT

## Contact Information

Name			Organization			Job Title			
<b>Mr. John P. Walsh</b>			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**

Name			Organization			Job Title			
<b>Mr. Robert J. Ulrich</b>			Aquarion Water Company of Ct			Vp-Supply & Utility			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
Aquarion Water Company of Ct			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:**

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>CT0680021</b>	<b>KENT SCHOOL CORP (VALLEY CAMPUS)</b>	C	722	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			22	8			

Towns Served: KENT

### 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	1/1/23 - 12/31/31				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 12/31/24		Complete		
	1/1/25 - 1/31/25		Complete		
	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25				
	5/1/25 - 5/31/25				
	6/1/25 - 6/30/25				
	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				
<b>Lead And Copper (PBCU)</b>		<b>10 routine (RT) per three years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/23 - 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 month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 12/31/24		Complete		
	1/1/25 - 1/31/25		Complete		
	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25				
	5/1/25 - 5/31/25				
	6/1/25 - 6/30/25				
	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				
<b>Water System Facility: ENTRY POINT (WSF ID: 00700)</b>					
<b>Net Gross Alpha (4000)</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		
CT0680021	KENT SCHOOL CORP (VALLEY CAMPUS)	C	722	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			22	8			

Towns Served: KENT

## Monitoring Requirements

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

Uranium (4006)	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		
Combined Radium-226/228 (4010)	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		
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		
	1/1/26 - 12/31/26		
Pesticides, Herbicides and PCBs - Phase II & V (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 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		

## 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: 6.4 PH	Daily
Start Date: 1/1/2003			
	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	12/1/2024 - 12/31/2024		
	1/1/2025 - 1/31/2025		
	2/1/2025 - 2/28/2025		
	3/1/2025 - 3/31/2025		
	4/1/2025 - 4/30/2025		

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT FISCAL AND ASSET MANAGEMENT CERT	1/1/2021	

*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>CT0680021</b>	<b>KENT SCHOOL CORP (VALLEY CAMPUS)</b>	C	722	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			22	8			

Towns Served: KENT

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT CCR TO THE DEPARTMENT	6/30/2025	
SUBMIT CCR CERTIFICATION FORM	8/9/2025	
CROSS CONNECTION SURVEY REPORT	3/1/2026	

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	001	DINING HALL	A	Y	N		
		002	FIELD DORM MENS	A		N		
		003	CASE DORM STAFF BTH	A		N		
		004	ADMIN BLD MENS RM	A		N		
		005	S.H. KITCHEN 4 FL	A		N		
		006	M.D. 1ST SLOP	A		N		
		007	M.D.S. 1ST SLOP	A		N		
		008	N.D. 1ST SLOP	A		N		
		009	SCI LST MENS RM	A		N		
		010	FOLEY MENS ROOM	A		N		
		4	GENERIC DISTRIBUTION	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
392	KENT SCHOOL TREATMENT PLANT							
45859	ATMOSPHERIC TANK 1							
45861	ATMOSPHERIC TANK 2							
45863	HYDROPNEUMATIC TANK							
992	WELL 2	2	WELL 2	A				
993	WELL 1	2	WELL 1	A				

### Certified Operator Information

Water System Facility: **KENT SCHOOL TREATMENT PLANT (WSF ID: 392)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
TOMLINSON, JONATHAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	9/30/2026
KNIFFEN, PETER	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	9/30/2026

### Contact Information

Name		Organization		Job Title		
<b>Mr. Jonathan Tomlinson</b>		Kent School Corporation		Chf Water Sys Opr		
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
PO Box 2006				Kent	CT	06757

*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>CT0680021</b>	<b>KENT SCHOOL CORP (VALLEY CAMPUS)</b>	<b>C</b>	<b>722</b>	<b>P</b>	<b>GW</b>			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
			22	8				
Towns Served: KENT								
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-927-6124				860-671-1477	tomlinsonj@kent-school.edu			
Contact Role(s): <b>Administrative Contact</b>								
Name			Organization			Job Title		
<b>Mr. John Bergin</b>			Kent School Corp.			Facilities Director		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
PO Box 2006						Kent	CT	06757
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-927-6119				845-309-1574	berginj@kent-school.edu			
Contact Role(s): <b>Legal Contact</b>								
<b>Please note the following:</b>								
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>CT0680031</b>	<b>THE MARVELWOOD SCHOOL</b>	C	220	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
476 SKIFF MOUNTAIN RD			8	4			
Towns Served: KENT							

### Monitoring Requirements

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

<b>Chlorine Residual (1012)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 12/31/24		Complete		
	1/1/25 - 1/31/25		Complete		
	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25		Complete		
<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/23 - 12/31/31		Complete		
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 12/31/24		Complete		
	1/1/25 - 1/31/25		Complete		
	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		Complete		
	8/1/25 - 8/31/25		Complete		
	9/1/25 - 9/30/25		Complete		
	10/1/25 - 10/31/25		Complete		
	11/1/25 - 11/30/25		Complete		
<b>Disinfectant Byproducts - TTHM &amp; HAA5 (DBP)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
SCHOOL HOUSE BATH (MS007)	1/1/24 - 12/31/24	8/1-8/31	Complete		
	1/1/25 - 12/31/25	8/1-8/31	Complete		
	1/1/26 - 12/31/26	8/1-8/31	Complete		
<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		
	1/1/27 - 12/31/29	6/1-9/30	Complete		
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 12/31/24		Complete		
	1/1/25 - 1/31/25		Complete		
	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25		Complete		

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

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0680031</b>	<b>THE MARVELWOOD SCHOOL</b>	C	220	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
476 SKIFF MOUNTAIN RD			8	4			

Towns Served: KENT

### Monitoring Requirements

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

Physical Parameters (PPS)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	5/1/25 - 5/31/25		
	6/1/25 - 6/30/25		
	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		

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

Net Gross Alpha (4000)	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		

Uranium (4006)	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		

Combined Radium-226/228 (4010)	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		

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 & V (SOCS)	1 (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25	1/1-12/31	Waiver

Pesticides, Herbicides and PCBs - Phase II & V (SOCS)	1 routine (RT) per three years		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/26 - 12/31/28		

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

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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>CT0680031</b>	<b>THE MARVELWOOD SCHOOL</b>	C	220	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
476 SKIFF MOUNTAIN RD			8	4			

Towns Served: KENT

### Monitoring Requirements

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

<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>
	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		

Water System Facility: **WELL 4 (WSF ID: 129)**

<b>E. Coli (3014)</b>	<b>1 routine (RT) per month</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL 4 (2)	12/1/24 - 12/31/24		Complete
	1/1/25 - 1/31/25		Complete
	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		
	6/1/25 - 6/30/25		
	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		

Water System Facility: **WELL 5 (WSF ID: 130)**

<b>E. Coli (3014)</b>	<b>1 routine (RT) per month</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL 5 (2)	12/1/24 - 12/31/24		Complete
	1/1/25 - 1/31/25		Complete
	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		
	6/1/25 - 6/30/25		
	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		

### 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		
<b>CT0680031</b>	<b>THE MARVELWOOD SCHOOL</b>	C	220	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
476 SKIFF MOUNTAIN RD			8	4			
Towns Served: KENT							

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

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily
<b>Start Date:</b> 1/1/2003	<b>Compliance History:</b>	<b>Operating Limit</b>	<b>Monitoring</b>
	<b>Monitoring Period</b>	<b>Compliance Status:</b>	<b>Compliance Status:</b>
	12/1/2024 - 12/31/2024		
	1/1/2025 - 1/31/2025		
	2/1/2025 - 2/28/2025		
	3/1/2025 - 3/31/2025		
	4/1/2025 - 4/30/2025		

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT CCR TO THE DEPARTMENT	6/30/2025	
SUBMIT CCR CERTIFICATION FORM	8/9/2025	
CROSS CONNECTION SURVEY REPORT	3/1/2026	

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MS002	SUMMIT DORM	A	Y	N		
		MS003	STERLING DORM	A	Y	N		
		MS004	LAKE DORM	A	Y	N		
		MS005	STAR DORM	A	Y	N		
		MS006	DINING HALL BATHROOM	A	Y	N		
		MS007	SCHOOL HOUSE BATH	A	Y	N	Y	Y
		MS008	GYM GIRLS BATH 1	A	Y	N		
		MS009	KITCHEN HANDWASH SIN	A	Y	N		
		MS010	KITCHEN PREP SINK 1	A	Y	N		
		MS011	KITCHEN PREP SINK 2	A	Y	N		
		MS012	BUSINESS/MED BUILDIN	A	Y	N		
		MS013	SCHOOL HOUSE F BATH	A	Y	N		
		MS014	SCHOOL HOUSE M BATH	A	Y	N		
		MS015	GYM GIRLS BATH 2	A	Y	N		
		MS016	GYM GIRLS LOCKER ROO	A	Y	N		
		MS017	PAC CTR BATH	A	Y	N		
		MS018	FACULTY HOUSE KITCHE	A	Y	N		
		MS019	MAINTENANCE SINK	A	Y	N		
00700	ENTRY POINT	3	ENTRY POINT	A				
		MS001	PUMP HOUSE	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		
<b>CT0680031</b>	<b>THE MARVELWOOD SCHOOL</b>	C	220	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
476 SKIFF MOUNTAIN RD			8	4			
Towns Served: KENT							

## 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
129	WELL 4	2	WELL 4	A				
130	WELL 5	2	WELL 5	A				
51455	CONCRETE ATMOSPHERIC TANK							
566	WELL 4 & 5 TREATMENT STATION							
59004	PUMP STATION							

## Certified Operator Information

Water System Facility: <b>WELL 4 &amp; 5 TREATMENT STATION (WSF ID: 566)</b>			
Facility Classification: CLASS 1 TREATMENT PLANT			
			<i>Certification Expiration</i>
Operator Name	Operator Type	Certification(s)	
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2026
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2026
CROWNSHAW, MICHAEL L	ASSIGNED OPERATOR	SMALL WATER SYSTEM OPERATOR	3/31/2025

## Contact Information

Name		Organization			Job Title		
<b>Mr. David Fiorillo</b>		Marvelwood School			Business Manager		
Mailing Address Line One			Mailing Address Line Two		City	State	Zip Code
476 Skiff Mountain Road					Kent	CT	06757
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-927-0047		860-927-2012			david.fiorillo@marvelwood.org		
Contact Role(s): <b>Administrative Contact, Legal Contact, Owner</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		
CT0680082	SOUTH KENT SCHOOL	C	228	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
40 BULLS BRIDGE RD						36	
Towns Served: KENT							

### Monitoring Requirements

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

<b>Chlorine Residual (1012)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 12/31/24		Complete		
	1/1/25 - 1/31/25		Complete		
	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/22 - 12/31/30				
<b>Total Haloacetic Acids (2456)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
GARF.UPST.DORM BATH (SKS004)	1/1/24 - 12/31/24	9/1-9/30	Complete		
	1/1/25 - 12/31/25	9/1-9/30			
	1/1/26 - 12/31/26	9/1-9/30			
<b>Total Trihalomethanes (2950)</b>		<b>1 routine (RT) per year</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
FACULTY HOUSE #1 KITCHEN (SKS011)	1/1/24 - 12/31/24	9/1-9/30	Complete		
	1/1/25 - 12/31/25	9/1-9/30			
	1/1/26 - 12/31/26	9/1-9/30			
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 12/31/24		Complete		
	1/1/25 - 1/31/25		Complete		
	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25				
	5/1/25 - 5/31/25				
	6/1/25 - 6/30/25				
	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				
<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			
	1/1/27 - 12/31/29	6/1-9/30			
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 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		
CT0680082	SOUTH KENT SCHOOL	C	228	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
40 BULLS BRIDGE RD						36	
Towns Served: KENT							

### Monitoring Requirements

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

Physical Parameters (PPS)	1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/25 - 1/31/25		Complete
	2/1/25 - 2/28/25		Complete
	3/1/25 - 3/31/25		Complete
	4/1/25 - 4/30/25		
	5/1/25 - 5/31/25		
	6/1/25 - 6/30/25		
	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		

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

Net Gross Alpha (4000)	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		

  

Uranium (4006)	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		

  

Combined Radium-226/228 (4010)	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		

  

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

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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>CT0680082</b>	<b>SOUTH KENT SCHOOL</b>	C	228	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
40 BULLS BRIDGE RD						36	
Towns Served: KENT							

## Monitoring Requirements

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

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

Water System Facility: <b>ENTRY POINT (WSFID: 00700)</b>							
<b>Analyte</b>	<b>Monitoring Requirement (Summary Type)</b>	<b>Operating Limit</b>			<b>Samples Req/Month</b>		
Chlorine	Entry Point RDC (EPRD)	Minimum: 0.45 MG/L			Continuous		
<b>Start Date:</b> 12/1/2014		<b>Compliance History:</b>		<b>Operating Limit</b>		<b>Monitoring</b>	
		<b>Monitoring Period</b>		<b>Compliance Status:</b>		<b>Compliance Status:</b>	
		12/1/2024 - 12/31/2024		Y			
		1/1/2025 - 1/31/2025		Y			
		2/1/2025 - 2/28/2025		Y			
		3/1/2025 - 3/31/2025		Y			
		4/1/2025 - 4/30/2025					

## Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT FISCAL AND ASSET MANAGEMENT CERT	1/1/2021	
COMPLETE INITIAL LSL INVENTORY	10/16/2024	
SUBMIT CCR TO THE DEPARTMENT	6/30/2025	
SUBMIT CCR CERTIFICATION FORM	8/9/2025	
CROSS CONNECTION SURVEY REPORT	3/1/2026	

## Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		SKS001	MN.BLD.SM KITCH.SINK	A	Y		Y	
		SKS002	MN.BLD.DISH WASH SK.	A	Y			
		SKS003	MN.BLD.BASEM.BATH S.	A	Y			
		SKS004	GARF.UPST.DORM BATH	A	Y	2		Y
		SKS005	BRINGH.LOBBY MENS R.	A	Y			
		SKS006	MCCOUN ART RM.SINK	A	Y	2		
		SKS007	2ND FL.MAINT.SH.SINK	A	Y			

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0680082</b>	<b>SOUTH KENT SCHOOL</b>	<b>C</b>	<b>228</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
40 BULLS BRIDGE RD						36	
Towns Served: KENT							

### 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
		SKS008	BARTL.DORM BATH SINK	A		2		
		SKS009	GILDER HOUSE	A		2		
		SKS010	WOODWD.D.3RD.FL.BATH	A		2		
		SKS011	FACULTY HOUSE #1 KIT	A		N		Y
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
37258	ATMOSPHERIC TANK							
502	WELL #1 TREATMENT PLANT							
995	WELL #1	2	WELL #1	A				

### Certified Operator Information

**Water System Facility:** WELL #1 TREATMENT PLANT (WSF ID: 502)

**Facility Classification:** CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
CARLSON, BRUCE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2025

### Contact Information

Name	Organization	Job Title
<b>South Kent School Corporation</b>		

Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
40 Bulls Bridge Rd				South Kent	CT	06785
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	

**Contact Role(s):** Owner

Name	Organization	Job Title
<b>Mr. Brian Sullivan</b>	South Kent School	Head of School

Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
40 Bulls Bridge Rd				South Kent	CT	06785
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-927-3539	209				Sullivanb@southkentschool.org	

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

Name	Organization	Job Title
<b>Ms. Luz McCarthy</b>	South Kent School	Cfo_Business Office

Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
40 Bulls Bridge Rd				South Kent	CT	06785
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-927-3539	215			860-795-6889	mccarthy1@southkentschool.org	

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

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

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source			
<b>CT0680082</b>	<b>SOUTH KENT SCHOOL</b>	<b>C</b>	<b>228</b>	<b>P</b>	<b>GW</b>			
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural	
40 BULLS BRIDGE RD						36		
Towns Served: KENT								
Name			Organization			Job Title		
<b>Mr. Jeff Galusha</b>			South Kent School			Plant Manager		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
40 Bulls Bridge Rd						South Kent	CT	06785
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-927-3539	233		860-248-0548		galushaj@southkentschool.org			
Contact Role(s): <b>Administrative Contact</b>								

**Please note the following:**

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

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

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

**End of schedule**

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0681061</b>	<b>KENT SCHOOL (MAINTENANCE WELL)</b>	C	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			9	2			

Towns Served: KENT

## 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	1/1/23 - 12/31/31				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 12/31/24		Complete		
	1/1/25 - 1/31/25		Complete		
	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25				
	5/1/25 - 5/31/25				
	6/1/25 - 6/30/25				
	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				
<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 month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 12/31/24		Complete		
	1/1/25 - 1/31/25		Complete		
	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25				
	5/1/25 - 5/31/25				
	6/1/25 - 6/30/25				
	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				
<b>Water System Facility: ENTRY POINT (WSF ID: 00700)</b>					
<b>Net Gross Alpha (4000)</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>CT0681061</b>	<b>KENT SCHOOL (MAINTENANCE WELL)</b>	C	30	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			9	2			

Towns Served: KENT

## Monitoring Requirements

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

<b>Uranium (4006)</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>Combined Radium-226/228 (4010)</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>Inorganic Chemicals (IOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
<b>Nitrate And Nitrite (NOX)</b>	<b>1 routine (RT) per year</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		
	1/1/26 - 12/31/26		
<b>Pesticides, Herbicides and PCBs - Phase II &amp; V (SOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		
<b>Organic Chemicals (VOCS)</b>	<b>1 routine (RT) per three years</b>		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/23 - 12/31/25		
	1/1/26 - 12/31/28		

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013	
SUBMIT FISCAL AND ASSET MANAGEMENT CERT	1/1/2021	
SUBMIT CCR TO THE DEPARTMENT	6/30/2022	
SUBMIT CCR CERTIFICATION FORM	8/9/2022	
SUBMIT CCR TO THE DEPARTMENT	6/30/2025	
SUBMIT CCR CERTIFICATION FORM	8/9/2025	
CROSS CONNECTION SURVEY REPORT	3/1/2030	

## 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	001	KITCHENET	A	Y	N		

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
<b>CT0681061</b>	<b>KENT SCHOOL (MAINTENANCE WELL)</b>	<b>C</b>	<b>30</b>	<b>P</b>	<b>GW</b>		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
		9	2				

Towns Served: KENT

## 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
		002	MENS ROOM	A		N		
		003	WOMENS ROOM	A		N		
		004	SLOP SINK	A		N		
		005	TOMS SHOP	A		N		
		4	GENERIC DISTRIBUTION	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
1674	WELL 3	2	WELL 3	A				

## Certified Operator Information

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

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
TOMLINSON, JONATHAN	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	9/30/2026
KNIFFEN, PETER	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	9/30/2026

## Contact Information

Name			Organization			Job Title		
<b>Mr. Jonathan Tomlinson</b>			Kent School Corporation			Chf Water Sys Opr		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
PO Box 2006						Kent	CT	06757
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-927-6124				860-671-1477	tomlinsonj@kent-school.edu			

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

Name			Organization			Job Title		
<b>Mr. John Bergin</b>			Kent School Corp.			Facilities Director		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
PO Box 2006						Kent	CT	06757
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-927-6119				845-309-1574	berginj@kent-school.edu			

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

**Please note the following:**

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

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

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

**End of schedule**

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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>CT0688011</b>	<b>BROOKWOODS II</b>	C	120	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
433 KENT CORNWALL RD			30				

Towns Served: KENT

### Monitoring Requirements

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

<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	1/1/22 - 12/31/30				
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 12/31/24		Complete		
	1/1/25 - 1/31/25		Complete		
	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25				
	5/1/25 - 5/31/25				
	6/1/25 - 6/30/25				
	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				
<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 month</b>			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>		
Select from Inventory of Active Sampling Points	12/1/24 - 12/31/24		Complete		
	1/1/25 - 1/31/25		Complete		
	2/1/25 - 2/28/25		Complete		
	3/1/25 - 3/31/25		Complete		
	4/1/25 - 4/30/25				
	5/1/25 - 5/31/25				
	6/1/25 - 6/30/25				
	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				
<b>Water System Facility: ENTRY POINT (WSF ID: 00700)</b>					
<b>Net Gross Alpha (4000)</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

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433 KENT CORNWALL RD			30				
Towns Served: KENT							

## Monitoring Requirements

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

Uranium (4006)	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		
Combined Radium-226/228 (4010)	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		
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 & V (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 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		

## Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
SUBMIT CCR TO THE DEPARTMENT	6/30/2025	
SUBMIT CCR CERTIFICATION FORM	8/9/2025	
CROSS CONNECTION EXEMPTION	3/1/2029	

## 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	GENERIC DISTRIBUTION	A	Y			
		BRO-1	HOUSE 30-SINK	A	Y			
		BRO-2	DISTRIBUTION SAMPLE	A		1		
		BRO-3	HOUSE 3-SINK	A		1		
		BRO-4	HOUSE 12-SINK	A		1		

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

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433 KENT CORNWALL RD			30				
Towns Served: KENT							

## 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
		BRO-5	HOUSE 16-SINK	A		1		
		BRO-6	HOUSE 20-SINK	A		1		
		BRO-7	HOUSE 23-SINK	A		1		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
1672	WELL 1	2	WELL 1	A				
1673	WELL 2	2	WELL 2	A				
44913	ATMOSPHERIC TANK							

## Certified Operator Information

Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00600)</b>			
Facility Classification: SMALL WATER SYSTEM			
Operator Name	Operator Type	Certification(s)	Certification Expiration
TOMASCAK, THOMAS S.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I WATER TREATMENT PLANT OPERATOR - CLASS I	12/31/2024 6/30/2025

## Contact Information

Name		Organization			Job Title	
<b>Mr. Stephen P. Allison</b>		Brookwoods II Association			Administrator	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
433 Kent Cornwall Rd		Unit #20		Kent	CT	06757
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
203-770-2458				203-417-2126	steve.allison25@gmail.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**