

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT1450024	TRAVELERS RESTAURANT	NC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
1257-1259 BUCKLEY HIGHWAY				1			

Towns Served: UNION

Monitoring Requirements

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

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	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		

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	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: **ENTRY POINT (WSF ID: 00700)**

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

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
RESPOND TO SANITARY SURVEY	4/16/2025	
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN	7/15/2025	

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				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
22421	WELL	2	WELL	A				
61660	TREATMENT PLANT							

Contact Information

Name		Organization		Job Title		
Mr. Art Murdock		C/O Travelers Restaurant				
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
1257 Buckley Highway				Union	CT	06076

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		
CT1450024	TRAVELERS RESTAURANT	NC	25	P	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
1257-1259 BUCKLEY HIGHWAY				1			
Towns Served: UNION							
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-684-4920					karen17@cox.net		
Contact Role(s): Administrative Contact, Legal Contact, Owner							
Please note the following:							
1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.							
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.							
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.							

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

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

End of schedule

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

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
CT1450214	UNION WEIGH STATION	NC	25	S	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
INTERSTATE 84 WEST				1			
Towns Served: UNION							

Monitoring Requirements

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

Total Coliform (3100)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		
	7/1/25 - 9/30/25		
	10/1/25 - 12/31/25		

Physical Parameters (PPS)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
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		
	7/1/25 - 9/30/25		
	10/1/25 - 12/31/25		

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		

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	4
Start Date: 9/1/2008	Compliance History:	Operating Limit	Monitoring
	Monitoring Period	Compliance Status:	Compliance Status:
	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
CROSS CONNECTION SURVEY REPORT	3/1/2029	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	3	GENERATED BY BATCH	A	Y			

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		
CT1450214	UNION WEIGH STATION	NC	25	S	GW		
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
INTERSTATE 84 WEST				1			
Towns Served: UNION							

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
		4	DISTRIBUTION SYSTEM DOWNSTREAM WITHIN 5 SERVICE CON	A	Y			
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
23033	WELL #1	2	WELL #1	A				
55195	TREATMENT PLANT							

Certified Operator Information

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

Contact Information

Name		Organization			Job Title	
Mr. Joseph Giulietti		Department of Transportation			Commissioner	
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
2800 Berlin Turnpike				Newington	CT	06111
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
860-594-3000						

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.
- 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