



OH3000111 CAMBRIDGE, CITY OF

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>3054707</b><br>SMP ID: <b>EP001</b> | Facility Name: <b>WTP-CAMBRIDGE</b><br>Facility Source: <b>Surface Water</b> | Facility Class: <b>CLASS 4</b> |
|--------------------------|---|--|--------------------------------|

THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018

| Chemicals  | Monitoring Requirements  |
|--|--|
| INORGANICS   | 1 Sample(s) Required between 1/1/2018 and 5/31/2018  |
| <i>Sample for all the analytes listed below:</i>   |  |
| ANTIMONY, TOTAL - 1074 ARSENIC - 1005 BARIUM - 1010 BERYLLIUM, TOTAL - 1075 CADMIUM - 1015 CHROMIUM - 1020<br>CYANIDE - 1024 FLUORIDE - 1025 MERCURY - 1035 NICKEL - 1036 SELENIUM - 1045 THALLIUM, TOTAL - 1085 |  |
| NITRITE - 1041   | Not Required   |
| NITRATE - 1040   | 1 Sample(s) Required between 1/1/2018 and 1/31/2018<br>1 Sample(s) Required between 2/1/2018 and 2/28/2018<br>1 Sample(s) Required between 3/1/2018 and 3/31/2018<br>1 Sample(s) Required between 4/1/2018 and 4/30/2018<br>1 Sample(s) Required between 5/1/2018 and 5/31/2018<br>1 Sample(s) Required between 6/1/2018 and 6/30/2018<br>1 Sample(s) Required between 7/1/2018 and 7/31/2018<br>1 Sample(s) Required between 8/1/2018 and 8/31/2018<br>1 Sample(s) Required between 9/1/2018 and 9/30/2018<br>1 Sample(s) Required between 10/1/2018 and 10/31/2018<br>1 Sample(s) Required between 11/1/2018 and 11/30/2018<br>1 Sample(s) Required between 12/1/2018 and 12/31/2018   |
| RADIOLOGICALS  | Not Required   |
| SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1  | 1 Sample(s) Required between 4/1/2018 and 6/30/2018  |
| <i>Sample for all the analytes listed below:</i>   |  |
| ALACHLOR (LASSO) - 2051 ATRAZINE - 2050 SIMAZINE - 2037  |  |
| VOLATILE ORGANIC CHEMICALS (VOC)   | 1 Sample(s) Required between 1/1/2018 and 5/31/2018  |
| TOTAL ORGANIC CARBON (TOC)   | 1 Paired Sample Set Required between 1/1/2018 and 1/31/2018<br>1 Paired Sample Set Required between 2/1/2018 and 2/28/2018<br>1 Paired Sample Set Required between 3/1/2018 and 3/31/2018<br>1 Paired Sample Set Required between 4/1/2018 and 4/30/2018<br>1 Paired Sample Set Required between 5/1/2018 and 5/31/2018<br>1 Paired Sample Set Required between 6/1/2018 and 6/30/2018<br>1 Paired Sample Set Required between 7/1/2018 and 7/31/2018<br>1 Paired Sample Set Required between 8/1/2018 and 8/31/2018<br>1 Paired Sample Set Required between 9/1/2018 and 9/30/2018<br>1 Paired Sample Set Required between 10/1/2018 and 10/31/2018<br>1 Paired Sample Set Required between 11/1/2018 and 11/30/2018<br>1 Paired Sample Set Required between 12/1/2018 and 12/31/2018 |

A paired sample set refers to one source water and one treated water sample. A source water alkalinity is also required at the same time the TOC sample is taken.



OH3000111 CAMBRIDGE, CITY OF

System Type: Community

Operating Period: 1/1 to 12/31

**ENTRY POINT MONITORING SCHEDULE**

|                 |                             |                                       |                                |
|-----------------|-----------------------------|---------------------------------------|--------------------------------|
| <b>Sampling</b> | Facility ID: <b>3054707</b> | Facility Name: <b>WTP-CAMBRIDGE</b>   |                                |
| <b>Location</b> | SMP ID: <b>EP001/LT2001</b> | Facility Source: <b>Surface Water</b> | Facility Class: <b>CLASS 4</b> |

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018**

**Chemicals**

**Monitoring Requirements**

TOTAL MICROCYSTINS

1 Sample Set Required WEEKLY\*

*Total microcystins sample set refers to one raw source water sample at LT2001 and one finished water sample at EP001. A week is defined as Sunday through Saturday.*

*\*Weekly sampling unless requirements for reduced monitoring are met. Current reduced monitoring schedules can be found at <http://epa.ohio.gov/ddagw/HAB.aspx>. Reduced monitoring is contingent on a public water system continuing to experience NO raw or finished water total microcystins detections. Any total microcystins detections during routine (weekly) or reduced sampling will trigger additional sampling. Please refer to the website above for specifics on follow-up sampling requirements.*



OH3000111 CAMBRIDGE, CITY OF

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

|                          |                             |                                       |                                |
|--------------------------|-----------------------------|---------------------------------------|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>3054707</b> | Facility Name: <b>WTP-CAMBRIDGE</b>   | Facility Class: <b>CLASS 4</b> |
|                          | SMP ID: <b>LT2001</b>       | Facility Source: <b>Surface Water</b> |                                |

THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018

| Chemicals | Monitoring Requirements |
|-----------|-------------------------|
|-----------|-------------------------|

|                              |                              |               |           |
|------------------------------|------------------------------|---------------|-----------|
| CYANOBACTERIA SCREENING      | 1 Sample(s) Required between | 1/7/2018 and  | 1/13/2018 |
|                              | 1 Sample(s) Required between | 1/21/2018 and | 1/27/2018 |
|                              | 1 Sample(s) Required between | 2/4/2018 and  | 2/10/2018 |
|                              | 1 Sample(s) Required between | 2/18/2018 and | 2/24/2018 |
|                              | 1 Sample(s) Required between | 3/4/2018 and  | 3/10/2018 |
|                              | 1 Sample(s) Required between | 3/18/2018 and | 3/24/2018 |
|                              | 1 Sample(s) Required between | 4/1/2018 and  | 4/7/2018  |
|                              | 1 Sample(s) Required between | 4/15/2018 and | 4/21/2018 |
|                              | 1 Sample(s) Required between | 4/29/2018 and | 5/5/2018  |
|                              | 1 Sample(s) Required between | 5/13/2018 and | 5/19/2018 |
|                              | 1 Sample(s) Required between | 5/27/2018 and | 6/2/2018  |
|                              | 1 Sample(s) Required between | 6/10/2018 and | 6/16/2018 |
|                              | 1 Sample(s) Required between | 6/24/2018 and | 6/30/2018 |
|                              | 1 Sample(s) Required between | 7/8/2018 and  | 7/14/2018 |
|                              | 1 Sample(s) Required between | 7/22/2018 and | 7/28/2018 |
|                              | 1 Sample(s) Required between | 8/5/2018 and  | 8/11/2018 |
|                              | 1 Sample(s) Required between | 8/19/2018 and | 8/25/2018 |
|                              | 1 Sample(s) Required between | 9/2/2018 and  | 9/8/2018  |
|                              | 1 Sample(s) Required between | 9/16/2018 and | 9/22/2018 |
|                              | 1 Sample(s) Required between | 9/30/2018 and | 10/6/2018 |
| 1 Sample(s) Required between | 10/14/2018 and               | 10/20/2018    |           |
| 1 Sample(s) Required between | 10/28/2018 and               | 11/3/2018     |           |
| 1 Sample(s) Required between | 11/11/2018 and               | 11/17/2018    |           |
| 1 Sample(s) Required between | 11/25/2018 and               | 12/1/2018     |           |
| 1 Sample(s) Required between | 12/9/2018 and                | 12/15/2018    |           |
| 1 Sample(s) Required between | 12/23/2018 and               | 12/29/2018    |           |

Cyanobacteria screening sample is to be collected biweekly from raw source water at sample point LT2001 unless requirements for reduced monitoring are met. Current reduced monitoring schedules can be found at <http://epa.ohio.gov/ddagw/HAB.aspx>. As of 12/31/17, all public water systems are responsible for contracting with a lab certified to perform cyanobacteria screening (qPCR). Please review the website for further information pertaining to follow-up sampling requirements for cyanobacteria screening gene detections, and certified labs that can perform analysis.

|                |                              |               |           |
|----------------|------------------------------|---------------|-----------|
| LT2 MONITORING | 1 Sample(s) Required between | 1/6/2018 and  | 1/10/2018 |
|                | 1 Sample(s) Required between | 2/10/2018 and | 2/14/2018 |
|                | 1 Sample(s) Required between | 3/10/2018 and | 3/14/2018 |
|                | 1 Sample(s) Required between | 4/7/2018 and  | 4/11/2018 |
|                | 1 Sample(s) Required between | 5/12/2018 and | 5/16/2018 |
|                | 1 Sample(s) Required between | 6/9/2018 and  | 6/13/2018 |
|                | 1 Sample(s) Required between | 7/7/2018 and  | 7/11/2018 |
|                | 1 Sample(s) Required between | 8/11/2018 and | 8/15/2018 |
|                | 1 Sample(s) Required between | 9/8/2018 and  | 9/12/2018 |

Monitor for: Cryptosporidium - 2078, E-coli count - 3014, Turbidity - 0100



**OH3000111 CAMBRIDGE, CITY OF**

System Type: Community

Operating Period: 1/1 to 12/31

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018**

**DISTRIBUTION MONITORING SCHEDULE**

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS000</b> | Facility Name: <b>DISTRIBUTION-CAMBRIDGE</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-----------|-------------------------|
|-----------|-------------------------|

|                 |              |
|-----------------|--------------|
| ASBESTOS - 1094 | Not Required |
|-----------------|--------------|

|                             |  |
|-----------------------------|--|
| TOTAL COLIFORM (TCR) - 3100 | 10 Sample(s) Required between 1/1/2018 and 1/31/2018   |
|                             | 10 Sample(s) Required between 2/1/2018 and 2/28/2018   |
|                             | 10 Sample(s) Required between 3/1/2018 and 3/31/2018   |
|                             | 10 Sample(s) Required between 4/1/2018 and 4/30/2018   |
|                             | 10 Sample(s) Required between 5/1/2018 and 5/31/2018   |
|                             | 10 Sample(s) Required between 6/1/2018 and 6/30/2018   |
|                             | 10 Sample(s) Required between 7/1/2018 and 7/31/2018   |
|                             | 10 Sample(s) Required between 8/1/2018 and 8/31/2018   |
|                             | 10 Sample(s) Required between 9/1/2018 and 9/30/2018   |
|                             | 10 Sample(s) Required between 10/1/2018 and 10/31/2018 |
|                             | 10 Sample(s) Required between 11/1/2018 and 11/30/2018 |
|                             | 10 Sample(s) Required between 12/1/2018 and 12/31/2018 |

|                       |  |
|-----------------------|--|
| TOTAL CHLORINE - 1000 | 10 Sample(s) Required between 1/1/2018 and 1/31/2018   |
|                       | 10 Sample(s) Required between 2/1/2018 and 2/28/2018   |
|                       | 10 Sample(s) Required between 3/1/2018 and 3/31/2018   |
|                       | 10 Sample(s) Required between 4/1/2018 and 4/30/2018   |
|                       | 10 Sample(s) Required between 5/1/2018 and 5/31/2018   |
|                       | 10 Sample(s) Required between 6/1/2018 and 6/30/2018   |
|                       | 10 Sample(s) Required between 7/1/2018 and 7/31/2018   |
|                       | 10 Sample(s) Required between 8/1/2018 and 8/31/2018   |
|                       | 10 Sample(s) Required between 9/1/2018 and 9/30/2018   |
|                       | 10 Sample(s) Required between 10/1/2018 and 10/31/2018 |
|                       | 10 Sample(s) Required between 11/1/2018 and 11/30/2018 |
|                       | 10 Sample(s) Required between 12/1/2018 and 12/31/2018 |

*Samples should be collected at the same time and place as the Total Coliform samples.*

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS201</b> | Facility Name: <b>DISTRIBUTION-CAMBRIDGE</b><br><b>9900 BRICK CHURCH RD.</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-----------|-------------------------|
|-----------|-------------------------|

|                         |   |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/1/2018 and 2/7/2018at: DS201   |
|                         | Dual Sample Required between 5/1/2018 and 5/7/2018at: DS201   |
|                         | Dual Sample Required between 8/1/2018 and 8/7/2018at: DS201   |
|                         | Dual Sample Required between 11/1/2018 and 11/7/2018at: DS201 |

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950

**OH3000111 CAMBRIDGE, CITY OF**

System Type: Community

Operating Period: 1/1 to 12/31

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018**

**DISTRIBUTION MONITORING SCHEDULE**

|                          |   |   |                                |
|--------------------------|---|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS202</b> | Facility Name: <b>DISTRIBUTION-CAMBRIDGE</b><br><b>1000 WATER ST.</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|---|--------------------------------|

| Chemicals               | Monitoring Requirements                                       |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/1/2018 and 2/7/2018at: DS202   |
|                         | Dual Sample Required between 5/1/2018 and 5/7/2018at: DS202   |
|                         | Dual Sample Required between 8/1/2018 and 8/7/2018at: DS202   |
|                         | Dual Sample Required between 11/1/2018 and 11/7/2018at: DS202 |

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950

|                          |   |   |                                |
|--------------------------|---|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS203</b> | Facility Name: <b>DISTRIBUTION-CAMBRIDGE</b><br><b>1300 CLARK ST.</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|---|--------------------------------|

| Chemicals               | Monitoring Requirements                                       |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/1/2018 and 2/7/2018at: DS203   |
|                         | Dual Sample Required between 5/1/2018 and 5/7/2018at: DS203   |
|                         | Dual Sample Required between 8/1/2018 and 8/7/2018at: DS203   |
|                         | Dual Sample Required between 11/1/2018 and 11/7/2018at: DS203 |

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS204</b> | Facility Name: <b>DISTRIBUTION-CAMBRIDGE</b><br><b>9547 CADIZ ROAD</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

| Chemicals               | Monitoring Requirements                                       |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/1/2018 and 2/7/2018at: DS204   |
|                         | Dual Sample Required between 5/1/2018 and 5/7/2018at: DS204   |
|                         | Dual Sample Required between 8/1/2018 and 8/7/2018at: DS204   |
|                         | Dual Sample Required between 11/1/2018 and 11/7/2018at: DS204 |

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950



Effective Date: 05/25/2018

2018 DISTRIBUTION SCHEDULE

**OH3000111 CAMBRIDGE, CITY OF**

System Type: Community

Operating Period: 1/1 to 12/31

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018**

**DISTRIBUTION MONITORING SCHEDULE**

|                          |   |   |                                |
|--------------------------|---|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>LC###</b> | Facility Name: <b>DISTRIBUTION-CAMBRIDGE</b><br><b>Refer to your Lead and Copper plan for SMP IDs</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|---|--------------------------------|

| <b>Chemicals</b>              | <b>Monitoring Requirements</b>                       |
|-------------------------------|--|
| LEAD - 1030 AND COPPER - 1022 | 30 Sample(s) Required between 6/1/2018 and 9/30/2018 |

*Lead consumer notice must be completed no later than two business days after receipt of the sample results. The verification form for consumer notice must be submitted to Ohio EPA no later than five business days after receipt of the sample results. Lead and copper sample monitoring point (SMP) IDs (LC###) must be current and reflect properly tiered sites according to OAC Rule 3745-81-86. Submit lead and copper SMP ID revisions to your Ohio EPA District Office. Forms and templates are available online at <http://epa.ohio.gov/ddagw/pws/leadandcopper.aspx>. For questions contact your Ohio EPA District Office representative.*



OH3000603 GUERNSEY CO. WATER DEPT.

System Type: Community

Operating Period: 1/1 to 12/31

THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018

DISTRIBUTION MONITORING SCHEDULE

Sampling Facility ID: DS1 Facility Name: DISTRIBUTION-GUERNSEY CO. WATER DEPT. Facility Class: CLASS 1
Location SMP ID: DS000

Chemicals Monitoring Requirements

ASBESTOS - 1094 Not Required

TOTAL COLIFORM (TCR) - 3100
10 Sample(s) Required between 1/1/2018 and 1/31/2018
10 Sample(s) Required between 2/1/2018 and 2/28/2018
10 Sample(s) Required between 3/1/2018 and 3/31/2018
10 Sample(s) Required between 4/1/2018 and 4/30/2018
10 Sample(s) Required between 5/1/2018 and 5/31/2018
10 Sample(s) Required between 6/1/2018 and 6/30/2018
10 Sample(s) Required between 7/1/2018 and 7/31/2018
10 Sample(s) Required between 8/1/2018 and 8/31/2018
10 Sample(s) Required between 9/1/2018 and 9/30/2018
10 Sample(s) Required between 10/1/2018 and 10/31/2018
10 Sample(s) Required between 11/1/2018 and 11/30/2018
10 Sample(s) Required between 12/1/2018 and 12/31/2018

TOTAL CHLORINE - 1000
10 Sample(s) Required between 1/1/2018 and 1/31/2018
10 Sample(s) Required between 2/1/2018 and 2/28/2018
10 Sample(s) Required between 3/1/2018 and 3/31/2018
10 Sample(s) Required between 4/1/2018 and 4/30/2018
10 Sample(s) Required between 5/1/2018 and 5/31/2018
10 Sample(s) Required between 6/1/2018 and 6/30/2018
10 Sample(s) Required between 7/1/2018 and 7/31/2018
10 Sample(s) Required between 8/1/2018 and 8/31/2018
10 Sample(s) Required between 9/1/2018 and 9/30/2018
10 Sample(s) Required between 10/1/2018 and 10/31/2018
10 Sample(s) Required between 11/1/2018 and 11/30/2018
10 Sample(s) Required between 12/1/2018 and 12/31/2018

Samples should be collected at the same time and place as the Total Coliform samples.

Sampling Facility ID: DS1 Facility Name: DISTRIBUTION-GUERNSEY CO. WATER DEPT. Facility Class: CLASS 1
Location SMP ID: DS201 16869 CADIZ RD. LORE CITY

Chemicals Monitoring Requirements

DISINFECTION BYPRODUCTS
Dual Sample Required between 3/1/2018 and 3/7/2018at: DS201
Dual Sample Required between 6/1/2018 and 6/7/2018at: DS201
Dual Sample Required between 9/1/2018 and 9/7/2018at: DS201
Dual Sample Required between 12/1/2018 and 12/7/2018at: DS201

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) - 2456
2) TTHM - 2950



**OH3000603 GUERNSEY CO. WATER DEPT.**

System Type: Community

Operating Period: 1/1 to 12/31

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018**

**DISTRIBUTION MONITORING SCHEDULE**

|                          |                         |   |                                |
|--------------------------|-------------------------|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b> | Facility Name: <b>DISTRIBUTION-GUERNSEY CO. WATER DEPT.</b> | Facility Class: <b>CLASS 1</b> |
|                          | SMP ID: <b>DS202</b>    | <b>SR 313 AND SR 660 CAMBRIDGE</b>                          |                                |

| Chemicals               | Monitoring Requirements                                       |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/1/2018 and 3/7/2018at: DS202   |
|                         | Dual Sample Required between 6/1/2018 and 6/7/2018at: DS202   |
|                         | Dual Sample Required between 9/1/2018 and 9/7/2018at: DS202   |
|                         | Dual Sample Required between 12/1/2018 and 12/7/2018at: DS202 |

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950

|                          |                         |   |                                |
|--------------------------|-------------------------|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b> | Facility Name: <b>DISTRIBUTION-GUERNSEY CO. WATER DEPT.</b> | Facility Class: <b>CLASS 1</b> |
|                          | SMP ID: <b>LC###</b>    | <b>Refer to your Lead and Copper plan for SMP IDs</b>       |                                |

| Chemicals                     | Monitoring Requirements |
|-------------------------------|-------------------------|
| LEAD - 1030 AND COPPER - 1022 | Not Required            |





Effective Date: 01/01/2018

2018 ENTRY POINT SCHEDULE

OH3000912 PLEASANT CITY, VILLAGE OF

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

|                          |   |   |                                |
|--------------------------|---|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>3054714</b><br>SMP ID: <b>EP001</b> | Facility Name: <b>WTP-PLEASANT CITY</b><br>Facility Source: <b>Ground Water</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|---|--------------------------------|

THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018

| Chemicals   | Monitoring Requirements  |
|---|--|
| ARSENIC - 1005  | 1 Sample(s) Required between 1/1/2018 and 3/31/2018<br>1 Sample(s) Required between 4/1/2018 and 6/30/2018<br>1 Sample(s) Required between 7/1/2018 and 9/30/2018<br>1 Sample(s) Required between 10/1/2018 and 12/31/2018 |
| INORGANICS  | Not Required   |
| NITRITE - 1041  | 1 Sample(s) Required between 1/1/2018 and 3/31/2018<br>1 Sample(s) Required between 4/1/2018 and 6/30/2018<br>1 Sample(s) Required between 7/1/2018 and 9/30/2018<br>1 Sample(s) Required between 10/1/2018 and 12/31/2018 |
| NITRATE - 1040  | 1 Sample(s) Required between 1/1/2018 and 5/31/2018  |
| RADIOLOGICALS   | Not Required   |
| SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1               | 1 Sample(s) Required between 1/1/2018 and 5/31/2018  |
| <i>Sample for all the analytes listed below:</i>        |  |
| ALACHLOR (LASSO) - 2051 ATRAZINE - 2050 SIMAZINE - 2037 |  |
| VOLATILE ORGANIC CHEMICALS (VOC)                        | Not Required   |

**OH3000912 PLEASANT CITY, VILLAGE OF**

System Type: Community

Operating Period: 1/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018**

**DISTRIBUTION MONITORING SCHEDULE**

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS000</b> | Facility Name: <b>DISTRIBUTION-PLEASANT CITY</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-----------|-------------------------|
|-----------|-------------------------|

|                             |  |
|-----------------------------|--|
| ASBESTOS - 1094             | Not Required   |
| TOTAL COLIFORM (TCR) - 3100 | 1 Sample(s) Required between 1/1/2018 and 1/31/2018<br>1 Sample(s) Required between 2/1/2018 and 2/28/2018<br>1 Sample(s) Required between 3/1/2018 and 3/31/2018<br>1 Sample(s) Required between 4/1/2018 and 4/30/2018<br>1 Sample(s) Required between 5/1/2018 and 5/31/2018<br>1 Sample(s) Required between 6/1/2018 and 6/30/2018<br>1 Sample(s) Required between 7/1/2018 and 7/31/2018<br>1 Sample(s) Required between 8/1/2018 and 8/31/2018<br>1 Sample(s) Required between 9/1/2018 and 9/30/2018<br>1 Sample(s) Required between 10/1/2018 and 10/31/2018<br>1 Sample(s) Required between 11/1/2018 and 11/30/2018<br>1 Sample(s) Required between 12/1/2018 and 12/31/2018 |
| TOTAL CHLORINE - 1000       | 1 Sample(s) Required between 1/1/2018 and 1/31/2018<br>1 Sample(s) Required between 2/1/2018 and 2/28/2018<br>1 Sample(s) Required between 3/1/2018 and 3/31/2018<br>1 Sample(s) Required between 4/1/2018 and 4/30/2018<br>1 Sample(s) Required between 5/1/2018 and 5/31/2018<br>1 Sample(s) Required between 6/1/2018 and 6/30/2018<br>1 Sample(s) Required between 7/1/2018 and 7/31/2018<br>1 Sample(s) Required between 8/1/2018 and 8/31/2018<br>1 Sample(s) Required between 9/1/2018 and 9/30/2018<br>1 Sample(s) Required between 10/1/2018 and 10/31/2018<br>1 Sample(s) Required between 11/1/2018 and 11/30/2018<br>1 Sample(s) Required between 12/1/2018 and 12/31/2018 |

*Samples should be collected at the same time and place as the Total Coliform samples.*

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS201</b> | Facility Name: <b>DISTRIBUTION-PLEASANT CITY</b><br><b>ADDRESS NOT KNOWN</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-----------|-------------------------|
|-----------|-------------------------|

|                         |   |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 7/1/2018 and 9/30/2018 at: DS201 |
|-------------------------|---|

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950



OH3000912 PLEASANT CITY, VILLAGE OF

System Type: Community

Operating Period: 1/1 to 12/31

Ground Water Rule Substantial System

THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018

DISTRIBUTION MONITORING SCHEDULE

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS202</b> | Facility Name: <b>DISTRIBUTION-PLEASANT CITY</b><br><b>ADDRESS NOT KNOWN</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

Chemicals Monitoring Requirements

DISINFECTION BYPRODUCTS Dual Sample Required between 7/1/2018 and 9/30/2018at: DS202

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950

|                          |   |   |                                |
|--------------------------|---|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>LC###</b> | Facility Name: <b>DISTRIBUTION-PLEASANT CITY</b><br><b>Refer to your Lead and Copper plan for SMP IDs</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|---|--------------------------------|

Chemicals Monitoring Requirements

LEAD - 1030 AND COPPER - 1022 5 Sample(s) Required between 6/1/2018 and 9/30/2018

Lead consumer notice must be completed no later than two business days after receipt of the sample results. The verification form for consumer notice must be submitted to Ohio EPA no later than five business days after receipt of the sample results. Lead and copper sample monitoring point (SMP) IDs (LC###) must be current and reflect properly tiered sites according to OAC Rule 3745-81-86. Submit lead and copper SMP ID revisions to your Ohio EPA District Office. Forms and templates are available online at http://epa.ohio.gov/ddagw/pws/leadandcopper.aspx. For questions contact your Ohio EPA District Office representative.



**OH3001011 QUAKER CITY**

System Type: Community

Operating Period: 1/1 to 12/31

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018**

**DISTRIBUTION MONITORING SCHEDULE**

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS000</b> | Facility Name: <b>DISTRIBUTION-QUAKER CITY</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

**Chemicals Monitoring Requirements**

|                             |                              |           |     |            |
|-----------------------------|------------------------------|-----------|-----|------------|
| TOTAL COLIFORM (TCR) - 3100 | 1 Sample(s) Required between | 1/1/2018  | and | 1/31/2018  |
|                             | 1 Sample(s) Required between | 2/1/2018  | and | 2/28/2018  |
|                             | 1 Sample(s) Required between | 3/1/2018  | and | 3/31/2018  |
|                             | 1 Sample(s) Required between | 4/1/2018  | and | 4/30/2018  |
|                             | 1 Sample(s) Required between | 5/1/2018  | and | 5/31/2018  |
|                             | 1 Sample(s) Required between | 6/1/2018  | and | 6/30/2018  |
|                             | 1 Sample(s) Required between | 7/1/2018  | and | 7/31/2018  |
|                             | 1 Sample(s) Required between | 8/1/2018  | and | 8/31/2018  |
|                             | 1 Sample(s) Required between | 9/1/2018  | and | 9/30/2018  |
|                             | 1 Sample(s) Required between | 10/1/2018 | and | 10/31/2018 |
|                             | 1 Sample(s) Required between | 11/1/2018 | and | 11/30/2018 |
|                             | 1 Sample(s) Required between | 12/1/2018 | and | 12/31/2018 |

|                       |                              |           |     |            |
|-----------------------|------------------------------|-----------|-----|------------|
| TOTAL CHLORINE - 1000 | 1 Sample(s) Required between | 1/1/2018  | and | 1/31/2018  |
|                       | 1 Sample(s) Required between | 2/1/2018  | and | 2/28/2018  |
|                       | 1 Sample(s) Required between | 3/1/2018  | and | 3/31/2018  |
|                       | 1 Sample(s) Required between | 4/1/2018  | and | 4/30/2018  |
|                       | 1 Sample(s) Required between | 5/1/2018  | and | 5/31/2018  |
|                       | 1 Sample(s) Required between | 6/1/2018  | and | 6/30/2018  |
|                       | 1 Sample(s) Required between | 7/1/2018  | and | 7/31/2018  |
|                       | 1 Sample(s) Required between | 8/1/2018  | and | 8/31/2018  |
|                       | 1 Sample(s) Required between | 9/1/2018  | and | 9/30/2018  |
|                       | 1 Sample(s) Required between | 10/1/2018 | and | 10/31/2018 |
|                       | 1 Sample(s) Required between | 11/1/2018 | and | 11/30/2018 |
|                       | 1 Sample(s) Required between | 12/1/2018 | and | 12/31/2018 |

Samples should be collected at the same time and place as the Total Coliform samples.

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS201</b> | Facility Name: <b>DISTRIBUTION-QUAKER CITY</b><br><b>STATE ROUTE 800</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

**Chemicals Monitoring Requirements**

|                         |                              |           |     |           |           |
|-------------------------|------------------------------|-----------|-----|-----------|-----------|
| DISINFECTION BYPRODUCTS | Dual Sample Required between | 1/1/2018  | and | 1/7/2018  | at: DS201 |
|                         | Dual Sample Required between | 4/1/2018  | and | 4/7/2018  | at: DS201 |
|                         | Dual Sample Required between | 7/1/2018  | and | 7/7/2018  | at: DS201 |
|                         | Dual Sample Required between | 10/1/2018 | and | 10/7/2018 | at: DS201 |

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950



**OH3001011 QUAKER CITY**

System Type: Community

Operating Period: 1/1 to 12/31

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018**

**DISTRIBUTION MONITORING SCHEDULE**

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS202</b> | Facility Name: <b>DISTRIBUTION-QUAKER CITY</b><br><b>126 FAIR STREET</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

| Chemicals               | Monitoring Requirements  |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 1/1/2018 and 1/7/2018at: DS202<br>Dual Sample Required between 4/1/2018 and 4/7/2018at: DS202<br>Dual Sample Required between 7/1/2018 and 7/7/2018at: DS202<br>Dual Sample Required between 10/1/2018 and 10/7/2018at: DS202 |

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950

|                          |   |   |                                |
|--------------------------|---|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>LC###</b> | Facility Name: <b>DISTRIBUTION-QUAKER CITY</b><br><b>Refer to your Lead and Copper plan for SMP IDs</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|---|--------------------------------|

| Chemicals                     | Monitoring Requirements                              |
|-------------------------------|--|
| LEAD - 1030 AND COPPER - 1022 | 10 Sample(s) Required between 6/1/2018 and 9/30/2018 |

*Lead consumer notice must be completed no later than two business days after receipt of the sample results. The verification form for consumer notice must be submitted to Ohio EPA no later than five business days after receipt of the sample results. Lead and copper sample monitoring point (SMP) IDs (LC###) must be current and reflect properly tiered sites according to OAC Rule 3745-81-86. Submit lead and copper SMP ID revisions to your Ohio EPA District Office. Forms and templates are available online at <http://epa.ohio.gov/ddagw/pws/leadandcopper.aspx>. For questions contact your Ohio EPA District Office representative.*



**OH3001103 WESTERN GUERNSEY REGIONAL WATER DISTRICT**

System Type: Community

Operating Period: 1/1 to 12/31

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018

**DISTRIBUTION MONITORING SCHEDULE**

|                          |   |   |                                |
|--------------------------|---|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS000</b> | Facility Name: <b>DISTRIBUTION-WESTERN GUERNSEY</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|---|--------------------------------|

**Chemicals Monitoring Requirements**

|                             |                              |           |     |            |
|-----------------------------|------------------------------|-----------|-----|------------|
| TOTAL COLIFORM (TCR) - 3100 | 3 Sample(s) Required between | 1/1/2018  | and | 1/31/2018  |
|                             | 3 Sample(s) Required between | 2/1/2018  | and | 2/28/2018  |
|                             | 3 Sample(s) Required between | 3/1/2018  | and | 3/31/2018  |
|                             | 3 Sample(s) Required between | 4/1/2018  | and | 4/30/2018  |
|                             | 3 Sample(s) Required between | 5/1/2018  | and | 5/31/2018  |
|                             | 3 Sample(s) Required between | 6/1/2018  | and | 6/30/2018  |
|                             | 3 Sample(s) Required between | 7/1/2018  | and | 7/31/2018  |
|                             | 3 Sample(s) Required between | 8/1/2018  | and | 8/31/2018  |
|                             | 3 Sample(s) Required between | 9/1/2018  | and | 9/30/2018  |
|                             | 3 Sample(s) Required between | 10/1/2018 | and | 10/31/2018 |
|                             | 3 Sample(s) Required between | 11/1/2018 | and | 11/30/2018 |
|                             | 3 Sample(s) Required between | 12/1/2018 | and | 12/31/2018 |

|                       |                              |           |     |            |
|-----------------------|------------------------------|-----------|-----|------------|
| TOTAL CHLORINE - 1000 | 3 Sample(s) Required between | 1/1/2018  | and | 1/31/2018  |
|                       | 3 Sample(s) Required between | 2/1/2018  | and | 2/28/2018  |
|                       | 3 Sample(s) Required between | 3/1/2018  | and | 3/31/2018  |
|                       | 3 Sample(s) Required between | 4/1/2018  | and | 4/30/2018  |
|                       | 3 Sample(s) Required between | 5/1/2018  | and | 5/31/2018  |
|                       | 3 Sample(s) Required between | 6/1/2018  | and | 6/30/2018  |
|                       | 3 Sample(s) Required between | 7/1/2018  | and | 7/31/2018  |
|                       | 3 Sample(s) Required between | 8/1/2018  | and | 8/31/2018  |
|                       | 3 Sample(s) Required between | 9/1/2018  | and | 9/30/2018  |
|                       | 3 Sample(s) Required between | 10/1/2018 | and | 10/31/2018 |
|                       | 3 Sample(s) Required between | 11/1/2018 | and | 11/30/2018 |
|                       | 3 Sample(s) Required between | 12/1/2018 | and | 12/31/2018 |

Samples should be collected at the same time and place as the Total Coliform samples.

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS201</b> | Facility Name: <b>DISTRIBUTION-WESTERN GUERNSEY</b><br><b>2703 BLOOMFIELD ROAD</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

**Chemicals Monitoring Requirements**

|                         |                              |           |     |           |           |
|-------------------------|------------------------------|-----------|-----|-----------|-----------|
| DISINFECTION BYPRODUCTS | Dual Sample Required between | 2/1/2018  | and | 2/7/2018  | at: DS201 |
|                         | Dual Sample Required between | 5/1/2018  | and | 5/7/2018  | at: DS201 |
|                         | Dual Sample Required between | 8/1/2018  | and | 8/7/2018  | at: DS201 |
|                         | Dual Sample Required between | 11/1/2018 | and | 11/7/2018 | at: DS201 |

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950



Effective Date: 01/01/2018

2018 DISTRIBUTION SCHEDULE

OH3001103 WESTERN GUERNSEY REGIONAL WATER DISTRICT

System Type: Community

Operating Period: 1/1 to 12/31

THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018

DISTRIBUTION MONITORING SCHEDULE

|                          |   |   |                                |
|--------------------------|---|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS202</b> | Facility Name: <b>DISTRIBUTION-WESTERN GUERNSEY</b><br><b>56032 CLAYSVILLE ROAD</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|---|--------------------------------|

| Chemicals               | Monitoring Requirements                                       |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/1/2018 and 2/7/2018at: DS202   |
|                         | Dual Sample Required between 5/1/2018 and 5/7/2018at: DS202   |
|                         | Dual Sample Required between 8/1/2018 and 8/7/2018at: DS202   |
|                         | Dual Sample Required between 11/1/2018 and 11/7/2018at: DS202 |

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>LC###</b> | Facility Name: <b>DISTRIBUTION-WESTERN GUERNSEY</b><br><b>Refer to your Lead and Copper plan for SMP IDs</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

| Chemicals                     | Monitoring Requirements |
|-------------------------------|-------------------------|
| LEAD - 1030 AND COPPER - 1022 | Not Required            |



OH3001212 BYESVILLE

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

|                          |                             |                                       |                                |
|--------------------------|-----------------------------|---------------------------------------|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>3054706</b> | Facility Name: <b>WTP-PLANT #2</b>    | Facility Class: <b>CLASS 3</b> |
|                          | SMP ID: <b>EP002</b>        | Facility Source: <b>Surface Water</b> |                                |

THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018

| Chemicals  | Monitoring Requirements  |
|--|--|
| INORGANICS   | 1 Sample(s) Required between 1/1/2018 and 5/31/2018  |
| <i>Sample for all the analytes listed below:</i>   |  |
| ANTIMONY, TOTAL - 1074 ARSENIC - 1005 BARIUM - 1010 BERYLLIUM, TOTAL - 1075 CADMIUM - 1015 CHROMIUM - 1020 |  |
| CYANIDE - 1024 FLUORIDE - 1025 MERCURY - 1035 NICKEL - 1036 SELENIUM - 1045 THALLIUM, TOTAL - 1085         |  |
| NITRITE - 1041   | Not Required   |
| NITRATE - 1040   | 1 Sample(s) Required between 1/1/2018 and 1/31/2018<br>1 Sample(s) Required between 2/1/2018 and 2/28/2018<br>1 Sample(s) Required between 3/1/2018 and 3/31/2018<br>1 Sample(s) Required between 4/1/2018 and 4/30/2018<br>1 Sample(s) Required between 5/1/2018 and 5/31/2018<br>1 Sample(s) Required between 6/1/2018 and 6/30/2018<br>1 Sample(s) Required between 7/1/2018 and 7/31/2018<br>1 Sample(s) Required between 8/1/2018 and 8/31/2018<br>1 Sample(s) Required between 9/1/2018 and 9/30/2018<br>1 Sample(s) Required between 10/1/2018 and 10/31/2018<br>1 Sample(s) Required between 11/1/2018 and 11/30/2018<br>1 Sample(s) Required between 12/1/2018 and 12/31/2018 |
| RADIOLOGICALS  | Not Required   |
| SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1  | 1 Sample(s) Required between 4/1/2018 and 6/30/2018  |
| <i>Sample for all the analytes listed below:</i>   |  |
| ALACHLOR (LASSO) - 2051 ATRAZINE - 2050 SIMAZINE - 2037  |  |
| VOLATILE ORGANIC CHEMICALS (VOC)   | 1 Sample(s) Required between 1/1/2018 and 5/31/2018  |





OH3001212 BYESVILLE

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

|                 |                             |                                       |                                |
|-----------------|-----------------------------|---------------------------------------|--------------------------------|
| <b>Sampling</b> | Facility ID: <b>3054706</b> | Facility Name: <b>WTP-PLANT #2</b>    |                                |
| <b>Location</b> | SMP ID: <b>LT2002</b>       | Facility Source: <b>Surface Water</b> | Facility Class: <b>CLASS 3</b> |

THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018

| Chemicals  | Monitoring Requirements                              |
|--|--|
| CYANOBACTERIA SCREENING                                | 1 Sample(s) Required between 1/7/2018 and 1/13/2018  |
|  | 1 Sample(s) Required between 1/21/2018 and 1/27/2018 |
|  | 1 Sample(s) Required between 2/4/2018 and 2/10/2018  |
|  | 1 Sample(s) Required between 2/18/2018 and 2/24/2018 |
|  | 1 Sample(s) Required between 3/4/2018 and 3/10/2018  |
|  | 1 Sample(s) Required between 3/18/2018 and 3/24/2018 |
|  | 1 Sample(s) Required between 4/1/2018 and 4/7/2018   |
|  | 1 Sample(s) Required between 4/15/2018 and 4/21/2018 |
|  | 1 Sample(s) Required between 4/29/2018 and 5/5/2018  |
|  | 1 Sample(s) Required between 5/13/2018 and 5/19/2018 |
|  | 1 Sample(s) Required between 5/27/2018 and 6/2/2018  |
|  | 1 Sample(s) Required between 6/10/2018 and 6/16/2018 |
|  | 1 Sample(s) Required between 6/24/2018 and 6/30/2018 |
|  | 1 Sample(s) Required between 7/8/2018 and 7/14/2018  |
|  | 1 Sample(s) Required between 7/22/2018 and 7/28/2018 |
|  | 1 Sample(s) Required between 8/5/2018 and 8/11/2018  |
|  | 1 Sample(s) Required between 8/19/2018 and 8/25/2018 |
|  | 1 Sample(s) Required between 9/2/2018 and 9/8/2018   |
|  | 1 Sample(s) Required between 9/16/2018 and 9/22/2018 |
|  | 1 Sample(s) Required between 9/30/2018 and 10/6/2018 |
| 1 Sample(s) Required between 10/14/2018 and 10/20/2018 |  |
| 1 Sample(s) Required between 10/28/2018 and 11/3/2018  |  |
| 1 Sample(s) Required between 11/11/2018 and 11/17/2018 |  |
| 1 Sample(s) Required between 11/25/2018 and 12/1/2018  |  |
| 1 Sample(s) Required between 12/9/2018 and 12/15/2018  |  |
| 1 Sample(s) Required between 12/23/2018 and 12/29/2018 |  |

Cyanobacteria screening sample is to be collected biweekly from raw source water at sample point LT2001 unless requirements for reduced monitoring are met. Current reduced monitoring schedules can be found at <http://epa.ohio.gov/ddagw/HAB.aspx>. As of 12/31/17, all public water systems are responsible for contracting with a lab certified to perform cyanobacteria screening (qPCR). Please review the website for further information pertaining to follow-up sampling requirements for cyanobacteria screening gene detections, and certified labs that can perform analysis.

**OH3001212 BYESVILLE**

System Type: Community

Operating Period: 1/1 to 12/31

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018**

**DISTRIBUTION MONITORING SCHEDULE**

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS000</b> | Facility Name: <b>DISTRIBUTION-BYESVILLE</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-----------|-------------------------|
|-----------|-------------------------|

|                 |              |
|-----------------|--------------|
| ASBESTOS - 1094 | Not Required |
|-----------------|--------------|

|                             |   |
|-----------------------------|---|
| TOTAL COLIFORM (TCR) - 3100 | 5 Sample(s) Required between 1/1/2018 and 1/31/2018   |
|                             | 5 Sample(s) Required between 2/1/2018 and 2/28/2018   |
|                             | 5 Sample(s) Required between 3/1/2018 and 3/31/2018   |
|                             | 5 Sample(s) Required between 4/1/2018 and 4/30/2018   |
|                             | 5 Sample(s) Required between 5/1/2018 and 5/31/2018   |
|                             | 5 Sample(s) Required between 6/1/2018 and 6/30/2018   |
|                             | 5 Sample(s) Required between 7/1/2018 and 7/31/2018   |
|                             | 5 Sample(s) Required between 8/1/2018 and 8/31/2018   |
|                             | 5 Sample(s) Required between 9/1/2018 and 9/30/2018   |
|                             | 5 Sample(s) Required between 10/1/2018 and 10/31/2018 |
|                             | 5 Sample(s) Required between 11/1/2018 and 11/30/2018 |
|                             | 5 Sample(s) Required between 12/1/2018 and 12/31/2018 |

|                       |   |
|-----------------------|---|
| TOTAL CHLORINE - 1000 | 5 Sample(s) Required between 1/1/2018 and 1/31/2018   |
|                       | 5 Sample(s) Required between 2/1/2018 and 2/28/2018   |
|                       | 5 Sample(s) Required between 3/1/2018 and 3/31/2018   |
|                       | 5 Sample(s) Required between 4/1/2018 and 4/30/2018   |
|                       | 5 Sample(s) Required between 5/1/2018 and 5/31/2018   |
|                       | 5 Sample(s) Required between 6/1/2018 and 6/30/2018   |
|                       | 5 Sample(s) Required between 7/1/2018 and 7/31/2018   |
|                       | 5 Sample(s) Required between 8/1/2018 and 8/31/2018   |
|                       | 5 Sample(s) Required between 9/1/2018 and 9/30/2018   |
|                       | 5 Sample(s) Required between 10/1/2018 and 10/31/2018 |
|                       | 5 Sample(s) Required between 11/1/2018 and 11/30/2018 |
|                       | 5 Sample(s) Required between 12/1/2018 and 12/31/2018 |

*Samples should be collected at the same time and place as the Total Coliform samples.*

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS201</b> | Facility Name: <b>DISTRIBUTION-BYESVILLE</b><br><b>431 CARL STREET</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-----------|-------------------------|
|-----------|-------------------------|

|                         |   |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/1/2018 and 3/7/2018at: DS201   |
|                         | Dual Sample Required between 6/1/2018 and 6/7/2018at: DS201   |
|                         | Dual Sample Required between 9/1/2018 and 9/7/2018at: DS201   |
|                         | Dual Sample Required between 12/1/2018 and 12/7/2018at: DS201 |

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950



**OH3001212 BYESVILLE**

System Type: Community

Operating Period: 1/1 to 12/31

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2018**

**DISTRIBUTION MONITORING SCHEDULE**

|                          |   |   |                                |
|--------------------------|---|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS202</b> | Facility Name: <b>DISTRIBUTION-BYESVILLE</b><br><b>357 NORTH CAMBRIDGE STREET</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|---|--------------------------------|

| Chemicals               | Monitoring Requirements  |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/1/2018 and 3/7/2018at: DS202<br>Dual Sample Required between 6/1/2018 and 6/7/2018at: DS202<br>Dual Sample Required between 9/1/2018 and 9/7/2018at: DS202<br>Dual Sample Required between 12/1/2018 and 12/7/2018at: DS202 |

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950

|                          |   |   |                                |
|--------------------------|---|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>LC###</b> | Facility Name: <b>DISTRIBUTION-BYESVILLE</b><br><b>Refer to your Lead and Copper plan for SMP IDs</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|---|--------------------------------|

| Chemicals                     | Monitoring Requirements                              |
|-------------------------------|--|
| LEAD - 1030 AND COPPER - 1022 | 20 Sample(s) Required between 6/1/2018 and 9/30/2018 |

*Lead consumer notice must be completed no later than two business days after receipt of the sample results. The verification form for consumer notice must be submitted to Ohio EPA no later than five business days after receipt of the sample results. Lead and copper sample monitoring point (SMP) IDs (LC###) must be current and reflect properly tiered sites according to OAC Rule 3745-81-86. Submit lead and copper SMP ID revisions to your Ohio EPA District Office. Forms and templates are available online at <http://epa.ohio.gov/ddagw/pws/leadandcopper.aspx>. For questions contact your Ohio EPA District Office representative.*

**OH3033712 MWCD PIEDMONT CAMP P2 PWS**

System Type: Transient Noncommunity

Operating Period: 4/1 to 10/31

Ground Water Rule Minimal Treatment System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

**Sampling Facility ID: DS1 Facility Name: MWCD,PIEDMONT CAMP P2 DISTRIBUTION**  
**Location SMP ID: SUP01 Facility Source: Ground Water**

| Chemicals                         | Monitoring Requirements  |
|-----------------------------------|--|
| TOTAL COLIFORM - SEASONAL STARTUP | At least 1 negative Total Coliform<br>Bacteria sample prior to serving water to the public |

\*\*\* Seasonal start-up sample does not count for routine compliance requirements. Collect at least one special purpose (SP) sample for total coliform (TC) analysis at the service connection considered to be most susceptible to contamination. The sample must be TC negative before the system may serve water to the public. If the sample is positive, contact your Ohio EPA District Representative for additional requirements. If your start date is different from last year, please contact your Ohio EPA District Representative.\*\*\*

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3033712 MWCD PIEDMONT CAMP P2 PWS**

System Type: Transient Noncommunity

Operating Period: 4/1 to 10/31

Ground Water Rule Minimal Treatment System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

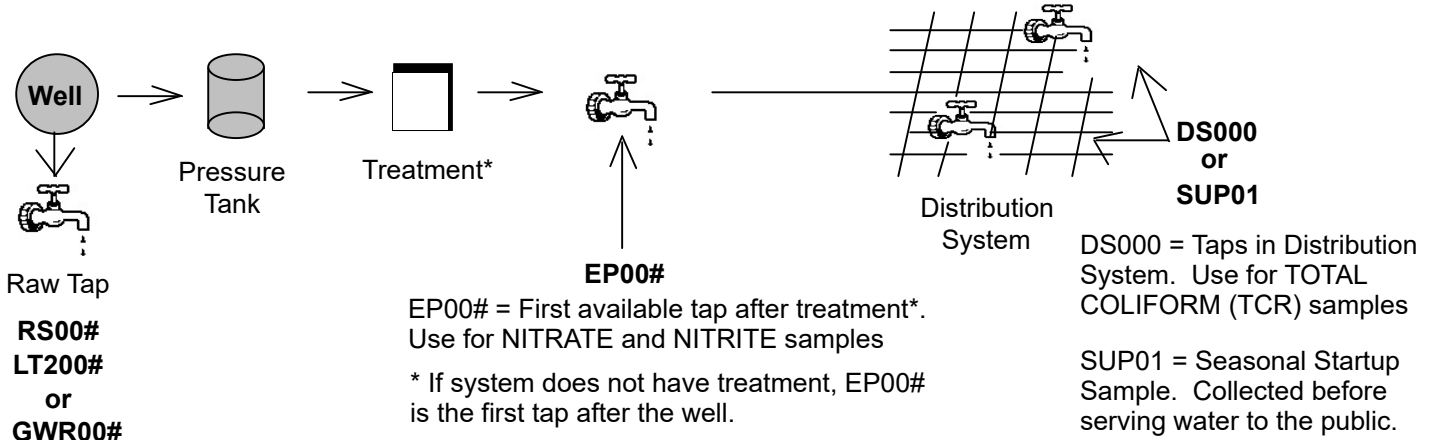
For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

|                                  |   |
|----------------------------------|---|
| <b>Sampling Facility ID:</b> DS1 | <b>Facility Name:</b> MWCD, PIEDMONT CAMP P2 DISTRIBUTION |
| <b>Location SMP ID:</b> DS000    | <b>Facility Source:</b> Ground Water                      |

| Chemicals                   | Monitoring Requirements   |
|-----------------------------|---|
| TOTAL COLIFORM (TCR) - 3100 | 1 Sample(s) Required between 4/1/2018 and 6/30/2018<br>1 Sample(s) Required between 7/1/2018 and 9/30/2018<br>1 Sample(s) Required between 10/1/2018 and 10/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3033712 MWCD PIEDMONT CAMP P2 PWS**

System Type: Transient Noncommunity

Operating Period: 4/1 to 10/31

Ground Water Rule Minimal Treatment System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**ENTRY POINT MONITORING SCHEDULE**

**Sampling Facility ID: 3054726 Facility Name: MWCD PIEDMONT CAMP P2**  
**Location SMP ID: EP001 Facility Source: Ground Water**

| Chemicals      | Monitoring Requirements                             |
|----------------|---|
| NITRITE - 1041 | Not Required  |
| NITRATE - 1040 | 1 Sample(s) Required between 1/1/2018 and 5/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3033912 THE SHACK**

System Type: Transient Noncommunity

Operating Period: 4/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

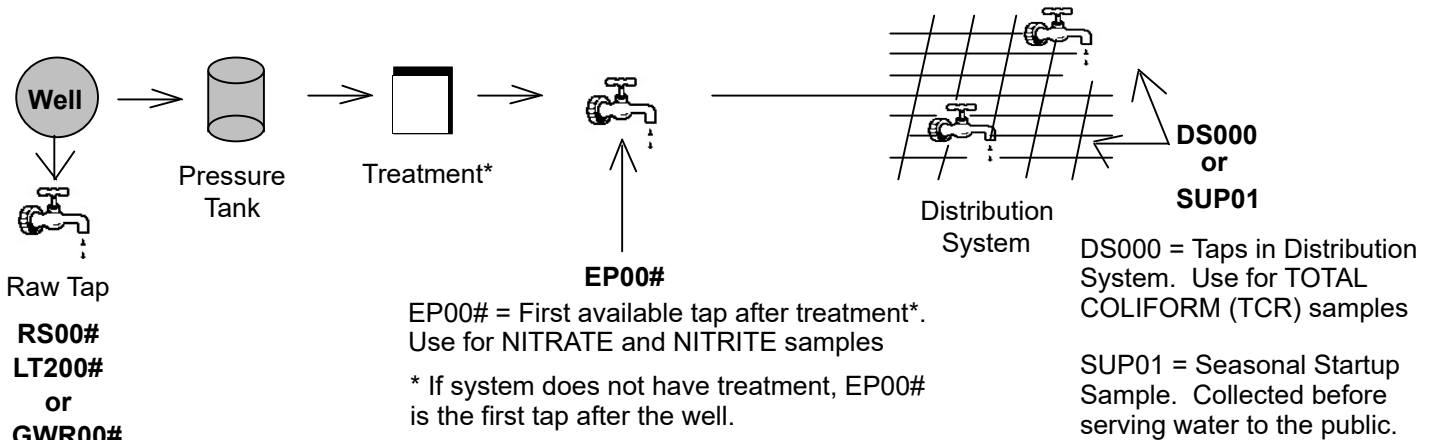
**DISTRIBUTION MONITORING SCHEDULE**

**Sampling** Facility ID: **DS1** Facility Name: **SUGARSHACK DISTRIBUTION**  
**Location** SMP ID: **SUP01** Facility Source: **Ground Water**

| Chemicals                         | Monitoring Requirements  |
|-----------------------------------|--|
| TOTAL COLIFORM - SEASONAL STARTUP | At least 1 negative Total Coliform<br>Bacteria sample prior to serving water to the public |

\*\*\* Seasonal start-up sample does not count for routine compliance requirements. Collect at least one special purpose (SP) sample for total coliform (TC) analysis at the service connection considered to be most susceptible to contamination. The sample must be TC negative before the system may serve water to the public. If the sample is positive, contact your Ohio EPA District Representative for additional requirements. If your start date is different from last year, please contact your Ohio EPA District Representative.\*\*\*

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3033912 THE SHACK**

System Type: Transient Noncommunity

Operating Period: 4/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

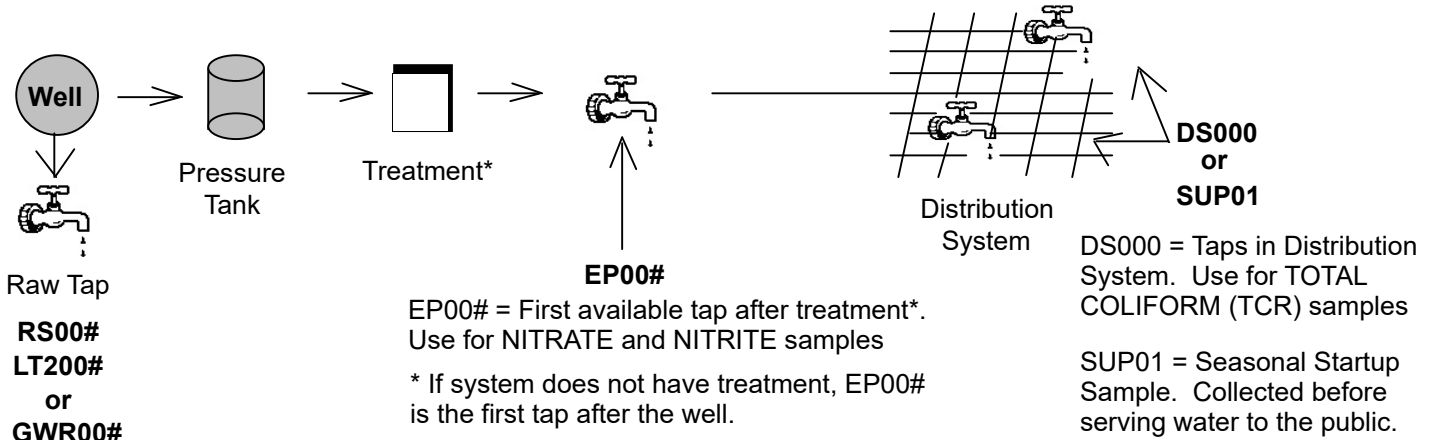
For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

**Sampling Facility ID: DS1 Facility Name: SUGARSHACK DISTRIBUTION**  
**Location SMP ID: DS000 Facility Source: Ground Water**

| Chemicals                   | Monitoring Requirements                               |
|-----------------------------|---|
| TOTAL COLIFORM (TCR) - 3100 | 1 Sample(s) Required between 4/1/2018 and 4/30/2018   |
|                             | 1 Sample(s) Required between 5/1/2018 and 5/31/2018   |
|                             | 1 Sample(s) Required between 6/1/2018 and 6/30/2018   |
|                             | 1 Sample(s) Required between 7/1/2018 and 7/31/2018   |
|                             | 1 Sample(s) Required between 8/1/2018 and 8/31/2018   |
|                             | 1 Sample(s) Required between 9/1/2018 and 9/30/2018   |
|                             | 1 Sample(s) Required between 10/1/2018 and 10/31/2018 |
|                             | 1 Sample(s) Required between 11/1/2018 and 11/30/2018 |
|                             | 1 Sample(s) Required between 12/1/2018 and 12/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**



**OH3033912 THE SHACK**

System Type: Transient Noncommunity

Operating Period: 4/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

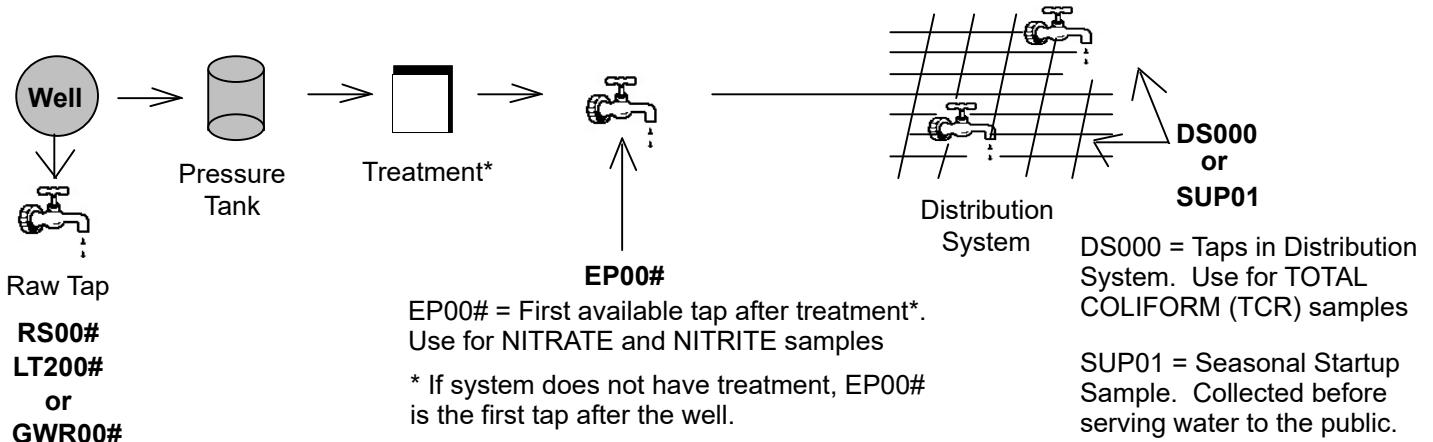
For water emergencies that occur after hours, please call 800-282-9378

**ENTRY POINT MONITORING SCHEDULE**

**Sampling** Facility ID: 3054727 Facility Name: SUGARSHACK  
**Location** SMP ID: EP001 Facility Source: Ground Water

| Chemicals      | Monitoring Requirements                             |
|----------------|---|
| NITRATE - 1040 | 1 Sample(s) Required between 1/1/2018 and 5/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3034212 170 FUEL MART 727**

System Type: Transient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

**Sampling Facility ID: DS1 Facility Name: 170 FUEL MART 727 DISTRIBUTION**  
**Location SMP ID: DS000 Facility Source: Ground Water**

| Chemicals                   | Monitoring Requirements                               |
|-----------------------------|---|
| TOTAL COLIFORM (TCR) - 3100 | 1 Sample(s) Required between 1/1/2018 and 3/31/2018   |
|                             | 1 Sample(s) Required between 4/1/2018 and 6/30/2018   |
|                             | 1 Sample(s) Required between 7/1/2018 and 9/30/2018   |
|                             | 1 Sample(s) Required between 10/1/2018 and 12/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3034212 I70 FUEL MART 727**

System Type: Transient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

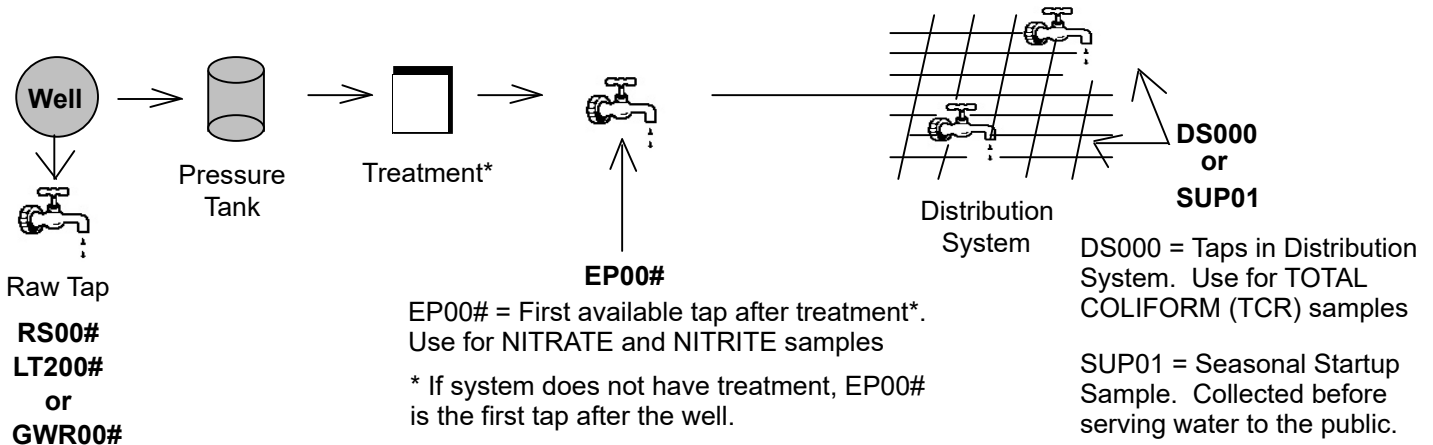
**ENTRY POINT MONITORING SCHEDULE**

**Sampling Facility ID: 3054728 Facility Name: PORTS PETROLEUM CO INC GAS MART NO 727**

**Location SMP ID: EP001 Facility Source: Ground Water**

| Chemicals      | Monitoring Requirements                             |
|----------------|---|
| NITRITE - 1041 | Not Required  |
| NITRATE - 1040 | 1 Sample(s) Required between 1/1/2018 and 5/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3034312 SPRING VALLEY OUTDOORS, INC**

System Type: Transient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

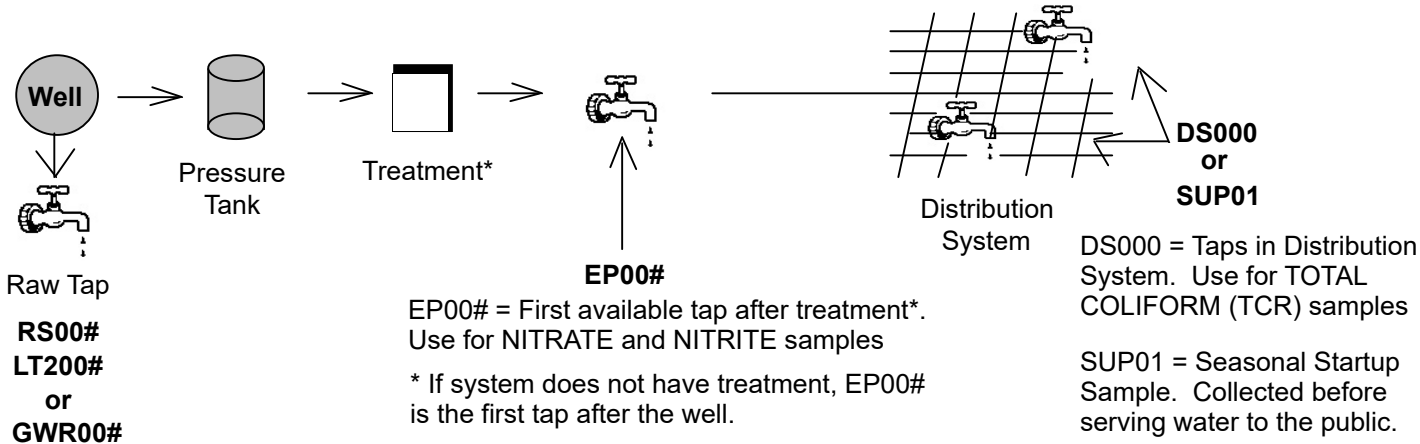
For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

**Sampling** Facility ID: **DS1** Facility Name: **SPRING VALLEY CAMPGROUND DISTRIBUTION**  
**Location** SMP ID: **DS000** Facility Source: **Ground Water**

| Chemicals                   | Monitoring Requirements                               |
|-----------------------------|---|
| TOTAL COLIFORM (TCR) - 3100 | 1 Sample(s) Required between 1/1/2018 and 3/31/2018   |
|                             | 1 Sample(s) Required between 4/1/2018 and 6/30/2018   |
|                             | 1 Sample(s) Required between 7/1/2018 and 9/30/2018   |
|                             | 1 Sample(s) Required between 10/1/2018 and 12/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3034312 SPRING VALLEY OUTDOORS, INC**

System Type: Transient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**ENTRY POINT MONITORING SCHEDULE**

**Sampling Facility ID: 3054729 Facility Name: SPRING VALLEY CAMPGROUND**  
**Location SMP ID: EP001 Facility Source: Ground Water**

| Chemicals      | Monitoring Requirements                             |
|----------------|---|
| NITRITE - 1041 | Not Required  |
| NITRATE - 1040 | 1 Sample(s) Required between 1/1/2018 and 5/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**



Effective Date: 08/20/2018

2018 ENTRY POINT SCHEDULE

OH3053012 SALT FORK UTILITY CO.

System Type: Nontransient Noncommunity

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

|                          |                             |  |                                |
|--------------------------|-----------------------------|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>3054731</b> | Facility Name: <b>SALT FORK UTILITY CO</b> | Facility Class: <b>CLASS 1</b> |
|                          | SMP ID: <b>EP001</b>        | Facility Source: <b>Ground Water</b>       |                                |

THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

| Chemicals  | Monitoring Requirements                               |
|--|---|
| INORGANICS   | Not Required  |
| NITRITE - 1041   | Not Required  |
| NITRATE - 1040   | 1 Sample(s) Required between 1/1/2018 and 5/31/2018   |
| SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1                      | 1 Sample(s) Required between 6/1/2018 and 10/31/2018  |
| <b>Sample for all the analytes listed below:</b>               |   |
| <b>ALACHLOR (LASSO) - 2051 ATRAZINE - 2050 SIMAZINE - 2037</b> |   |
| VOLATILE ORGANIC CHEMICALS (VOC)                               | 1 Sample(s) Required between 7/1/2018 and 9/30/2018   |
|  | 1 Sample(s) Required between 10/1/2018 and 12/31/2018 |

**OH3053012 SALT FORK UTILITY CO.**

System Type: Nontransient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS000</b> | Facility Name: <b>SALT FORK UTILITY CO. DISTRIBUTION</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

| Chemicals                   | Monitoring Requirements                               |
|-----------------------------|---|
| TOTAL COLIFORM (TCR) - 3100 | 2 Sample(s) Required between 1/1/2018 and 1/31/2018   |
|                             | 2 Sample(s) Required between 2/1/2018 and 2/28/2018   |
|                             | 2 Sample(s) Required between 3/1/2018 and 3/31/2018   |
|                             | 2 Sample(s) Required between 4/1/2018 and 4/30/2018   |
|                             | 2 Sample(s) Required between 5/1/2018 and 5/31/2018   |
|                             | 2 Sample(s) Required between 6/1/2018 and 6/30/2018   |
|                             | 2 Sample(s) Required between 7/1/2018 and 7/31/2018   |
|                             | 2 Sample(s) Required between 8/1/2018 and 8/31/2018   |
|                             | 2 Sample(s) Required between 9/1/2018 and 9/30/2018   |
|                             | 2 Sample(s) Required between 10/1/2018 and 10/31/2018 |
|                             | 2 Sample(s) Required between 11/1/2018 and 11/30/2018 |
|                             | 2 Sample(s) Required between 12/1/2018 and 12/31/2018 |

|                          |   |   |                                |
|--------------------------|---|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS201</b> | Facility Name: <b>SALT FORK UTILITY CO. DISTRIBUTION</b><br><b>UNKOWN</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|---|--------------------------------|

| Chemicals               | Monitoring Requirements                                      |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 7/1/2018 and 9/30/2018at: DS201 |

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950

|                          |   |  |                                |
|--------------------------|---|--|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>DS202</b> | Facility Name: <b>SALT FORK UTILITY CO. DISTRIBUTION</b><br><b>UNKNOWN</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|--|--------------------------------|

| Chemicals               | Monitoring Requirements                                      |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 7/1/2018 and 9/30/2018at: DS202 |

Sample for all the analytes listed below:

- 1) TOTAL HALOACETIC ACIDS (HAA5) – 2456
- 2) TTHM - 2950



Effective Date: 07/13/2018

2018 DISTRIBUTION SCHEDULE

**OH3053012 SALT FORK UTILITY CO.**

System Type: Nontransient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

|                          |   |   |                                |
|--------------------------|---|---|--------------------------------|
| <b>Sampling Location</b> | Facility ID: <b>DS1</b><br>SMP ID: <b>LC###</b> | Facility Name: <b>SALT FORK UTILITY CO. DISTRIBUTION</b><br><b>Refer to your Lead and Copper plan for SMP IDs</b> | Facility Class: <b>CLASS 1</b> |
|--------------------------|---|---|--------------------------------|

| <b>Chemicals</b>              | <b>Monitoring Requirements</b>                        |
|-------------------------------|---|
| LEAD - 1030 AND COPPER - 1022 | 20 Sample(s) Required between 7/1/2018 and 12/31/2018 |

*Lead consumer notice must be completed no later than two business days after receipt of the sample results. The verification form for consumer notice must be submitted to Ohio EPA no later than five business days after receipt of the sample results. Lead and copper sample monitoring point (SMP) IDs (LC###) must be current and reflect properly tiered sites according to OAC Rule 3745-81-86. Submit lead and copper SMP ID revisions to your Ohio EPA District Office. Forms and templates are available online at <http://epa.ohio.gov/ddagw/pws/leadandcopper.aspx>. For questions contact your Ohio EPA District Office representative.*



**OH3053312 GENIE MANAGEMENT, LLC PWS**

System Type: Transient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

**Sampling** Facility ID: **DS1** Facility Name: **B P FOOD MART DISTRIBUTION**  
**Location** SMP ID: **DS000** Facility Source: **Ground Water**

| Chemicals                   | Monitoring Requirements                               |
|-----------------------------|---|
| TOTAL COLIFORM (TCR) - 3100 | 1 Sample(s) Required between 1/1/2018 and 3/31/2018   |
|                             | 1 Sample(s) Required between 4/1/2018 and 6/30/2018   |
|                             | 1 Sample(s) Required between 7/1/2018 and 9/30/2018   |
|                             | 1 Sample(s) Required between 10/1/2018 and 12/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3053312 GENIE MANAGEMENT, LLC PWS**

System Type: Transient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**ENTRY POINT MONITORING SCHEDULE**

**Sampling Facility ID: 3054732 Facility Name: GENIE MANAGEMENT LLC**  
**Location SMP ID: EP001 Facility Source: Ground Water**

| Chemicals      | Monitoring Requirements                             |
|----------------|---|
| NITRITE - 1041 | Not Required  |
| NITRATE - 1040 | 1 Sample(s) Required between 1/1/2018 and 5/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3053912 GARYS BP PWS**

System Type: Transient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

**Sampling** Facility ID: **DS1** Facility Name: **GARYS BP DISTRIBUTION**  
**Location** SMP ID: **DS000** Facility Source: **Ground Water**

| Chemicals                   | Monitoring Requirements  |
|-----------------------------|--|
| TOTAL COLIFORM (TCR) - 3100 | 1 Sample(s) Required between 1/1/2018 and 3/31/2018<br>1 Sample(s) Required between 4/1/2018 and 6/30/2018<br>1 Sample(s) Required between 7/1/2018 and 9/30/2018<br>1 Sample(s) Required between 10/1/2018 and 12/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3053912 GARYS BP PWS**

System Type: Transient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**ENTRY POINT MONITORING SCHEDULE**

**Sampling Facility ID: 3054736 Facility Name: GARYS BP**  
**Location SMP ID: EP001 Facility Source: Ground Water**

| Chemicals      | Monitoring Requirements                             |
|----------------|---|
| NITRITE - 1041 | Not Required  |
| NITRATE - 1040 | 1 Sample(s) Required between 1/1/2018 and 5/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3054212 BIG SKY CAMPGROUND**

System Type: Transient Noncommunity

Operating Period: 4/1 to 9/30

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

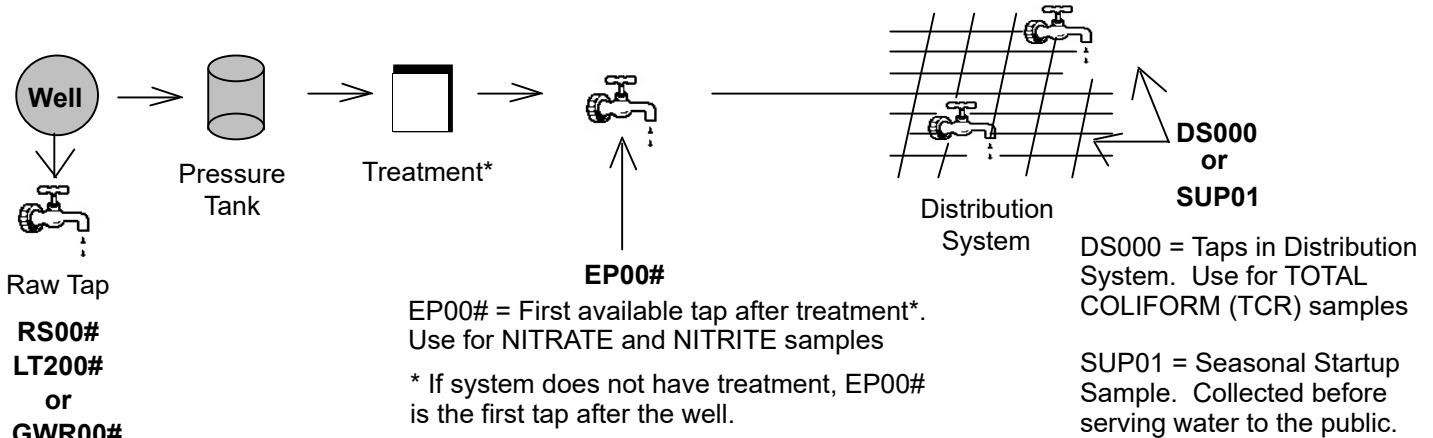
**DISTRIBUTION MONITORING SCHEDULE**

**Sampling Facility ID: DS1 Facility Name: BIG SKY CAMPGROUND DISTRIBUTION**  
**Location SMP ID: SUP01 Facility Source: Ground Water**

| Chemicals                         | Monitoring Requirements   |
|-----------------------------------|---|
| TOTAL COLIFORM - SEASONAL STARTUP | At least 1 negative Total Coliform Bacteria sample prior to serving water to the public |

\*\*\* Seasonal start-up sample does not count for routine compliance requirements. Collect at least one special purpose (SP) sample for total coliform (TC) analysis at the service connection considered to be most susceptible to contamination. The sample must be TC negative before the system may serve water to the public. If the sample is positive, contact your Ohio EPA District Representative for additional requirements. If your start date is different from last year, please contact your Ohio EPA District Representative.\*\*\*

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3054212 BIG SKY CAMPGROUND**

System Type: Transient Noncommunity

Operating Period: 4/1 to 9/30

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

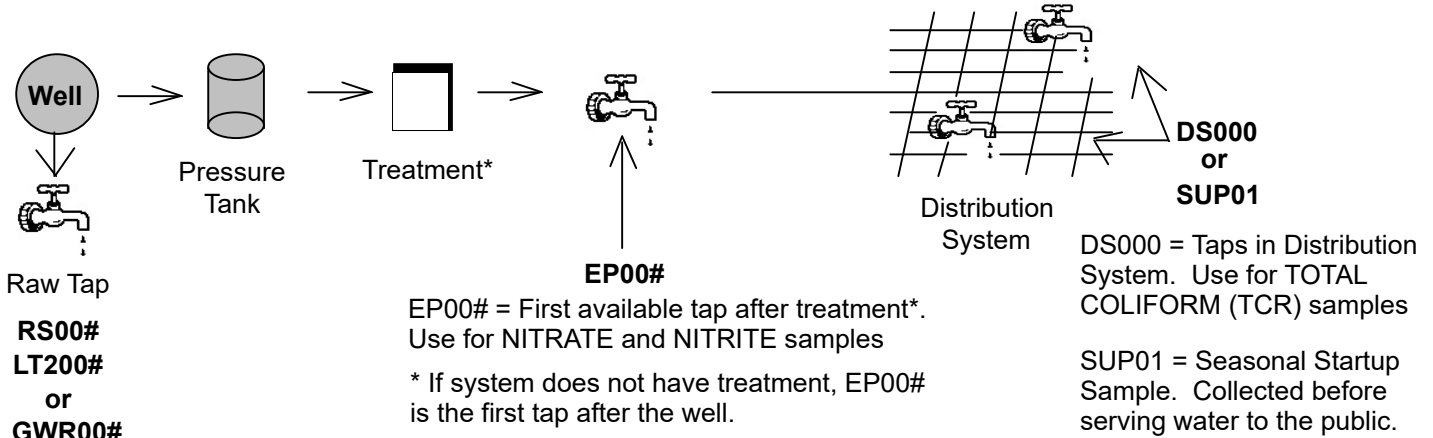
For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

**Sampling Facility ID: DS1 Facility Name: BIG SKY CAMPGROUND DISTRIBUTION**  
**Location SMP ID: DS000 Facility Source: Ground Water**

| Chemicals                   | Monitoring Requirements  |
|-----------------------------|--|
| TOTAL COLIFORM (TCR) - 3100 | 1 Sample(s) Required between 4/1/2018 and 6/30/2018<br>1 Sample(s) Required between 7/1/2018 and 9/30/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3054212 BIG SKY CAMPGROUND**

System Type: Transient Noncommunity

Operating Period: 4/1 to 9/30

Ground Water Rule Substantial System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**ENTRY POINT MONITORING SCHEDULE**

**Sampling Facility ID: 3054739 Facility Name: BIG SKY CAMPGROUND**  
**Location SMP ID: EP001 Facility Source: Ground Water**

| Chemicals      | Monitoring Requirements                             |
|----------------|---|
| NITRITE - 1041 | Not Required  |
| NITRATE - 1040 | 1 Sample(s) Required between 1/1/2018 and 5/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3054312 JACKIES FAMILY RESTAURANT**

System Type: Transient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Minimal Treatment System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

|                                  |  |
|----------------------------------|--|
| <b>Sampling Facility ID:</b> DS1 | <b>Facility Name:</b> JACKIES FAMILY RESTAURANT DISTRIBUTION |
| <b>Location SMP ID:</b> DS000    | <b>Facility Source:</b> Ground Water                         |

| Chemicals                   | Monitoring Requirements                               |
|-----------------------------|---|
| TOTAL COLIFORM (TCR) - 3100 | 1 Sample(s) Required between 1/1/2018 and 3/31/2018   |
|                             | 1 Sample(s) Required between 4/1/2018 and 6/30/2018   |
|                             | 1 Sample(s) Required between 7/1/2018 and 9/30/2018   |
|                             | 1 Sample(s) Required between 10/1/2018 and 12/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**



**OH3054312 JACKIES FAMILY RESTAURANT**

System Type: Transient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Minimal Treatment System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

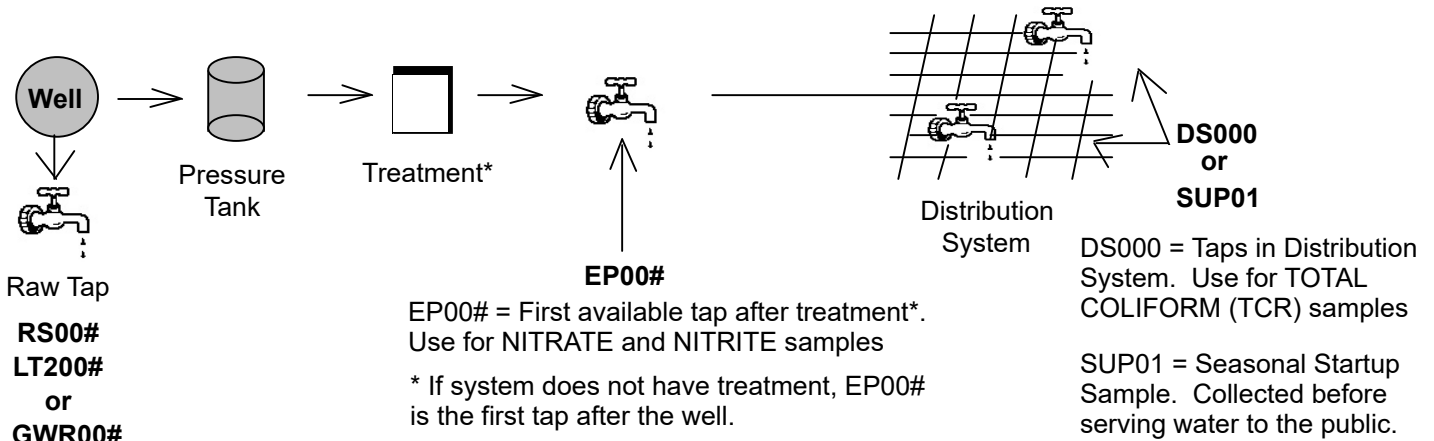
**ENTRY POINT MONITORING SCHEDULE**

**Sampling Facility ID: 3054740 Facility Name: JACKIES FAMILY RESTAURANT**

**Location SMP ID: EP001 Facility Source: Ground Water**

| Chemicals      | Monitoring Requirements                             |
|----------------|---|
| NITRITE - 1041 | Not Required  |
| NITRATE - 1040 | 1 Sample(s) Required between 1/1/2018 and 3/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3054512 GEORGETOWN WINERY PWS**

System Type: Transient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Minimal Treatment System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

**Sampling** Facility ID: **DS1** Facility Name: **GEORGETOWN WINERY DISTRIBUTION**  
**Location** SMP ID: **DS000** Facility Source: **Ground Water**

| Chemicals                   | Monitoring Requirements                               |
|-----------------------------|---|
| TOTAL COLIFORM (TCR) - 3100 | 1 Sample(s) Required between 1/1/2018 and 3/31/2018   |
|                             | 1 Sample(s) Required between 4/1/2018 and 6/30/2018   |
|                             | 1 Sample(s) Required between 7/1/2018 and 9/30/2018   |
|                             | 1 Sample(s) Required between 10/1/2018 and 12/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**

**OH3054512 GEORGETOWN WINERY PWS**

System Type: Transient Noncommunity

Operating Period: 1/1 to 12/31

Ground Water Rule Minimal Treatment System

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

For water emergencies that occur after hours, please call 800-282-9378

**ENTRY POINT MONITORING SCHEDULE**

**Sampling Facility ID: 3062156 Facility Name: GEORGETOWN WINERY**

**Location SMP ID: EP001 Facility Source: Ground Water**

| Chemicals      | Monitoring Requirements                             |
|----------------|---|
| NITRITE - 1041 | Not Required  |
| NITRATE - 1040 | 1 Sample(s) Required between 1/1/2018 and 5/31/2018 |

**Where to Collect Samples For a Small Public Water System**



**Failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

**Save a dime. Sample on time!**