



OH4700003 AMHERST CITY PWS

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, 2019

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS000 | Facility Name: AMHERST, CITY OF DISTRIBUTION | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-----------------------------|--|
| TOTAL COLIFORM (TCR) - 3100 | 10 Sample(s) Required between 1/1/2019 and 1/31/2019 |
| | 10 Sample(s) Required between 2/1/2019 and 2/28/2019 |
| | 10 Sample(s) Required between 3/1/2019 and 3/31/2019 |
| | 10 Sample(s) Required between 4/1/2019 and 4/30/2019 |
| | 10 Sample(s) Required between 5/1/2019 and 5/31/2019 |
| | 10 Sample(s) Required between 6/1/2019 and 6/30/2019 |
| | 10 Sample(s) Required between 7/1/2019 and 7/31/2019 |
| | 10 Sample(s) Required between 8/1/2019 and 8/31/2019 |
| | 10 Sample(s) Required between 9/1/2019 and 9/30/2019 |
| | 10 Sample(s) Required between 10/1/2019 and 10/31/2019 |
| | 10 Sample(s) Required between 11/1/2019 and 11/30/2019 |
| | 10 Sample(s) Required between 12/1/2019 and 12/31/2019 |
| TOTAL CHLORINE - 1000 | 10 Sample(s) Required between 1/1/2019 and 1/31/2019 |
| | 10 Sample(s) Required between 2/1/2019 and 2/28/2019 |
| | 10 Sample(s) Required between 3/1/2019 and 3/31/2019 |
| | 10 Sample(s) Required between 4/1/2019 and 4/30/2019 |
| | 10 Sample(s) Required between 5/1/2019 and 5/31/2019 |
| | 10 Sample(s) Required between 6/1/2019 and 6/30/2019 |
| | 10 Sample(s) Required between 7/1/2019 and 7/31/2019 |
| | 10 Sample(s) Required between 8/1/2019 and 8/31/2019 |
| | 10 Sample(s) Required between 9/1/2019 and 9/30/2019 |
| | 10 Sample(s) Required between 10/1/2019 and 10/31/2019 |
| | 10 Sample(s) Required between 11/1/2019 and 11/30/2019 |
| | 10 Sample(s) Required between 12/1/2019 and 12/31/2019 |

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS201 | Facility Name: AMHERST, CITY OF DISTRIBUTION 48540 N. RIDGE | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/8/2019 and 2/14/2019 at: DS201 |
| | Dual Sample Required between 5/8/2019 and 5/14/2019 at: DS201 |
| | Dual Sample Required between 8/8/2019 and 8/14/2019 at: DS201 |
| | Dual Sample Required between 11/8/2019 and 11/14/2019 at: DS201 |

Sample for all the analytes listed below:

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

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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: AMHERST, CITY OF DISTRIBUTION 48395 COOPER FOSTER | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/8/2019 and 2/14/2019 at: DS202 |
| | Dual Sample Required between 5/8/2019 and 5/14/2019 at: DS202 |
| | Dual Sample Required between 8/8/2019 and 8/14/2019 at: DS202 |
| | Dual Sample Required between 11/8/2019 and 11/14/2019 at: DS202 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS203 | Facility Name: AMHERST, CITY OF DISTRIBUTION 611 BRENNAN | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/8/2019 and 2/14/2019 at: DS203 |
| | Dual Sample Required between 5/8/2019 and 5/14/2019 at: DS203 |
| | Dual Sample Required between 8/8/2019 and 8/14/2019 at: DS203 |
| | Dual Sample Required between 11/8/2019 and 11/14/2019 at: DS203 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS204 | Facility Name: AMHERST, CITY OF DISTRIBUTION 58 CANTERBURY | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/8/2019 and 2/14/2019 at: DS204 |
| | Dual Sample Required between 5/8/2019 and 5/14/2019 at: DS204 |
| | Dual Sample Required between 8/8/2019 and 8/14/2019 at: DS204 |
| | Dual Sample Required between 11/8/2019 and 11/14/2019 at: DS204 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: LC### | Facility Name: AMHERST, CITY OF DISTRIBUTION Refer to your Lead and Copper plan for SMP IDs | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

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



OH4700203 AVON CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS000 | Facility Name: CITY OF AVON DISTRIBUTION | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

Chemicals Monitoring Requirements

ASBESTOS - 1094 Not Required

| | | | | |
|-----------------------------|-------------------------------|-----------|-----|------------|
| TOTAL COLIFORM (TCR) - 3100 | 25 Sample(s) Required between | 1/1/2019 | and | 1/31/2019 |
| | 25 Sample(s) Required between | 2/1/2019 | and | 2/28/2019 |
| | 25 Sample(s) Required between | 3/1/2019 | and | 3/31/2019 |
| | 25 Sample(s) Required between | 4/1/2019 | and | 4/30/2019 |
| | 25 Sample(s) Required between | 5/1/2019 | and | 5/31/2019 |
| | 25 Sample(s) Required between | 6/1/2019 | and | 6/30/2019 |
| | 25 Sample(s) Required between | 7/1/2019 | and | 7/31/2019 |
| | 25 Sample(s) Required between | 8/1/2019 | and | 8/31/2019 |
| | 25 Sample(s) Required between | 9/1/2019 | and | 9/30/2019 |
| | 25 Sample(s) Required between | 10/1/2019 | and | 10/31/2019 |
| | 25 Sample(s) Required between | 11/1/2019 | and | 11/30/2019 |
| | 25 Sample(s) Required between | 12/1/2019 | and | 12/31/2019 |

| | | | | |
|-----------------------|-------------------------------|-----------|-----|------------|
| TOTAL CHLORINE - 1000 | 25 Sample(s) Required between | 1/1/2019 | and | 1/31/2019 |
| | 25 Sample(s) Required between | 2/1/2019 | and | 2/28/2019 |
| | 25 Sample(s) Required between | 3/1/2019 | and | 3/31/2019 |
| | 25 Sample(s) Required between | 4/1/2019 | and | 4/30/2019 |
| | 25 Sample(s) Required between | 5/1/2019 | and | 5/31/2019 |
| | 25 Sample(s) Required between | 6/1/2019 | and | 6/30/2019 |
| | 25 Sample(s) Required between | 7/1/2019 | and | 7/31/2019 |
| | 25 Sample(s) Required between | 8/1/2019 | and | 8/31/2019 |
| | 25 Sample(s) Required between | 9/1/2019 | and | 9/30/2019 |
| | 25 Sample(s) Required between | 10/1/2019 | and | 10/31/2019 |
| | 25 Sample(s) Required between | 11/1/2019 | and | 11/30/2019 |
| | 25 Sample(s) Required between | 12/1/2019 | and | 12/31/2019 |

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS201 | Facility Name: CITY OF AVON DISTRIBUTION 32300 DETROIT RD. | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

Chemicals Monitoring Requirements

| | | | | |
|-------------------------|------------------------------|-----------|-----|----------------------|
| DISINFECTION BYPRODUCTS | Dual Sample Required between | 1/8/2019 | and | 1/14/2019 at: DS201 |
| | Dual Sample Required between | 4/8/2019 | and | 4/14/2019 at: DS201 |
| | Dual Sample Required between | 7/8/2019 | and | 7/14/2019 at: DS201 |
| | Dual Sample Required between | 10/8/2019 | and | 10/14/2019 at: DS201 |

Sample for all the analytes listed below:

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



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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: CITY OF AVON DISTRIBUTION 1260 MOORE ROAD | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 1/8/2019 and 1/14/2019 at: DS202 Dual Sample Required between 4/8/2019 and 4/14/2019 at: DS202 Dual Sample Required between 7/8/2019 and 7/14/2019 at: DS202 Dual Sample Required between 10/8/2019 and 10/14/2019 at: DS202 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: LC### | Facility Name: CITY OF AVON DISTRIBUTION Refer to your Lead and Copper plan for SMP IDs | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------------|--|
| LEAD - 1030 AND COPPER - 1022 | 30 Sample(s) Required between 6/1/2019 and 9/30/2019 |

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.



OH4700311 AVON LAKE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: 4755816 SMP ID: EP001 | Facility Name: AVON LAKE UTILITIES DEPT WTP Facility Source: Surface Water | Facility Class: CLASS 4 |
|--------------------------|---|---|--------------------------------|

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| Chemicals | Monitoring Requirements | |
|--|--------------------------------------|--------------------------|
| DIOXIN - 2063 | 1 Sample(s) Required between | 4/1/2019 and 6/30/2019 |
| INORGANICS | 1 Sample(s) Required between | 6/1/2019 and 10/31/2019 |
| <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 | 1/1/2019 and 1/31/2019 |
| | 1 Sample(s) Required between | 2/1/2019 and 2/28/2019 |
| | 1 Sample(s) Required between | 3/1/2019 and 3/31/2019 |
| | 1 Sample(s) Required between | 4/1/2019 and 4/30/2019 |
| | 1 Sample(s) Required between | 5/1/2019 and 5/31/2019 |
| | 1 Sample(s) Required between | 6/1/2019 and 6/30/2019 |
| | 1 Sample(s) Required between | 7/1/2019 and 7/31/2019 |
| | 1 Sample(s) Required between | 8/1/2019 and 8/31/2019 |
| | 1 Sample(s) Required between | 9/1/2019 and 9/30/2019 |
| | 1 Sample(s) Required between | 10/1/2019 and 10/31/2019 |
| | 1 Sample(s) Required between | 11/1/2019 and 11/30/2019 |
| | 1 Sample(s) Required between | 12/1/2019 and 12/31/2019 |
| RADIOLOGICALS | Not Required | |
| SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1 | 1 Sample(s) Required between | 4/1/2019 and 6/30/2019 |
| <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 | 6/1/2019 and 10/31/2019 |
| TOTAL ORGANIC CARBON (TOC) | 1 Paired Sample Set Required between | 1/1/2019 and 1/31/2019 |
| | 1 Paired Sample Set Required between | 2/1/2019 and 2/28/2019 |
| | 1 Paired Sample Set Required between | 3/1/2019 and 3/31/2019 |
| | 1 Paired Sample Set Required between | 4/1/2019 and 4/30/2019 |
| | 1 Paired Sample Set Required between | 5/1/2019 and 5/31/2019 |
| | 1 Paired Sample Set Required between | 6/1/2019 and 6/30/2019 |
| | 1 Paired Sample Set Required between | 7/1/2019 and 7/31/2019 |
| | 1 Paired Sample Set Required between | 8/1/2019 and 8/31/2019 |
| | 1 Paired Sample Set Required between | 9/1/2019 and 9/30/2019 |
| | 1 Paired Sample Set Required between | 10/1/2019 and 10/31/2019 |
| | 1 Paired Sample Set Required between | 11/1/2019 and 11/30/2019 |
| | 1 Paired Sample Set Required between | 12/1/2019 and 12/31/2019 |

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.



Effective Date: 01/01/2019

2019 ENTRY POINT SCHEDULE

OH4700311 AVON LAKE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|-----------------|-----------------------------|--|--------------------------------|
| Sampling | Facility ID: 4755816 | Facility Name: AVON LAKE UTILITIES DEPT WTP | |
| Location | SMP ID: EP001/LT2001 | Facility Source: Surface Water | Facility Class: CLASS 4 |

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**** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019**

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.*



OH4700311 AVON LAKE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|-----------------|-----------------------------|--|--------------------------------|
| Sampling | Facility ID: 4755816 | Facility Name: AVON LAKE UTILITIES DEPT WTP | |
| Location | SMP ID: LT2001 | Facility Source: Surface Water | Facility Class: CLASS 4 |

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| Chemicals | Monitoring Requirements |
|--|--|
| CYANOBACTERIA SCREENING | 1 Sample(s) Required between 1/6/2019 and 1/12/2019 |
| | 1 Sample(s) Required between 1/20/2019 and 1/26/2019 |
| | 1 Sample(s) Required between 2/3/2019 and 2/9/2019 |
| | 1 Sample(s) Required between 2/17/2019 and 2/23/2019 |
| | 1 Sample(s) Required between 3/3/2019 and 3/9/2019 |
| | 1 Sample(s) Required between 3/17/2019 and 3/23/2019 |
| | 1 Sample(s) Required between 3/31/2019 and 4/6/2019 |
| | 1 Sample(s) Required between 4/14/2019 and 4/20/2019 |
| | 1 Sample(s) Required between 4/28/2019 and 5/4/2019 |
| | 1 Sample(s) Required between 5/12/2019 and 5/18/2019 |
| | 1 Sample(s) Required between 5/26/2019 and 6/1/2019 |
| | 1 Sample(s) Required between 6/9/2019 and 6/15/2019 |
| | 1 Sample(s) Required between 6/23/2019 and 6/29/2019 |
| | 1 Sample(s) Required between 7/7/2019 and 7/13/2019 |
| | 1 Sample(s) Required between 7/21/2019 and 7/27/2019 |
| | 1 Sample(s) Required between 8/4/2019 and 8/10/2019 |
| | 1 Sample(s) Required between 8/18/2019 and 8/24/2019 |
| | 1 Sample(s) Required between 9/1/2019 and 9/7/2019 |
| | 1 Sample(s) Required between 9/15/2019 and 9/21/2019 |
| | 1 Sample(s) Required between 9/29/2019 and 10/5/2019 |
| 1 Sample(s) Required between 10/13/2019 and 10/19/2019 | |
| 1 Sample(s) Required between 10/27/2019 and 11/2/2019 | |
| 1 Sample(s) Required between 11/10/2019 and 11/16/2019 | |
| 1 Sample(s) Required between 11/24/2019 and 11/30/2019 | |
| 1 Sample(s) Required between 12/8/2019 and 12/14/2019 | |
| 1 Sample(s) Required between 12/22/2019 and 12/28/2019 | |

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.

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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS000 | Facility Name: AVON LAKE, CITY OF DISTRIBUTION | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

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

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

| | | |
|-----------------------------|-------------------------------|--------------------------|
| TOTAL COLIFORM (TCR) - 3100 | 25 Sample(s) Required between | 1/1/2019 and 1/31/2019 |
| | 25 Sample(s) Required between | 2/1/2019 and 2/28/2019 |
| | 25 Sample(s) Required between | 3/1/2019 and 3/31/2019 |
| | 25 Sample(s) Required between | 4/1/2019 and 4/30/2019 |
| | 25 Sample(s) Required between | 5/1/2019 and 5/31/2019 |
| | 25 Sample(s) Required between | 6/1/2019 and 6/30/2019 |
| | 25 Sample(s) Required between | 7/1/2019 and 7/31/2019 |
| | 25 Sample(s) Required between | 8/1/2019 and 8/31/2019 |
| | 25 Sample(s) Required between | 9/1/2019 and 9/30/2019 |
| | 25 Sample(s) Required between | 10/1/2019 and 10/31/2019 |
| | 25 Sample(s) Required between | 11/1/2019 and 11/30/2019 |
| | 25 Sample(s) Required between | 12/1/2019 and 12/31/2019 |

| | | |
|-----------------------|-------------------------------|--------------------------|
| TOTAL CHLORINE - 1000 | 25 Sample(s) Required between | 1/1/2019 and 1/31/2019 |
| | 25 Sample(s) Required between | 2/1/2019 and 2/28/2019 |
| | 25 Sample(s) Required between | 3/1/2019 and 3/31/2019 |
| | 25 Sample(s) Required between | 4/1/2019 and 4/30/2019 |
| | 25 Sample(s) Required between | 5/1/2019 and 5/31/2019 |
| | 25 Sample(s) Required between | 6/1/2019 and 6/30/2019 |
| | 25 Sample(s) Required between | 7/1/2019 and 7/31/2019 |
| | 25 Sample(s) Required between | 8/1/2019 and 8/31/2019 |
| | 25 Sample(s) Required between | 9/1/2019 and 9/30/2019 |
| | 25 Sample(s) Required between | 10/1/2019 and 10/31/2019 |
| | 25 Sample(s) Required between | 11/1/2019 and 11/30/2019 |
| | 25 Sample(s) Required between | 12/1/2019 and 12/31/2019 |

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS201 | Facility Name: AVON LAKE, CITY OF DISTRIBUTION 750 JAYCOX | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

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

| | | |
|-------------------------|------------------------------|------------------------------------|
| DISINFECTION BYPRODUCTS | Dual Sample Required between | 3/8/2019 and 3/14/2019 at: DS201 |
| | Dual Sample Required between | 6/8/2019 and 6/14/2019 at: DS201 |
| | Dual Sample Required between | 9/8/2019 and 9/14/2019 at: DS201 |
| | Dual Sample Required between | 12/8/2019 and 12/14/2019 at: DS201 |

Sample for all the analytes listed below:

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



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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: AVON LAKE, CITY OF DISTRIBUTION 31765 LEEWARD CT. | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/8/2019 and 3/14/2019 at: DS202 |
| | Dual Sample Required between 6/8/2019 and 6/14/2019 at: DS202 |
| | Dual Sample Required between 9/8/2019 and 9/14/2019 at: DS202 |
| | Dual Sample Required between 12/8/2019 and 12/14/2019 at: DS202 |

Sample for all the analytes listed below:

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



OH4700411 ELYRIA WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|--------------------------|-----------------------------|---|--------------------------------|
| Sampling Location | Facility ID: 4755817 | Facility Name: ELYRIA WATER DEPARTMENT | Facility Class: CLASS 4 |
| | SMP ID: EP001 | Facility Source: Surface Water | |

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** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019

| Chemicals | Monitoring Requirements |
|--|--|
| INORGANICS | 1 Sample(s) Required between 6/1/2019 and 10/31/2019 |
| <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 1/1/2019 and 1/31/2019 1 Sample(s) Required between 2/1/2019 and 2/28/2019 1 Sample(s) Required between 3/1/2019 and 3/31/2019 1 Sample(s) Required between 4/1/2019 and 4/30/2019 1 Sample(s) Required between 5/1/2019 and 5/31/2019 1 Sample(s) Required between 6/1/2019 and 6/30/2019 1 Sample(s) Required between 7/1/2019 and 7/31/2019 1 Sample(s) Required between 8/1/2019 and 8/31/2019 1 Sample(s) Required between 9/1/2019 and 9/30/2019 1 Sample(s) Required between 10/1/2019 and 10/31/2019 1 Sample(s) Required between 11/1/2019 and 11/30/2019 1 Sample(s) Required between 12/1/2019 and 12/31/2019 |
| RADIOLOGICALS | Not Required |
| SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1 | 1 Sample(s) Required between 4/1/2019 and 6/30/2019 |
| <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 6/1/2019 and 10/31/2019 |
| TOTAL ORGANIC CARBON (TOC) | 1 Paired Sample Set Required between 1/1/2019 and 1/31/2019 1 Paired Sample Set Required between 2/1/2019 and 2/28/2019 1 Paired Sample Set Required between 3/1/2019 and 3/31/2019 1 Paired Sample Set Required between 4/1/2019 and 4/30/2019 1 Paired Sample Set Required between 5/1/2019 and 5/31/2019 1 Paired Sample Set Required between 6/1/2019 and 6/30/2019 1 Paired Sample Set Required between 7/1/2019 and 7/31/2019 1 Paired Sample Set Required between 8/1/2019 and 8/31/2019 1 Paired Sample Set Required between 9/1/2019 and 9/30/2019 1 Paired Sample Set Required between 10/1/2019 and 10/31/2019 1 Paired Sample Set Required between 11/1/2019 and 11/30/2019 1 Paired Sample Set Required between 12/1/2019 and 12/31/2019 |

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.



Effective Date: 01/01/2019

2019 ENTRY POINT SCHEDULE

OH4700411 ELYRIA WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|-----------------|-----------------------------|---|--------------------------------|
| Sampling | Facility ID: 4755817 | Facility Name: ELYRIA WATER DEPARTMENT | |
| Location | SMP ID: EP001/LT2001 | Facility Source: Surface Water | Facility Class: CLASS 4 |

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

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**** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019**

| 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.*



OH4700411 ELYRIA WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|-----------------|-----------------------------|---|--------------------------------|
| Sampling | Facility ID: 4755817 | Facility Name: ELYRIA WATER DEPARTMENT | |
| Location | SMP ID: LT2001 | Facility Source: Surface Water | Facility Class: CLASS 4 |

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

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** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019

| Chemicals | Monitoring Requirements |
|--|--|
| CYANOBACTERIA SCREENING | 1 Sample(s) Required between 1/6/2019 and 1/12/2019 |
| | 1 Sample(s) Required between 1/20/2019 and 1/26/2019 |
| | 1 Sample(s) Required between 2/3/2019 and 2/9/2019 |
| | 1 Sample(s) Required between 2/17/2019 and 2/23/2019 |
| | 1 Sample(s) Required between 3/3/2019 and 3/9/2019 |
| | 1 Sample(s) Required between 3/17/2019 and 3/23/2019 |
| | 1 Sample(s) Required between 3/31/2019 and 4/6/2019 |
| | 1 Sample(s) Required between 4/14/2019 and 4/20/2019 |
| | 1 Sample(s) Required between 4/28/2019 and 5/4/2019 |
| | 1 Sample(s) Required between 5/12/2019 and 5/18/2019 |
| | 1 Sample(s) Required between 5/26/2019 and 6/1/2019 |
| | 1 Sample(s) Required between 6/9/2019 and 6/15/2019 |
| | 1 Sample(s) Required between 6/23/2019 and 6/29/2019 |
| | 1 Sample(s) Required between 7/7/2019 and 7/13/2019 |
| | 1 Sample(s) Required between 7/21/2019 and 7/27/2019 |
| | 1 Sample(s) Required between 8/4/2019 and 8/10/2019 |
| | 1 Sample(s) Required between 8/18/2019 and 8/24/2019 |
| | 1 Sample(s) Required between 9/1/2019 and 9/7/2019 |
| | 1 Sample(s) Required between 9/15/2019 and 9/21/2019 |
| | 1 Sample(s) Required between 9/29/2019 and 10/5/2019 |
| 1 Sample(s) Required between 10/13/2019 and 10/19/2019 | |
| 1 Sample(s) Required between 10/27/2019 and 11/2/2019 | |
| 1 Sample(s) Required between 11/10/2019 and 11/16/2019 | |
| 1 Sample(s) Required between 11/24/2019 and 11/30/2019 | |
| 1 Sample(s) Required between 12/8/2019 and 12/14/2019 | |
| 1 Sample(s) Required between 12/22/2019 and 12/28/2019 | |

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.

OH4700411 ELYRIA WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

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

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**** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019**

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS000 | Facility Name: ELYRIA WATER DEPARTMENT DISTRIBUTION | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|--|--|
| TOTAL COLIFORM (TCR) - 3100 | 70 Sample(s) Required between 1/1/2019 and 1/31/2019 |
| | 70 Sample(s) Required between 2/1/2019 and 2/28/2019 |
| | 70 Sample(s) Required between 3/1/2019 and 3/31/2019 |
| | 70 Sample(s) Required between 4/1/2019 and 4/30/2019 |
| | 70 Sample(s) Required between 5/1/2019 and 5/31/2019 |
| | 70 Sample(s) Required between 6/1/2019 and 6/30/2019 |
| | 70 Sample(s) Required between 7/1/2019 and 7/31/2019 |
| | 70 Sample(s) Required between 8/1/2019 and 8/31/2019 |
| | 70 Sample(s) Required between 9/1/2019 and 9/30/2019 |
| | 70 Sample(s) Required between 10/1/2019 and 10/31/2019 |
| | 70 Sample(s) Required between 11/1/2019 and 11/30/2019 |
| | 70 Sample(s) Required between 12/1/2019 and 12/31/2019 |
| | TOTAL CHLORINE - 1000 |
| 70 Sample(s) Required between 2/1/2019 and 2/28/2019 | |
| 70 Sample(s) Required between 3/1/2019 and 3/31/2019 | |
| 70 Sample(s) Required between 4/1/2019 and 4/30/2019 | |
| 70 Sample(s) Required between 5/1/2019 and 5/31/2019 | |
| 70 Sample(s) Required between 6/1/2019 and 6/30/2019 | |
| 70 Sample(s) Required between 7/1/2019 and 7/31/2019 | |
| 70 Sample(s) Required between 8/1/2019 and 8/31/2019 | |
| 70 Sample(s) Required between 9/1/2019 and 9/30/2019 | |
| 70 Sample(s) Required between 10/1/2019 and 10/31/2019 | |
| 70 Sample(s) Required between 11/1/2019 and 11/30/2019 | |
| 70 Sample(s) Required between 12/1/2019 and 12/31/2019 | |

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS201 | Facility Name: ELYRIA WATER DEPARTMENT DISTRIBUTION APL-8303 MURRAY RD. | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/1/2019 and 2/7/2019 at: DS201 |
| | Dual Sample Required between 5/1/2019 and 5/7/2019 at: DS201 |
| | Dual Sample Required between 8/1/2019 and 8/7/2019 at: DS201 |
| | Dual Sample Required between 11/1/2019 and 11/7/2019 at: DS201 |

Sample for all the analytes listed below:

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

OH4700411 ELYRIA WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

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

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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: ELYRIA WATER DEPARTMENT DISTRIBUTION 2396 N. RIDGE RD | Facility Class: CLASS 2 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/1/2019 and 2/7/2019 at: DS202 |
| | Dual Sample Required between 5/1/2019 and 5/7/2019 at: DS202 |
| | Dual Sample Required between 8/1/2019 and 8/7/2019 at: DS202 |
| | Dual Sample Required between 11/1/2019 and 11/7/2019 at: DS202 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS203 | Facility Name: ELYRIA WATER DEPARTMENT DISTRIBUTION 10425 MIDDLE AVE. | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/1/2019 and 2/7/2019 at: DS203 |
| | Dual Sample Required between 5/1/2019 and 5/7/2019 at: DS203 |
| | Dual Sample Required between 8/1/2019 and 8/7/2019 at: DS203 |
| | Dual Sample Required between 11/1/2019 and 11/7/2019 at: DS203 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS204 | Facility Name: ELYRIA WATER DEPARTMENT DISTRIBUTION 1095 INFIRMARY | Facility Class: CLASS 2 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/1/2019 and 2/7/2019 at: DS204 |
| | Dual Sample Required between 5/1/2019 and 5/7/2019 at: DS204 |
| | Dual Sample Required between 8/1/2019 and 8/7/2019 at: DS204 |
| | Dual Sample Required between 11/1/2019 and 11/7/2019 at: DS204 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS205 | Facility Name: ELYRIA WATER DEPARTMENT DISTRIBUTION 247 HADAWAY | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/1/2019 and 2/7/2019 at: DS205 |
| | Dual Sample Required between 5/1/2019 and 5/7/2019 at: DS205 |
| | Dual Sample Required between 8/1/2019 and 8/7/2019 at: DS205 |

OH4700411 ELYRIA WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|-------------------------|--|--------------------------------|
| Sampling Location | Facility ID: DS1 | Facility Name: ELYRIA WATER DEPARTMENT DISTRIBUTION | Facility Class: CLASS 2 |
| | SMP ID: DS205 | 247 HADAWAY | |

Chemicals

Monitoring Requirements

DISINFECTION BYPRODUCTS Dual Sample Required between 11/1/2019 and 11/7/2019 at: DS205

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|-------------------------|--|--------------------------------|
| Sampling Location | Facility ID: DS1 | Facility Name: ELYRIA WATER DEPARTMENT DISTRIBUTION | Facility Class: CLASS 2 |
| | SMP ID: DS206 | 100 HUNTERS CROSSING WAY #100 | |

Chemicals

Monitoring Requirements

DISINFECTION BYPRODUCTS
 Dual Sample Required between 2/1/2019 and 2/7/2019 at: DS206
 Dual Sample Required between 5/1/2019 and 5/7/2019 at: DS206
 Dual Sample Required between 8/1/2019 and 8/7/2019 at: DS206
 Dual Sample Required between 11/1/2019 and 11/7/2019 at: DS206

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|-------------------------|--|--------------------------------|
| Sampling Location | Facility ID: DS1 | Facility Name: ELYRIA WATER DEPARTMENT DISTRIBUTION | Facility Class: CLASS 2 |
| | SMP ID: DS207 | 38521 CHESNUT RIDGE | |

Chemicals

Monitoring Requirements

DISINFECTION BYPRODUCTS
 Dual Sample Required between 2/1/2019 and 2/7/2019 at: DS207
 Dual Sample Required between 5/1/2019 and 5/7/2019 at: DS207
 Dual Sample Required between 8/1/2019 and 8/7/2019 at: DS207
 Dual Sample Required between 11/1/2019 and 11/7/2019 at: DS207

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|-------------------------|--|--------------------------------|
| Sampling Location | Facility ID: DS1 | Facility Name: ELYRIA WATER DEPARTMENT DISTRIBUTION | Facility Class: CLASS 2 |
| | SMP ID: DS208 | 1251 EAST AVE. | |

Chemicals

Monitoring Requirements

DISINFECTION BYPRODUCTS
 Dual Sample Required between 2/1/2019 and 2/7/2019 at: DS208
 Dual Sample Required between 5/1/2019 and 5/7/2019 at: DS208
 Dual Sample Required between 8/1/2019 and 8/7/2019 at: DS208
 Dual Sample Required between 11/1/2019 and 11/7/2019 at: DS208

Sample for all the analytes listed below:

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



OH4700411 ELYRIA WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|-------------------------|--|--------------------------------|
| Sampling Location | Facility ID: DS1 | Facility Name: ELYRIA WATER DEPARTMENT DISTRIBUTION | Facility Class: CLASS 2 |
| | SMP ID: LC### | Refer to your Lead and Copper plan for SMP IDs | |

| Chemicals | Monitoring Requirements |
|-------------------------------|--|
| LEAD - 1030 AND COPPER - 1022 | 30 Sample(s) Required between 6/1/2019 and 9/30/2019 |

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.



OH4700511 GRAFTON VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019

DISTRIBUTION MONITORING SCHEDULE

Table with 4 columns: Sampling Location, Facility ID, Facility Name, Facility Class. Values: DS1, DS000, GRAFTON, VILLAGE OF DISTRIBUTION, CLASS 1.

Chemicals Monitoring Requirements

Table for TOTAL COLIFORM (TCR) - 3100. Columns: Chemicals, Monitoring Requirements. Lists 12 sampling periods from 1/1/2019 to 12/31/2019.

Table for TOTAL CHLORINE - 1000. Columns: Chemicals, Monitoring Requirements. Lists 12 sampling periods from 1/1/2019 to 12/31/2019.

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

Table with 4 columns: Sampling Location, Facility ID, Facility Name, Facility Class. Values: DS1, DS201, GRAFTON, VILLAGE OF DISTRIBUTION, CLASS 1.

Chemicals Monitoring Requirements

Table for DISINFECTION BYPRODUCTS. Columns: Chemicals, Monitoring Requirements. Lists 4 sampling periods from 3/8/2019 to 12/14/2019.

Sample for all the analytes listed below:

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



OH4700511 GRAFTON VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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**** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019**

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: GRAFTON, VILLAGE OF DISTRIBUTION 408 MAIN ST | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/8/2019 and 3/14/2019 at: DS202 Dual Sample Required between 6/8/2019 and 6/14/2019 at: DS202 Dual Sample Required between 9/8/2019 and 9/14/2019 at: DS202 Dual Sample Required between 12/8/2019 and 12/14/2019 at: DS202 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: LC### | Facility Name: GRAFTON, VILLAGE OF DISTRIBUTION Refer to your Lead and Copper plan for SMP IDs | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------------|--|
| LEAD - 1030 AND COPPER - 1022 | 10 Sample(s) Required between 6/1/2019 and 9/30/2019 |

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.



OH4700603 LAGRANGE VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019

DISTRIBUTION MONITORING SCHEDULE

Table with 4 columns: Sampling Location, Facility ID, Facility Name, Facility Class. Values: DS1, LAGRANGE, VILLAGE OF DISTRIBUTION, CLASS 1.

Chemicals Monitoring Requirements

Table for TOTAL COLIFORM (TCR) - 3100. Columns: Chemicals, Monitoring Requirements. Lists 12 sampling periods from 1/1/2019 to 12/31/2019.

Table for TOTAL CHLORINE - 1000. Columns: Chemicals, Monitoring Requirements. Lists 12 sampling periods from 1/1/2019 to 12/31/2019.

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

Table with 4 columns: Sampling Location, Facility ID, Facility Name, Facility Class. Values: DS201, LAGRANGE, VILLAGE OF DISTRIBUTION, CLASS 1.

Chemicals Monitoring Requirements

Table for DISINFECTION BYPRODUCTS. Columns: Chemicals, Monitoring Requirements. Lists 4 sampling periods from 2/1/2019 to 11/7/2019.

Sample for all the analytes listed below:

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



OH4700603 LAGRANGE VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

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

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** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: LAGRANGE, VILLAGE OF DISTRIBUTION MM @ SW CORNER OF SR 301/BIGGS | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/1/2019 and 2/7/2019 at: DS202 Dual Sample Required between 5/1/2019 and 5/7/2019 at: DS202 Dual Sample Required between 8/1/2019 and 8/7/2019 at: DS202 Dual Sample Required between 11/1/2019 and 11/7/2019 at: DS202 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: LC### | Facility Name: LAGRANGE, VILLAGE OF DISTRIBUTION Refer to your Lead and Copper plan for SMP IDs | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------------|--|
| LEAD - 1030 AND COPPER - 1022 | 10 Sample(s) Required between 6/1/2019 and 9/30/2019 |

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.



OH4700711 LORAIN CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|--------------------------|-----------------------------|---------------------------------------|--------------------------------|
| Sampling Location | Facility ID: 4755820 | Facility Name: LORAIN WTP | Facility Class: CLASS 4 |
| | SMP ID: EP001 | Facility Source: Surface Water | |

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**** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019**

| Chemicals | Monitoring Requirements |
|--|--|
| INORGANICS | 1 Sample(s) Required between 6/1/2019 and 10/31/2019 |
| <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 1/1/2019 and 1/31/2019 1 Sample(s) Required between 2/1/2019 and 2/28/2019 1 Sample(s) Required between 3/1/2019 and 3/31/2019 1 Sample(s) Required between 4/1/2019 and 4/30/2019 1 Sample(s) Required between 5/1/2019 and 5/31/2019 1 Sample(s) Required between 6/1/2019 and 6/30/2019 1 Sample(s) Required between 7/1/2019 and 7/31/2019 1 Sample(s) Required between 8/1/2019 and 8/31/2019 1 Sample(s) Required between 9/1/2019 and 9/30/2019 1 Sample(s) Required between 10/1/2019 and 10/31/2019 1 Sample(s) Required between 11/1/2019 and 11/30/2019 1 Sample(s) Required between 12/1/2019 and 12/31/2019 |
| RADIOLOGICALS | Not Required |
| SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1 | 1 Sample(s) Required between 4/1/2019 and 6/30/2019 |
| <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 6/1/2019 and 10/31/2019 |
| TOTAL ORGANIC CARBON (TOC) | 1 Paired Sample Set Required between 1/1/2019 and 1/31/2019 1 Paired Sample Set Required between 2/1/2019 and 2/28/2019 1 Paired Sample Set Required between 3/1/2019 and 3/31/2019 1 Paired Sample Set Required between 4/1/2019 and 4/30/2019 1 Paired Sample Set Required between 5/1/2019 and 5/31/2019 1 Paired Sample Set Required between 6/1/2019 and 6/30/2019 1 Paired Sample Set Required between 7/1/2019 and 7/31/2019 1 Paired Sample Set Required between 8/1/2019 and 8/31/2019 1 Paired Sample Set Required between 9/1/2019 and 9/30/2019 1 Paired Sample Set Required between 10/1/2019 and 10/31/2019 1 Paired Sample Set Required between 11/1/2019 and 11/30/2019 1 Paired Sample Set Required between 12/1/2019 and 12/31/2019 |

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.



OH4700711 LORAIN CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|-----------------|-----------------------------|---------------------------------------|--------------------------------|
| Sampling | Facility ID: 4755820 | Facility Name: LORAIN WTP | |
| Location | SMP ID: EP001/LT2001 | Facility Source: Surface Water | Facility Class: CLASS 4 |

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**** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019**

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.*



OH4700711 LORAIN CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|-----------------|-----------------------------|---------------------------------------|--------------------------------|
| Sampling | Facility ID: 4755820 | Facility Name: LORAIN WTP | |
| Location | SMP ID: LT2001 | Facility Source: Surface Water | Facility Class: CLASS 4 |

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** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019

| Chemicals | Monitoring Requirements |
|--|--|
| CYANOBACTERIA SCREENING | 1 Sample(s) Required between 1/6/2019 and 1/12/2019 |
| | 1 Sample(s) Required between 1/20/2019 and 1/26/2019 |
| | 1 Sample(s) Required between 2/3/2019 and 2/9/2019 |
| | 1 Sample(s) Required between 2/17/2019 and 2/23/2019 |
| | 1 Sample(s) Required between 3/3/2019 and 3/9/2019 |
| | 1 Sample(s) Required between 3/17/2019 and 3/23/2019 |
| | 1 Sample(s) Required between 3/31/2019 and 4/6/2019 |
| | 1 Sample(s) Required between 4/14/2019 and 4/20/2019 |
| | 1 Sample(s) Required between 4/28/2019 and 5/4/2019 |
| | 1 Sample(s) Required between 5/12/2019 and 5/18/2019 |
| | 1 Sample(s) Required between 5/26/2019 and 6/1/2019 |
| | 1 Sample(s) Required between 6/9/2019 and 6/15/2019 |
| | 1 Sample(s) Required between 6/23/2019 and 6/29/2019 |
| | 1 Sample(s) Required between 7/7/2019 and 7/13/2019 |
| | 1 Sample(s) Required between 7/21/2019 and 7/27/2019 |
| | 1 Sample(s) Required between 8/4/2019 and 8/10/2019 |
| | 1 Sample(s) Required between 8/18/2019 and 8/24/2019 |
| | 1 Sample(s) Required between 9/1/2019 and 9/7/2019 |
| | 1 Sample(s) Required between 9/15/2019 and 9/21/2019 |
| | 1 Sample(s) Required between 9/29/2019 and 10/5/2019 |
| 1 Sample(s) Required between 10/13/2019 and 10/19/2019 | |
| 1 Sample(s) Required between 10/27/2019 and 11/2/2019 | |
| 1 Sample(s) Required between 11/10/2019 and 11/16/2019 | |
| 1 Sample(s) Required between 11/24/2019 and 11/30/2019 | |
| 1 Sample(s) Required between 12/8/2019 and 12/14/2019 | |
| 1 Sample(s) Required between 12/22/2019 and 12/28/2019 | |

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.

OH4700711 LORAIN CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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**** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019**

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS000 | Facility Name: LORAIN, CITY OF DISTRIBUTION | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|--|--|
| TOTAL COLIFORM (TCR) - 3100 | 70 Sample(s) Required between 1/1/2019 and 1/31/2019 |
| | 70 Sample(s) Required between 2/1/2019 and 2/28/2019 |
| | 70 Sample(s) Required between 3/1/2019 and 3/31/2019 |
| | 70 Sample(s) Required between 4/1/2019 and 4/30/2019 |
| | 70 Sample(s) Required between 5/1/2019 and 5/31/2019 |
| | 70 Sample(s) Required between 6/1/2019 and 6/30/2019 |
| | 70 Sample(s) Required between 7/1/2019 and 7/31/2019 |
| | 70 Sample(s) Required between 8/1/2019 and 8/31/2019 |
| | 70 Sample(s) Required between 9/1/2019 and 9/30/2019 |
| | 70 Sample(s) Required between 10/1/2019 and 10/31/2019 |
| | 70 Sample(s) Required between 11/1/2019 and 11/30/2019 |
| | 70 Sample(s) Required between 12/1/2019 and 12/31/2019 |
| | TOTAL CHLORINE - 1000 |
| 70 Sample(s) Required between 2/1/2019 and 2/28/2019 | |
| 70 Sample(s) Required between 3/1/2019 and 3/31/2019 | |
| 70 Sample(s) Required between 4/1/2019 and 4/30/2019 | |
| 70 Sample(s) Required between 5/1/2019 and 5/31/2019 | |
| 70 Sample(s) Required between 6/1/2019 and 6/30/2019 | |
| 70 Sample(s) Required between 7/1/2019 and 7/31/2019 | |
| 70 Sample(s) Required between 8/1/2019 and 8/31/2019 | |
| 70 Sample(s) Required between 9/1/2019 and 9/30/2019 | |
| 70 Sample(s) Required between 10/1/2019 and 10/31/2019 | |
| 70 Sample(s) Required between 11/1/2019 and 11/30/2019 | |
| 70 Sample(s) Required between 12/1/2019 and 12/31/2019 | |

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS201 | Facility Name: LORAIN, CITY OF DISTRIBUTION WALGREENS 5411 LEAVITT | Facility Class: CLASS 2 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/1/2019 and 3/7/2019 at: DS201 |
| | Dual Sample Required between 6/1/2019 and 6/7/2019 at: DS201 |
| | Dual Sample Required between 9/1/2019 and 9/7/2019 at: DS201 |
| | Dual Sample Required between 12/1/2019 and 12/7/2019 at: DS201 |

Sample for all the analytes listed below:

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

OH4700711 LORAIN CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: LORAIN, CITY OF DISTRIBUTION RESERVOIR ELYRIA AVE. | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/1/2019 and 3/7/2019 at: DS202 |
| | Dual Sample Required between 6/1/2019 and 6/7/2019 at: DS202 |
| | Dual Sample Required between 9/1/2019 and 9/7/2019 at: DS202 |
| | Dual Sample Required between 12/1/2019 and 12/7/2019 at: DS202 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS203 | Facility Name: LORAIN, CITY OF DISTRIBUTION BP GAS 3509 GROVE | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/1/2019 and 3/7/2019 at: DS203 |
| | Dual Sample Required between 6/1/2019 and 6/7/2019 at: DS203 |
| | Dual Sample Required between 9/1/2019 and 9/7/2019 at: DS203 |
| | Dual Sample Required between 12/1/2019 and 12/7/2019 at: DS203 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS204 | Facility Name: LORAIN, CITY OF DISTRIBUTION FLOWERAMA 6000 S BROADWAY | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/1/2019 and 3/7/2019 at: DS204 |
| | Dual Sample Required between 6/1/2019 and 6/7/2019 at: DS204 |
| | Dual Sample Required between 9/1/2019 and 9/7/2019 at: DS204 |
| | Dual Sample Required between 12/1/2019 and 12/7/2019 at: DS204 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS205 | Facility Name: LORAIN, CITY OF DISTRIBUTION KOLCZUNANDKOLCZUN 5800 COOPER FOSTER | Facility Class: CLASS 2 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/1/2019 and 3/7/2019 at: DS205 |
| | Dual Sample Required between 6/1/2019 and 6/7/2019 at: DS205 |
| | Dual Sample Required between 9/1/2019 and 9/7/2019 at: DS205 |

OH4700711 LORAIN CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS205 | Facility Name: LORAIN, CITY OF DISTRIBUTION KOLCZUNANDKOLCZUN 5800 COOPER FOSTER | Facility Class: CLASS 2 |
|--------------------------|---|---|--------------------------------|

Chemicals Monitoring Requirements

DISINFECTION BYPRODUCTS Dual Sample Required between 12/1/2019 and 12/7/2019 at: DS205

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS206 | Facility Name: LORAIN, CITY OF DISTRIBUTION HYDRANT ON WEST ERIE AND BAUMHART | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

Chemicals Monitoring Requirements

DISINFECTION BYPRODUCTS
 Dual Sample Required between 3/1/2019 and 3/7/2019 at: DS206
 Dual Sample Required between 6/1/2019 and 6/7/2019 at: DS206
 Dual Sample Required between 9/1/2019 and 9/7/2019 at: DS206
 Dual Sample Required between 12/1/2019 and 12/7/2019 at: DS206

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS207 | Facility Name: LORAIN, CITY OF DISTRIBUTION HYDRANT ON OAK KNOLL AND HIDDEN TREE | Facility Class: CLASS 2 |
|--------------------------|---|---|--------------------------------|

Chemicals Monitoring Requirements

DISINFECTION BYPRODUCTS
 Dual Sample Required between 3/1/2019 and 3/7/2019 at: DS207
 Dual Sample Required between 6/1/2019 and 6/7/2019 at: DS207
 Dual Sample Required between 9/1/2019 and 9/7/2019 at: DS207
 Dual Sample Required between 12/1/2019 and 12/7/2019 at: DS207

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS208 | Facility Name: LORAIN, CITY OF DISTRIBUTION BURGER KING 2210 FAIRLESS | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

Chemicals Monitoring Requirements

DISINFECTION BYPRODUCTS
 Dual Sample Required between 3/1/2019 and 3/7/2019 at: DS208
 Dual Sample Required between 6/1/2019 and 6/7/2019 at: DS208
 Dual Sample Required between 9/1/2019 and 9/7/2019 at: DS208
 Dual Sample Required between 12/1/2019 and 12/7/2019 at: DS208

Sample for all the analytes listed below:

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



Effective Date: 01/01/2019

2019 DISTRIBUTION SCHEDULE

OH4700711 LORAIN CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: LC### | Facility Name: LORAIN, CITY OF DISTRIBUTION Refer to your Lead and Copper plan for SMP IDs | Facility Class: CLASS 2 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------------|--|
| LEAD - 1030 AND COPPER - 1022 | 30 Sample(s) Required between 6/1/2019 and 9/30/2019 |

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.



OH4700803 NORTH RIDGEVILLE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS000 | Facility Name: NORTH RIDGEVILLE, CITY OF DISTRIBUTION | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

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

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

| | | | | |
|-----------------------------|-------------------------------|-----------|-----|------------|
| TOTAL COLIFORM (TCR) - 3100 | 30 Sample(s) Required between | 1/1/2019 | and | 1/31/2019 |
| | 30 Sample(s) Required between | 2/1/2019 | and | 2/28/2019 |
| | 30 Sample(s) Required between | 3/1/2019 | and | 3/31/2019 |
| | 30 Sample(s) Required between | 4/1/2019 | and | 4/30/2019 |
| | 30 Sample(s) Required between | 5/1/2019 | and | 5/31/2019 |
| | 30 Sample(s) Required between | 6/1/2019 | and | 6/30/2019 |
| | 30 Sample(s) Required between | 7/1/2019 | and | 7/31/2019 |
| | 30 Sample(s) Required between | 8/1/2019 | and | 8/31/2019 |
| | 30 Sample(s) Required between | 9/1/2019 | and | 9/30/2019 |
| | 30 Sample(s) Required between | 10/1/2019 | and | 10/31/2019 |
| | 30 Sample(s) Required between | 11/1/2019 | and | 11/30/2019 |
| | 30 Sample(s) Required between | 12/1/2019 | and | 12/31/2019 |

| | | | | |
|-----------------------|-------------------------------|-----------|-----|------------|
| TOTAL CHLORINE - 1000 | 30 Sample(s) Required between | 1/1/2019 | and | 1/31/2019 |
| | 30 Sample(s) Required between | 2/1/2019 | and | 2/28/2019 |
| | 30 Sample(s) Required between | 3/1/2019 | and | 3/31/2019 |
| | 30 Sample(s) Required between | 4/1/2019 | and | 4/30/2019 |
| | 30 Sample(s) Required between | 5/1/2019 | and | 5/31/2019 |
| | 30 Sample(s) Required between | 6/1/2019 | and | 6/30/2019 |
| | 30 Sample(s) Required between | 7/1/2019 | and | 7/31/2019 |
| | 30 Sample(s) Required between | 8/1/2019 | and | 8/31/2019 |
| | 30 Sample(s) Required between | 9/1/2019 | and | 9/30/2019 |
| | 30 Sample(s) Required between | 10/1/2019 | and | 10/31/2019 |
| | 30 Sample(s) Required between | 11/1/2019 | and | 11/30/2019 |
| | 30 Sample(s) Required between | 12/1/2019 | and | 12/31/2019 |

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS201 | Facility Name: NORTH RIDGEVILLE, CITY OF DISTRIBUTION 36097 WEST MINSTER | Facility Class: CLASS 2 |
|--------------------------|---|---|--------------------------------|

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

| | | | | |
|-------------------------|------------------------------|-----------|-----|----------------------|
| DISINFECTION BYPRODUCTS | Dual Sample Required between | 3/8/2019 | and | 3/14/2019 at: DS201 |
| | Dual Sample Required between | 6/8/2019 | and | 6/14/2019 at: DS201 |
| | Dual Sample Required between | 9/8/2019 | and | 9/14/2019 at: DS201 |
| | Dual Sample Required between | 12/8/2019 | and | 12/14/2019 at: DS201 |

Sample for all the analytes listed below:

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

OH4700803 NORTH RIDGEVILLE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: NORTH RIDGEVILLE, CITY OF DISTRIBUTION 7307 AVON BELDEN | Facility Class: CLASS 2 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/8/2019 and 3/14/2019 at: DS202 |
| | Dual Sample Required between 6/8/2019 and 6/14/2019 at: DS202 |
| | Dual Sample Required between 9/8/2019 and 9/14/2019 at: DS202 |
| | Dual Sample Required between 12/8/2019 and 12/14/2019 at: DS202 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS203 | Facility Name: NORTH RIDGEVILLE, CITY OF DISTRIBUTION 34043 CENTER RIDGE | Facility Class: CLASS 2 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/8/2019 and 3/14/2019 at: DS203 |
| | Dual Sample Required between 6/8/2019 and 6/14/2019 at: DS203 |
| | Dual Sample Required between 9/8/2019 and 9/14/2019 at: DS203 |
| | Dual Sample Required between 12/8/2019 and 12/14/2019 at: DS203 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS204 | Facility Name: NORTH RIDGEVILLE, CITY OF DISTRIBUTION NORTH RIDGEVILLE SERVICE CENTER | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/8/2019 and 3/14/2019 at: DS204 |
| | Dual Sample Required between 6/8/2019 and 6/14/2019 at: DS204 |
| | Dual Sample Required between 9/8/2019 and 9/14/2019 at: DS204 |
| | Dual Sample Required between 12/8/2019 and 12/14/2019 at: DS204 |

Sample for all the analytes listed below:

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



Effective Date: 01/01/2019

2019 DISTRIBUTION SCHEDULE

OH4700803 NORTH RIDGEVILLE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|-------------------------|--|--------------------------------|
| Sampling Location | Facility ID: DS1 | Facility Name: NORTH RIDGEVILLE, CITY OF DISTRIBUTION | Facility Class: CLASS 2 |
| | SMP ID: LC### | Refer to your Lead and Copper plan for SMP IDs | |

Chemicals

Monitoring Requirements

LEAD - 1030 AND COPPER - 1022 30 Sample(s) Required between 6/1/2019 and 9/30/2019

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.



OH4700911 OBERLIN WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: 4755822 SMP ID: EP001 | Facility Name: OBERLIN WATER DEPARTMENT Facility Source: Surface Water | Facility Class: CLASS 3 |
|--------------------------|---|---|--------------------------------|

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, 2019**

| Chemicals | Monitoring Requirements | |
|--|--------------------------------------|--------------------------|
| INORGANICS | 1 Sample(s) Required between | 6/1/2019 and 10/31/2019 |
| <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 | 1/1/2019 and 1/31/2019 |
| | 1 Sample(s) Required between | 2/1/2019 and 2/28/2019 |
| | 1 Sample(s) Required between | 3/1/2019 and 3/31/2019 |
| | 1 Sample(s) Required between | 4/1/2019 and 4/30/2019 |
| | 1 Sample(s) Required between | 5/1/2019 and 5/31/2019 |
| | 1 Sample(s) Required between | 6/1/2019 and 6/30/2019 |
| | 1 Sample(s) Required between | 7/1/2019 and 7/31/2019 |
| | 1 Sample(s) Required between | 8/1/2019 and 8/31/2019 |
| | 1 Sample(s) Required between | 9/1/2019 and 9/30/2019 |
| | 1 Sample(s) Required between | 10/1/2019 and 10/31/2019 |
| | 1 Sample(s) Required between | 11/1/2019 and 11/30/2019 |
| | 1 Sample(s) Required between | 12/1/2019 and 12/31/2019 |
| RADIOLOGICALS | Not Required | |
| SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1 | 1 Sample(s) Required between | 4/1/2019 and 4/30/2019 |
| | 1 Sample(s) Required between | 5/1/2019 and 5/31/2019 |
| | 1 Sample(s) Required between | 6/1/2019 and 6/30/2019 |
| <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 | 6/1/2019 and 10/31/2019 |
| TOTAL ORGANIC CARBON (TOC) | 1 Paired Sample Set Required between | 1/1/2019 and 1/31/2019 |
| | 1 Paired Sample Set Required between | 2/1/2019 and 2/28/2019 |
| | 1 Paired Sample Set Required between | 3/1/2019 and 3/31/2019 |
| | 1 Paired Sample Set Required between | 4/1/2019 and 4/30/2019 |
| | 1 Paired Sample Set Required between | 5/1/2019 and 5/31/2019 |
| | 1 Paired Sample Set Required between | 6/1/2019 and 6/30/2019 |
| | 1 Paired Sample Set Required between | 7/1/2019 and 7/31/2019 |
| | 1 Paired Sample Set Required between | 8/1/2019 and 8/31/2019 |
| | 1 Paired Sample Set Required between | 9/1/2019 and 9/30/2019 |
| | 1 Paired Sample Set Required between | 10/1/2019 and 10/31/2019 |
| | 1 Paired Sample Set Required between | 11/1/2019 and 11/30/2019 |
| | 1 Paired Sample Set Required between | 12/1/2019 and 12/31/2019 |

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.



Effective Date: 01/01/2019

2019 ENTRY POINT SCHEDULE

OH4700911 OBERLIN WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|-----------------|-----------------------------|--|--------------------------------|
| Sampling | Facility ID: 4755822 | Facility Name: OBERLIN WATER DEPARTMENT | |
| Location | SMP ID: EP001/LT2001 | Facility Source: Surface Water | Facility Class: CLASS 3 |

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, 2019**

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.*



OH4700911 OBERLIN WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|-----------------|-----------------------------|--|--------------------------------|
| Sampling | Facility ID: 4755822 | Facility Name: OBERLIN WATER DEPARTMENT | |
| Location | SMP ID: LT2001 | Facility Source: Surface Water | Facility Class: CLASS 3 |

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, 2019

| Chemicals | Monitoring Requirements |
|--|--|
| CYANOBACTERIA SCREENING | 1 Sample(s) Required between 1/6/2019 and 1/12/2019 |
| | 1 Sample(s) Required between 1/20/2019 and 1/26/2019 |
| | 1 Sample(s) Required between 2/3/2019 and 2/9/2019 |
| | 1 Sample(s) Required between 2/17/2019 and 2/23/2019 |
| | 1 Sample(s) Required between 3/3/2019 and 3/9/2019 |
| | 1 Sample(s) Required between 3/17/2019 and 3/23/2019 |
| | 1 Sample(s) Required between 3/31/2019 and 4/6/2019 |
| | 1 Sample(s) Required between 4/14/2019 and 4/20/2019 |
| | 1 Sample(s) Required between 4/28/2019 and 5/4/2019 |
| | 1 Sample(s) Required between 5/12/2019 and 5/18/2019 |
| | 1 Sample(s) Required between 5/26/2019 and 6/1/2019 |
| | 1 Sample(s) Required between 6/9/2019 and 6/15/2019 |
| | 1 Sample(s) Required between 6/23/2019 and 6/29/2019 |
| | 1 Sample(s) Required between 7/7/2019 and 7/13/2019 |
| | 1 Sample(s) Required between 7/21/2019 and 7/27/2019 |
| | 1 Sample(s) Required between 8/4/2019 and 8/10/2019 |
| | 1 Sample(s) Required between 8/18/2019 and 8/24/2019 |
| | 1 Sample(s) Required between 9/1/2019 and 9/7/2019 |
| | 1 Sample(s) Required between 9/15/2019 and 9/21/2019 |
| | 1 Sample(s) Required between 9/29/2019 and 10/5/2019 |
| 1 Sample(s) Required between 10/13/2019 and 10/19/2019 | |
| 1 Sample(s) Required between 10/27/2019 and 11/2/2019 | |
| 1 Sample(s) Required between 11/10/2019 and 11/16/2019 | |
| 1 Sample(s) Required between 11/24/2019 and 11/30/2019 | |
| 1 Sample(s) Required between 12/8/2019 and 12/14/2019 | |
| 1 Sample(s) Required between 12/22/2019 and 12/28/2019 | |

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.

OH4700911 OBERLIN WATER DEPARTMENT

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, 2019**

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS000 | Facility Name: OBERLIN WATER DEPARTMENT DISTRIBUTIO | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

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

| | |
|-----------------------------|--|
| ASBESTOS - 1094 | Not Required |
| TOTAL COLIFORM (TCR) - 3100 | 9 Sample(s) Required between 1/1/2019 and 1/31/2019 9 Sample(s) Required between 2/1/2019 and 2/28/2019 9 Sample(s) Required between 3/1/2019 and 3/31/2019 9 Sample(s) Required between 4/1/2019 and 4/30/2019 9 Sample(s) Required between 5/1/2019 and 5/31/2019 9 Sample(s) Required between 6/1/2019 and 6/30/2019 9 Sample(s) Required between 7/1/2019 and 7/31/2019 9 Sample(s) Required between 8/1/2019 and 8/31/2019 9 Sample(s) Required between 9/1/2019 and 9/30/2019 9 Sample(s) Required between 10/1/2019 and 10/31/2019 9 Sample(s) Required between 11/1/2019 and 11/30/2019 9 Sample(s) Required between 12/1/2019 and 12/31/2019 |
| TOTAL CHLORINE - 1000 | 9 Sample(s) Required between 1/1/2019 and 1/31/2019 9 Sample(s) Required between 2/1/2019 and 2/28/2019 9 Sample(s) Required between 3/1/2019 and 3/31/2019 9 Sample(s) Required between 4/1/2019 and 4/30/2019 9 Sample(s) Required between 5/1/2019 and 5/31/2019 9 Sample(s) Required between 6/1/2019 and 6/30/2019 9 Sample(s) Required between 7/1/2019 and 7/31/2019 9 Sample(s) Required between 8/1/2019 and 8/31/2019 9 Sample(s) Required between 9/1/2019 and 9/30/2019 9 Sample(s) Required between 10/1/2019 and 10/31/2019 9 Sample(s) Required between 11/1/2019 and 11/30/2019 9 Sample(s) Required between 12/1/2019 and 12/31/2019 |

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS201 | Facility Name: OBERLIN WATER DEPARTMENT DISTRIBUTIO 380 RESERVE WAY | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

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

| | |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 1/1/2019 and 1/7/2019 at: DS201 Dual Sample Required between 4/1/2019 and 4/7/2019 at: DS201 Dual Sample Required between 7/1/2019 and 7/7/2019 at: DS201 Dual Sample Required between 10/1/2019 and 10/7/2019 at: DS201 |
|-------------------------|--|

Sample for all the analytes listed below:

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



OH4700911 OBERLIN WATER DEPARTMENT

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, 2019**

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: OBERLIN WATER DEPARTMENT DISTRIBUTIO 797 EAST LORAIN STREET | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 1/1/2019 and 1/7/2019 at: DS202 |
| | Dual Sample Required between 4/1/2019 and 4/7/2019 at: DS202 |
| | Dual Sample Required between 7/1/2019 and 7/7/2019 at: DS202 |
| | Dual Sample Required between 10/1/2019 and 10/7/2019 at: DS202 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: LC### | Facility Name: OBERLIN WATER DEPARTMENT DISTRIBUTIO Refer to your Lead and Copper plan for SMP IDs | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------------|--|
| LEAD - 1030 AND COPPER - 1022 | 20 Sample(s) Required between 6/1/2019 and 9/30/2019 |

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.



OH4701103 SHEFFIELD LAKE CITY PWS

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, 2019

DISTRIBUTION MONITORING SCHEDULE

Table with 4 columns: Sampling Location, Facility ID, Facility Name, Facility Class. Values: DS1, SHEFFIELD LAKE CITY DISTRIBUTION, CLASS 1, DS000.

Chemicals Monitoring Requirements

ASBESTOS - 1094 Not Required

Table with 3 columns: Parameter, Samples, Dates. Parameter: TOTAL COLIFORM (TCR) - 3100. Samples: 10. Dates: 1/1/2019 to 12/31/2019.

Table with 3 columns: Parameter, Samples, Dates. Parameter: TOTAL CHLORINE - 1000. Samples: 10. Dates: 1/1/2019 to 12/31/2019.

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

Table with 4 columns: Sampling Location, Facility ID, Facility Name, Facility Class. Values: DS201, SHEFFIELD LAKE CITY DISTRIBUTION, CLASS 1, DS201, 3740 TENNYSON AVE.

Chemicals Monitoring Requirements

DISINFECTION BYPRODUCTS Dual Sample Required between 7/1/2019 and 9/30/2019 at: DS201

Sample for all the analytes listed below:

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



OH4701103 SHEFFIELD LAKE CITY PWS

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, 2019**

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: SHEFFIELD LAKE CITY DISTRIBUTION 4750 RICHELIEU AVE. | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

Chemicals Monitoring Requirements

DISINFECTION BYPRODUCTS Dual Sample Required between 7/1/2019 and 9/30/2019 at: DS202

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: LC### | Facility Name: SHEFFIELD LAKE CITY DISTRIBUTION Refer to your Lead and Copper plan for SMP IDs | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

Chemicals Monitoring Requirements

LEAD - 1030 AND COPPER - 1022 20 Sample(s) Required between 6/1/2019 and 9/30/2019

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.



OH4701203 SHEFFIELD VILLAGE PWS

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, 2019

DISTRIBUTION MONITORING SCHEDULE

Table with 4 columns: Sampling Location, Facility ID, Facility Name, Facility Class. Values: DS1, SHEFFIELD, VILLAGE OF DISTRIBUTION, CLASS 1.

Chemicals Monitoring Requirements

ASBESTOS - 1094 Not Required

Table with 2 columns: Chemical Name, Monitoring Requirements. Lists 12 sampling periods for TOTAL COLIFORM (TCR) - 3100.

Table with 2 columns: Chemical Name, Monitoring Requirements. Lists 12 sampling periods for TOTAL CHLORINE - 1000.

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

Table with 4 columns: Sampling Location, Facility ID, Facility Name, Facility Class. Values: DS201, 4480 COLORADO AVE., CLASS 1.

Chemicals Monitoring Requirements

DISINFECTION BYPRODUCTS Dual Sample Required between 7/1/2019 and 9/30/2019 at: DS201

Sample for all the analytes listed below:

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



OH4701203 SHEFFIELD VILLAGE PWS

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, 2019**

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: SHEFFIELD, VILLAGE OF DISTRIBUTION ADDRESS NOT KNOWN | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

Chemicals Monitoring Requirements

DISINFECTION BYPRODUCTS Dual Sample Required between 7/1/2019 and 9/30/2019 at: DS202

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: LC### | Facility Name: SHEFFIELD, VILLAGE OF DISTRIBUTION Refer to your Lead and Copper plan for SMP IDs | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

Chemicals Monitoring Requirements

LEAD - 1030 AND COPPER - 1022 20 Sample(s) Required between 6/1/2019 and 9/30/2019

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.



OH4701411 SOUTH AMHERST VILLAGE PWS

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, 2019

DISTRIBUTION MONITORING SCHEDULE

Table with 4 columns: Sampling Location, Facility ID, Facility Name, Facility Class. Values: DS1, SOUTH AMHERST, VILLAGE O DISTRIBUTION, CLASS 1.

Chemicals Monitoring Requirements

Table for TOTAL COLIFORM (TCR) - 3100. Lists 12 sampling events with 2 samples each, spaced evenly from 1/1/2019 to 12/31/2019.

Table for TOTAL CHLORINE - 1000. Lists 12 sampling events with 2 samples each, spaced evenly from 1/1/2019 to 12/31/2019.

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

Table with 4 columns: Sampling Location, Facility ID, Facility Name, Facility Class. Values: DS201, SOUTH AMHERST, VILLAGE O DISTRIBUTION, CLASS 1.

Chemicals Monitoring Requirements

Table for DISINFECTION BYPRODUCTS. Lists 4 sampling events with dual samples each, occurring on 3/7, 6/7, 9/7, and 12/7/2019.

Sample for all the analytes listed below:

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



OH4701411 SOUTH AMHERST VILLAGE PWS

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, 2019

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: SOUTH AMHERST, VILLAGE O DISTRIBUTION 227 N. LAKE ST. | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/1/2019 and 3/7/2019 at: DS202 |
| | Dual Sample Required between 6/1/2019 and 6/7/2019 at: DS202 |
| | Dual Sample Required between 9/1/2019 and 9/7/2019 at: DS202 |
| | Dual Sample Required between 12/1/2019 and 12/7/2019 at: DS202 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: LC### | Facility Name: SOUTH AMHERST, VILLAGE O DISTRIBUTION Refer to your Lead and Copper plan for SMP IDs | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------------|--|
| LEAD - 1030 AND COPPER - 1022 | 10 Sample(s) Required between 6/1/2019 and 9/30/2019 |

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.



OH4701511 WELLINGTON VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: 4755826 SMP ID: EP001 | Facility Name: WELLINGTON WTP Facility Source: Surface Water | Facility Class: CLASS 3 |
|--------------------------|---|---|--------------------------------|

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, 2019

| Chemicals | Monitoring Requirements |
|--|--|
| INORGANICS | 1 Sample(s) Required between 6/1/2019 and 10/31/2019 |
| <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 1/1/2019 and 1/31/2019 1 Sample(s) Required between 2/1/2019 and 2/28/2019 1 Sample(s) Required between 3/1/2019 and 3/31/2019 1 Sample(s) Required between 4/1/2019 and 4/30/2019 1 Sample(s) Required between 5/1/2019 and 5/31/2019 1 Sample(s) Required between 6/1/2019 and 6/30/2019 1 Sample(s) Required between 7/1/2019 and 7/31/2019 1 Sample(s) Required between 8/1/2019 and 8/31/2019 1 Sample(s) Required between 9/1/2019 and 9/30/2019 1 Sample(s) Required between 10/1/2019 and 10/31/2019 1 Sample(s) Required between 11/1/2019 and 11/30/2019 1 Sample(s) Required between 12/1/2019 and 12/31/2019 |
| RADIOLOGICALS | Not Required |
| SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1 | 1 Sample(s) Required between 4/1/2019 and 6/30/2019 |
| <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 6/1/2019 and 10/31/2019 |



Effective Date: 01/01/2019

2019 ENTRY POINT SCHEDULE

OH4701511 WELLINGTON VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|-----------------|-----------------------------|---------------------------------------|--------------------------------|
| Sampling | Facility ID: 4755826 | Facility Name: WELLINGTON WTP | |
| Location | SMP ID: EP001/LT2001 | Facility Source: Surface Water | Facility Class: CLASS 3 |

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, 2019**

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.*



OH4701511 WELLINGTON VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

| | | | |
|-----------------|-----------------------------|---------------------------------------|--------------------------------|
| Sampling | Facility ID: 4755826 | Facility Name: WELLINGTON WTP | |
| Location | SMP ID: LT2001 | Facility Source: Surface Water | Facility Class: CLASS 3 |

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.

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

** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019

| Chemicals | Monitoring Requirements |
|--|--|
| CYANOBACTERIA SCREENING | 1 Sample(s) Required between 1/6/2019 and 1/12/2019 |
| | 1 Sample(s) Required between 1/20/2019 and 1/26/2019 |
| | 1 Sample(s) Required between 2/3/2019 and 2/9/2019 |
| | 1 Sample(s) Required between 2/17/2019 and 2/23/2019 |
| | 1 Sample(s) Required between 3/3/2019 and 3/9/2019 |
| | 1 Sample(s) Required between 3/17/2019 and 3/23/2019 |
| | 1 Sample(s) Required between 3/31/2019 and 4/6/2019 |
| | 1 Sample(s) Required between 4/14/2019 and 4/20/2019 |
| | 1 Sample(s) Required between 4/28/2019 and 5/4/2019 |
| | 1 Sample(s) Required between 5/12/2019 and 5/18/2019 |
| | 1 Sample(s) Required between 5/26/2019 and 6/1/2019 |
| | 1 Sample(s) Required between 6/9/2019 and 6/15/2019 |
| | 1 Sample(s) Required between 6/23/2019 and 6/29/2019 |
| | 1 Sample(s) Required between 7/7/2019 and 7/13/2019 |
| | 1 Sample(s) Required between 7/21/2019 and 7/27/2019 |
| | 1 Sample(s) Required between 8/4/2019 and 8/10/2019 |
| | 1 Sample(s) Required between 8/18/2019 and 8/24/2019 |
| | 1 Sample(s) Required between 9/1/2019 and 9/7/2019 |
| | 1 Sample(s) Required between 9/15/2019 and 9/21/2019 |
| | 1 Sample(s) Required between 9/29/2019 and 10/5/2019 |
| 1 Sample(s) Required between 10/13/2019 and 10/19/2019 | |
| 1 Sample(s) Required between 10/27/2019 and 11/2/2019 | |
| 1 Sample(s) Required between 11/10/2019 and 11/16/2019 | |
| 1 Sample(s) Required between 11/24/2019 and 11/30/2019 | |
| 1 Sample(s) Required between 12/8/2019 and 12/14/2019 | |
| 1 Sample(s) Required between 12/22/2019 and 12/28/2019 | |

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.

OH4701511 WELLINGTON VILLAGE PWS

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, 2019**

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS000 | Facility Name: WELLINGTON, VILLAGE OF DISTRIBUTION | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

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

| | |
|-----------------------------|--|
| ASBESTOS - 1094 | Not Required |
| TOTAL COLIFORM (TCR) - 3100 | 5 Sample(s) Required between 1/1/2019 and 1/31/2019 5 Sample(s) Required between 2/1/2019 and 2/28/2019 5 Sample(s) Required between 3/1/2019 and 3/31/2019 5 Sample(s) Required between 4/1/2019 and 4/30/2019 5 Sample(s) Required between 5/1/2019 and 5/31/2019 5 Sample(s) Required between 6/1/2019 and 6/30/2019 5 Sample(s) Required between 7/1/2019 and 7/31/2019 5 Sample(s) Required between 8/1/2019 and 8/31/2019 5 Sample(s) Required between 9/1/2019 and 9/30/2019 5 Sample(s) Required between 10/1/2019 and 10/31/2019 5 Sample(s) Required between 11/1/2019 and 11/30/2019 5 Sample(s) Required between 12/1/2019 and 12/31/2019 |
| TOTAL CHLORINE - 1000 | 5 Sample(s) Required between 1/1/2019 and 1/31/2019 5 Sample(s) Required between 2/1/2019 and 2/28/2019 5 Sample(s) Required between 3/1/2019 and 3/31/2019 5 Sample(s) Required between 4/1/2019 and 4/30/2019 5 Sample(s) Required between 5/1/2019 and 5/31/2019 5 Sample(s) Required between 6/1/2019 and 6/30/2019 5 Sample(s) Required between 7/1/2019 and 7/31/2019 5 Sample(s) Required between 8/1/2019 and 8/31/2019 5 Sample(s) Required between 9/1/2019 and 9/30/2019 5 Sample(s) Required between 10/1/2019 and 10/31/2019 5 Sample(s) Required between 11/1/2019 and 11/30/2019 5 Sample(s) Required between 12/1/2019 and 12/31/2019 |

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS201 | Facility Name: WELLINGTON, VILLAGE OF DISTRIBUTION 23687 PITTS ROAD | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

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

| | |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/1/2019 and 2/7/2019 at: DS201 Dual Sample Required between 5/1/2019 and 5/7/2019 at: DS201 Dual Sample Required between 8/1/2019 and 8/7/2019 at: DS201 Dual Sample Required between 11/1/2019 and 11/7/2019 at: DS201 |
|-------------------------|--|

Sample for all the analytes listed below:

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



OH4701511 WELLINGTON VILLAGE PWS

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, 2019

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: WELLINGTON, VILLAGE OF DISTRIBUTION 816 NORTH MAIN STREET | Facility Class: CLASS 1 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|--|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 2/1/2019 and 2/7/2019 at: DS202 |
| | Dual Sample Required between 5/1/2019 and 5/7/2019 at: DS202 |
| | Dual Sample Required between 8/1/2019 and 8/7/2019 at: DS202 |
| | Dual Sample Required between 11/1/2019 and 11/7/2019 at: DS202 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: LC### | Facility Name: WELLINGTON, VILLAGE OF DISTRIBUTION Refer to your Lead and Copper plan for SMP IDs | Facility Class: CLASS 1 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------------|--|
| LEAD - 1030 AND COPPER - 1022 | 20 Sample(s) Required between 6/1/2019 and 9/30/2019 |

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.



OH4701803 RURAL LORAIN CO. WATER A

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.

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** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019

DISTRIBUTION MONITORING SCHEDULE

Table with 4 columns: Sampling Location, Facility ID, Facility Name, Facility Class. Values: DS1, DS000, RURAL LORAIN CO. WATER A DISTRIBUTION, CLASS 2

Chemicals Monitoring Requirements

ASBESTOS - 1094 Not Required

Table with 3 columns: Parameter, Samples, Dates. Rows for TOTAL COLIFORM (TCR) - 3100 with 12 monthly sampling requirements.

Table with 3 columns: Parameter, Samples, Dates. Rows for TOTAL CHLORINE - 1000 with 12 monthly sampling requirements.

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

Table with 4 columns: Sampling Location, Facility ID, Facility Name, Facility Class. Values: DS201, DS201, POLK TANK, CLASS 2

Chemicals Monitoring Requirements

Table with 3 columns: Parameter, Samples, Dates. Rows for DISINFECTION BYPRODUCTS with 4 sampling requirements.

Sample for all the analytes listed below:

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

OH4701803 RURAL LORAIN CO. WATER A

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.

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**** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019**

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS202 | Facility Name: RURAL LORAIN CO. WATER A DISTRIBUTION HOMERVILLE TANK | Facility Class: CLASS 2 |
|--------------------------|---|---|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/8/2019 and 3/14/2019 at: DS202 |
| | Dual Sample Required between 6/8/2019 and 6/14/2019 at: DS202 |
| | Dual Sample Required between 9/8/2019 and 9/14/2019 at: DS202 |
| | Dual Sample Required between 12/8/2019 and 12/14/2019 at: DS202 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS203 | Facility Name: RURAL LORAIN CO. WATER A DISTRIBUTION RLCWA SHOP #1 - 42401 SR 303 | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/8/2019 and 3/14/2019 at: DS203 |
| | Dual Sample Required between 6/8/2019 and 6/14/2019 at: DS203 |
| | Dual Sample Required between 9/8/2019 and 9/14/2019 at: DS203 |
| | Dual Sample Required between 12/8/2019 and 12/14/2019 at: DS203 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS204 | Facility Name: RURAL LORAIN CO. WATER A DISTRIBUTION 42777 PECK-WADSWORTH RD. | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/8/2019 and 3/14/2019 at: DS204 |
| | Dual Sample Required between 6/8/2019 and 6/14/2019 at: DS204 |
| | Dual Sample Required between 9/8/2019 and 9/14/2019 at: DS204 |
| | Dual Sample Required between 12/8/2019 and 12/14/2019 at: DS204 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS205 | Facility Name: RURAL LORAIN CO. WATER A DISTRIBUTION CAMDEN TOWNSHIP GARAGE | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

| Chemicals | Monitoring Requirements |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/8/2019 and 3/14/2019 at: DS205 |
| | Dual Sample Required between 6/8/2019 and 6/14/2019 at: DS205 |
| | Dual Sample Required between 9/8/2019 and 9/14/2019 at: DS205 |

OH4701803 RURAL LORAIN CO. WATER A

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.

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**** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2019**

DISTRIBUTION MONITORING SCHEDULE

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS205 | Facility Name: RURAL LORAIN CO. WATER A DISTRIBUTION CAMDEN TOWNSHIP GARAGE | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

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

| | |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 12/8/2019 and 12/14/2019 at: DS205 |
|-------------------------|---|

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|--|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS206 | Facility Name: RURAL LORAIN CO. WATER A DISTRIBUTION FOSTER RD. AND SMITH RD. PRV STATION | Facility Class: CLASS 2 |
|--------------------------|---|--|--------------------------------|

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

| | |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/8/2019 and 3/14/2019 at: DS206 |
| | Dual Sample Required between 6/8/2019 and 6/14/2019 at: DS206 |
| | Dual Sample Required between 9/8/2019 and 9/14/2019 at: DS206 |
| | Dual Sample Required between 12/8/2019 and 12/14/2019 at: DS206 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS207 | Facility Name: RURAL LORAIN CO. WATER A DISTRIBUTION WELLINGTON P.S. | Facility Class: CLASS 2 |
|--------------------------|---|---|--------------------------------|

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

| | |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/8/2019 and 3/14/2019 at: DS207 |
| | Dual Sample Required between 6/8/2019 and 6/14/2019 at: DS207 |
| | Dual Sample Required between 9/8/2019 and 9/14/2019 at: DS207 |
| | Dual Sample Required between 12/8/2019 and 12/14/2019 at: DS207 |

Sample for all the analytes listed below:

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

| | | | |
|--------------------------|---|---|--------------------------------|
| Sampling Location | Facility ID: DS1 SMP ID: DS208 | Facility Name: RURAL LORAIN CO. WATER A DISTRIBUTION NOVA US POSTAL OFFICE | Facility Class: CLASS 2 |
|--------------------------|---|---|--------------------------------|

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

| | |
|-------------------------|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 3/8/2019 and 3/14/2019 at: DS208 |
| | Dual Sample Required between 6/8/2019 and 6/14/2019 at: DS208 |
| | Dual Sample Required between 9/8/2019 and 9/14/2019 at: DS208 |
| | Dual Sample Required between 12/8/2019 and 12/14/2019 at: DS208 |

Sample for all the analytes listed below:

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



OH4701912 PHEASANT RUN ASSOCIATION PWS

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, 2019

DISTRIBUTION MONITORING SCHEDULE

Sampling Location Facility ID: DS1 SMP ID: DS000 Facility Name: PHEASANT RUN ASSOCIATION DISTRIBUTION Facility Class: CLASS 1

Chemicals Monitoring Requirements

Table with 3 columns: Chemicals, Monitoring Requirements, and Dates. Includes rows for TOTAL COLIFORM (TCR) - 3100 with 12 sampling requirements.

Table with 3 columns: Chemicals, Monitoring Requirements, and Dates. Includes rows for TOTAL CHLORINE - 1000 with 12 sampling requirements.

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

Sampling Location Facility ID: DS1 SMP ID: DS201 Facility Name: PHEASANT RUN ASSOCIATION DISTRIBUTION Facility Class: CLASS 1

Chemicals Monitoring Requirements

Table with 3 columns: Chemicals, Monitoring Requirements, and Dates. Includes rows for DISINFECTION BYPRODUCTS with 4 sampling requirements.

Sample for all the analytes listed below:

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



OH4701912 PHEASANT RUN ASSOCIATION PWS

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, 2019

DISTRIBUTION MONITORING SCHEDULE

Sampling Facility ID: DS1 Facility Name: PHEASANT RUN ASSOCIATION DISTRIBUTION Facility Class: CLASS 1
Location SMP ID: DS202 11 SUNSET DR.

Chemicals

Monitoring Requirements

Table with 2 columns: Chemicals, Monitoring Requirements. Rows include DISINFECTION BYPRODUCTS with dual sample requirements for various dates.

Sample for all the analytes listed below:

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

Sampling Facility ID: DS1 Facility Name: PHEASANT RUN ASSOCIATION DISTRIBUTION Facility Class: CLASS 1
Location SMP ID: LC### Refer to your Lead and Copper plan for SMP IDs

Chemicals

Monitoring Requirements

Table with 2 columns: Chemicals, Monitoring Requirements. Row includes LEAD - 1030 AND COPPER - 1022 with 10 sample(s) required between 6/1/2019 and 9/30/2019.

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.

OH4737312 AUTORAMA TWIN THEATER

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: AUTORAMA TWIN THEATER DISTRIBUTION |
| Location SMP ID: SUP01 | Facility Source: Ground Water |

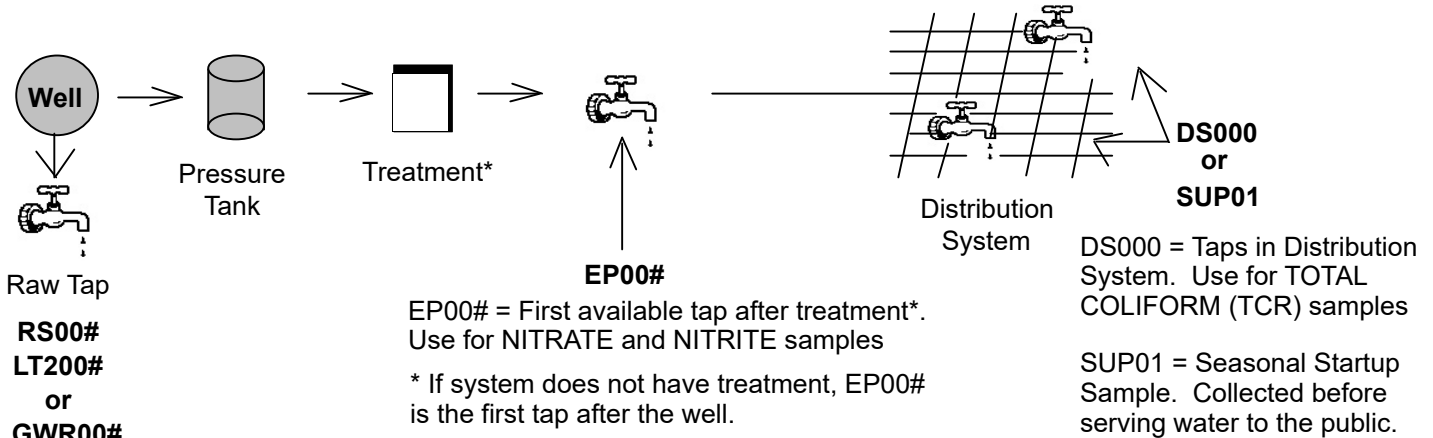
Chemicals

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!

OH4737312 AUTORAMA TWIN THEATER

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.

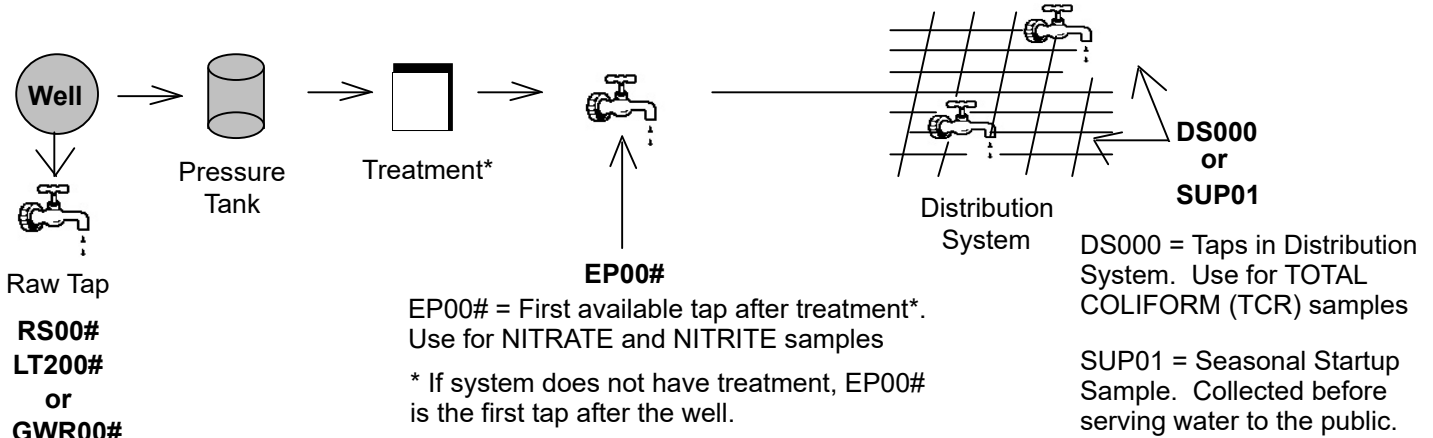
For water emergencies that occur after hours, please call 800-282-9378

DISTRIBUTION MONITORING SCHEDULE

| | |
|----------------------------------|--|
| Sampling Facility ID: DS1 | Facility Name: AUTORAMA TWIN THEATER DISTRIBUTION |
| Location SMP ID: DS000 | Facility Source: Ground Water |

| Chemicals | Monitoring Requirements |
|-----------------------------|--|
| TOTAL COLIFORM (TCR) - 3100 | 1 Sample(s) Required between 4/1/2019 and 6/30/2019 1 Sample(s) Required between 7/1/2019 and 9/30/2019 |

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!

OH4737312 AUTORAMA TWIN THEATER

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.

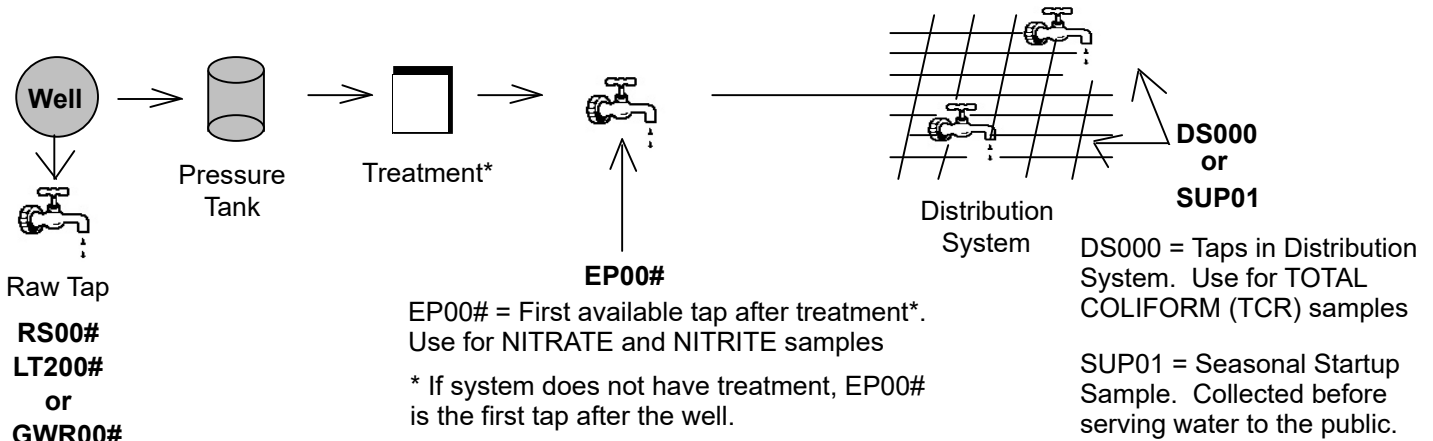
For water emergencies that occur after hours, please call 800-282-9378

ENTRY POINT MONITORING SCHEDULE

| | |
|--------------------------------------|---|
| Sampling Facility ID: 4755839 | Facility Name: AUTORAMA TWIN THEATER |
| Location SMP ID: EP001 | Facility Source: Ground Water |
| Facility Class: CLASS A | |

| Chemicals | Monitoring Requirements |
|----------------|--|
| NITRITE - 1041 | Not Required |
| NITRATE - 1040 | 1 Sample(s) Required between 6/1/2019 and 10/31/2019 |

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!