



Effective Date: 01/01/2015

2015 ENTRY POINT SCHEDULE

**OH0100012 ADAMS COUNTY REGIONAL WD PWS**

System Type: Community

Operating Period: 1/1 to 12/31

**ENTRY POINT MONITORING SCHEDULE**

<b>Sampling Location</b>	Facility ID: <b>152614</b>	Facility Name: <b>ADAMS COUNTY WATER CO INC</b>
	SMP ID: <b>EP001</b>	Facility Source: <b>Ground Water</b>
		Facility Class: <b>CLASS 3</b>

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

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. For water emergencies that occur after hours, please call 800-282-9378

**\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2015**

<b>Chemicals</b>	<b>Monitoring Requirements</b>
INORGANICS	Not Required
NITRITE - 1041	Not Required
NITRATE - 1040	1 Sample(s) Required between 1/1/2015 and 5/31/2015
RADIOLOGICALS	Not Required
SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1	Not Required
VOLATILE ORGANIC CHEMICALS (VOC)	Not Required



**OH0100012 ADAMS COUNTY REGIONAL WD PWS**

System Type: Community

Operating Period: 1/1 to 12/31

Groundwater Rule Substantial Treatment System

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**\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2015**

**DISTRIBUTION MONITORING SCHEDULE**

**Sampling Location** Facility ID: **DS1** Facility Name: **ADAMS COUNTY REGIONAL WD DISTRIBUTI** Facility Class: **CLASS 2**  
SMP ID: **DS000**

Chemicals	Monitoring Requirements
LEAD - 1030 AND COPPER - 1022	Not Required
ASBESTOS - 1094	Not Required
TOTAL COLIFORM (TCR) - 3100	20 Sample(s) Required between 1/1/2015 and 1/31/2015 20 Sample(s) Required between 2/1/2015 and 2/28/2015 20 Sample(s) Required between 3/1/2015 and 3/31/2015 20 Sample(s) Required between 4/1/2015 and 4/30/2015 20 Sample(s) Required between 5/1/2015 and 5/31/2015 20 Sample(s) Required between 6/1/2015 and 6/30/2015 20 Sample(s) Required between 7/1/2015 and 7/31/2015 20 Sample(s) Required between 8/1/2015 and 8/31/2015 20 Sample(s) Required between 9/1/2015 and 9/30/2015 20 Sample(s) Required between 10/1/2015 and 10/31/2015 20 Sample(s) Required between 11/1/2015 and 11/30/2015 20 Sample(s) Required between 12/1/2015 and 12/31/2015
TOTAL CHLORINE - 1000	20 Sample(s) Required between 1/1/2015 and 1/31/2015 20 Sample(s) Required between 2/1/2015 and 2/28/2015 20 Sample(s) Required between 3/1/2015 and 3/31/2015 20 Sample(s) Required between 4/1/2015 and 4/30/2015 20 Sample(s) Required between 5/1/2015 and 5/31/2015 20 Sample(s) Required between 6/1/2015 and 6/30/2015 20 Sample(s) Required between 7/1/2015 and 7/31/2015 20 Sample(s) Required between 8/1/2015 and 8/31/2015 20 Sample(s) Required between 9/1/2015 and 9/30/2015 20 Sample(s) Required between 10/1/2015 and 10/31/2015 20 Sample(s) Required between 11/1/2015 and 11/30/2015 20 Sample(s) Required between 12/1/2015 and 12/31/2015

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

**Sampling Location** Facility ID: **DS1** Facility Name: **ADAMS COUNTY REGIONAL WD DISTRIBUTI** Facility Class: **CLASS 2**  
SMP ID: **DS201** ADDRESS NOT KNOWN

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 7/1/2015 and 9/30/2015 at SMP: DS201

Sample for all the analytes listed below:

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



Effective Date: 01/01/2015

2015 DISTRIBUTION SCHEDULE

**OH0100012 ADAMS COUNTY REGIONAL WD PWS**

System Type: Community

Operating Period: 1/1 to 12/31

Groundwater Rule Substantial Treatment System

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**DISTRIBUTION MONITORING SCHEDULE**

<b>Sampling Location</b>	Facility ID: <b>DS1</b>	Facility Name: <b>ADAMS COUNTY REGIONAL WD DISTRIBUTI</b>	Facility Class: <b>CLASS 2</b>
	SMP ID: <b>DS202</b>	<b>ADDRESS NOT KNOWN</b>	

**Chemicals**

**Monitoring Requirements**

DISINFECTION BYPRODUCTS

1 Sample(s) Required between 7/1/2015 and 9/30/2015 at SMP: DS202

Sample for all the analytes listed below:

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

**OH0100112 MANCHESTER VILLAGE**

System Type: Community

Operating Period: 1/1 to 12/31

**ENTRY POINT MONITORING SCHEDULE**

<b>Sampling Location</b>	Facility ID: <b>152615</b>	Facility Name: <b>MANCHESTER WTP</b>	Facility Class: <b>CLASS 1</b>
	SMP ID: <b>EP001</b>	Facility Source: <b>Ground Water</b>	

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<b>Chemicals</b>	<b>Monitoring Requirements</b>
INORGANICS	Not Required
NITRITE - 1041	Not Required
NITRATE - 1040	1 Sample(s) Required between 4/1/2015 and 6/30/2015
RADIOLOGICALS	Not Required
SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1	Not Required
SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 2	Not Required
SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 3	1 Sample(s) Required between 4/1/2015 and 6/30/2015
<i>Sample for all the analytes listed below:</i>	
BHC-GAMMA (LINDANE) - 2010 DIQUAT - 2032 GLYPHOSATE - 2034	
METHOXYCHLOR - 2015 POLYCHLORINATED BIPHENYLS (PCB) - 2383	
SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 4	1 Sample(s) Required between 4/1/2015 and 6/30/2015
<i>Sample for all the analytes listed below:</i>	
BENZO (A) PYRENE - 2306 DI(2-ETHYLHEXYL) - ADIPATE - 2035 DI(2-ETHYLHEXYL) - PHTHALATE - 2039	
ENDOTHALL - 2033	
VOLATILE ORGANIC CHEMICALS (VOC)	Not Required



**OH0100112 MANCHESTER VILLAGE**

System Type: Community

Operating Period: 1/1 to 12/31

Groundwater Rule Substantial Treatment System

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**DISTRIBUTION MONITORING SCHEDULE**

<b>Sampling Location</b>	Facility ID: <b>DS1</b> SMP ID: <b>DS000</b>	Facility Name: <b>MANCHESTER, VILLAGE OF DISTRIBUTION</b>	Facility Class: <b>CLASS 1</b>
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Chemicals	Monitoring Requirements
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LEAD - 1030 AND COPPER - 1022	Not Required
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ASBESTOS - 1094	Not Required
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TOTAL COLIFORM (TCR) - 3100	2 Sample(s) Required between	1/1/2015	and	1/31/2015
	2 Sample(s) Required between	2/1/2015	and	2/28/2015
	2 Sample(s) Required between	3/1/2015	and	3/31/2015
	2 Sample(s) Required between	4/1/2015	and	4/30/2015
	2 Sample(s) Required between	5/1/2015	and	5/31/2015
	2 Sample(s) Required between	6/1/2015	and	6/30/2015
	2 Sample(s) Required between	7/1/2015	and	7/31/2015
	2 Sample(s) Required between	8/1/2015	and	8/31/2015
	2 Sample(s) Required between	9/1/2015	and	9/30/2015
	2 Sample(s) Required between	10/1/2015	and	10/31/2015
	2 Sample(s) Required between	11/1/2015	and	11/30/2015
	2 Sample(s) Required between	12/1/2015	and	12/31/2015

TOTAL CHLORINE - 1000	2 Sample(s) Required between	1/1/2015	and	1/31/2015
	2 Sample(s) Required between	2/1/2015	and	2/28/2015
	2 Sample(s) Required between	3/1/2015	and	3/31/2015
	2 Sample(s) Required between	4/1/2015	and	4/30/2015
	2 Sample(s) Required between	5/1/2015	and	5/31/2015
	2 Sample(s) Required between	6/1/2015	and	6/30/2015
	2 Sample(s) Required between	7/1/2015	and	7/31/2015
	2 Sample(s) Required between	8/1/2015	and	8/31/2015
	2 Sample(s) Required between	9/1/2015	and	9/30/2015
	2 Sample(s) Required between	10/1/2015	and	10/31/2015
	2 Sample(s) Required between	11/1/2015	and	11/30/2015
	2 Sample(s) Required between	12/1/2015	and	12/31/2015

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

<b>Sampling Location</b>	Facility ID: <b>DS1</b> SMP ID: <b>DS201</b>	Facility Name: <b>MANCHESTER, VILLAGE OF DISTRIBUTION</b> <b>ADDRESS NOT KNOWN</b>	Facility Class: <b>CLASS 1</b>
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Chemicals	Monitoring Requirements
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DISINFECTION BYPRODUCTS	1 Sample(s) Required between 7/1/2015 and 9/30/2015 at SMP: DS201
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Sample for all the analytes listed below:

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



Effective Date: 01/01/2015

2015 DISTRIBUTION SCHEDULE

**OH0100112 MANCHESTER VILLAGE**

System Type: Community

Operating Period: 1/1 to 12/31

*Groundwater Rule Substantial Treatment System*

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**DISTRIBUTION MONITORING SCHEDULE**

<b>Sampling Location</b>	Facility ID: <b>DS1</b>	Facility Name: <b>MANCHESTER, VILLAGE OF DISTRIBUTION</b>	Facility Class: <b>CLASS 1</b>
	SMP ID: <b>DS202</b>	<b>ADDRESS NOT KNOWN</b>	

**Chemicals**

**Monitoring Requirements**

DISINFECTION BYPRODUCTS

1 Sample(s) Required between 7/1/2015 and 9/30/2015 at SMP: DS202

Sample for all the analytes listed below:

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



**OH0100203 PEEBLES PUBLIC WATER SYSTEM**

System Type: Community

Operating Period: 1/1 to 12/31

Groundwater Rule Substantial Treatment System

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**DISTRIBUTION MONITORING SCHEDULE**

<b>Sampling Location</b>	Facility ID: <b>DS1</b> SMP ID: <b>DS000</b>	Facility Name: <b>PEEBLES, VILLAGE OF DISTRIBUTION</b>	Facility Class: <b>CLASS 1</b>
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**Chemicals Monitoring Requirements**

LEAD - 1030 AND COPPER - 1022 Not Required

ASBESTOS - 1094 Not Required

TOTAL COLIFORM (TCR) - 3100

2 Sample(s) Required between 1/1/2015 and 1/31/2015

2 Sample(s) Required between 2/1/2015 and 2/28/2015

2 Sample(s) Required between 3/1/2015 and 3/31/2015

2 Sample(s) Required between 4/1/2015 and 4/30/2015

2 Sample(s) Required between 5/1/2015 and 5/31/2015

2 Sample(s) Required between 6/1/2015 and 6/30/2015

2 Sample(s) Required between 7/1/2015 and 7/31/2015

2 Sample(s) Required between 8/1/2015 and 8/31/2015

2 Sample(s) Required between 9/1/2015 and 9/30/2015

2 Sample(s) Required between 10/1/2015 and 10/31/2015

2 Sample(s) Required between 11/1/2015 and 11/30/2015

2 Sample(s) Required between 12/1/2015 and 12/31/2015

TOTAL CHLORINE - 1000

2 Sample(s) Required between 1/1/2015 and 1/31/2015

2 Sample(s) Required between 2/1/2015 and 2/28/2015

2 Sample(s) Required between 3/1/2015 and 3/31/2015

2 Sample(s) Required between 4/1/2015 and 4/30/2015

2 Sample(s) Required between 5/1/2015 and 5/31/2015

2 Sample(s) Required between 6/1/2015 and 6/30/2015

2 Sample(s) Required between 7/1/2015 and 7/31/2015

2 Sample(s) Required between 8/1/2015 and 8/31/2015

2 Sample(s) Required between 9/1/2015 and 9/30/2015

2 Sample(s) Required between 10/1/2015 and 10/31/2015

2 Sample(s) Required between 11/1/2015 and 11/30/2015

2 Sample(s) Required between 12/1/2015 and 12/31/2015

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

<b>Sampling Location</b>	Facility ID: <b>DS1</b> SMP ID: <b>DS201</b>	Facility Name: <b>PEEBLES, VILLAGE OF DISTRIBUTION</b> <b>ADDRESS NOT KNOWN</b>	Facility Class: <b>CLASS 1</b>
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**Chemicals Monitoring Requirements**

DISINFECTION BYPRODUCTS 1 Sample(s) Required between 7/1/2015 and 9/30/2015 at SMP: DS201

Sample for all the analytes listed below:

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



Effective Date: 01/01/2015

2015 DISTRIBUTION SCHEDULE

**OH0100203 PEBBLES PUBLIC WATER SYSTEM**

System Type: Community

Operating Period: 1/1 to 12/31

Groundwater Rule Substantial Treatment System

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**DISTRIBUTION MONITORING SCHEDULE**

<b>Sampling Location</b>	Facility ID: <b>DS1</b> SMP ID: <b>DS202</b>	Facility Name: <b>PEEBLES, VILLAGE OF DISTRIBUTION</b> <b>ADDRESS NOT KNOWN</b>	Facility Class: <b>CLASS 1</b>
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Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 7/1/2015 and 9/30/2015 at SMP: DS202

Sample for all the analytes listed below:

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

**OH0100303 SEAMAN VILLAGE PWS**

System Type: Community

Operating Period: 1/1 to 12/31

Groundwater Rule Substantial Treatment System

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**DISTRIBUTION MONITORING SCHEDULE**

<b>Sampling Location</b>	Facility ID: <b>DS1</b> SMP ID: <b>DS000</b>	Facility Name: <b>SEAMAN, VILLAGE OF DISTRIBUTION</b>	Facility Class: <b>CLASS 1</b>
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Chemicals	Monitoring Requirements
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LEAD - 1030 AND COPPER - 1022	10 Sample(s) Required between 6/1/2015 and 9/30/2015
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*Lead Consumer Notice needs issued to sampling participants within thirty days of receipt of results and verification submitted to Ohio EPA within ninety days from the end of the monitoring period. Submit Form 5105 with appendix to Ohio EPA within ten days from the end of the monitoring period. Forms are available online at: <http://epa.ohio.gov/ddagw/reporting.aspx>*

TOTAL COLIFORM (TCR) - 3100	2 Sample(s) Required between 1/1/2015 and 1/31/2015
	2 Sample(s) Required between 2/1/2015 and 2/28/2015
	2 Sample(s) Required between 3/1/2015 and 3/31/2015
	2 Sample(s) Required between 4/1/2015 and 4/30/2015
	2 Sample(s) Required between 5/1/2015 and 5/31/2015
	2 Sample(s) Required between 6/1/2015 and 6/30/2015
	2 Sample(s) Required between 7/1/2015 and 7/31/2015
	2 Sample(s) Required between 8/1/2015 and 8/31/2015
	2 Sample(s) Required between 9/1/2015 and 9/30/2015
	2 Sample(s) Required between 10/1/2015 and 10/31/2015
	2 Sample(s) Required between 11/1/2015 and 11/30/2015
	2 Sample(s) Required between 12/1/2015 and 12/31/2015

TOTAL CHLORINE - 1000	2 Sample(s) Required between 1/1/2015 and 1/31/2015
	2 Sample(s) Required between 2/1/2015 and 2/28/2015
	2 Sample(s) Required between 3/1/2015 and 3/31/2015
	2 Sample(s) Required between 4/1/2015 and 4/30/2015
	2 Sample(s) Required between 5/1/2015 and 5/31/2015
	2 Sample(s) Required between 6/1/2015 and 6/30/2015
	2 Sample(s) Required between 7/1/2015 and 7/31/2015
	2 Sample(s) Required between 8/1/2015 and 8/31/2015
	2 Sample(s) Required between 9/1/2015 and 9/30/2015
	2 Sample(s) Required between 10/1/2015 and 10/31/2015
	2 Sample(s) Required between 11/1/2015 and 11/30/2015
	2 Sample(s) Required between 12/1/2015 and 12/31/2015

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

<b>Sampling Location</b>	Facility ID: <b>DS1</b> SMP ID: <b>DS201</b>	Facility Name: <b>SEAMAN, VILLAGE OF DISTRIBUTION</b> <b>ADDRESS NOT KNOWN</b>	Facility Class: <b>CLASS 1</b>
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Chemicals	Monitoring Requirements
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DISINFECTION BYPRODUCTS	1 Sample(s) Required between 7/1/2015 and 9/30/2015 at SMP: DS201
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*Sample for all the analytes listed below:*

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



Effective Date: 01/01/2015

2015 DISTRIBUTION SCHEDULE

**OH0100303 SEAMAN VILLAGE PWS**

System Type: Community

Operating Period: 1/1 to 12/31

Groundwater Rule Substantial Treatment System

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**DISTRIBUTION MONITORING SCHEDULE**

<b>Sampling Location</b>	Facility ID: <b>DS1</b>	Facility Name: <b>SEAMAN, VILLAGE OF DISTRIBUTION</b>	Facility Class: <b>CLASS 1</b>
	SMP ID: <b>DS202</b>	<b>ADDRESS NOT KNOWN</b>	

<b>Chemicals</b>	<b>Monitoring Requirements</b>
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 7/1/2015 and 9/30/2015 at SMP: DS202

Sample for all the analytes listed below:

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

**OH0100503 WEST UNION PUBLIC WATER SYSTEM**

System Type: Community

Operating Period: 1/1 to 12/31

Groundwater Rule Substantial Treatment System

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<b>Sampling Location</b>	Facility ID: <b>DS1</b> SMP ID: <b>DS000</b>	Facility Name: <b>WEST UNION, VILLAGE OF DISTRIBUTION</b>	Facility Class: <b>CLASS 1</b>
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Chemicals	Monitoring Requirements
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LEAD - 1030 AND COPPER - 1022	20 Sample(s) Required between 6/1/2015 and 9/30/2015
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*Lead Consumer Notice needs issued to sampling participants within thirty days of receipt of results and verification submitted to Ohio EPA within ninety days from the end of the monitoring period. Submit Form 5105 with appendix to Ohio EPA within ten days from the end of the monitoring period. Forms are available online at: <http://epa.ohio.gov/ddagw/reporting.aspx>*

ASBESTOS - 1094	Not Required
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TOTAL COLIFORM (TCR) - 3100	4 Sample(s) Required between 1/1/2015 and 1/31/2015
	4 Sample(s) Required between 2/1/2015 and 2/28/2015
	4 Sample(s) Required between 3/1/2015 and 3/31/2015
	4 Sample(s) Required between 4/1/2015 and 4/30/2015
	4 Sample(s) Required between 5/1/2015 and 5/31/2015
	4 Sample(s) Required between 6/1/2015 and 6/30/2015
	4 Sample(s) Required between 7/1/2015 and 7/31/2015
	4 Sample(s) Required between 8/1/2015 and 8/31/2015
	4 Sample(s) Required between 9/1/2015 and 9/30/2015
	4 Sample(s) Required between 10/1/2015 and 10/31/2015
	4 Sample(s) Required between 11/1/2015 and 11/30/2015
	4 Sample(s) Required between 12/1/2015 and 12/31/2015

TOTAL CHLORINE - 1000	4 Sample(s) Required between 1/1/2015 and 1/31/2015
	4 Sample(s) Required between 2/1/2015 and 2/28/2015
	4 Sample(s) Required between 3/1/2015 and 3/31/2015
	4 Sample(s) Required between 4/1/2015 and 4/30/2015
	4 Sample(s) Required between 5/1/2015 and 5/31/2015
	4 Sample(s) Required between 6/1/2015 and 6/30/2015
	4 Sample(s) Required between 7/1/2015 and 7/31/2015
	4 Sample(s) Required between 8/1/2015 and 8/31/2015
	4 Sample(s) Required between 9/1/2015 and 9/30/2015
	4 Sample(s) Required between 10/1/2015 and 10/31/2015
	4 Sample(s) Required between 11/1/2015 and 11/30/2015
	4 Sample(s) Required between 12/1/2015 and 12/31/2015

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

<b>Sampling Location</b>	Facility ID: <b>DS1</b> SMP ID: <b>DS201</b>	Facility Name: <b>WEST UNION, VILLAGE OF DISTRIBUTION</b> <b>ADDRESS NOT KNOWN</b>	Facility Class: <b>CLASS 1</b>
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Chemicals	Monitoring Requirements
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DISINFECTION BYPRODUCTS	1 Sample(s) Required between 7/1/2015 and 9/30/2015 at SMP: DS201
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**Sample for all the analytes listed below:**

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



**OH0100503 WEST UNION PUBLIC WATER SYSTEM**

System Type: Community

Operating Period: 1/1 to 12/31

Groundwater Rule Substantial Treatment System

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**DISTRIBUTION MONITORING SCHEDULE**

<b>Sampling Location</b>	Facility ID: <b>DS1</b> SMP ID: <b>DS202</b>	Facility Name: <b>WEST UNION, VILLAGE OF DISTRIBUTION</b> <b>ADDRESS NOT KNOWN</b>	Facility Class: <b>CLASS 1</b>
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**Chemicals**

**Monitoring Requirements**

DISINFECTION BYPRODUCTS

1 Sample(s) Required between 7/1/2015 and 9/30/2015 at SMP: DS202

Sample for all the analytes listed below:

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

**OH0100603 WINCHESTER PUBLIC WATER SYSTEM**

System Type: Community

Operating Period: 1/1 to 12/31

Groundwater Rule Substantial Treatment System

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<b>Sampling Location</b>	Facility ID: <b>DS1</b> SMP ID: <b>DS000</b>	Facility Name: <b>WINCHESTER, VILLAGE OF DISTRIBUTION</b>	Facility Class: <b>CLASS 1</b>
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**Chemicals****Monitoring Requirements**

LEAD - 1030 AND COPPER - 1022 10 Sample(s) Required between 6/1/2015 and 9/30/2015

*Lead Consumer Notice needs issued to sampling participants within thirty days of receipt of results and verification submitted to Ohio EPA within ninety days from the end of the monitoring period. Submit Form 5105 with appendix to Ohio EPA within ten days from the end of the monitoring period. Forms are available online at: <http://epa.ohio.gov/ddagw/reporting.aspx>*

ASBESTOS - 1094 Not Required

TOTAL COLIFORM (TCR) - 3100	2 Sample(s) Required between 1/1/2015 and 1/31/2015
	2 Sample(s) Required between 2/1/2015 and 2/28/2015
	2 Sample(s) Required between 3/1/2015 and 3/31/2015
	2 Sample(s) Required between 4/1/2015 and 4/30/2015
	2 Sample(s) Required between 5/1/2015 and 5/31/2015
	2 Sample(s) Required between 6/1/2015 and 6/30/2015
	2 Sample(s) Required between 7/1/2015 and 7/31/2015
	2 Sample(s) Required between 8/1/2015 and 8/31/2015
	2 Sample(s) Required between 9/1/2015 and 9/30/2015
	2 Sample(s) Required between 10/1/2015 and 10/31/2015
	2 Sample(s) Required between 11/1/2015 and 11/30/2015
	2 Sample(s) Required between 12/1/2015 and 12/31/2015

TOTAL CHLORINE - 1000	2 Sample(s) Required between 1/1/2015 and 1/31/2015
	2 Sample(s) Required between 2/1/2015 and 2/28/2015
	2 Sample(s) Required between 3/1/2015 and 3/31/2015
	2 Sample(s) Required between 4/1/2015 and 4/30/2015
	2 Sample(s) Required between 5/1/2015 and 5/31/2015
	2 Sample(s) Required between 6/1/2015 and 6/30/2015
	2 Sample(s) Required between 7/1/2015 and 7/31/2015
	2 Sample(s) Required between 8/1/2015 and 8/31/2015
	2 Sample(s) Required between 9/1/2015 and 9/30/2015
	2 Sample(s) Required between 10/1/2015 and 10/31/2015
	2 Sample(s) Required between 11/1/2015 and 11/30/2015
	2 Sample(s) Required between 12/1/2015 and 12/31/2015

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

<b>Sampling Location</b>	Facility ID: <b>DS1</b> SMP ID: <b>DS201</b>	Facility Name: <b>WINCHESTER, VILLAGE OF DISTRIBUTION</b> <b>ADDRESS NOT KNOWN</b>	Facility Class: <b>CLASS 1</b>
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**Chemicals****Monitoring Requirements**

DISINFECTION BYPRODUCTS 1 Sample(s) Required between 7/1/2015 and 9/30/2015 at SMP: DS201

*Sample for all the analytes listed below:*

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



Effective Date: 01/01/2015

2015 DISTRIBUTION SCHEDULE

**OH0100603 WINCHESTER PUBLIC WATER SYSTEM**

System Type: Community

Operating Period: 1/1 to 12/31

*Groundwater Rule Substantial Treatment System*

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

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. For water emergencies that occur after hours, please call 800-282-9378

**\*\* REMINDER: \*\* Consumer Confidence Report (CCR) is due July 1, 2015**

**DISTRIBUTION MONITORING SCHEDULE**

<b>Sampling Location</b>	Facility ID: <b>DS1</b>	Facility Name: <b>WINCHESTER, VILLAGE OF DISTRIBUTION</b>	Facility Class: <b>CLASS 1</b>
	SMP ID: <b>DS202</b>	<b>ADDRESS NOT KNOWN</b>	

**Chemicals**

**Monitoring Requirements**

DISINFECTION BYPRODUCTS

1 Sample(s) Required between 7/1/2015 and 9/30/2015 at SMP: DS202

*Sample for all the analytes listed below:*

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

**OH0133712 HICKORY VALLEY LLC**

System Type: Transient Noncommunity

Operating Period: 1/1 to 12/31

Groundwater Rule Minimal Treatment System

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

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

**Sampling** Facility ID: **DS1** Facility Name: **OHIO BRUSH CREEK ENTERPR DISTRIBUTION**  
**Location** SMP ID: **DS000** Facility Source: **Ground Water**

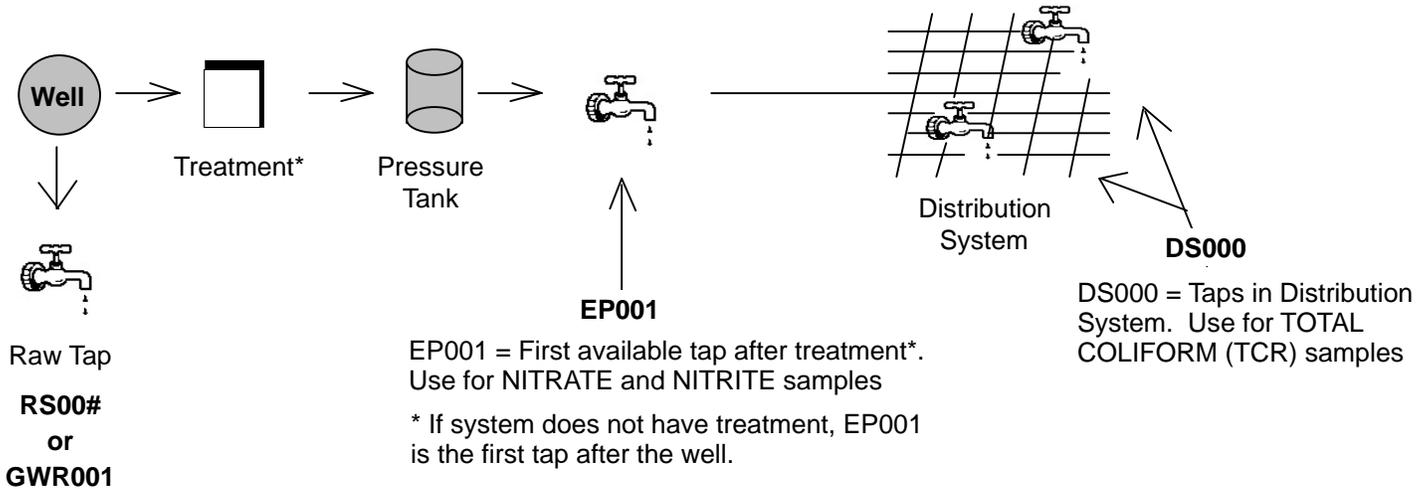
Chemicals	Monitoring Requirements
TOTAL COLIFORM (TCR) - 3100	1 Sample(s) Required between 1/1/2015 and 3/31/2015
	1 Sample(s) Required between 4/1/2015 and 6/30/2015
	1 Sample(s) Required between 7/1/2015 and 9/30/2015
	1 Sample(s) Required between 10/1/2015 and 12/31/2015

**ENTRY POINT MONITORING SCHEDULE**

**Sampling** Facility ID: **152624** Facility Name: **OHIO BRUSH CREEK ENTERPRISES**  
**Location** SMP ID: **EP001** Facility Source: **Ground Water**

Chemicals	Monitoring Requirements
NITRITE - 1041	Not Required
NITRATE - 1040	1 Sample(s) Required between 1/1/2015 and 5/31/2015

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



**Beginning January 1, 2014, failing to sample for total coliform or nitrate will cost you \$150 or more in penalties for each monitoring violation. A list of drinking water sample collection services that can assist you with collecting water samples is located at: <http://epa.ohio.gov/portals/28/documents/PWS/DWSample.pdf>.**

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



Effective Date: 01/01/2015

2015 ENTRY POINT SCHEDULE

**OH0134112 DAYTON POWER AND LIGHT/JM STUART PWS**

System Type: Nontransient Noncommunity

Operating Period: 1/1 to 12/31

**ENTRY POINT MONITORING SCHEDULE**

<b>Sampling Location</b>	Facility ID: <b>152626</b>	Facility Name: <b>DAYTON POWER &amp; LIGHT CO JM STUART</b>
	SMP ID: <b>EP001</b>	Facility Source: <b>Ground Water</b>
		Facility Class: <b>CLASS 1</b>

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

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<b>Chemicals</b>	<b>Monitoring Requirements</b>
DIOXIN - 2063	Not Required
INORGANICS	Not Required
NITRITE - 1041	Not Required
NITRATE - 1040	1 Sample(s) Required between 1/1/2015 and 5/31/2015
SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1	Not Required
VOLATILE ORGANIC CHEMICALS (VOC)	Not Required



Effective Date: 01/01/2015

2015 DISTRIBUTION SCHEDULE

**OH0134112 DAYTON POWER AND LIGHT/JM STUART PWS**

System Type: Nontransient Noncommunity

Operating Period: 1/1 to 12/31

Groundwater Rule Substantial Treatment System

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

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. For water emergencies that occur after hours, please call 800-282-9378

**DISTRIBUTION MONITORING SCHEDULE**

<b>Sampling Location</b>	Facility ID: <b>DS1</b> SMP ID: <b>DS000</b>	Facility Name: <b>DP&amp;L/ JM STUART PLANT DISTRIBUTION</b>	Facility Class: <b>CLASS 1</b>
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Chemicals	Monitoring Requirements
LEAD - 1030 AND COPPER - 1022	Not Required
TOTAL COLIFORM (TCR) - 3100	1 Sample(s) Required between 1/1/2015 and 3/31/2015 1 Sample(s) Required between 4/1/2015 and 6/30/2015 1 Sample(s) Required between 7/1/2015 and 9/30/2015 1 Sample(s) Required between 10/1/2015 and 12/31/2015