



OH0700011 BARNESVILLE

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

Sampling Location	Facility ID: 752965	Facility Name: BARNESVILLE	Facility Class: CLASS 3
	SMP ID: EP001	Facility Source: Surface Water	

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**

Chemicals	Monitoring Requirements
INORGANICS	1 Sample(s) Required between 1/1/2015 and 5/31/2015
<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 1/1/2015 and 1/31/2015 1 Sample(s) Required between 2/1/2015 and 2/28/2015 1 Sample(s) Required between 3/1/2015 and 3/31/2015 1 Sample(s) Required between 4/1/2015 and 4/30/2015 1 Sample(s) Required between 5/1/2015 and 5/31/2015 1 Sample(s) Required between 6/1/2015 and 6/30/2015 1 Sample(s) Required between 7/1/2015 and 7/31/2015 1 Sample(s) Required between 8/1/2015 and 8/31/2015 1 Sample(s) Required between 9/1/2015 and 9/30/2015 1 Sample(s) Required between 10/1/2015 and 10/31/2015 1 Sample(s) Required between 11/1/2015 and 11/30/2015 1 Sample(s) Required between 12/1/2015 and 12/31/2015
RADIOLOGICALS	Not Required
SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1	1 Sample(s) Required between 4/1/2015 and 6/30/2015
<i>Sample for all the analytes listed below:</i>	
ALACHLOR (LASSO) - 2051 ATRAZINE - 2050 SIMAZINE - 2037	
VOLATILE ORGANIC CHEMICALS (VOC)	1 Sample(s) Required between 1/1/2015 and 5/31/2015

**OH0700011 BARNESVILLE**

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. 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

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

Chemicals**Monitoring Requirements**

LEAD - 1030 AND COPPER - 1022	20 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>

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

TOTAL CHLORINE - 1000	7 Sample(s) Required between	1/1/2015 and 1/31/2015
	7 Sample(s) Required between	2/1/2015 and 2/28/2015
	7 Sample(s) Required between	3/1/2015 and 3/31/2015
	7 Sample(s) Required between	4/1/2015 and 4/30/2015
	7 Sample(s) Required between	5/1/2015 and 5/31/2015
	7 Sample(s) Required between	6/1/2015 and 6/30/2015
	7 Sample(s) Required between	7/1/2015 and 7/31/2015
	7 Sample(s) Required between	8/1/2015 and 8/31/2015
	7 Sample(s) Required between	9/1/2015 and 9/30/2015
	7 Sample(s) Required between	10/1/2015 and 10/31/2015
	7 Sample(s) Required between	11/1/2015 and 11/30/2015
	7 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 SMP ID: DS201	Facility Name: BARNESVILLE, VILLAGE OF DISTRIBUTION 36460 BARNESVILLE-BETHESDA RC	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

Chemicals**Monitoring Requirements**

DISINFECTION BYPRODUCTS	1 Sample(s) Required between	1/1/2015 and 1/7/2015 at SMP: DS201
	1 Sample(s) Required between	4/1/2015 and 4/7/2015 at SMP: DS201
	1 Sample(s) Required between	7/1/2015 and 7/7/2015 at SMP: DS201
	1 Sample(s) Required between	10/1/2015 and 10/7/2015 at SMP: DS201

Sample for all the analytes listed below:

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



OH0700011 BARNESVILLE

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. 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

Sampling Location	Facility ID: DS1	Facility Name: BARNESVILLE, VILLAGE OF DISTRIBUTION	Facility Class: CLASS 1
	SMP ID: DS202	598 WATT AVENUE	

Chemicals	Monitoring Requirements		
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	1/1/2015 and	1/7/2015 at SMP: DS202
	1 Sample(s) Required between	4/1/2015 and	4/7/2015 at SMP: DS202
	1 Sample(s) Required between	7/1/2015 and	7/7/2015 at SMP: DS202
	1 Sample(s) Required between	10/1/2015 and	10/7/2015 at SMP: DS202

Sample for all the analytes listed below:

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

**OH0700114 BELLAIRE PUBLIC WATER SYSTEM**

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

Sampling Location	Facility ID: 752966	Facility Name: BELLAIRE PWS	Facility Class: CLASS 3
	SMP ID: EP001	Facility Source: Surface Water	

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**

Chemicals**Monitoring Requirements**

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

Sample for all the analytes listed below:

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 1/1/2015 and 1/31/2015

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

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

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

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

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

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

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

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

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

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

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

RADIOLOGICALS Not Required

SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1 1 Sample(s) Required between 4/1/2015 and 6/30/2015

Sample for all the analytes listed below:

ALACHLOR (LASSO) - 2051 ATRAZINE - 2050 SIMAZINE - 2037

VOLATILE ORGANIC CHEMICALS (VOC)

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

TOTAL ORGANIC CARBON (TOC)

1 Paired Sample Set Required between 1/1/2015 and 1/31/2015

1 Paired Sample Set Required between 2/1/2015 and 2/28/2015

1 Paired Sample Set Required between 3/1/2015 and 3/31/2015

1 Paired Sample Set Required between 4/1/2015 and 4/30/2015

1 Paired Sample Set Required between 5/1/2015 and 5/31/2015

1 Paired Sample Set Required between 6/1/2015 and 6/30/2015

1 Paired Sample Set Required between 7/1/2015 and 7/31/2015

1 Paired Sample Set Required between 8/1/2015 and 8/31/2015

1 Paired Sample Set Required between 9/1/2015 and 9/30/2015

1 Paired Sample Set Required between 10/1/2015 and 10/31/2015

1 Paired Sample Set Required between 11/1/2015 and 11/30/2015

1 Paired Sample Set Required between 12/1/2015 and 12/31/2015

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.

**OH0700114 BELLAIRE PUBLIC WATER SYSTEM**

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. 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

Sampling Location	Facility ID: DS1 SMP ID: DS000	Facility Name: BELLAIRE DISTRIBUTION	Facility Class: CLASS 1
--------------------------	---	---	--------------------------------

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

LEAD - 1030 AND COPPER - 1022	20 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	5 Sample(s) Required between 1/1/2015 and 1/31/2015
	5 Sample(s) Required between 2/1/2015 and 2/28/2015
	5 Sample(s) Required between 3/1/2015 and 3/31/2015
	5 Sample(s) Required between 4/1/2015 and 4/30/2015
	5 Sample(s) Required between 5/1/2015 and 5/31/2015
	5 Sample(s) Required between 6/1/2015 and 6/30/2015
	5 Sample(s) Required between 7/1/2015 and 7/31/2015
	5 Sample(s) Required between 8/1/2015 and 8/31/2015
	5 Sample(s) Required between 9/1/2015 and 9/30/2015
	5 Sample(s) Required between 10/1/2015 and 10/31/2015
	5 Sample(s) Required between 11/1/2015 and 11/30/2015
	5 Sample(s) Required between 12/1/2015 and 12/31/2015

TOTAL CHLORINE - 1000	5 Sample(s) Required between 1/1/2015 and 1/31/2015
	5 Sample(s) Required between 2/1/2015 and 2/28/2015
	5 Sample(s) Required between 3/1/2015 and 3/31/2015
	5 Sample(s) Required between 4/1/2015 and 4/30/2015
	5 Sample(s) Required between 5/1/2015 and 5/31/2015
	5 Sample(s) Required between 6/1/2015 and 6/30/2015
	5 Sample(s) Required between 7/1/2015 and 7/31/2015
	5 Sample(s) Required between 8/1/2015 and 8/31/2015
	5 Sample(s) Required between 9/1/2015 and 9/30/2015
	5 Sample(s) Required between 10/1/2015 and 10/31/2015
	5 Sample(s) Required between 11/1/2015 and 11/30/2015
	5 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 SMP ID: DS201	Facility Name: BELLAIRE DISTRIBUTION 57625 PINCH RUN RD	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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

OH0700114 BELLAIRE PUBLIC WATER SYSTEM

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. 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

Sampling Location	Facility ID: DS1	Facility Name: BELLAIRE DISTRIBUTION	Facility Class: CLASS 1
	SMP ID: DS202	6000 NORTH GUERNSEY ST	

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



Effective Date: 01/01/2015

2015 ENTRY POINT SCHEDULE

OH0700315 BELMONT PUBLIC WATER SYSTEM

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

Sampling Location	Facility ID: 752968	Facility Name: BELMONT PUBLIC WATER SYSTEM STU 1
	SMP ID: EP001	Facility Source: Ground Water
		Facility Class: CLASS 1

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**

Chemicals	Monitoring Requirements
INORGANICS	Not Required
NITRITE - 1041	Not Required
NITRATE - 1040	1 Sample(s) Required between 1/1/2015 and 3/31/2015
RADIOLOGICALS	Not Required
SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1	Not Required
VOLATILE ORGANIC CHEMICALS (VOC)	Not Required

**OH0700315 BELMONT 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

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

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

LEAD - 1030 AND COPPER - 1022	5 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	1 Sample(s) Required between 1/1/2015 and 1/31/2015
	1 Sample(s) Required between 2/1/2015 and 2/28/2015
	1 Sample(s) Required between 3/1/2015 and 3/31/2015
	1 Sample(s) Required between 4/1/2015 and 4/30/2015
	1 Sample(s) Required between 5/1/2015 and 5/31/2015
	1 Sample(s) Required between 6/1/2015 and 6/30/2015
	1 Sample(s) Required between 7/1/2015 and 7/31/2015
	1 Sample(s) Required between 8/1/2015 and 8/31/2015
	1 Sample(s) Required between 9/1/2015 and 9/30/2015
	1 Sample(s) Required between 10/1/2015 and 10/31/2015
	1 Sample(s) Required between 11/1/2015 and 11/30/2015
	1 Sample(s) Required between 12/1/2015 and 12/31/2015

TOTAL CHLORINE - 1000	1 Sample(s) Required between 1/1/2015 and 1/31/2015
	1 Sample(s) Required between 2/1/2015 and 2/28/2015
	1 Sample(s) Required between 3/1/2015 and 3/31/2015
	1 Sample(s) Required between 4/1/2015 and 4/30/2015
	1 Sample(s) Required between 5/1/2015 and 5/31/2015
	1 Sample(s) Required between 6/1/2015 and 6/30/2015
	1 Sample(s) Required between 7/1/2015 and 7/31/2015
	1 Sample(s) Required between 8/1/2015 and 8/31/2015
	1 Sample(s) Required between 9/1/2015 and 9/30/2015
	1 Sample(s) Required between 10/1/2015 and 10/31/2015
	1 Sample(s) Required between 11/1/2015 and 11/30/2015
	1 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 SMP ID: DS201	Facility Name: BELMONT, VILLAGE OF DISTRIBUTION 42481 GREEN ST.	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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

OH0700315 BELMONT 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

Sampling Location	Facility ID: DS1 SMP ID: DS202	Facility Name: BELMONT, VILLAGE OF DISTRIBUTION HYDRANT 321 E. MAIN ST.	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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



Effective Date: 01/01/2015

2015 ENTRY POINT SCHEDULE

OH0700412 BELMONT CO. SANITARY DISTRICT 3 PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

Sampling Location	Facility ID: 752969	Facility Name: BELMONT CO SD 3	Facility Class: CLASS 3
	SMP ID: EP001	Facility Source: Ground Water	

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**

Chemicals	Monitoring Requirements
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)	1 Sample(s) Required between 4/1/2015 and 6/30/2015



OH0700412 BELMONT CO. SANITARY DISTRICT 3 PWS

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

Sampling Location	Facility ID: DS1 SMP ID: DS000	Facility Name: BELMONT CO. SAN. DIST. 3 DISTRIBUTION	Facility Class: CLASS 2
--------------------------	---	---	--------------------------------

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

LEAD - 1030 AND COPPER - 1022	Not Required
-------------------------------	--------------

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

TOTAL COLIFORM (TCR) - 3100	25 Sample(s) Required between	1/1/2015	and	1/31/2015
	25 Sample(s) Required between	2/1/2015	and	2/28/2015
	25 Sample(s) Required between	3/1/2015	and	3/31/2015
	25 Sample(s) Required between	4/1/2015	and	4/30/2015
	25 Sample(s) Required between	5/1/2015	and	5/31/2015
	25 Sample(s) Required between	6/1/2015	and	6/30/2015
	25 Sample(s) Required between	7/1/2015	and	7/31/2015
	25 Sample(s) Required between	8/1/2015	and	8/31/2015
	25 Sample(s) Required between	9/1/2015	and	9/30/2015
	25 Sample(s) Required between	10/1/2015	and	10/31/2015
	25 Sample(s) Required between	11/1/2015	and	11/30/2015
	25 Sample(s) Required between	12/1/2015	and	12/31/2015

TOTAL CHLORINE - 1000	25 Sample(s) Required between	1/1/2015	and	1/31/2015
	25 Sample(s) Required between	2/1/2015	and	2/28/2015
	25 Sample(s) Required between	3/1/2015	and	3/31/2015
	25 Sample(s) Required between	4/1/2015	and	4/30/2015
	25 Sample(s) Required between	5/1/2015	and	5/31/2015
	25 Sample(s) Required between	6/1/2015	and	6/30/2015
	25 Sample(s) Required between	7/1/2015	and	7/31/2015
	25 Sample(s) Required between	8/1/2015	and	8/31/2015
	25 Sample(s) Required between	9/1/2015	and	9/30/2015
	25 Sample(s) Required between	10/1/2015	and	10/31/2015
	25 Sample(s) Required between	11/1/2015	and	11/30/2015
	25 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 SMP ID: DS201	Facility Name: BELMONT CO. SAN. DIST. 3 DISTRIBUTION COUNTY GARAGE ARMSTRONG MII	Facility Class: CLASS 2
--------------------------	---	---	--------------------------------

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

DISINFECTION BYPRODUCTS	1 Sample(s) Required between	1/8/2015	and	1/14/2015	at SMP: DS201
	1 Sample(s) Required between	4/8/2015	and	4/14/2015	at SMP: DS201
	1 Sample(s) Required between	7/8/2015	and	7/14/2015	at SMP: DS201
	1 Sample(s) Required between	10/8/2015	and	10/14/2015	at SMP: DS201

Sample for all the analytes listed below:

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



OH0700412 BELMONT CO. SANITARY DISTRICT 3 PWS

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

Sampling Location	Facility ID: DS1 SMP ID: DS202	Facility Name: BELMONT CO. SAN. DIST. 3 DISTRIBUTION 69841 STATE ROUTE 149	Facility Class: CLASS 2
--------------------------	---	---	--------------------------------

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 1/8/2015 and 1/14/2015 at SMP: DS202
	1 Sample(s) Required between 4/8/2015 and 4/14/2015 at SMP: DS202
	1 Sample(s) Required between 7/8/2015 and 7/14/2015 at SMP: DS202
	1 Sample(s) Required between 10/8/2015 and 10/14/2015 at SMP: 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: BELMONT CO. SAN. DIST. 3 DISTRIBUTION MEAD TWP. GARAGE	Facility Class: CLASS 2
--------------------------	---	--	--------------------------------

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 1/8/2015 and 1/14/2015 at SMP: DS203
	1 Sample(s) Required between 4/8/2015 and 4/14/2015 at SMP: DS203
	1 Sample(s) Required between 7/8/2015 and 7/14/2015 at SMP: DS203
	1 Sample(s) Required between 10/8/2015 and 10/14/2015 at SMP: 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: BELMONT CO. SAN. DIST. 3 DISTRIBUTION BCSSD OFFICE ST. RT. 331	Facility Class: CLASS 2
--------------------------	---	--	--------------------------------

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 1/8/2015 and 1/14/2015 at SMP: DS204
	1 Sample(s) Required between 4/8/2015 and 4/14/2015 at SMP: DS204
	1 Sample(s) Required between 7/8/2015 and 7/14/2015 at SMP: DS204
	1 Sample(s) Required between 10/8/2015 and 10/14/2015 at SMP: DS204

Sample for all the analytes listed below:

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

**OH0700511 BETHESDA PUBLIC WATER SYSTEM**

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. 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**

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

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.

Sampling Location	Facility ID: DS1 SMP ID: DS201	Facility Name: BETHESDA, VILLAGE OF DISTRIBUTION 429 SOUTH MAIN STREET	Facility Class: CLASS 1
--------------------------	---	---	--------------------------------

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

DISINFECTION BYPRODUCTS	1 Sample(s) Required between 1/1/2015 and 1/7/2015 at SMP: DS201
	1 Sample(s) Required between 4/1/2015 and 4/7/2015 at SMP: DS201
	1 Sample(s) Required between 7/1/2015 and 7/7/2015 at SMP: DS201



OH0700511 BETHESDA PUBLIC WATER SYSTEM

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. 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

Sampling Location	Facility ID: DS1 SMP ID: DS201	Facility Name: BETHESDA, VILLAGE OF DISTRIBUTION 429 SOUTH MAIN STREET	Facility Class: CLASS 1
--------------------------	---	---	--------------------------------

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 10/1/2015 and 10/7/2015 at SMP: DS201

Sample for all the analytes listed below:

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

Sampling Location	Facility ID: DS1 SMP ID: DS202	Facility Name: BETHESDA, VILLAGE OF DISTRIBUTION 112 SOUTH MAIN ST	Facility Class: CLASS 1
--------------------------	---	---	--------------------------------

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 1/1/2015 and 1/7/2015 at SMP: DS202
	1 Sample(s) Required between 4/1/2015 and 4/7/2015 at SMP: DS202
	1 Sample(s) Required between 7/1/2015 and 7/7/2015 at SMP: DS202
	1 Sample(s) Required between 10/1/2015 and 10/7/2015 at SMP: DS202

Sample for all the analytes listed below:

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



Effective Date: 01/01/2015

2015 ENTRY POINT SCHEDULE

OH0700612 BRIDGEPORT PUBLIC WATER SYSTEM

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

Sampling Location	Facility ID: 752971	Facility Name: BRIDGEPORT WTP	Facility Class: CLASS 2
	SMP ID: EP001	Facility Source: Ground Water	

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**

Chemicals	Monitoring Requirements
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
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>	
<i>BHC-GAMMA (LINDANE) - 2010 DIQUAT - 2032 GLYPHOSATE - 2034</i>	
<i>METHOXYCHLOR - 2015 POLYCHLORINATED BIPHENYLS (PCB) - 2383</i>	
SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 4	Not Required
VOLATILE ORGANIC CHEMICALS (VOC)	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



OH0700612 BRIDGEPORT 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

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

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>

TOTAL COLIFORM (TCR) - 3100

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

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

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

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

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

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

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

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

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

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

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

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

TOTAL CHLORINE - 1000

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

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

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

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

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

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

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

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

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

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

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

3 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 SMP ID: DS201	Facility Name: BRIDGEPORT, VILLAGE OF DISTRIBUTION ADDRESS NOT KNOWN	Facility Class: CLASS 1
--------------------------	---	---	--------------------------------

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

OH0700612 BRIDGEPORT 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

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

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



OH0700912 FLUSHING VILLAGE PWS

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

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

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

TOTAL CHLORINE - 1000	1 Sample(s) Required between 1/1/2015 and 1/31/2015
	1 Sample(s) Required between 2/1/2015 and 2/28/2015
	1 Sample(s) Required between 3/1/2015 and 3/31/2015
	1 Sample(s) Required between 4/1/2015 and 4/30/2015
	1 Sample(s) Required between 5/1/2015 and 5/31/2015
	1 Sample(s) Required between 6/1/2015 and 6/30/2015
	1 Sample(s) Required between 7/1/2015 and 7/31/2015
	1 Sample(s) Required between 8/1/2015 and 8/31/2015
	1 Sample(s) Required between 9/1/2015 and 9/30/2015
	1 Sample(s) Required between 10/1/2015 and 10/31/2015
	1 Sample(s) Required between 11/1/2015 and 11/30/2015
	1 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 SMP ID: DS201	Facility Name: FLUSHING, VILLAGE OF DISTRIBUTION 154 NORTHWEST ST.	Facility Class: CLASS 1
--------------------------	---	---	--------------------------------

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

OH0700912 FLUSHING VILLAGE PWS

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

Sampling Location	Facility ID: DS1 SMP ID: DS202	Facility Name: FLUSHING, VILLAGE OF DISTRIBUTION 223 PEARL ST.	Facility Class: CLASS 1
--------------------------	---	---	--------------------------------

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



Effective Date: 01/01/2015

2015 ENTRY POINT SCHEDULE

OH0701112 HOLLOWAY PUBLIC WATER SYSTEM

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

Sampling Location	Facility ID: 752973	Facility Name: HOLLOWAY WTP	Facility Class: CLASS 1
	SMP ID: EP001	Facility Source: Ground Water	

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**

Chemicals	Monitoring Requirements
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



OH0701112 HOLLOWAY 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

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

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

LEAD - 1030 AND COPPER - 1022	Not Required
-------------------------------	--------------

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

TOTAL CHLORINE - 1000	1 Sample(s) Required between	1/1/2015	and	1/31/2015
	1 Sample(s) Required between	2/1/2015	and	2/28/2015
	1 Sample(s) Required between	3/1/2015	and	3/31/2015
	1 Sample(s) Required between	4/1/2015	and	4/30/2015
	1 Sample(s) Required between	5/1/2015	and	5/31/2015
	1 Sample(s) Required between	6/1/2015	and	6/30/2015
	1 Sample(s) Required between	7/1/2015	and	7/31/2015
	1 Sample(s) Required between	8/1/2015	and	8/31/2015
	1 Sample(s) Required between	9/1/2015	and	9/30/2015
	1 Sample(s) Required between	10/1/2015	and	10/31/2015
	1 Sample(s) Required between	11/1/2015	and	11/30/2015
	1 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 SMP ID: DS201	Facility Name: HOLLOWAY, VILLAGE OF DISTRIBUTION ADDRESS NOT KNOWN	Facility Class: CLASS 1
--------------------------	---	---	--------------------------------

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



OH0701212 MARTINS FERRY PUBLIC WATER SYSTEM

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

Sampling	Facility ID: 752974	Facility Name: MARTINS FERRY WTP	
Location	SMP ID: EP001	Facility Source: Ground Water	Facility Class: CLASS 2

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**

Chemicals	Monitoring Requirements
BROMATE - 1011	1 Sample(s) Required between 1/1/2015 and 1/31/2015 1 Sample(s) Required between 2/1/2015 and 2/28/2015 1 Sample(s) Required between 3/1/2015 and 3/31/2015 1 Sample(s) Required between 4/1/2015 and 4/30/2015 1 Sample(s) Required between 5/1/2015 and 5/31/2015 1 Sample(s) Required between 6/1/2015 and 6/30/2015 1 Sample(s) Required between 7/1/2015 and 7/31/2015 1 Sample(s) Required between 8/1/2015 and 8/31/2015 1 Sample(s) Required between 9/1/2015 and 9/30/2015 1 Sample(s) Required between 10/1/2015 and 10/31/2015 1 Sample(s) Required between 11/1/2015 and 11/30/2015 1 Sample(s) Required between 12/1/2015 and 12/31/2015
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



OH0701212 MARTINS FERRY 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

Sampling Location	Facility ID: DS1 SMP ID: DS000	Facility Name: MARTINS FERRY DISTRIBUTION	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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

LEAD - 1030 AND COPPER - 1022	Not Required
-------------------------------	--------------

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

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

TOTAL CHLORINE - 1000	10 Sample(s) Required between	1/1/2015	and	1/31/2015
	10 Sample(s) Required between	2/1/2015	and	2/28/2015
	10 Sample(s) Required between	3/1/2015	and	3/31/2015
	10 Sample(s) Required between	4/1/2015	and	4/30/2015
	10 Sample(s) Required between	5/1/2015	and	5/31/2015
	10 Sample(s) Required between	6/1/2015	and	6/30/2015
	10 Sample(s) Required between	7/1/2015	and	7/31/2015
	10 Sample(s) Required between	8/1/2015	and	8/31/2015
	10 Sample(s) Required between	9/1/2015	and	9/30/2015
	10 Sample(s) Required between	10/1/2015	and	10/31/2015
	10 Sample(s) Required between	11/1/2015	and	11/30/2015
	10 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 SMP ID: DS201	Facility Name: MARTINS FERRY DISTRIBUTION ADDRESS NOT KNOWN	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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

OH0701212 MARTINS FERRY 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

Sampling Location	Facility ID: DS1 SMP ID: DS202	Facility Name: MARTINS FERRY DISTRIBUTION ADDRESS NOT KNOWN	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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



OH0701303 MORRISTOWN 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

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

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

LEAD - 1030 AND COPPER - 1022	Not Required
-------------------------------	--------------

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

TOTAL CHLORINE - 1000	1 Sample(s) Required between	1/1/2015	and	1/31/2015
	1 Sample(s) Required between	2/1/2015	and	2/28/2015
	1 Sample(s) Required between	3/1/2015	and	3/31/2015
	1 Sample(s) Required between	4/1/2015	and	4/30/2015
	1 Sample(s) Required between	5/1/2015	and	5/31/2015
	1 Sample(s) Required between	6/1/2015	and	6/30/2015
	1 Sample(s) Required between	7/1/2015	and	7/31/2015
	1 Sample(s) Required between	8/1/2015	and	8/31/2015
	1 Sample(s) Required between	9/1/2015	and	9/30/2015
	1 Sample(s) Required between	10/1/2015	and	10/31/2015
	1 Sample(s) Required between	11/1/2015	and	11/30/2015
	1 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 SMP ID: DS201	Facility Name: MORRISTOWN, VILLAGE OF DISTRIBUTION ADDRESS NOT KNOWN	Facility Class: CLASS 1
--------------------------	---	---	--------------------------------

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



OH0701412 POWHATAN POINT PUBLIC WATER SYSTEM

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

Sampling Location	Facility ID: 752976	Facility Name: POWHATAN POINT STU 1	Facility Class: CLASS 1
	SMP ID: EP001	Facility Source: Ground Water	

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**

Chemicals	Monitoring Requirements
INORGANICS	Not Required
NITRITE - 1041	Not Required
NITRATE - 1040	1 Sample(s) Required between 7/1/2015 and 9/30/2015
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>	
<i>BHC-GAMMA (LINDANE) - 2010 DIQUAT - 2032 GLYPHOSATE - 2034</i>	
<i>METHOXYCHLOR - 2015 POLYCHLORINATED BIPHENYLS (PCB) - 2383</i>	
SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 4	Not Required
VOLATILE ORGANIC CHEMICALS (VOC)	Not Required



OH0701412 POWHATAN POINT PUBLIC WATER SYSTEM

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

Sampling	Facility ID: 760325	Facility Name: POWHATAN POINT STU 2	
Location	SMP ID: EP002	Facility Source: Ground Water	Facility Class: CLASS 1

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**

Chemicals	Monitoring Requirements
INORGANICS	Not Required
NITRITE - 1041	Not Required
NITRATE - 1040	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
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>	
<i>BHC-GAMMA (LINDANE) - 2010 DIQUAT - 2032 GLYPHOSATE - 2034</i>	
<i>METHOXYCHLOR - 2015 POLYCHLORINATED BIPHENYLS (PCB) - 2383</i>	
SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 4	Not Required
VOLATILE ORGANIC CHEMICALS (VOC)	Not Required



OH0701412 POWHATAN POINT 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

Sampling Location	Facility ID: DS1 SMP ID: DS000	Facility Name: POWHATAN POINT, VILLAGE DISTRIBUTION	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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.

Sampling Location	Facility ID: DS1 SMP ID: DS201	Facility Name: POWHATAN POINT, VILLAGE DISTRIBUTION ADDRESS NOT KNOWN	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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

OH0701412 POWHATAN POINT 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

Sampling Location	Facility ID: DS1	Facility Name: POWHATAN POINT, VILLAGE DISTRIBUTION	Facility Class: CLASS 1
	SMP ID: DS202	ADDRESS NOT KNOWN	

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



OH0701516 ST. CLAIRSVILLE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

Sampling Location	Facility ID: 752977	Facility Name: SAINT CLAIRSVILLE WTP	Facility Class: CLASS 3
	SMP ID: EP001	Facility Source: Surface Water	

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**

Chemicals**Monitoring Requirements**

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

Sample for all the analytes listed below:

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 1/1/2015 and 1/31/2015

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

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

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

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

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

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

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

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

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

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

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

RADIOLOGICALS Not Required

SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1 1 Sample(s) Required between 4/1/2015 and 6/30/2015

Sample for all the analytes listed below:

ALACHLOR (LASSO) - 2051 ATRAZINE - 2050 SIMAZINE - 2037

VOLATILE ORGANIC CHEMICALS (VOC) 1 Sample(s) Required between 1/1/2015 and 5/31/2015

TOTAL ORGANIC CARBON (TOC)

1 Paired Sample Set Required between 1/1/2015 and 1/31/2015

1 Paired Sample Set Required between 2/1/2015 and 2/28/2015

1 Paired Sample Set Required between 3/1/2015 and 3/31/2015

1 Paired Sample Set Required between 4/1/2015 and 4/30/2015

1 Paired Sample Set Required between 5/1/2015 and 5/31/2015

1 Paired Sample Set Required between 6/1/2015 and 6/30/2015

1 Paired Sample Set Required between 7/1/2015 and 7/31/2015

1 Paired Sample Set Required between 8/1/2015 and 8/31/2015

1 Paired Sample Set Required between 9/1/2015 and 9/30/2015

1 Paired Sample Set Required between 10/1/2015 and 10/31/2015

1 Paired Sample Set Required between 11/1/2015 and 11/30/2015

1 Paired Sample Set Required between 12/1/2015 and 12/31/2015

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.

**OH0701516 ST. CLAIRSVILLE 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. 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**

Sampling Location	Facility ID: DS1 SMP ID: DS000	Facility Name: ST. CLAIRSVILLE, CITY OF DISTRIBUTION	Facility Class: CLASS 1
--------------------------	---	---	--------------------------------

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

LEAD - 1030 AND COPPER - 1022	Not Required
-------------------------------	--------------

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

TOTAL CHLORINE - 1000	6 Sample(s) Required between 1/1/2015 and 1/31/2015
	6 Sample(s) Required between 2/1/2015 and 2/28/2015
	6 Sample(s) Required between 3/1/2015 and 3/31/2015
	6 Sample(s) Required between 4/1/2015 and 4/30/2015
	6 Sample(s) Required between 5/1/2015 and 5/31/2015
	6 Sample(s) Required between 6/1/2015 and 6/30/2015
	6 Sample(s) Required between 7/1/2015 and 7/31/2015
	6 Sample(s) Required between 8/1/2015 and 8/31/2015
	6 Sample(s) Required between 9/1/2015 and 9/30/2015
	6 Sample(s) Required between 10/1/2015 and 10/31/2015
	6 Sample(s) Required between 11/1/2015 and 11/30/2015
	6 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 SMP ID: DS201	Facility Name: ST. CLAIRSVILLE, CITY OF DISTRIBUTION 122 OVERBAUGH AVENUE	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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

DISINFECTION BYPRODUCTS	1 Sample(s) Required between 1/1/2015 and 1/7/2015 at SMP: DS201
	1 Sample(s) Required between 4/1/2015 and 4/7/2015 at SMP: DS201
	1 Sample(s) Required between 7/1/2015 and 7/7/2015 at SMP: DS201
	1 Sample(s) Required between 10/1/2015 and 10/7/2015 at SMP: DS201

Sample for all the analytes listed below:

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



OH0701516 ST. CLAIRSVILLE 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. 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

Sampling Location	Facility ID: DS1 SMP ID: DS202	Facility Name: ST. CLAIRSVILLE, CITY OF DISTRIBUTION 100 NORTH MARKET STREET	Facility Class: CLASS 1
--------------------------	---	---	--------------------------------

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 1/1/2015 and 1/7/2015 at SMP: DS202
	1 Sample(s) Required between 4/1/2015 and 4/7/2015 at SMP: DS202
	1 Sample(s) Required between 7/1/2015 and 7/7/2015 at SMP: DS202
	1 Sample(s) Required between 10/1/2015 and 10/7/2015 at SMP: DS202

Sample for all the analytes listed below:

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



OH0701612 SHADYSIDE PUBLIC WATER SYSTEM

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

Sampling Location	Facility ID: 752978	Facility Name: SHADYSIDE WTP	Facility Class: CLASS 1
	SMP ID: EP001	Facility Source: Ground Water	

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**

Chemicals	Monitoring Requirements
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
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>	
<i>BHC-GAMMA (LINDANE) - 2010 DIQUAT - 2032 GLYPHOSATE - 2034</i>	
<i>METHOXYCHLOR - 2015 POLYCHLORINATED BIPHENYLS (PCB) - 2383</i>	
SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 4	Not Required
VOLATILE ORGANIC CHEMICALS (VOC)	Not Required



OH0701612 SHADYSIDE 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

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

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

LEAD - 1030 AND COPPER - 1022	Not Required
-------------------------------	--------------

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

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.

Sampling Location	Facility ID: DS1 SMP ID: DS201	Facility Name: SHADYSIDE, VILLAGE OF DISTRIBUTION ADDRESS NOT KNOWN	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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

OH0701612 SHADYSIDE 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

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

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



OH0701703 YORK TOWNSHIP WATER AUTHORITY PWS

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

Sampling Location	Facility ID: DS1 SMP ID: DS000	Facility Name: YORK TOWNSHIP WATER AUTH DISTRIBUTIC	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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

LEAD - 1030 AND COPPER - 1022	5 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	1 Sample(s) Required between 1/1/2015 and 1/31/2015
	1 Sample(s) Required between 2/1/2015 and 2/28/2015
	1 Sample(s) Required between 3/1/2015 and 3/31/2015
	1 Sample(s) Required between 4/1/2015 and 4/30/2015
	1 Sample(s) Required between 5/1/2015 and 5/31/2015
	1 Sample(s) Required between 6/1/2015 and 6/30/2015
	1 Sample(s) Required between 7/1/2015 and 7/31/2015
	1 Sample(s) Required between 8/1/2015 and 8/31/2015
	1 Sample(s) Required between 9/1/2015 and 9/30/2015
	1 Sample(s) Required between 10/1/2015 and 10/31/2015
	1 Sample(s) Required between 11/1/2015 and 11/30/2015
	1 Sample(s) Required between 12/1/2015 and 12/31/2015

TOTAL CHLORINE - 1000	1 Sample(s) Required between 1/1/2015 and 1/31/2015
	1 Sample(s) Required between 2/1/2015 and 2/28/2015
	1 Sample(s) Required between 3/1/2015 and 3/31/2015
	1 Sample(s) Required between 4/1/2015 and 4/30/2015
	1 Sample(s) Required between 5/1/2015 and 5/31/2015
	1 Sample(s) Required between 6/1/2015 and 6/30/2015
	1 Sample(s) Required between 7/1/2015 and 7/31/2015
	1 Sample(s) Required between 8/1/2015 and 8/31/2015
	1 Sample(s) Required between 9/1/2015 and 9/30/2015
	1 Sample(s) Required between 10/1/2015 and 10/31/2015
	1 Sample(s) Required between 11/1/2015 and 11/30/2015
	1 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 SMP ID: DS201	Facility Name: YORK TOWNSHIP WATER AUTH DISTRIBUTIC ADDRESS NOT KNOWN	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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



OH0701803 BELMONT CO. SEWER DISTRICT 1B PWS

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

Sampling Location	Facility ID: DS1 SMP ID: DS000	Facility Name: BELMONT CO. SWR DIST 1B DISTRIBUTION	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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.

Sampling Location	Facility ID: DS1 SMP ID: DS201	Facility Name: BELMONT CO. SWR DIST 1B DISTRIBUTION 68626 HILL STREET	Facility Class: CLASS 1
--------------------------	---	--	--------------------------------

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

OH0701803 BELMONT CO. SEWER DISTRICT 1B PWS

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

Sampling Location	Facility ID: DS1	Facility Name: BELMONT CO. SWR DIST 1B DISTRIBUTION	Facility Class: CLASS 1
	SMP ID: DS202	54568 NATIONAL ROAD	

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

OH0733012 CAMP PRESMONT INC.

System Type: Transient Noncommunity

Operating Period: 5/1 to 9/30

Groundwater Rule Minimal Treatment System

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

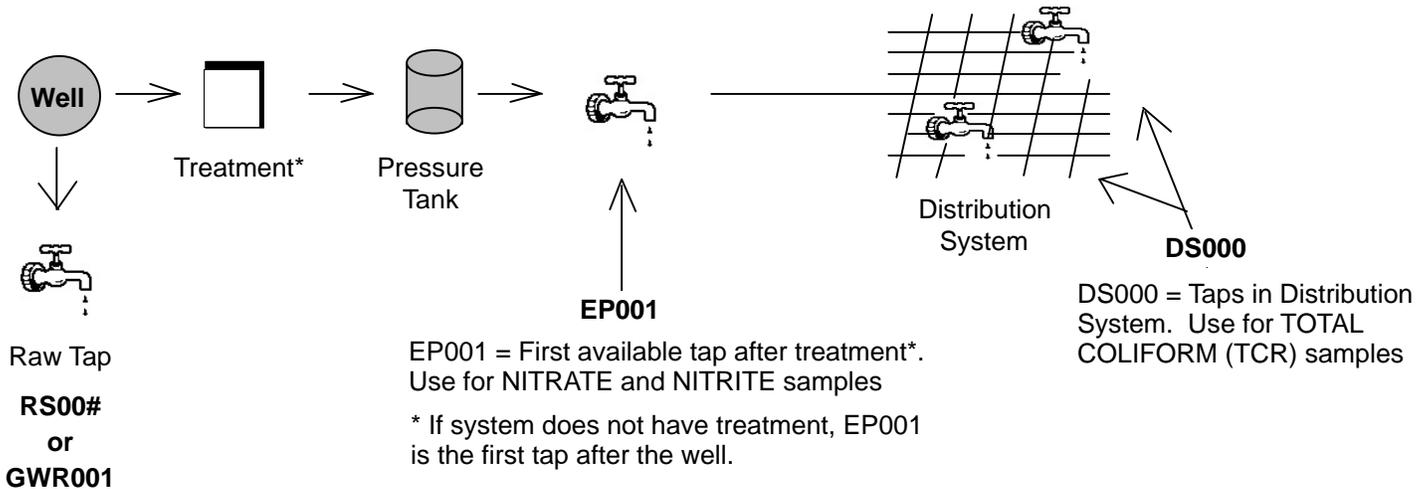
Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. For water emergencies that occur after hours, please call 800-282-9378

ENTRY POINT MONITORING SCHEDULE

Sampling Facility ID: **752983** Facility Name: **CAMP PRESMONT INC**
Location SMP ID: **EP001** Facility Source: **Ground Water**

Chemicals	Monitoring Requirements
NITRITE - 1041	Not Required
NITRATE - 1040	1 Sample(s) Required between 6/1/2015 and 10/31/2015

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!

OH0735012 4-H CAMP PIEDMONT PWS

System Type: Transient Noncommunity

Operating Period: 5/1 to 9/30

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: **4-H CAMP PIEDMONT DISTRIBUTION**
Location SMP ID: **DS000** Facility Source: **Ground Water**

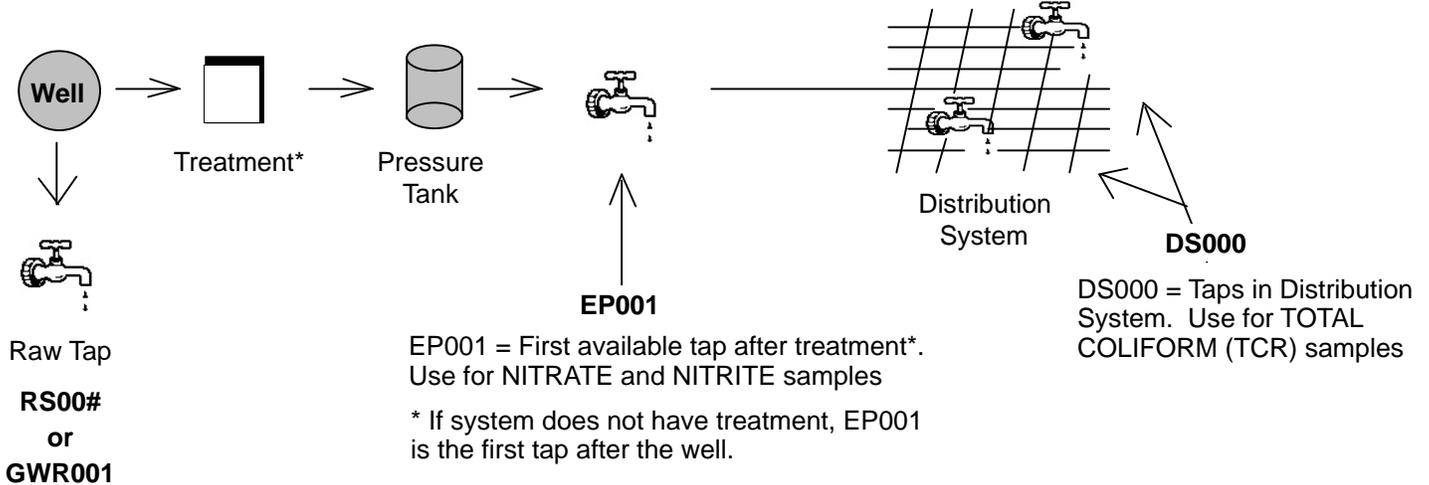
Chemicals	Monitoring Requirements
TOTAL COLIFORM (TCR) - 3100	1 Sample(s) Required between 4/1/2015 and 6/30/2015 1 Sample(s) Required between 7/1/2015 and 9/30/2015

ENTRY POINT MONITORING SCHEDULE

Sampling Facility ID: **752987** Facility Name: **4-H CAMP PIEDMONT**
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



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!

OH0735022 4-H CAMP PIEDMONT WELL 2 PWS

System Type: Transient Noncommunity

Operating Period: 6/1 to 9/30

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

Sampling Facility ID: DS1	Facility Name: 4-H CAMP PIEDMONT WELL 2 DISTRIBUTION
Location SMP ID: DS000	Facility Source: Ground Water

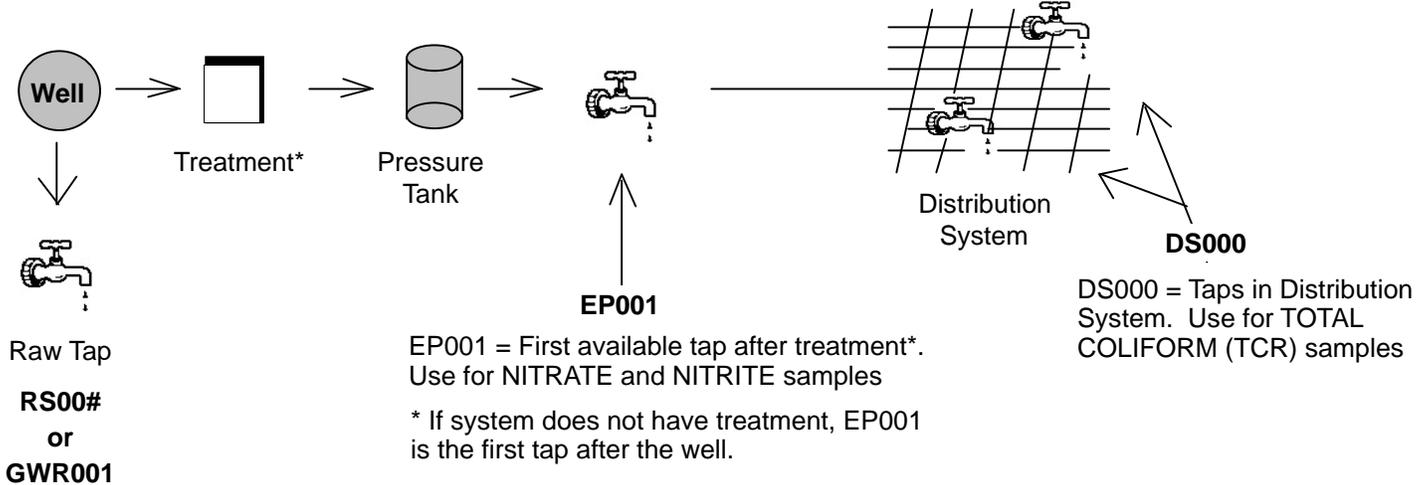
Chemicals	Monitoring Requirements
TOTAL COLIFORM (TCR) - 3100	1 Sample(s) Required between 4/1/2015 and 6/30/2015 1 Sample(s) Required between 7/1/2015 and 9/30/2015

ENTRY POINT MONITORING SCHEDULE

Sampling Facility ID: 752988	Facility Name: 4-H CAMP PIEDMONT WELL 2
Location SMP ID: EP001	Facility Source: Ground Water

Chemicals	Monitoring Requirements
NITRITE - 1041	Not Required
NITRATE - 1040	1 Sample(s) Required between 6/1/2015 and 10/31/2015

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!

OH0735212 MWCD/PIEDMONT MARINA P-1 PWS

System Type: Transient Noncommunity

Operating Period: 4/1 to 10/31

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: MWCD/PIEDMONT MARINA P-1 DISTRIBUTION
Location SMP ID: DS000 Facility Source: Ground Water

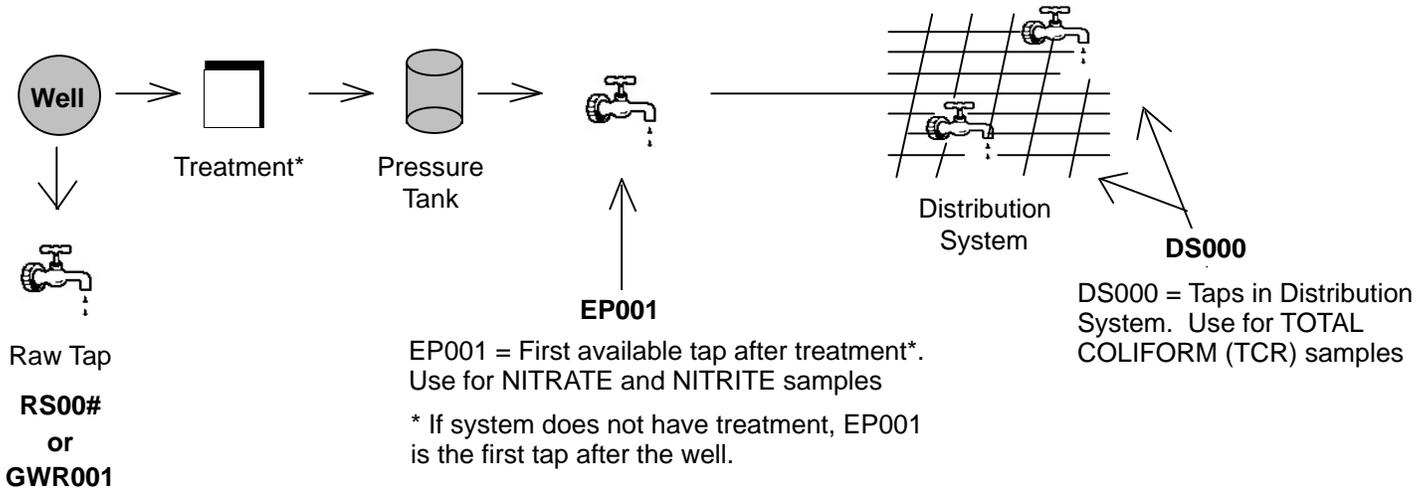
Chemicals	Monitoring Requirements
TOTAL COLIFORM (TCR) - 3100	1 Sample(s) Required between 4/1/2015 and 6/30/2015 1 Sample(s) Required between 7/1/2015 and 9/30/2015 1 Sample(s) Required between 10/1/2015 and 12/31/2015

ENTRY POINT MONITORING SCHEDULE

Sampling Facility ID: 752989 Facility Name: MWCD PIEDMONT MARINA P1
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



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!

OH0735612 U-SAVE FOOD MART PWS

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: **U-SAVE FOOD MART DISTRIBUTION**
Location SMP ID: **DS000** Facility Source: **Ground Water**

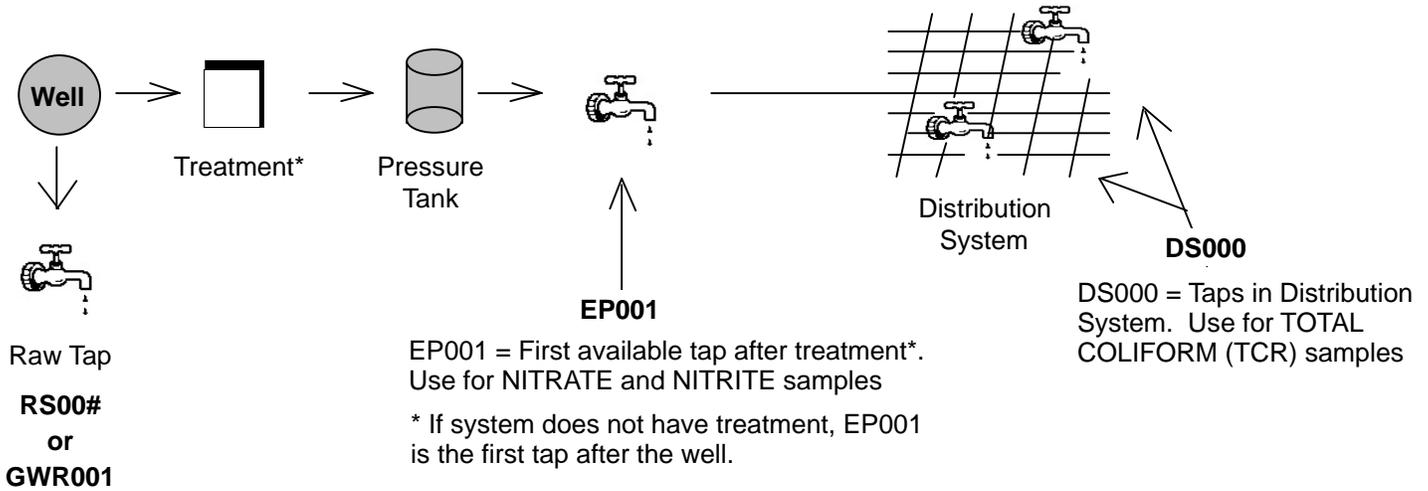
Chemicals	Monitoring Requirements
TOTAL COLIFORM (TCR) - 3100	1 Sample(s) Required between 1/1/2015 and 3/31/2015
	1 Sample(s) Required between 4/1/2015 and 6/30/2015
	1 Sample(s) Required between 7/1/2015 and 9/30/2015
	1 Sample(s) Required between 10/1/2015 and 12/31/2015

ENTRY POINT MONITORING SCHEDULE

Sampling Facility ID: **761442** Facility Name: **U-SAVE FOOD MART**
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



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!

OH0735712 BELMONT BETTER HUNTING/FISHING CLUB PW

System Type: Transient Noncommunity

Operating Period: 4/1 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: **BELMONT BETTER HUNTING & FISHING CLUB DI**
Location SMP ID: **DS000** Facility Source: **Ground Water**

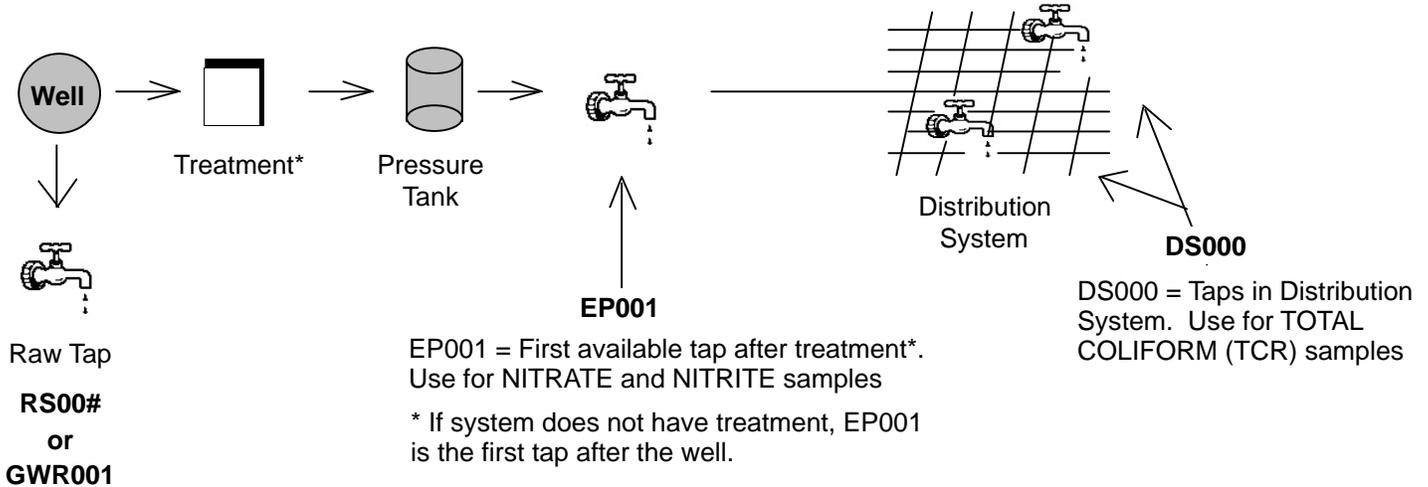
Chemicals	Monitoring Requirements
TOTAL COLIFORM (TCR) - 3100	1 Sample(s) Required between 4/1/2015 and 6/30/2015
	1 Sample(s) Required between 7/1/2015 and 9/30/2015
	1 Sample(s) Required between 10/1/2015 and 12/31/2015

ENTRY POINT MONITORING SCHEDULE

Sampling Facility ID: **761561** Facility Name: **BELMONT BETTER HUNTING & FISHING CLUB**
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



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!