Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700003 AMHERST CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. 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: **AMHERST, CITY OF DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS000**

Chemicals	Monitoring Requirements			
LEAD - 1030 AND COPPER - 1022	30 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	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** Facility Name: **AMHERST, CITY OF DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS201** **48540 N. RIDGE**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	2/8/2015	and	2/14/2015	at SMP: DS201
	1 Sample(s) Required between	5/8/2015	and	5/14/2015	at SMP: DS201
	1 Sample(s) Required between	8/8/2015	and	8/14/2015	at SMP: DS201
	1 Sample(s) Required between	11/8/2015	and	11/14/2015	at SMP: DS201

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700003 AMHERST CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 2/8/2015 and 2/14/2015 at SMP: DS202
	1 Sample(s) Required between 5/8/2015 and 5/14/2015 at SMP: DS202
	1 Sample(s) Required between 8/8/2015 and 8/14/2015 at SMP: DS202
	1 Sample(s) Required between 11/8/2015 and 11/14/2015 at SMP: DS202

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 2/8/2015 and 2/14/2015 at SMP: DS203
	1 Sample(s) Required between 5/8/2015 and 5/14/2015 at SMP: DS203
	1 Sample(s) Required between 8/8/2015 and 8/14/2015 at SMP: DS203
	1 Sample(s) Required between 11/8/2015 and 11/14/2015 at SMP: DS203

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 2/8/2015 and 2/14/2015 at SMP: DS204
	1 Sample(s) Required between 5/8/2015 and 5/14/2015 at SMP: DS204
	1 Sample(s) Required between 8/8/2015 and 8/14/2015 at SMP: DS204
	1 Sample(s) Required between 11/8/2015 and 11/14/2015 at SMP: DS204

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700203 AVON CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements			
LEAD - 1030 AND COPPER - 1022	30 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	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: **CITY OF AVON DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS201** **33173 JUST IMAGINE DR.**

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700203 AVON CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

Sampling Location Facility ID: **DS1** Facility Name: **CITY OF AVON DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS201** **33173 JUST IMAGINE DR.**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	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***

Sampling Location Facility ID: **DS1** Facility Name: **CITY OF AVON DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS202** **3375 NAPA**

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***

Ohio Environmental Protection Agency

Effective Date: 10/16/2015

OH4700311 AVON LAKE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

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

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

Chemicals	Monitoring Requirements
INORGANICS	1 Sample(s) Required between 6/1/2015 and 10/31/2015
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	1 Sample(s) Required between 6/1/2015 and 10/31/2015
Sample for all the analytes listed below:	
GROSS ALPHA - 4002 RADIUM-228 - 4030	
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 6/1/2015 and 10/31/2015
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.

Ohio Environmental Protection Agency

Effective Date: 10/16/2015

OH4700311 AVON LAKE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

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

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Chemicals	Monitoring Requirements
LT2 MONITORING	1 Sample(s) Required between 10/3/2015 and 10/7/2015
	1 Sample(s) Required between 11/1/2015 and 11/5/2015
	1 Sample(s) Required between 12/1/2015 and 12/5/2015

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700311 AVON LAKE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

Sampling Location Facility ID: **DS1** Facility Name: **AVON LAKE, CITY OF DISTRIBUTION** 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	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** Facility Name: **AVON LAKE, CITY OF DISTRIBUTION** Facility Class: **CLASS 2**
SMP ID: **DS201** **750 JAYCOX**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS201
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS201
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS201
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS201

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700311 AVON LAKE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

Sampling Location Facility ID: **DS1** Facility Name: **AVON LAKE, CITY OF DISTRIBUTION** Facility Class: **CLASS 2**
SMP ID: **DS202** **31765 LEEWARD CT.**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS202
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS202
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS202
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS202

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 11/13/2015

OH4700411 ELYRIA WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

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

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

Chemicals	Monitoring Requirements
INORGANICS	1 Sample(s) Required between 6/1/2015 and 10/31/2015
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	1 Sample(s) Required between 6/1/2015 and 10/31/2015
Sample for all the analytes listed below:	
GROSS ALPHA - 4002 RADIUM-228 - 4030	
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 6/1/2015 and 10/31/2015
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.

Ohio Environmental Protection Agency

Effective Date: 11/13/2015

OH4700411 ELYRIA WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

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

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

Chemicals	Monitoring Requirements
LT2 MONITORING	1 Sample(s) Required between 10/4/2015 and 10/8/2015
	1 Sample(s) Required between 11/1/2015 and 11/5/2015
	1 Sample(s) Required between 11/29/2015 and 12/3/2015
Monitor for: Cryptosporidium - 2078, E-coli count - 3014, Turbidity - 0100	
LT2 MATRIX SPIKE SAMPLE	1 Sample(s) Required between 10/4/2015 and 10/8/2015

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700411 ELYRIA WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements			
LEAD - 1030 AND COPPER - 1022	30 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	70 Sample(s) Required between	1/1/2015	and	1/31/2015
	70 Sample(s) Required between	2/1/2015	and	2/28/2015
	70 Sample(s) Required between	3/1/2015	and	3/31/2015
	70 Sample(s) Required between	4/1/2015	and	4/30/2015
	70 Sample(s) Required between	5/1/2015	and	5/31/2015
	70 Sample(s) Required between	6/1/2015	and	6/30/2015
	70 Sample(s) Required between	7/1/2015	and	7/31/2015
	70 Sample(s) Required between	8/1/2015	and	8/31/2015
	70 Sample(s) Required between	9/1/2015	and	9/30/2015
	70 Sample(s) Required between	10/1/2015	and	10/31/2015
	70 Sample(s) Required between	11/1/2015	and	11/30/2015
	70 Sample(s) Required between	12/1/2015	and	12/31/2015

TOTAL CHLORINE - 1000	70 Sample(s) Required between	1/1/2015	and	1/31/2015
	70 Sample(s) Required between	2/1/2015	and	2/28/2015
	70 Sample(s) Required between	3/1/2015	and	3/31/2015
	70 Sample(s) Required between	4/1/2015	and	4/30/2015
	70 Sample(s) Required between	5/1/2015	and	5/31/2015
	70 Sample(s) Required between	6/1/2015	and	6/30/2015
	70 Sample(s) Required between	7/1/2015	and	7/31/2015
	70 Sample(s) Required between	8/1/2015	and	8/31/2015
	70 Sample(s) Required between	9/1/2015	and	9/30/2015
	70 Sample(s) Required between	10/1/2015	and	10/31/2015
	70 Sample(s) Required between	11/1/2015	and	11/30/2015
	70 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: **ELYRIA WATER DEPARTMENT DISTRIBUTION** Facility Class: **CLASS 2**
SMP ID: **DS201** **APL-8303 MURRAY RD.**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	2/1/2015	and	2/7/2015	at SMP: DS201
	1 Sample(s) Required between	5/1/2015	and	5/7/2015	at SMP: DS201
	1 Sample(s) Required between	8/1/2015	and	8/7/2015	at SMP: DS201
	1 Sample(s) Required between	11/1/2015	and	11/7/2015	at SMP: DS201

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700411 ELYRIA WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

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

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 2/1/2015 and 2/7/2015 at SMP: DS202
	1 Sample(s) Required between 5/1/2015 and 5/7/2015 at SMP: DS202
	1 Sample(s) Required between 8/1/2015 and 8/7/2015 at SMP: DS202
	1 Sample(s) Required between 11/1/2015 and 11/7/2015 at SMP: DS202

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 2/1/2015 and 2/7/2015 at SMP: DS203
	1 Sample(s) Required between 5/1/2015 and 5/7/2015 at SMP: DS203
	1 Sample(s) Required between 8/1/2015 and 8/7/2015 at SMP: DS203
	1 Sample(s) Required between 11/1/2015 and 11/7/2015 at SMP: DS203

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 2/1/2015 and 2/7/2015 at SMP: DS204
	1 Sample(s) Required between 5/1/2015 and 5/7/2015 at SMP: DS204
	1 Sample(s) Required between 8/1/2015 and 8/7/2015 at SMP: DS204
	1 Sample(s) Required between 11/1/2015 and 11/7/2015 at SMP: DS204

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 2/1/2015 and 2/7/2015 at SMP: DS205
	1 Sample(s) Required between 5/1/2015 and 5/7/2015 at SMP: DS205
	1 Sample(s) Required between 8/1/2015 and 8/7/2015 at SMP: DS205

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700411 ELYRIA WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	11/1/2015	and	11/7/2015	at SMP: DS205

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	2/1/2015	and	2/7/2015	at SMP: DS206
	1 Sample(s) Required between	5/1/2015	and	5/7/2015	at SMP: DS206
	1 Sample(s) Required between	8/1/2015	and	8/7/2015	at SMP: DS206
	1 Sample(s) Required between	11/1/2015	and	11/7/2015	at SMP: DS206

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	2/1/2015	and	2/7/2015	at SMP: DS207
	1 Sample(s) Required between	5/1/2015	and	5/7/2015	at SMP: DS207
	1 Sample(s) Required between	8/1/2015	and	8/7/2015	at SMP: DS207
	1 Sample(s) Required between	11/1/2015	and	11/7/2015	at SMP: DS207

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	2/1/2015	and	2/7/2015	at SMP: DS208
	1 Sample(s) Required between	5/1/2015	and	5/7/2015	at SMP: DS208
	1 Sample(s) Required between	8/1/2015	and	8/7/2015	at SMP: DS208
	1 Sample(s) Required between	11/1/2015	and	11/7/2015	at SMP: DS208

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700511 GRAFTON VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

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

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** Facility Name: **GRAFTON, VILLAGE OF DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS201** **1050 NOVAK RD.**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS201
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS201
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS201
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS201

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700511 GRAFTON VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS202
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS202
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS202
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS202

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700603 LAGRANGE VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

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

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	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** Facility Name: **LAGRANGE, VILLAGE OF DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS201** **580 OPPORTUNITY WAY**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	2/1/2015	and	2/7/2015	at SMP: DS201
	1 Sample(s) Required between	5/1/2015	and	5/7/2015	at SMP: DS201
	1 Sample(s) Required between	8/1/2015	and	8/7/2015	at SMP: DS201
	1 Sample(s) Required between	11/1/2015	and	11/7/2015	at SMP: DS201

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700603 LAGRANGE VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	2/1/2015	and	2/7/2015	at SMP: DS202
	1 Sample(s) Required between	5/1/2015	and	5/7/2015	at SMP: DS202
	1 Sample(s) Required between	8/1/2015	and	8/7/2015	at SMP: DS202
	1 Sample(s) Required between	11/1/2015	and	11/7/2015	at SMP: DS202

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 08/14/2015

OH4700711 LORAIN CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

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

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

Chemicals	Monitoring Requirements
INORGANICS	1 Sample(s) Required between 6/1/2015 and 10/31/2015
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	1 Sample(s) Required between 6/1/2015 and 10/31/2015
Sample for all the analytes listed below:	
GROSS ALPHA - 4002 RADIUM-228 - 4030	
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 6/1/2015 and 10/31/2015
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.

Ohio Environmental Protection Agency

Effective Date: 08/14/2015

OH4700711 LORAIN CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

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

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Chemicals	Monitoring Requirements
LT2 MONITORING	1 Sample(s) Required between 8/17/2015 and 8/21/2015
	1 Sample(s) Required between 9/14/2015 and 9/18/2015
	1 Sample(s) Required between 10/19/2015 and 10/23/2015
	1 Sample(s) Required between 11/16/2015 and 11/20/2015
	1 Sample(s) Required between 12/14/2015 and 12/18/2015
Monitor for: Cryptosporidium - 2078, E-coli count - 3014, Turbidity - 0100	
LT2 MATRIX SPIKE SAMPLE	1 Sample(s) Required between 12/14/2015 and 12/18/2015

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700711 LORAIN CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements
LEAD - 1030 AND COPPER - 1022	Not Required
TOTAL COLIFORM (TCR) - 3100	70 Sample(s) Required between 1/1/2015 and 1/31/2015
	70 Sample(s) Required between 2/1/2015 and 2/28/2015
	70 Sample(s) Required between 3/1/2015 and 3/31/2015
	70 Sample(s) Required between 4/1/2015 and 4/30/2015
	70 Sample(s) Required between 5/1/2015 and 5/31/2015
	70 Sample(s) Required between 6/1/2015 and 6/30/2015
	70 Sample(s) Required between 7/1/2015 and 7/31/2015
	70 Sample(s) Required between 8/1/2015 and 8/31/2015
	70 Sample(s) Required between 9/1/2015 and 9/30/2015
	70 Sample(s) Required between 10/1/2015 and 10/31/2015
	70 Sample(s) Required between 11/1/2015 and 11/30/2015
	70 Sample(s) Required between 12/1/2015 and 12/31/2015
TOTAL CHLORINE - 1000	70 Sample(s) Required between 1/1/2015 and 1/31/2015
	70 Sample(s) Required between 2/1/2015 and 2/28/2015
	70 Sample(s) Required between 3/1/2015 and 3/31/2015
	70 Sample(s) Required between 4/1/2015 and 4/30/2015
	70 Sample(s) Required between 5/1/2015 and 5/31/2015
	70 Sample(s) Required between 6/1/2015 and 6/30/2015
	70 Sample(s) Required between 7/1/2015 and 7/31/2015
	70 Sample(s) Required between 8/1/2015 and 8/31/2015
	70 Sample(s) Required between 9/1/2015 and 9/30/2015
	70 Sample(s) Required between 10/1/2015 and 10/31/2015
	70 Sample(s) Required between 11/1/2015 and 11/30/2015
	70 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: **LORAIN, CITY OF DISTRIBUTION** Facility Class: **CLASS 2**
SMP ID: **DS201** **WALGREENS 5411 LEAVITT**

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 3/1/2015 and 3/7/2015 at SMP: DS201
	1 Sample(s) Required between 6/1/2015 and 6/7/2015 at SMP: DS201
	1 Sample(s) Required between 9/1/2015 and 9/7/2015 at SMP: DS201
	1 Sample(s) Required between 12/1/2015 and 12/7/2015 at SMP: DS201

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700711 LORAIN CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/1/2015	and	3/7/2015	at SMP: DS202
	1 Sample(s) Required between	6/1/2015	and	6/7/2015	at SMP: DS202
	1 Sample(s) Required between	9/1/2015	and	9/7/2015	at SMP: DS202
	1 Sample(s) Required between	12/1/2015	and	12/7/2015	at SMP: DS202

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/1/2015	and	3/7/2015	at SMP: DS203
	1 Sample(s) Required between	6/1/2015	and	6/7/2015	at SMP: DS203
	1 Sample(s) Required between	9/1/2015	and	9/7/2015	at SMP: DS203
	1 Sample(s) Required between	12/1/2015	and	12/7/2015	at SMP: DS203

Sample for all the analytes listed below:

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

Sampling Location Facility ID: **DS1** Facility Name: **LORAIN, CITY OF DISTRIBUTION** Facility Class: **CLASS 2**
SMP ID: **DS204** **DELUCA'S 6075 MIDDLE RIDGE**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/1/2015	and	3/7/2015	at SMP: DS204
	1 Sample(s) Required between	6/1/2015	and	6/7/2015	at SMP: DS204
	1 Sample(s) Required between	9/1/2015	and	9/7/2015	at SMP: DS204
	1 Sample(s) Required between	12/1/2015	and	12/7/2015	at SMP: DS204

Sample for all the analytes listed below:

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

Sampling Location Facility ID: **DS1** Facility Name: **LORAIN, CITY OF DISTRIBUTION** Facility Class: **CLASS 2**
SMP ID: **DS205** **KOLCZUNANDKOLCZUN 5800 COOI**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/1/2015	and	3/7/2015	at SMP: DS205
	1 Sample(s) Required between	6/1/2015	and	6/7/2015	at SMP: DS205
	1 Sample(s) Required between	9/1/2015	and	9/7/2015	at SMP: DS205

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700711 LORAIN CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

Sampling Location Facility ID: **DS1** Facility Name: **LORAIN, CITY OF DISTRIBUTION** Facility Class: **CLASS 2**
SMP ID: **DS205** **KOLCZUNANDKOLCZUN 5800 COOI**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	12/1/2015	and	12/7/2015	at SMP: DS205

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/1/2015	and	3/7/2015	at SMP: DS206
	1 Sample(s) Required between	6/1/2015	and	6/7/2015	at SMP: DS206
	1 Sample(s) Required between	9/1/2015	and	9/7/2015	at SMP: DS206
	1 Sample(s) Required between	12/1/2015	and	12/7/2015	at SMP: DS206

Sample for all the analytes listed below:

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

Sampling Location Facility ID: **DS1** Facility Name: **LORAIN, CITY OF DISTRIBUTION** Facility Class: **CLASS 2**
SMP ID: **DS207** **HYDRANT ON OAK KNOLL AND HID**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/1/2015	and	3/7/2015	at SMP: DS207
	1 Sample(s) Required between	6/1/2015	and	6/7/2015	at SMP: DS207
	1 Sample(s) Required between	9/1/2015	and	9/7/2015	at SMP: DS207
	1 Sample(s) Required between	12/1/2015	and	12/7/2015	at SMP: DS207

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/1/2015	and	3/7/2015	at SMP: DS208
	1 Sample(s) Required between	6/1/2015	and	6/7/2015	at SMP: DS208
	1 Sample(s) Required between	9/1/2015	and	9/7/2015	at SMP: DS208
	1 Sample(s) Required between	12/1/2015	and	12/7/2015	at SMP: DS208

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700803 NORTH RIDGEVILLE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements
LEAD - 1030 AND COPPER - 1022	Not Required
ASBESTOS - 1094	Not Required
TOTAL COLIFORM (TCR) - 3100	30 Sample(s) Required between 1/1/2015 and 1/31/2015
	30 Sample(s) Required between 2/1/2015 and 2/28/2015
	30 Sample(s) Required between 3/1/2015 and 3/31/2015
	30 Sample(s) Required between 4/1/2015 and 4/30/2015
	30 Sample(s) Required between 5/1/2015 and 5/31/2015
	30 Sample(s) Required between 6/1/2015 and 6/30/2015
	30 Sample(s) Required between 7/1/2015 and 7/31/2015
	30 Sample(s) Required between 8/1/2015 and 8/31/2015
	30 Sample(s) Required between 9/1/2015 and 9/30/2015
	30 Sample(s) Required between 10/1/2015 and 10/31/2015
	30 Sample(s) Required between 11/1/2015 and 11/30/2015
	30 Sample(s) Required between 12/1/2015 and 12/31/2015
TOTAL CHLORINE - 1000	30 Sample(s) Required between 1/1/2015 and 1/31/2015
	30 Sample(s) Required between 2/1/2015 and 2/28/2015
	30 Sample(s) Required between 3/1/2015 and 3/31/2015
	30 Sample(s) Required between 4/1/2015 and 4/30/2015
	30 Sample(s) Required between 5/1/2015 and 5/31/2015
	30 Sample(s) Required between 6/1/2015 and 6/30/2015
	30 Sample(s) Required between 7/1/2015 and 7/31/2015
	30 Sample(s) Required between 8/1/2015 and 8/31/2015
	30 Sample(s) Required between 9/1/2015 and 9/30/2015
	30 Sample(s) Required between 10/1/2015 and 10/31/2015
	30 Sample(s) Required between 11/1/2015 and 11/30/2015
	30 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: **NORTH RIDGEVILLE, CITY OF DISTRIBUTION** Facility Class: **CLASS 2**
SMP ID: **DS201** **36097 WEST MINSTER**

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 3/8/2015 and 3/14/2015 at SMP: DS201
	1 Sample(s) Required between 6/8/2015 and 6/14/2015 at SMP: DS201
	1 Sample(s) Required between 9/8/2015 and 9/14/2015 at SMP: DS201
	1 Sample(s) Required between 12/8/2015 and 12/14/2015 at SMP: DS201

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700803 NORTH RIDGEVILLE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS202
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS202
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS202
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS202

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS203
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS203
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS203
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS203

Sample for all the analytes listed below:

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

Sampling Location Facility ID: **DS1** Facility Name: **NORTH RIDGEVILLE, CITY OF DISTRIBUTION** Facility Class: **CLASS 2**
SMP ID: **DS204** **NORTH RIDGEVILLE SERVICE CENT**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS204
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS204
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS204
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS204

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700911 OBERLIN WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

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

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

Chemicals	Monitoring Requirements
INORGANICS	1 Sample(s) Required between 6/1/2015 and 10/31/2015
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 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
Sample for all the analytes listed below:	
ALACHLOR (LASSO) - 2051 ATRAZINE - 2050 SIMAZINE - 2037	
VOLATILE ORGANIC CHEMICALS (VOC)	1 Sample(s) Required between 6/1/2015 and 10/31/2015
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.

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700911 OBERLIN WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

Sampling Location Facility ID: **DS1** Facility Name: **OBERLIN WATER DEPARTMENT DISTRIBUTIC** Facility Class: **CLASS 1**
SMP ID: **DS000**

Chemicals	Monitoring Requirements
LEAD - 1030 AND COPPER - 1022	Not Required
ASBESTOS - 1094	Not Required
TOTAL COLIFORM (TCR) - 3100	9 Sample(s) Required between 1/1/2015 and 1/31/2015
	9 Sample(s) Required between 2/1/2015 and 2/28/2015
	9 Sample(s) Required between 3/1/2015 and 3/31/2015
	9 Sample(s) Required between 4/1/2015 and 4/30/2015
	9 Sample(s) Required between 5/1/2015 and 5/31/2015
	9 Sample(s) Required between 6/1/2015 and 6/30/2015
	9 Sample(s) Required between 7/1/2015 and 7/31/2015
	9 Sample(s) Required between 8/1/2015 and 8/31/2015
	9 Sample(s) Required between 9/1/2015 and 9/30/2015
	9 Sample(s) Required between 10/1/2015 and 10/31/2015
	9 Sample(s) Required between 11/1/2015 and 11/30/2015
	9 Sample(s) Required between 12/1/2015 and 12/31/2015
TOTAL CHLORINE - 1000	9 Sample(s) Required between 1/1/2015 and 1/31/2015
	9 Sample(s) Required between 2/1/2015 and 2/28/2015
	9 Sample(s) Required between 3/1/2015 and 3/31/2015
	9 Sample(s) Required between 4/1/2015 and 4/30/2015
	9 Sample(s) Required between 5/1/2015 and 5/31/2015
	9 Sample(s) Required between 6/1/2015 and 6/30/2015
	9 Sample(s) Required between 7/1/2015 and 7/31/2015
	9 Sample(s) Required between 8/1/2015 and 8/31/2015
	9 Sample(s) Required between 9/1/2015 and 9/30/2015
	9 Sample(s) Required between 10/1/2015 and 10/31/2015
	9 Sample(s) Required between 11/1/2015 and 11/30/2015
	9 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: **OBERLIN WATER DEPARTMENT DISTRIBUTIC** Facility Class: **CLASS 1**
SMP ID: **DS201** **380 RESERVE WAY**

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***

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4700911 OBERLIN WATER DEPARTMENT

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

Sampling Location Facility ID: **DS1** Facility Name: **OBERLIN WATER DEPARTMENT DISTRIBUTIC** Facility Class: **CLASS 1**
SMP ID: **DS202** **797 EAST LORAIN STREET**

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***

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4701103 SHEFFIELD LAKE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

Sampling Location Facility ID: **DS1** Facility Name: **SHEFFIELD LAKE CITY DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS000**

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** Facility Name: **SHEFFIELD LAKE CITY DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS201** **3740 TENNYSON AVE.**

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***

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4701103 SHEFFIELD LAKE CITY PWS

System Type: Community

Operating Period: 1/1 to 12/31

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DISTRIBUTION MONITORING SCHEDULE

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

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***

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4701203 SHEFFIELD VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

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

DISTRIBUTION MONITORING SCHEDULE

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

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	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** Facility Name: **SHEFFIELD, VILLAGE OF DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS201** **4480 COLORADO AVE.**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS201
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS201
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS201

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4701203 SHEFFIELD VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

Sampling Location Facility ID: **DS1** Facility Name: **SHEFFIELD, VILLAGE OF DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS201** **4480 COLORADO AVE.**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS201

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS202
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS202
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS202
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS202

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4701411 SOUTH AMHERST VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

Sampling Location Facility ID: **DS1** Facility Name: **SOUTH AMHERST, VILLAGE O DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS000**

Chemicals	Monitoring Requirements
LEAD - 1030 AND COPPER - 1022	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** Facility Name: **SOUTH AMHERST, VILLAGE O DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS201** **417 OAKDALE ST.**

Chemicals	Monitoring Requirements
DISINFECTION BYPRODUCTS	1 Sample(s) Required between 3/1/2015 and 3/7/2015 at SMP: DS201
	1 Sample(s) Required between 6/1/2015 and 6/7/2015 at SMP: DS201
	1 Sample(s) Required between 9/1/2015 and 9/7/2015 at SMP: DS201
	1 Sample(s) Required between 12/1/2015 and 12/7/2015 at SMP: DS201

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4701411 SOUTH AMHERST VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/1/2015	and	3/7/2015	at SMP: DS202
	1 Sample(s) Required between	6/1/2015	and	6/7/2015	at SMP: DS202
	1 Sample(s) Required between	9/1/2015	and	9/7/2015	at SMP: DS202
	1 Sample(s) Required between	12/1/2015	and	12/7/2015	at SMP: DS202

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4701511 WELLINGTON VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

ENTRY POINT MONITORING SCHEDULE

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

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Chemicals	Monitoring Requirements
INORGANICS	1 Sample(s) Required between 6/1/2015 and 10/31/2015
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	1 Sample(s) Required between 6/1/2015 and 10/31/2015
Sample for all the analytes listed below:	
GROSS ALPHA - 4002 RADIUM-228 - 4030	
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 6/1/2015 and 10/31/2015

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4701511 WELLINGTON VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

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

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** Facility Name: **WELLINGTON, VILLAGE OF DISTRIBUTION** Facility Class: **CLASS 1**
SMP ID: **DS201** **23687 PITTS ROAD**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	2/1/2015	and	2/7/2015	at SMP: DS201
	1 Sample(s) Required between	5/1/2015	and	5/7/2015	at SMP: DS201
	1 Sample(s) Required between	8/1/2015	and	8/7/2015	at SMP: DS201

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4701511 WELLINGTON VILLAGE PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	11/1/2015	and	11/7/2015	at SMP: DS201

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	2/1/2015	and	2/7/2015	at SMP: DS202
	1 Sample(s) Required between	5/1/2015	and	5/7/2015	at SMP: DS202
	1 Sample(s) Required between	8/1/2015	and	8/7/2015	at SMP: DS202
	1 Sample(s) Required between	11/1/2015	and	11/7/2015	at SMP: DS202

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 09/11/2015

OH4701803 RURAL LORAIN CO. WATER A

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

Sampling Location Facility ID: **DS1** Facility Name: **RURAL LORAIN CO. WATER A DISTRIBUTION** 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	80 Sample(s) Required between	1/1/2015	and	1/31/2015
	80 Sample(s) Required between	2/1/2015	and	2/28/2015
	80 Sample(s) Required between	3/1/2015	and	3/31/2015
	80 Sample(s) Required between	4/1/2015	and	4/30/2015
	80 Sample(s) Required between	5/1/2015	and	5/31/2015
	80 Sample(s) Required between	6/1/2015	and	6/30/2015
	80 Sample(s) Required between	7/1/2015	and	7/31/2015
	80 Sample(s) Required between	8/1/2015	and	8/31/2015
	80 Sample(s) Required between	9/1/2015	and	9/30/2015
	80 Sample(s) Required between	10/1/2015	and	10/31/2015
	80 Sample(s) Required between	11/1/2015	and	11/30/2015
	80 Sample(s) Required between	12/1/2015	and	12/31/2015
TOTAL CHLORINE - 1000	80 Sample(s) Required between	1/1/2015	and	1/31/2015
	80 Sample(s) Required between	2/1/2015	and	2/28/2015
	80 Sample(s) Required between	3/1/2015	and	3/31/2015
	80 Sample(s) Required between	4/1/2015	and	4/30/2015
	80 Sample(s) Required between	5/1/2015	and	5/31/2015
	80 Sample(s) Required between	6/1/2015	and	6/30/2015
	80 Sample(s) Required between	7/1/2015	and	7/31/2015
	80 Sample(s) Required between	8/1/2015	and	8/31/2015
	80 Sample(s) Required between	9/1/2015	and	9/30/2015
	80 Sample(s) Required between	10/1/2015	and	10/31/2015
	80 Sample(s) Required between	11/1/2015	and	11/30/2015
	80 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: **RURAL LORAIN CO. WATER A DISTRIBUTION** Facility Class: **CLASS 2**
SMP ID: **DS201** **POLK TANK**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS201
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS201
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS201
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS201

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 09/11/2015

OH4701803 RURAL LORAIN CO. WATER A

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS202
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS202
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS202
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS202

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS203
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS203
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS203
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS203

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS204
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS204
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS204
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS204

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS205
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS205
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS205

Ohio Environmental Protection Agency

Effective Date: 09/11/2015

OH4701803 RURAL LORAIN CO. WATER A

System Type: Community

Operating Period: 1/1 to 12/31

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS205

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS206
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS206
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS206
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS206

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS207
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS207
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS207
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS207

Sample for all the analytes listed below:

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

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/8/2015	and	3/14/2015	at SMP: DS208
	1 Sample(s) Required between	6/8/2015	and	6/14/2015	at SMP: DS208
	1 Sample(s) Required between	9/8/2015	and	9/14/2015	at SMP: DS208
	1 Sample(s) Required between	12/8/2015	and	12/14/2015	at SMP: DS208

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4701912 PHEASANT RUN ASSOCIATION PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. 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: **PHEASANT RUN ASSOCIATION DISTRIBUTIO** Facility Class: **CLASS 1**
SMP ID: **DS000**

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	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** Facility Name: **PHEASANT RUN ASSOCIATION DISTRIBUTIO** Facility Class: **CLASS 1**
SMP ID: **DS201** **200 EAST LAKE**

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/1/2015	and	3/7/2015	at SMP: DS201
	1 Sample(s) Required between	6/1/2015	and	6/7/2015	at SMP: DS201
	1 Sample(s) Required between	9/1/2015	and	9/7/2015	at SMP: DS201
	1 Sample(s) Required between	12/1/2015	and	12/7/2015	at SMP: DS201

Sample for all the analytes listed below:

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

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4701912 PHEASANT RUN ASSOCIATION PWS

System Type: Community

Operating Period: 1/1 to 12/31

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

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

DISTRIBUTION MONITORING SCHEDULE

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

Chemicals	Monitoring Requirements				
DISINFECTION BYPRODUCTS	1 Sample(s) Required between	3/1/2015	and	3/7/2015	at SMP: DS202
	1 Sample(s) Required between	6/1/2015	and	6/7/2015	at SMP: DS202
	1 Sample(s) Required between	9/1/2015	and	9/7/2015	at SMP: DS202
	1 Sample(s) Required between	12/1/2015	and	12/7/2015	at SMP: DS202

Sample for all the analytes listed below:

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

Effective Date: 01/01/2015

OH4736912 PANTHER TRAILS CAMPGROUND

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 Location Facility ID: **DS1** Facility Name: **PANTHER TRAILS CAMPGROUN DISTRIBUTION**
SMP ID: **DS000** Facility Source: **Ground Water**

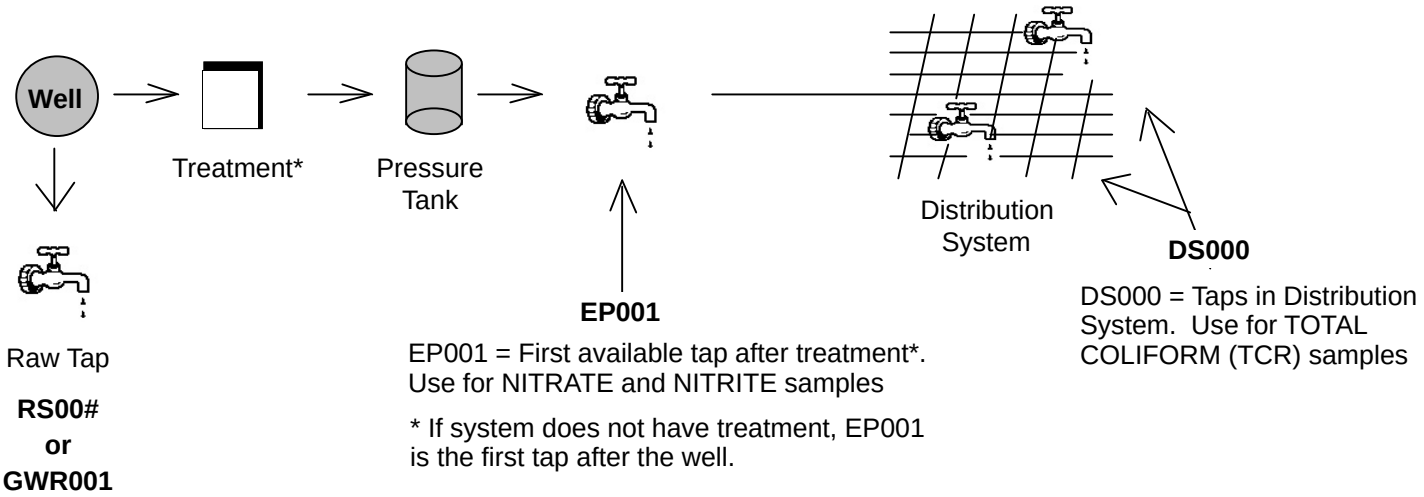
Chemicals	Monitoring Requirements
TOTAL COLIFORM (TCR) - 3100	1 Sample(s) Required between 4/1/2015 and 6/30/2015
	1 Sample(s) Required between 7/1/2015 and 9/30/2015

ENTRY POINT MONITORING SCHEDULE

Sampling Location Facility ID: **4755837** Facility Name: **PANTHER TRAILS CAMPGROUND**
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!

Ohio Environmental Protection Agency

Effective Date: 01/01/2015

OH4737312 AUTORAMA TWIN THEATER

System Type: Transient Noncommunity

Operating Period: 4/1 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 Location Facility ID: **DS1** Facility Name: **AUTORAMA TWIN THEATER DISTRIBUTION**
SMP ID: **DS000** Facility Source: **Ground Water**

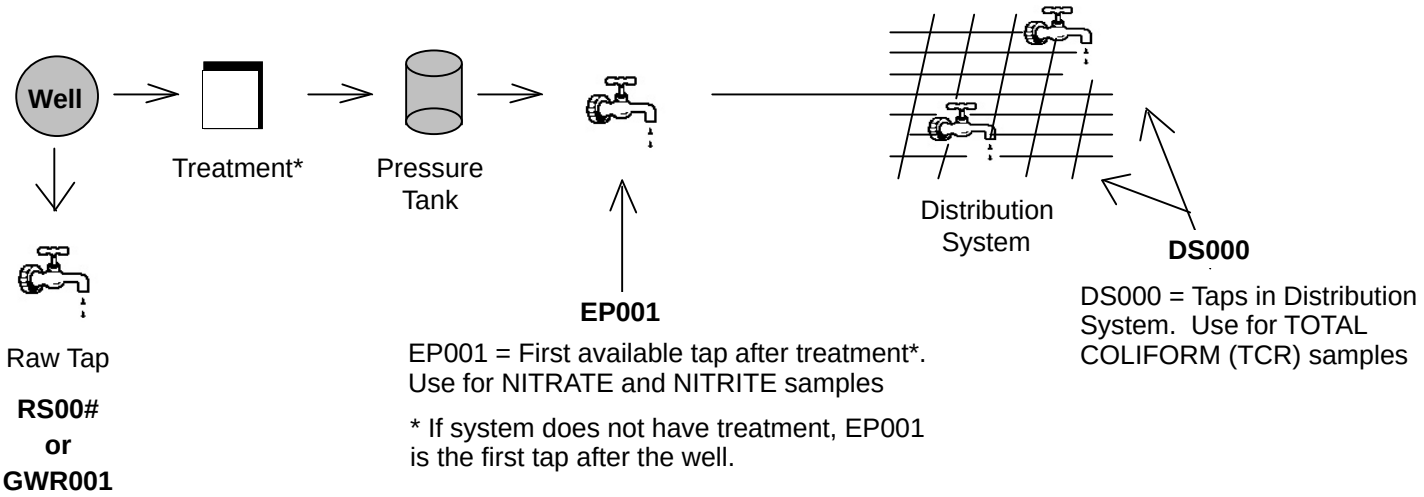
Chemicals	Monitoring Requirements
TOTAL COLIFORM (TCR) - 3100	1 Sample(s) Required between 4/1/2015 and 6/30/2015
	1 Sample(s) Required between 7/1/2015 and 9/30/2015

ENTRY POINT MONITORING SCHEDULE

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

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