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Rhema Business Services, Inc. 1344 Vickers Drive Tallahassee, FL 32303-3041

(850) 562-9886 (850) 562-9887 FAX

January 8, 1999

BECEIVED-FPSC 3 JAN -8 AN 9: 47 RECONDS AND REPORTING

Division of Records and Reporting Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, Florida 32399-0850

Re: Docket No. 981339-WS, Application of HIDDEN COVE, LTD. for Grandfather Water and Wastewater Certificates in Polk County, Florida

Gentlemen:

Enclosed are the original and five (5) copies of the Hidden Cove, Ltd. response to John D. Williams' letter of November 13, 1998, and the original and two (2) copies of the modified tariff sheets. Each item in that letter is addressed in the order it appeared.

1. Rate Authority. The Board of Commissioners of Polk County considered this utility exempt from its regulation, due to it being subject to the requirements of Chapter 723, Florida Statutes. Polk County, accordingly, did not authorize the current rates.

Hidden Cove put the current rate into effect on September 4, 1990. A copy of the portion of the current prospectus pertaining to the water and wastewater rate, and a copy of the lease for the park are enclosed. The rate reflected in the prospectus is that after implementation of the regulatory assessment fee pass-through rate adjustment. Management purged all earlier versions to assure that any prospectus issued is the current version.

2. Evidence of Ownership. A copy of the executed utility easement is enclosed.

<u>3.</u> Permit Information.

- a. Hidden Cove can not locate its water construction permit. The utility's current wastewater permit was issued on December 26, 1994.
- b. A copy of the current wastewater permit is enclosed.

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DOCUMENT NUMBER-DATE 00308 JAN-8 S FPSC-RECORDS/REPORTING Division of Records and Reporting January 8, 1999 Page 2

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- c. Copies of the monthly operating reports are enclosed.
- d. The utility is in the Highland Ridge Water Use Caution Area.
- 4. Tariff Address and Phone Number. Hidden Cove, Ltd. is managed by the Managing General Partner, which is responsible for the day-to-day management of the utility. The General Partner has a pool of employees available, which is in common with General Partners of the other utilities, all of which are located at the same address. This office is approximately twenty miles from the mobile home parks. The business and emergency telephone numbers are local calls for the utility's customers.
- 5. Tariff Rates. Hidden Cove is making application for grandfather certificates. The application for grandfather certificates is <u>not</u> the appropriate forum in which to modify its rate structure. The Commission can not fairly modify the rate structure without concurrently authorizing an increase in rates to offset the significant additional costs.
 - a. The lots are not individually metered. Hidden Cove respectfully declines to research the installation cost per meter and the time frame necessary to fully meter both mobile home parks, for reasons stated in part b.
 - b. Installation of water meters would impose a substantial financial hardship on the utility. With the current water and wastewater rate, the utility is clearly unable to finance the substantial cost of metering all connections at this time. In addition to the capital costs, a change to metered rates would necessarily impose significant additional operating costs: meter reading, additional bill processing costs, reprogramming of the billing program, handling of customer inquires concerning consumption, plus the associated supervision, administration and overhead costs.

A change to metered rates would require Hidden Cove to change its prospectus pursuant to Chapter 723, Florida Statutes. Amendment of the prospectus entails engaging attorneys to prepare and file the prospectus with the Bureau of Mobile Homes. In addition to the legal costs, Hidden Cove would have to pay a filing fee equal to ten dollars (\$10.00) per lot. Preparation, filing and processing the prospectus would require approximately three months. Hidden Cove would then have to give its customers ninety (90) days notice. Division of Records and Reporting January 8, 1999 Page 3

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The group which manages Hidden Cove would have to prepare a prospectus for each of ten (10) different mobile home parks. The expense of changing the prospectus for each of the ten mobile home parks would provide no benefit to the customers.

The Commission can not fairly impose metered rates without concurrently authorizing an increase in rates to offset these significant additional costs. The application for grandfather certificates is, accordingly, not the proper forum in which to change the rate structure.

- 6. Combined Rates. The fixed rate of \$15.00 per month is for water and wastewater service combined.
- 7. Cost of Service. Hidden Cove is making application for grandfather certificates. The application for grandfather certificate is <u>not</u> the appropriate forum in which to modify its rate structure. The Commission can not fairly require Hidden Cove to separate its water and wastewater charge without concurrently allowing it to recover the cost of separating the charge.

Separating the water and wastewater charge would require Hidden Cove to reprogram its customer billing program. It would also require Hidden Cove to change its prospectus pursuant to Chapter 723, Florida Statutes. Amendment of the prospectus entails engaging attorneys to prepare and file the prospectus with the Bureau of Mobile Homes. In addition to the legal costs, Hidden Cove would have to pay a filing fee equal to ten dollars (\$10.00) per lot. Preparation, filing and processing each prospectus would require approximately three months. Hidden Cove would then have to give its customers ninety (90) days notice. The entire process would, accordingly, take six months.

The group which manages Hidden Cove would have to prepare a prospectus for each of ten (10) different mobile home parks. The expense of changing the prospectus for each of the ten mobile home parks would provide no benefit to the customers.

The Commission can not fairly require Hidden Cove to separate its water and wastewater charge without concurrently allowing it to recover the costs of separating the charge. This application for grandfather certificates is, accordingly, not the proper forum in which to separate the water and wastewater charge. Division of Records and Reporting January 8, 1999 Page 4

8. Miscellaneous Tariff Corrections. Please see the enclosed, modified tariff sheets. In Water Tariff Rule 7.0, we have added the phrase, "without the prior written consent of the Utility", rather than deleting the paragraph.

Please direct any additional questions to me at 562-9886.

Sincerely,

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Norman F. Mears Senior Utility Consultant

Hand deliver Enclosures cc: Ray Moats

PROSPECTUS

HIDDEN COVE MOBILE HOME PARK

- 1. THIS PROSPECTUS (OFFERING CIRCULAR) CONTAINS IMPORTANT MATTERS TO BE CONSIDERED IN LEASING A MOBILE HOME LOT.
- 2. THE STATEMENTS CONTAINED HEREIN ARE ONLY SUMMARY IN NATURE. A PROSPECTIVE LESSEE SHOULD REFER TO ALL REFERENCES, ALL EXHIBITS HERETO, THE CONTRACT DOCUMENTS, AND SALES MATERIALS.
- 3. ORAL REPRESENTATIONS SHOULD NOT BE RELIED UPON AS CORRECTLY STATING THE REPRESENTATIONS OF THE PARK OWNER OR OPERATOR. REFER TO THIS PROSPECTUS (OFFERING CIRCULAR) AND ITS EXHIBITS FOR CORRECT REPRESENTATIONS.
- 4. UPON DELIVERY OF THIS PROSPECTUS TO A PROSPECTIVE LESSEE, THE RENTAL AGREEMENT IS VOIDABLE BY THE LESSEE FOR A PERIOD OF FIFTEEN (15) DAYS.

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maintenance and operation is A & M Business Properties, Inc., of 5015 South Florida Avenue, Post Office Box 5252, Lakeland, Florida 33803.

VL MOBILE HOME OWNER REQUIRED IMPROVEMENTS

Improvements, whether temporary or permanent, which are required to be installed by the mobile home owner as a condition of his occupancy in the park are: Brick skirting, attached utility shed, carport, concrete driveway, concrete patio, irrigation, uniform antenna, fully sodded lawn, and concrete steps, all of which are to be consistent with current improvements in the park. Each mobile home owner is required to maintain those improvements in good and clean condition. All additions or changes to the original manufactured home and its exterior aluminum and concrete package must have prior written approval from management (this is to maintain uniformity of the Community). No other improvements by those tenancies in existence as of June 4, 1984 are required.

The Park Owner does not maintain a mobile home owner's lawn, trees and shrubs, or premises in any manner. The Park will not be liable for damage to mobile home owner's mobile home or other property as a result of falling trees, limbs, or other debris. Mobile home owner will be subject to payment of the costs of lawn maintenance or tree and shrub trimming, and/or removal if necessary (which, in that event, would be included in the lot rental amount as an additional charge) and possible eviction if mobile home owner fails to maintain his premises within the standards set forth in the Park Rules and Regulations.

At any time, regardless of whether a mobile home is being sold or not, in order to maintain the quality of the park, the Park Owner may require removal from the park of any mobile home that is not or can not be maintained to meet the park's established standards. The "established standards" require that the lot must be clean and well landscaped and the exterior of the home must appear neat, clean, and free of rust, chipping paint, and similar conditions indicating poor maintenance.

VIL UTILITIES AND OTHER SERVICES

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Utilities, sewage and waste disposal, cable television, water supply, storm drainage, and the person or entity furnishing each will be provided as follows:

Water and Sewage:Water and sewage disposal are provided by the mobile home parkowner. So long as water and sewage are provided by or through the mobile home park, the minimum feeof \$15.71per month will be charged for usage of up to 5,000 gallons per month. The water andsewage usage are not currently individually metered. The park owner, at its discretion, may individuallymeter water and sewer usage. For every 1,000 gallons or portion thereof in excess of 5,000 gallons, therate shall be an additional \$1.05per month. In the event that a municipality, other governmentor agency thereof, or private utility company supplies water directly and sewage disposal to the homeowners, the home owners shall be responsible for and pay for monthly usage fees and other fees, includingany connection, impact or tap fees, all as established by such municipality or private utility company.Responsibility for sewage and water lines in the park up to the lot line only is the responsibility of thepark. The in-ground connection and the lines for water and sewage inside the mobile home owner's lotline are the mobile home owner's responsibility. The fee for water and sewage presently as provided bythe park owner is included within the lot rental amount but is not included in the base rent.

<u>Waste Disposal</u>: Waste disposal is provided by a separate waste disposal company, AAA Sanitation, and is the responsibility of the individual mobile home owner. The fee for such waste disposal is a matter of contract between the mobile home owner and the garbage disposal company (any

HIDDEN COVE MOBILE HOME PARK LEASE AGREEMENT

THIS LEASE made and entered into this _____ day of _____, 19___, by and between Hidden Cove, Ltd., known as Hidden Cove Mobile Home park, hereinafter called the "Community" and _____, hereinafter called the Owner-tenant.

WITNESSETH, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Ownertenant the following described property: Street: ______, Lot No.:

TO HAVE AND TO HOLD the same from the ______ day of ______, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of \$______ from the beginning of this Lease until the 31st day of December, 19______. Annual monthly base rental increases for the calendar years 19_____ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1967 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.

2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.

3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.

4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Owner-tenant so long as permitted by Chapter 723, Florida Statutes.

Exhibit E-2, Page 1 of 3

5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm Drainage is included in the lot rental amount and charged in accordance with Sections VII and VIII(J) of the Prospectus.

9. Other financial obligations of the Owner-tenant, not including user fees, are as follows:

Fees or Charges

Yard Maintenance (not charge fails to maintain yard)	ed unless owner	\$ _20.00 _ per cut
Water and Sewer excess	up to 5,000 gallons per 1,000 gal. over 5,000	\$ <u>15.71</u> \$ <u>1.05</u>
Tree Trimming/Removal, Debr (not charged unless Owner-ter to provide services himself)		<pre>\$ billed amount</pre>
Late Check Charge		\$ <u>1.50 per</u> day
Bad Check Charge		\$ _15.00
Extra Resident Fee		\$
Debris Removal	charged in accordance with So of the Prospectus	ection VIII(K)
Governmental Assessments, Fees, Surcharges, and and Charges	charged in accordance with Se of the Prospectus	ection VIII(J)

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The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

Exhibit E-2, Page 2 of 3

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

Community Representative

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Owner-tenant

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Exhibit E-2, Page 3 of 3

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Prepared by and Return to Peter A. McFarlane, Attorney 5015 South Florida Avenue Lakeland, Florida 33813

WATER AND WASTE WATER

UTILITY EASEMENT

KNOW ALL MEN BY THESE PRESENTS THAT the undersigned, MX Properties, Inc., a Florida corporation ("Grantor") for and in consideration of the sum of \$10.00 to it in hand paid by Hidden Cove Ltd., a Florida limited partnership ("Grantee"), receipt whereof is hereby acknowledged, does hereby grant and convey to Grantee, a perpetual non-exclusive easement to construct, reconstruct, maintain, repair and operate both a water treatment facility and a wastewater treatment facility, together with the distribution and collection system serving each, upon, under and across the following described lands of the Grantor located in Polk County Florida, to-wit:

That portion of the lands described in Exhibit "A" more particularly described as:

See Attached Exhibit "A"

AND to place, replace and maintain such pipes, lines, mains, force mains, pumps and related equipment on or under said land as may be necessary in the construction, maintenance and operation of said water and waste water utility systems, including the right to remove all trees, shrubs and bushes within the easement areas,

AND the right to go on, over and across the lands of the undersigned adjoining such easement areas for the purpose of access thereto and as may be necessary to construct, reconstruct, maintain, repair and operate said water and waste water utility systems, Grantee, agreeing to use reasonable care in exercise of such right so as not to unnecessarily disturb, damage or destroy any improvements, personal property, mobile homes or attachments, driveways, or shrubbery of the undersigned Grantor or their tenants located on such land.

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IN WITNESS WHEREOF, the undersigned Grantor has hereunto set its hand and seal this 151 day of October, 1998.

GRANTOR:

Witnesses:

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Print Name: . LOHITE GLORIA Print Name:

MX PROPERTIES, INC. a Florida corporation

STATE OF FLORIDA CALK

The foregoing instrument was acknowledged before me this 15T day of October, 1998, by Raymond L. Moats, President of MX Properties, Inc., who personally known to me or who has produced _ ____ as identification.

My Commission Ex

Signature JOYCE E. EVANS MY COMMISSION # CC 696771 Joyce E. Evans EXPIRES: December 28, 2001 DE SU Commission No. Fin. Notary Service & Bonding Co Print Name: NOTARY PUBLIC, STATE OF FLORIDA

EXHIBIT "A"

PARCEL 1: The West 660 feet of the NW 1/4 of the SW 1/4 of Section 31, Township 27 South, Range 27 East, Polk County, Florida.

PARCEL 2: Beginning at the SW corner of the SW 1/4 of Section 31, Township 27 South, Range 27 East, for a Point of Beginning; run thence East 1320 feet; thence North to the North boundary line of the South 1/2 of the SW 1/4; run thence Westerly along said North boundary of said South 1/2 of said SW 1/4 to the Westerly boundary line of said SW 1/4; run thence Southerly to the Point of Beginning.

TOGETHER WITH that certain easement for ingress and egress created by the two following Grants of Easement: Grant of Easement from Orange-Co of Florida, Inc. to Century Realty Funds, Inc., dated June 7, 1982, recorded June 15, 1982 in O.R. Book 2089, Page 485, Public Records of Polk County, Florida; and Grant of Easement by Stephen L. Richardville, a/k/a S.L. Richardville and Thomasine M. Richardville, his wife, to Century Realty Funds, Inc., dated May 27, 1982, recorded June 15, 1982 in O.R. Book 2089, page 487, Public Records of Polk County, Florida.



Department of Environmental Protection

Lawton Chiles Governor Southwest District 3804 Coconut Palm Drive Tampa, Florida 33619

Virginia B. Wetherell Secretary

November 21, 1997

Raymond Moats, Vice President MX Properties, Inc. P.O. Box 5252 Lakeland, FL 33807 DW Section Polk County

RE: Hidden Cove WWTP FDEP Permit Number DO53-252330 Facility ID FLA013107 Agricultural Use Plan Permit Revision

Dear Mr. Moats:

The Department is in receipt of your request (WAFR-PA No. FLA013107-001-DW3), to revise the above referenced facility's existing operation permit, originally issued on 12/26/94 and will expire on 10/30/99. The following conditions are hereby changed as follows:

<u>Condition</u>	<u>From</u>	Io
9.a	Delete current	See Below**

9.a** The domestic wastewater residuals shall be land applied only at the following site, as referenced below:

Site Name	Area (ac)	Latitude	Longitude	Section	Township	Range	County
O'Kelly	65	27°52'50"	81°44'00"	17	29S	26E	Poik

This permit modification, FLA013107-001-DW3, authorizing the above changes must be attached to your original permit and, together with any other preceding modification(s), becomes part of your permit,

Sincerely,

Michael Hickey. Water Facilities Administrator Southwest District

MH/ral

cc Michelle H. Duggan, FDEP Clyde Hill, FDEP Amy Watson, FDEP Steve Thompson, FDEP

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"Protect, Conserve and Manage Florida's Environment and Natural Resources"

Printed on recycled paper.



Environmental Protection

Lawton Chiles Governor Southwest District 3804 Coconut Palm Drive Tampa, Florida 33619

Virginia B. Wetherell Secretary

PERMITTEE: MX Properties, Inc. P.O. Box 5252 Lakeland, FL 33807

Expiration I County: Polk Lat/Long: 28 81 Moats Sec/Town/Ran Project: Hid

Attention: Mr. Raymond Moats Vice President Date of Issue: 12/26/94 Expiration Date: 10/30/99 County: Polk Lat/Long: 28° 05' 05"N 81° 39' 20"W Sec/Town/Range: 31/27S/27E Project: Hidden Cove WWTP Processor: S.G. Thompson

PERMIT/CERTIFICATION

GMS ID No: 4053P10047

Permit No: D053-252330

This permit is issued under the provisions of Chapter 403, Florida Statutes, and Florida Administrative Code Rule(s) 62-3, 62-4, 62-300, 62-500 and 62-600 Series. The above named permittee is hereby authorized to perform the work or operate the facility shown on the application and approved drawing(s), plans, and other documents, attached thereto or on file with the Department and made a part thereof and specifically described as follows:

Operation of a 0.020 MGD Type III extended aeration domestic wastewater treatment plant with chlorinated effluent to a dual percolation/evaporation system of 12,000 square feet total bottom area.

Location: S.R. 544 (Lucerne Park RD.), Polk County, FL

Replaces Permit No. D053-171379 Expired: 10/30/94

page 1 of 6

"Protect, Conserve and Manage Florida's Environment and Natural Resources"

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SPECIFIC CONDITIONS:

1. Drawings, plans, documents or specifications submitted by the permittee, not attached hereto, but retained on file at the Southwest District Office, are made a part hereof.

2. The zone of discharge boundary shall extend horizontally 100 feet from the site boundary or to the installation's property boundary, whichever is less, and vertically to the base of the shallow water table aquifer. (Rule 62-522.410, F.A.C.)

3. The water quality standards for Class G-II ground water shall not be exceeded at the boundary of the zone of discharge. (Rule 62-520.400, Rule 62-520.420, F.A.C.)

4. In accordance with Chapter 62-699, F.A.C., the required certified operator on site time is: A Class D or higher operator for 3 non-consecutive visits per week for 1 1/2 hours per week.

5. The discharge from the chlorine contact chamber shall be sampled in accordance with Chapter 62-601, F.A.C. and shall meet the following limitations:

	-	Min-	•	Туре	
Parameter	Unit	imun	n Maximum		Frequency
Permitted Capac.	ity				
(flow)	mgd	.000	0.020 annual	avg.	Daily,5/wk
pH	STD UN	6.00	8.50	grab	Daily,5/wk
CBOD5*& Total	mg/L	0	20 annual avg.	grab	Monthly
Suspended Solid	ls*		30 monthly avg.		
-			45 weekly avg.		
	•		60 any one sample		
Nitrate (as N)	mg/L	0		grab	Monthly
CL2	mg/L	0.5		grab	Daily,5/wk
Fecal coliform	#/100	0		grab	Monthly
			200 monthly avg.		
*Influent shall	be monit	cored	and reported monthl	У•	
[Rule 62-601.300)(1), F.A	A.C.]			
The results sha	ll be rep	ported	monthly on DEP For	m 62-60]	L.900(1).

6. The sludge shall be sampled after final treatment in accordance with Rule 62-640.700(1)(b) F.A.C. but prior to land application for the parameters listed below every 12 months. A copy of the analyses shall be submitted with the monthly operation report for the following parameters:

page 2 of 6

SPECIFIC CONDITIONS: (continued)

6. (continued):

ued):	Total Nitrogen - % dry weight Total Phosphorus - % dry weight Total Potassium - % dry weight Cadmium - mg/kg dry weight Copper - mg/kg dry weight Lead - mg/kg dry weight Nickel- mg/kg dry weight Zinc - mg/kg dry weight pH - standard units	
	Total Solids - %	

7. Direct discharge from the percolation/evaporation ponds to area surface waters is not allowed. Surface discharge shall be considered a violation of this permit and the permittee shall immediately report any such discharge to the S.W. District Office of the Department of Environmental Protection.

8. If historical or archaeological artifacts, such as Indian canoes, are discovered at any time within the project site, the permittee shall notify the DEP Southwest District office and the Bureau of Historic Preservation, Division of Archives, History and Records Management, R.A. Gray Building, Tallahassee, Florida 32301, telephone number (904) 487-2073.

9. The domestic wastewater residuals for this facility are classified as stabilization Class B.

a. The domestic wastewater treatment plant residuals for this facility shall be land applied only at the Waverly Groves property on Tyndell Camp Road, NE of Lake Wales in Polk County, Florida; (Latitude: 27° 59' 03", Longitude: 81° 35' 30") Section: 01, Township: 29S, and Range: 27E, with 2 acres used (as identified in the Agricultural Use Plan submitted with the application).

b. Annual update reports, summaries, and revised Agricultural Use Plans are due not later than one year from the issuance of the permit. The reports shall be submitted annually thereafter, and not later than this anniversary date to the Department.

page 3 of 6

Specific Conditions (# 9 continued)

c. The permittee shall comply with all provisions of Chapter 62-640, F.A.C. and shall report any non-compliance or changes from the approved site plan to the Department.

10. The permittee shall operate and maintain this evaporation/percolation pond system in strict accordance with Chapter 62-610, F.A.C. Hydraulic loading shall be uniformly distributed throughout the design bottom area such that the actual loading shall not exceed the design loading rate in any section of the pond bottom.

11. The permittee shall provide an approved flow measurement device on the domestic wastewater treatment plant to monitor the influent (ahead of any return flows) and/or effluent flow, as appropriate. The flow measurement device shall be calibrated at least annually, with evidence of calibration kept at the site of flow measurement, and submitted to the Department upon request.

12. The permittee shall provide a weatherproof location for an on/site log book to monitor the daily activities of the certified operator. This log book shall record sign in/out times of the certified operator, list any maintenance performed and contain the signature and certification number of the operator.

13. The permittee shall maintain all audible and visual alarm systems on the lift station(s) in operating condition at all times.

14. A reduced pressure zone backflow preventer shall be installed on any potable water supply to the treatment facility. No potable water outlet intended for human contact shall be located down-line of the backflow preventer. At least on annual check of the RPZ assembly by a certified technician is required. Certification documents should be kept at the plant and are subject to request for submittal by the Department.

As an alternative, the permittee may disconnect all potable water sources to the plant and install a pump in the chlorine contact chamber in order to use effluent for plant maintenance.

page 4 of 6

Specific Conditions:

15. The disinfection system shall be operated to maintain a minimum chlorine residual of 0.5 mg/L at the outfall from the chlorine contact chamber. A metering device for dosing chlorine to the effluent shall be utilized and the chlorine supply tank shall be inspected regularly to ensure proper operation.

16. Prior to sixty days before the expiration of this permit, the permittee shall apply for a renewal of the permit on forms and in a manner prescribed by the Department of Environmental Protection.

17. Daily checks of the plant shall be performed by the permittee, or supplier, or the designated representative five (5) days per week for all Class C and D plants pursuant to Rule 62-699.311(1), F.A.C.

18. The permittee shall ensure that the operation of this facility shall be as described in the application and supporting documents. Any request for change to this permit, shall be submitted in writing to the Domestic Wastewater Program Manager for review and clearance prior to implementation. Requests for changes of negligible impact to the environment and staff time will be reviewed by the Program Manager, cleared when appropriate and incorporated into this permit. Changes or modifications other than those described above will require submission of a completed application and appropriate processing fee as per Section 62-4.050, F.A.C.

19. In accordance with Rule 62-601.400(3), F.A.C., any laboratory test required by this permit shall be performed by a laboratory that has been certified by DHRS in accordance with Rule 10D41.100-113, F.A.C., to perform the test. On-site tests for dissolved oxygen, pH, and total chlorine residual shall be performed by a laboratory certified to test for dissolved oxygen, pH and total chlorine residual or under the direction of an operator certified in accordance with Chapter 61E12-41, F.A.C.

page 5 of 6

Specific Conditions:

20. In accordance with Rule 62-160.300(6), F.A.C., sample collection shall be performed by following the protocols outlined in "DEP Standard Operating Procedures for Laboratory Operations and Sample Collection Activities" (DEP-QA-001/92). Alternatively, sample collection may be performed by an organization which has an approved Comprehensive Quality Assurance Plan (CompQAP) on file with DEP. This CompQAP shall be approved for collection of samples from the required matrices and for the required tests.

21. The permittee shall be aware of and operate under the attached "General Permit Conditions #1 through #15". General Permit Conditions are binding upon the permittee and enforceable pursuant to Chapter 403 of the Florida Statutes.

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

Richard D. Garrity, Ph.D. Director of District Mapagement

page 6 of 6

FLORIDA			Department of mental Pro		RECEIVED NOV 14 1097
Monthly Operations: See Pa	ion Report nsecutive I age 4.	for Public Wa Public Water S	ter Systems ti Systems that	hat Use Groun Freat Their Wa	d Water and ter
GENERAL WATERS		ATER TREATMENT	PLANTINFORMATI	ON FOR THE MONT	HIYEAR OF
Water System Informatic • System Name: • <u>System Owner</u> Name: Address: City: • System Type: Commu • No. of Service Connect	CRF, Inc P.O. Box S Lakeland unity: a non-trans	252_ sient non-community	a non-community; a	PWS Identification N Telephone No.: <u>99</u> State: <u>F(</u> Zip Co I consecutive Served at End of Mo	(1) 647-1581 de: <u>33807-5252</u>
Water Treatment Plant li • Treatment Plant Name: Address: City:	Hidden (Lucenne k Winter New	lark Road	· ·	Telephone No.: 99	(1) 647-1581
Permitted Maximum Da Plant Category and Cla Lead/Chief Plant Open	iss per Rule 62-6		gpd		
Robert A:	Byrd	···Certificate Number···	Class (A, B, C, or D)	- Oay(s)/Shift	(s).Worked
Cther Certified Plant O Name			ecessary): * Class (a. 8: C. or D);-	: Day(s)/Shin	(s):Worked:
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				- -	
IL. STATEMENT BY L	EADICHIEFWA	TER TREATMENT P	LANT OPERATOR	FOR THE MONTHIVE	EAR OF

OCTOBER 1997

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my encwiesce and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

• • • -

- •records of amounts of chemicals used and chemical feed rates; and
- •if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them

available for review upon request 11/5/9 Å Signature and Date

Robert A. Burd, C7483 Name and Cartificate Number (please type or print)

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Page 1

Wonthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

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Hidde	: n	Cov	e

IL SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTHY EAR OF

ATTHEWT PLATA FOR THE MONTHWEAR OF O OT ABER

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1997

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant & free chlorine; combined chlorine (chloramine); chlorine dioxide

Summary of Daily Water Treatment Data for Month:

				Residual Cisinfectant in Distribution System			
Day of. the · Month	Plant in	Quantity of Finished Water Produced by Plant (gallons)	Concentration at Entry to Distribution System (mg/L)	Cowest Residuat. Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Samoling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency of Abnormal Operating Conditions
1		25,000	3,0	1.8			
2		/					
3		23,000	3,0	2.0		-]
4			1				
5		70.000)	}
<u>5</u>		39,000	2.0	15			
7		20 000	1 1 5				
3		30,000	2,5	1.5			
10		25,000	2.5	1.2	1		1
11				12]	}	1
12		4 27			<u></u>	<u> </u>	· · · ·
13		47,000	1.2	0.8		<u> </u>	1
14				1 013] 	1	1
15		29,000	1.0	0.5			1
:8	·····		1	}			1
17		25,000	15	0.8		I	
18							
19		· · · · · · · · · · · · · · · · · · ·				1	
20		35,000	1.5	6.8]	ļ
21		38,000	15	0.8	2	0,8	1
22		50,000	1.5	0.8	1 2	0,8	1
24		39,000	1.5	1,0	1	f	
25					<u>.</u>	· · · · · · · · · · · · · · · · · · ·	1
26		1]	
27		51,000	1.5	0,8			
28							<u> </u>
29		22,000	1.5	1.0		<u> </u>	<u> </u>
30		02 000	16	1 100]
31		23,900	1,6	0.8	<u> </u>	1	
	<u> </u>		<u> </u>				
	<u> 1////////////////////////////////////</u>						

Department of **Environmental Protection**

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•			-	hat Use Ground Water and Freat Their Water
NSTRUCTIONS: See Pa	ge 4.			
GENERALWATERS	ER 199	ATER TREATMENT	PLANT INFORMATI	ON FOR THE MONTH/YEAR OF
Water System Information	rinduc	n Cove	-	PWS Identification No.: 6534736
• <u>Svstem Owner</u> Name: Address: City:	CRF, I	NC		Telephone No.: (941) 647-1581
• System Type: M commu	nity- 🗆 non-trai	nsient non-community	a non-community; C	State: <u>F1</u> Zip Code: <u>33807-525</u>
Water Treatment Plant In	formation			Served at End of Month: 219
Name: Address:	Luceme	Park Road	<u> </u>	Telephone No.: (941) 647-158 [
City: • Permitted Maximum Da • Plant Category and Cla • Lead/Chief Plant Opera	ss per Rule 62	Plant: 45,000	gpd	State: <u>F1</u> Zip Code: <u>33811</u>
		· Certificate Number···	Class (A, B, C, or D).	Day(s)/Shift(s).Worked
Robert A.	Burd	007483	C	12
•Other Certified Plant Or			ecessary):	······································
Nате:-		Certificate Number	Class (a, 8:C, or 0)?	Day(s)/Shift(s):Worked:
-				
IL STATEMENT BY LL NOVEM			LANT OPERATOR F	FOR THE MONTH/YEAR OF

NOVEMBER 1997

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- •records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

12/2/97 Signature and Date

Robert A Byrd, DW007483C Name and Certificate Number (please type or print)

FLORID

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water System PWS Identification Number: _____ Treatment Plant Name: _____

6534736 Hidden Couc

IL SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTHINEAR OF NOVEM BER 1997

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: Xfree chlorine;

combined chlorine (chloramine); a chlorine dioxide

Residual Disinfectant in Distribution System Lowest Residual Reported : Lowest Residual Day of. Disinfectant ... Number of Instances Emergency or Lowest Residual. the · Concentration at Where Residual Disinfectant Abnormal Disinfectant (gallons) Disinfectant Monut Concentration at Operation Entry to Distribution Concentration at Operating · Measurements Taken Total Coliform System (mg/L) Conditions Remote Point at Total Coliform Sampling Points (mg/L)Samoling Points (mg/L) 1 2 .5 29.000 3 1.0 4 000 1.2 0.8 5 õ 29,000 2 7 0,8 8 9 15 43,000 1.0 10 11 1.2 12 42,000 2.0 13 1.2 1.8 14 28,000 15 16 17 44,000 2.0 1.5 18 000 2.5 1.5 19 29 20 1.2 45,000 2.5 21 22 23 00,000 2.2 1.0 24 2 1.0 25 2.0 000 1.2 33 26 27 000 .5 28 32 0.8 29 30 31 441.000 Total /////////// 2 ÷vg. 14700 V/// Wax. 22,500

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FLORIDA	Environmental F	rotection	
Monthly Operation Report	for Public Water System	s that lise Ground l	Natorand
· · · · · · · · · · · · · · · · · · ·	-		
for Consecutive	Public Water Systems that	at freat their water	
STRUCTIONS: See Page 4.			Contraction and
			and a state of the second s
GENERAL WATER SYSTEM AND W		ATION FOR THE MONTH/Y	FAR OF MAR
DECEMBER 149	7		
Jater System Information			Weiter State
System Name: Hidde	n Cove	PWS Identification No.:	6534736
System Owner			1. 16. 1 1 1
Name: (),<,-, ·	Inc	Telephone No.:	1)647-1581
Address: P.O. Bo	x 5252		· · · .]
City: Lakela	nd	State: F1 Zip Code:	33807-5254
City.			
System Type: K community; a non-tran	nsient non-community; a non-communi	ity: a consecutive	210
System Type: K community; non-tran No. of Service Connections at End of t	nsient non-community; □ non-communi Month: <u>120</u> Total Popula	ity; I consecutive ation Served at End of Month:	219
System Type: Community; I non-tran No. of Service Connections at End of N	nsient non-community; non-communi Month: 120 Total Popula	ity: a consecutive	2.19
System Type: Community; I non-tran No. of Service Connections at End of I Vater Treatment Plant Information Treatment Plant	Month: <u>120</u> Total Popula	ity;	· · · · · · · · · · · · · · · · · · ·
System Type: Community; I non-tran No. of Service Connections at End of N Vater Treatment Plant Information Treatment Plant Name: <u>Hidde</u>	Month: <u>120</u> Total Popula	ity: a consecutive	· · · · · · · · · · · · · · · · · · ·
System Type: Community: I non-tran No. of Service Connections at End of I Vater Treatment Plant Information Treatment Plant Name: Hidde Address: Lucern	Month: <u>120</u> Total Popula <u> N</u> COUC <u> E Park Rozd</u>	ity; a consecutive ation Served at End of Month: Telephone No.: <u>(941)</u>	647-1581
System Type: Community; I non-tran No. of Service Connections at End of N Vater Treatment Plant Information Treatment Plant Name: Hidde Address: Luce on City: Winter	Month: <u>120</u> Total Popula n COUC e Park Rozd	ity; a consecutive ation Served at End of Month: Telephone No.: <u>(941)</u>	· · · · · · · · · · · · · · · · · · ·
System Type: Community; I non-tran No. of Service Connections at End of N <u>Vater Treatment Plant Information</u> <u>Treatment Plant</u> Name: <u>Hidde</u> Address: <u>Luce non</u> City: <u>Uinter</u> Permitted Maximum Day Capacity of P	Month: <u>120</u> Total Popula <u>N</u> COUC <u>E Park Rozd</u> <u>hava</u> Mant: <u>45,000</u> gpd	ity; a consecutive ation Served at End of Month: Telephone No.: <u>(941)</u>	647-1581
System Type: Community: Don-tran No. of Service Connections at End of M <u>Vater Treatment Plant Information</u> <u>Treatment Plant</u> Name:	Month: <u>120</u> Total Popula <u>N</u> COUC <u>E Park Rozd</u> <u>hava</u> Mant: <u>45,000</u> gpd	ity; a consecutive ation Served at End of Month: Telephone No.: <u>(941)</u>	647-1581
System Type: Community: I non-tran No. of Service Connections at End of N <u>/ater Treatment Plant Information</u> <u>Treatment Plant</u> Name: <u>Hidde</u> Address: <u>Luce n</u> City: <u>Winter</u> Permitted Maximum Day Capacity of P Plant Category and Class per Rule 62- Lead/Chief Plant Operator.	Month: <u>120</u> Total Popula A COUC <u>E Park Rozd</u> hava Plant: <u>45,000</u> gpd -699.310(4), F.A.C.: <u>5C</u>	ity; I consecutive ation Served at End of Month: Telephone No.: (941) State: <u>F1</u> Zip Code:	0647-1581 338-17-
System Type: Community: Inon-tran No. of Service Connections at End of M <u>Ater Treatment Plant Information</u> <u>Treatment Plant</u> Name: <u>Hidde</u> Address: <u>Lucern</u> City: <u>Winter</u> Permitted Maximum Day Capacity of P Plant Category and Class per Rule 62- Lead/Chief Plant Operator. <u>Name</u>	Month: <u>120</u> Total Popula COUC COUC COUC Couc Class (A. B. C. or	ity; I consecutive ation Served at End of Month: Telephone No.: (941) State: <u>F1</u> Zip Code:	0647-1581 338-17-
System Type: Community: Inon-tran No. of Service Connections at End of Non- Name: <u>Hidde</u> Address: <u>Luce non</u> City: <u>Winter</u> Permitted Maximum Day Capacity of P Plant Category and Class per Rule 62- Lead/Chief Plant Operator. Name Robert A. Byrd	Month: <u>120</u> Total Popula A COUC C Park Rozd Mark Plant <u>45,000</u> gpd -699.310(4), F.A.C.: <u>5C</u> Class (A. B. C. or 007483 C	ity; I consecutive ation Served at End of Month: Telephone No.: (941) State: <u>F1</u> Zip Code:	0647-1581 338-17-
System Type: Community: Inon-tran No. of Service Connections at End of M <u>Atter Treatment Plant Information</u> <u>Treatment Plant</u> Name: <u>Hidde</u> Address: <u>Lucern</u> City: <u>Winter</u> Permitted Maximum Day Capacity of P Plant Category and Class per Rule 62- Lead/Chief Plant Operator. <u>Name</u> <u>Teobert A. Byrd</u> Other Certified Plant Operators (attach	Month: <u>120</u> Total Popula COUC C Park Rozd Marka Mant: <u>45,000</u> gpd -699.310(4), F.A.C.: <u>5C</u> Certificate Number Class (A. B. C. or. 007483 C 1 additional sheets if necessary):	ity; I consecutive ation Served at End of Month: Telephone No.: (941) State: f1 Zip Code: Day(s)/Shift(s).W	0647-1581 338-17
System Type: Community: Inon-tran No. of Service Connections at End of No. <u>Treatment Plant Information</u> <u>Treatment Plant</u> Name: <u>Hidde</u> Address: <u>Lucern</u> City: <u>Uinter</u> Permitted Maximum Day Capacity of P Plant Category and Class per Rule 62- Lead/Chief Plant Operator. <u>Name</u> <u>Tobert A. Byrd</u> Other Certified Plant Operators (attach	Month: <u>120</u> Total Popula A COUC C Park Rozd Mark Plant <u>45,000</u> gpd -699.310(4), F.A.C.: <u>5C</u> Class (A. B. C. or 007483 C	ity; I consecutive ation Served at End of Month: Telephone No.: (941) State: f1 Zip Code: Day(s)/Shift(s).W	0647-1581 338-17
System Type: Community: Inon-tran No. of Service Connections at End of No. <u>Treatment Plant Information</u> <u>Treatment Plant</u> Name: <u>Hidde</u> Address: <u>Lucern</u> City: <u>Uinter</u> Permitted Maximum Day Capacity of P Plant Category and Class per Rule 62- Lead/Chief Plant Operator. <u>Name</u> <u>Tobert A. Byrd</u> Other Certified Plant Operators (attach	Month: <u>120</u> Total Popula COUC C Park Rozd Marka Mant: <u>45,000</u> gpd -699.310(4), F.A.C.: <u>5C</u> Certificate Number Class (A. B. C. or. 007483 C 1 additional sheets if necessary):	ity; I consecutive ation Served at End of Month: Telephone No.: (941) State: f1 Zip Code: Day(s)/Shift(s).W	0647-1581 338-17
System Type: Community: Inon-tran No. of Service Connections at End of No. <u>Treatment Plant Information</u> <u>Treatment Plant</u> Name: <u>Hidde</u> Address: <u>Lucern</u> City: <u>Uinter</u> Permitted Maximum Day Capacity of P Plant Category and Class per Rule 62- Lead/Chief Plant Operator. <u>Name</u> <u>Tobert A. Byrd</u> Other Certified Plant Operators (attach	Month: <u>120</u> Total Popula COUC C Park Rozd Marka Mant: <u>45,000</u> gpd -699.310(4), F.A.C.: <u>5C</u> Certificate Number Class (A. B. C. or. 007483 C 1 additional sheets if necessary):	ity; I consecutive ation Served at End of Month: Telephone No.: (941) State: f1 Zip Code: Day(s)/Shift(s).W	0647-1581 338-17
System Type: Community: Inon-tran No. of Service Connections at End of No. <u>Atter Treatment Plant Information</u> <u>Treatment Plant</u> Name: <u>Hidde</u> Address: <u>Lucern</u> City: <u>Uinter</u> Permitted Maximum Day Capacity of P Plant Category and Class per Rule 62- Lead/Chief Plant Operator. <u>Name</u> <u>Tobert A. Byrd</u> Other Certified Plant Operators (attach	Month: <u>120</u> Total Popula COUC C Park Rozd Marka Mant: <u>45,000</u> gpd -699.310(4), F.A.C.: <u>5C</u> Certificate Number Class (A. B. C. or. 007483 C 1 additional sheets if necessary):	ity; I consecutive ation Served at End of Month: Telephone No.: (941) State: f1 Zip Code: Day(s)/Shift(s).W	0647-1581 338-17
System Type: Community: Inon-tran No. of Service Connections at End of M <u>Atter Treatment Plant Information</u> <u>Treatment Plant</u> Name: <u>Hidde</u> Address: <u>Lucern</u> City: <u>Winter</u> Permitted Maximum Day Capacity of P Plant Category and Class per Rule 62- Lead/Chief Plant Operator. <u>Name</u> <u>Teobert A. Byrd</u> Other Certified Plant Operators (attach	Month: <u>120</u> Total Popula COUC C Park Rozd Marka Mant: <u>45,000</u> gpd -699.310(4), F.A.C.: <u>5C</u> Certificate Number Class (A. B. C. or. 007483 C 1 additional sheets if necessary):	ity; I consecutive ation Served at End of Month: Telephone No.: (941) State: f1 Zip Code: Day(s)/Shift(s).W	0647-1581 338-17
System Type: Community: Inon-tran No. of Service Connections at End of M <u>Atter Treatment Plant Information</u> <u>Treatment Plant</u> Name: <u>Hidde</u> Address: <u>Lucern</u> City: <u>Winter</u> Permitted Maximum Day Capacity of P Plant Category and Class per Rule 62- Lead/Chief Plant Operator. <u>Name</u> <u>Teobert A. Byrd</u> Other Certified Plant Operators (attach	Month: <u>120</u> Total Popula COUC C Park Rozd Marka Mant: <u>45,000</u> gpd -699.310(4), F.A.C.: <u>5C</u> Certificate Number Class (A. B. C. or. 007483 C 1 additional sheets if necessary):	ity; I consecutive ation Served at End of Month: Telephone No.: (941) State: f1 Zip Code: Day(s)/Shift(s).W	0647-1581 338-17
System Type: Community: Inon-tran No. of Service Connections at End of No. <u>Atter Treatment Plant Information</u> <u>Treatment Plant</u> Name: <u>Hidde</u> Address: <u>Lucern</u> City: <u>Winter</u> Permitted Maximum Day Capacity of P Plant Category and Class per Rule 62- Lead/Chief Plant Operator. <u>Name</u> <u>Trobert A. Byrd</u> Other Certified Plant Operators (attach	Month: <u>120</u> Total Popula COUC C Park Rozd Marka Mant: <u>45,000</u> gpd -699.310(4), F.A.C.: <u>5C</u> Certificate Number Class (A. B. C. or. 007483 C 1 additional sheets if necessary):	ity; I consecutive ation Served at End of Month: Telephone No.: (941) State: f1 Zip Code: Day(s)/Shift(s).W	0647-1581 338-11- Vorked

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

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- •if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review uporyrequest.

01/7/98

Signature and Date

Pour A Burd, DW007483C Name and Certificate Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water System PWS Identification Number: _ Treatment Plant Name: _

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6534736 COUL dden

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IIIS SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTHWEAR OF DECEMBER 1997

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: A free chlorine; Combined chlorine (chloramine): C chlorine dioxide

Summary of Daily Water Treatment Data for Month:

				Residual	Disin(ectant in: Distributio	in System	Reported	
lay of. the donth	Plant in.	Cuantity of Finished Water	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Lowest Residual. Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Samoling Points	Lowest Residual Oisinlectant Concentration at Total Coliform Sampling Points (mg/L)	Emergency or Abnormal Operating - Conditions	
	! 	59,000	2.0	1-0				
1	1					l		1.1.1.1
2	! [20,000	1.8	1.0		<u> </u>		
4	!					<u> </u>		
	1	33,000	2.0	1.2		l	1	
5	1			1]	
5		1						
7	<u></u>	27,000	2.0	1.0		1		
8 9		all		1	}		·*	
10		(8,000	7.0	1.2		1	1	
	1	10,0	1		1	1		
11	1	19,000	2.0	1.0	1	1		
	· · · ·	1 1/		}	· ·) i
13			1	<u></u>		l .		٦.,
14		20 000	2.0	1.0		1	1 .	1
15	<u> </u>	38,000	1 2.0			- <u> </u>	1	٦.
តេ	<u></u>	27 28-0		6.8	2	1 6.8		1
17		22,000	(.8	10.0			1	7
18			20	1.0			1	1
19	<u> </u>	22,000	2.0	1.0	1		1	7
20					1			1
21		22 -12	2.0	1.2	<u>_</u>			<u> </u>
		32,000	2.0		<u></u>			
23		21,000	1.8	1.0	1	1		
		1 21,000			1		1	
25		24,000	(.5	0.8				_
26							1	-
27	l			1		1	1	`
28		32,000	1.5	0.8				
29				}				
30		24,000	2.0	1.2			1	
31		and the second se	<u> </u>	and the second	1/2 2	\$1111111111	///////////////////////////////////////	1/.
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· vc	1. <i>[]////////////////////////////////////</i>		<u></u>				II.SIIIIIIIII	11

Departmer	nt of
Environmental	Protection

Monthly Operation Report for Public Water System	
for Consecutive Public Water Systems t	
NSTRUCTIONS: See Page 4.	•
GENERAL WATER SYSTEM AND WATER TREATMENT PLANTINFOL	
JANUAM 1998	
Mater System Information	PWS Identification No.: 6534736
System Name: Hidden Couc	
System Name: IVIG CONCOUNT System Owner ORF, INC Name: P.O. Hon S25C Address: P.O. Hon S25C City: LAMMON	Telephone No.: <u>(941)647-1581</u>
Address: PON BOD SQL	
City:	State: <u>F1</u> Zip Code: <u>33807-52</u>
• System Type: 94 community; a non-transient non-community; a non-commu- • No. of Service Connections at End of Month: <u>120</u> Total Pop	unity, a consecutive
Vater Treatment Plant Information	
Name: HIdden Cose	Telephone No.: (941)647-1581
Address: Lucenne Pron Roof	
City: Winter howe	State: PL Zip Code: 338//
Permitted Maximum Day Capacity of Plant:45,000 gpd	
Plant Category and Class per Rule 62-699.310(4), F.A.C.:	·
Lead/Chief Plant Operator.	
Class (A, B, C	
Robert A Byrd 007483 C	/3
Other Certified Plant Operators (attach additional sheets if necessary):	
Namas - Cartificate Number - Class (a, 8: C.	or D)

I, the undersigned lead/onlef operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

•records of amounts of chemicals used and chemical feed rates; and

•if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

13/98

Signature and Date

NOTICE

FLORIDA

Rohest A Byrd, Dervor 483C Name and Certificate Number (please type or print)

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nmry Ivstei	Operation ms that Tr	n Report for Public W eat Their Water	ater Systems tha	t Use Ground V	Yater and for Cons	ecutive Public	Water
tem	PWS Ident	ification Number:	6534	1736			
atme	nt Plant Na	ame:	Hidden	~ Con			
		FOUL ANALES IS					
		Service and the Contract of the service of the serv			HIT JAN	um 1998	
COLL		Oisinfectant Maintaineo rine (chloramine); ⊂ chl Water Treatment Data	CARE digxide	stem Served by	Plant: 🗙 free chlori	no;	1.
. 4			Lowest Residual	Residual	Disinfectant in Distributio	on System	
lhe lontr	Plant in.	Quantity of Finished Water Produced by Plant	Disinfectant, Concentration: at Entry to Distribution System (mg/L)	Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliforn Samoling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported - Emergency or Abnormal Operating - Conditions
<u> </u>		0.02 (2)(2)(2)					
2 J		27,000	2.8				
4				1			
5		44,000	3.0	1.8			
ŝ	1. A						
7		25,000	3.0	2.0			
3		28,000	3.0	2.0			
10	1 A 1.4			<i>d</i> . <i>U</i>			
11							
12		57,000	2.5	1.8			· · · ·
13		24					at an
14		31,000	2.4	1.5			
:6		33,000	2.5	1.8			
17			<i>F</i> . <i>J</i>	7.8			
18							
19	$\sum_{i=1}^{n} i_{i} ^{2} = \sum_{i=1}^{n} i_{$	41,000 1	3.0	2.0			
20 21		19 ann	~~~~	()			
22		29,000	2.5	1.8			
23		34,000	2.4	1.5			
24	~	/					
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Nater System Informa	Hidden	River			1524731
System Name:	MIGOGI			_ PWS Identification No.	<u></u>
 <u>System Owner</u> Name: 	CRF, I	NC.		Telephone No.: (94)) 647-1581
Address:	P.D. B	NC. 00 5252			
City:	LAREAN			_ State: Fr Zip Code	e: 33807-5252
• System Type: A com • No. of Service Conn	imunity; a non-tra	Insient non-community;	D non-community	; I consecutive on Served at End of Mont	119
Nater Treatment Plan	it Information				
• <u>Treatment Plant</u> Name:	Hidde	n Cave		Telephone No.: (94)	647-1581
Address:	LUCON	ne PARK Roa	わ		· · · · · · · · · · · · · · · · · · ·
City:	WINTER	Horin		_ State: FL Zip Cod	e: <u>33877</u>
Permitted Maximum Plant Category and (Day Capacity of	Plant: $45,000$	gpd		and a second
 Lead/Chief Plant Op 		-033.310(4), P.A.C	10		
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Other Certified Plant	Operators (attac	h additional sheets if ne	ecessary):		
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I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

•records of amounts of chemicals used and chemical feed rates; and

•if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

3/10/98

Signature and Date

byrd, DW007483C -Name and Certificate Number (please type or print)

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ystem R	PWS Identification Number	6534730				• • • • •	:
reatmer	nt Plant Name:	Hidden C	0.02				-
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	Residual Disinfectant Maintained			. /			1
⊇ com)	ained chlorine (chloramine); 🗆 chl	orine dioxide	stem derved by		10,		
<u>3umma</u>	irv of Oaily Water Treatment Data	for Month:	1			مرو که در او مراجع در مهرور د	ada a bila a g 1
			Residual	Disinfectant in Distributio	on System		· · ·
Day of.	· Hours ···· Quantity of Finished Water	Lowest Residual		Number of Instances	Lowest Residual	Reported Emergency or	
the	Plant in Produced by Plant	Concentration at	Lowest Residual. Disinfectant	· Where Residual	Disinfectant	Abnormal	Haran Marina An Angelan
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	tidolen Cove		PWS Identification No.: _	65 34 736	2 ₁₂₁ 1
• <u>Svstem Owner</u> Name: Address:	1, R.F. P.D. Box 5252				
City: • System Type: 🗴 community; 🗆 • No. of Service Connections at		ty; □ non-community; □ Total Population	State: <u>F</u> Zip Code: consecutive Served at End of Month:		· · · · · · · · · · · · · · · · · · ·
Water Treatment Plant Informat • <u>Treatment Plant</u> Name: Address:	tion tidden Cove ucenne Pork Roz		Telephone No.: (941)	اسه و تنسخه ی اداران ه ادمانی از ۱۰ 1	
City: • Permitted Maximum Day Capa • Plant Category and Class per	Winterhaven acity of Plant: 45,000	2gpd	State: <u>F1</u> Zip Code:	33811	
Lead/Chier Plant Operator: Nama	··· Certificate Number.	·· Class (A, B, C, or D):	Day(s)/Shin(s).W	locked	
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I. STATEMENT BY LEADICHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF MARCH 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- •records of amounts of chemicals used and chemical feed rates; and
- •if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them

available for review upon request. /୯ନ୍ନ

Signature and Date

FLORID

Name and Certificate Number (please type or print)

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HEREROP CONTENT

UL SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF MARCH 1998

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant, Afree chlorine; Summary of Daily Water Trealment Data for Month

				Residual	Disinfectant in Distributi	on System	a a antiquitation a]
Day of. Ihe Jonitr	Plant in ~y	Quantity of Finished Water	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Lowest Residual. Disinfectant Concentration at Remote Point (mg/L)	' Number of Instances Where Residual Disinfectant Measurements Taken at Total Collorm Samoling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions	
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III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTHIVEAR OF APLIC 1998

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: I free chlorine; Combined chlorine (chloramine); C chlorine dioxide

			: Lowest Residual	Residual	Oisinlectant in Oistributi	on System		
ay of. Inc onUtr	Plant in	Quantity of Finished Water	Disinfectant Concentration at Entry to Distribution System (mg/L)	Lowest Residual. Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Totat Coliform Samoling Points	Lowest Residual Disinfectant Concentration at Total Colliform Sampling Points (mg/L)	Reported Emergency of Abnormal Operating Conditions	
1	•	40,000	3.0	2.0				
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9)			e e de	
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Vater System Information System Name:			PWS Identifi	cation No.: 65	34736	
Name: <u>C.R.F</u>	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		Telephone N	o.: <u>(941) 64</u>	<u> 1-1581</u>	• • • • • • • • • • • •
			State: F1	Zip Code: 3	3807	•
System Type: Community; a non-training of Service Connections at End of	ansient non-community f Month: 12 0	; o non-community; Total Population	□ consecutive 1 Served at E	nd of Month: 2	19	
Vater Treatment Plant Information	<u></u>					1
Treatment Plant	2				مر میں اور اور میں میں در	
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Name: Hode Address: Luce	re Park Rood			io.: <u>(941) 64</u> Zip Code: 3		olas Lintense serves Lintense serves Lintense serves
Name: Address: LoceA City: City: Cit	ne Park Rood Neum Plant 45,000	gpd		Io.: <u>(941) 64</u> Zip Code: <u>3</u>		
Name: Address: City: Permitted Maximum Day Capacity of Plant Category and Class per Rule 6	ne Park Rood Neum Plant 45,000	gpd				
Name: Address: City: Permitted Maximum Day Capacity of Plant Category and Class per Rule 6	ne Park Rood Neum Plant 45,000	gpd	State: PL		3311	
Name: Address: City: Permitted Maximum Day Capacity of Plant Category and Class per Rule 6 Lead/Chief Plant Operator: Namo Rohest A. Burd	№ №	gpd 5 C Class (A, B, C, or D):.	State: PL	_ Zip Code: <u>3</u>	3311	
Name: Address: City: Permitted Maximum Day Capacity of Plant Category and Class per Rule 6 Lead/Chief Plant Operator: Namo Rohest A. Byrd Other Certified Plant Operators (attac	Net Plant: 45,000 Plant: 45,000 2-699.310(4), F.A.C.:	gpd 5 Class (A. B. C. or D):. Class (A. B. C. or D):.	State: P1	_ Zip Code: <u>3</u>	3311	
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II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF May 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my snowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

•records of amounts of chemicals used and chemical feed rates; and

• if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them?

available for request. G CZ Signature and Date

0EP Form 62-555,900(3) Nective December 10, 1995

Kohert 11 Byrd, DW 507493C Name and Certificate Number (please type or pnnt)

Page 1

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ystem.	s that Tre	eat Their Water	-				•••	AL AL
		fication Number	6534	100			e en la manie and	-
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ionitr.	Operation		Entry to Distribution	Concentration at	Disinfectant Measurements Taken	Concentration at Total Coliform	Operating • Conditions	1 1 2 3 4
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Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground W	later and
for Consecutive Public Water Systems that Treat Their Water	
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ISTRUCTIONS: See Page 4.	. •

	E 1998	ATER TREATMENT.	PLANT INFORMATI	on for the m	DNTEINEA N	ROF	 .!
Nater System Infom • System Name:		Core		PWS Identification	on No.: <u>6</u>	534736	
 <u>Svstem Owner</u> Name: Address: 		5252		Telephone No.:	-	3	
City:	LAKON)			State: F1 Zi	p Code:	33807	
• System Type: Co	mmunity;	sient non-community onth: <u>126</u>	; a non-community; a Total Population	I consecutive Served at End o	f Month: <u>o</u>	2/9	-
Nater Treatment Pla	ant Information						يونيون موجوع چين
<u>Treatment Plant</u> Name: Address:	Hodden Lucarre P	will Road		Telephone No.:			
Citv	istister no	17 L		State: PI Z	p Code: _?	33.871	',
·Permitted Maximur	m Day Capacity of Pl	ant: 45,000	gpd				
 Plant Category and 	d Class per Rule 62-6	599.310(4), F_A.C.: _	50			————————————————————————————————————	ut. N
 Lead/Chief Plant C 	Operator:					· · · · ·	
· N	lamo ",	··Certificate Number··	Class (A, B, C, or D).	Day(s)	/Shift(s).Work	.cd	1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990
	- Byrd	007483	C		3		
 Other Certified Pla 	nt Oderators (attach	additional sheets if n	ecessary):			a second and a	
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IN STATEMENTEY LEADICHIER WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my snowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited he plant during the month indicated above:

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• if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them

available for review upon request. 'G8 Signature and Date

1,1007483

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Name and Certificate Number (please type or print)

0EP Form 62-555,900(3) Mective December 10, 1993

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be of	Residual	Disinfectant Maintained	t in Distribution Sy	stem Served by	Plant: A free chlori	ne;	ية والمر فية مسالي من المراجع	
		rine (chloramine);						
				Besidual	Disinfectant in: Distributio	n System		
	•		: Lowest Residual		•••		Reported	aja ja se se se Provinsione se
ny of. he		Quantity of Finished Water	Disinfectant Concentration at	Lowest Residual.	Number of Instances Where Residual	Lowest Residual Disinfectant	Emergency or	
	Operation	(gallons)	Entry to Oistnbutton	Disinfectant Concentration at	Oisinlectant	Concentration at	Operating · ·	
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FLORIDA	Department of Environmental Protection	
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	port for Public Water Systems that Use Ground Wa tive Public Water Systems that Treat Their Water	ater and
NSTRUCTIONS: See Page 4.		
	ND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEA	205/33
Vater System Information		10000000000000000000000000000000000000

Water System Information	n Couc		DIVIC Litrati	cation No.: 6534	721
•)•••••	1 4000		PVVS Idenuii	Callon No.: 6004	00
• System Owner	,		TalashasaN	10.: (941) 647-15	781
Name: C. K. F.	x 5252		тејерполе м		<u> </u>
	<u>x J W Z</u>		<u> </u>	7:01.2200	
City: LAKEL				Zip Code: 3380	
 System Type: Community; a non-tr No. of Service Connections at End o 		Total Population	Served at Er	nd of Month: 219	1
Water Treatment Plant Information					
• <u>Treatment Plant</u> Name: <u>Hidde</u> Address: <u>Lucerne</u>	Cove Part Part		Telephone N	io.: (94) 647-1	581
City: Liliote	-harra		State: H	Zip Code: 338/	7
City: <u>Winte</u> • Permitted Maximum Day Capacity of	Plant: 45,000	gpd	0.a.c. <u>-; c</u>	_ 20 0000. <u></u>	-
•Plant Category and Class per Rule 6	2-699.310(4), F.A.C.:				
•Lead/Chief Plant Operator.				······································	
Namo	··· Certificate Number	Class (A. B. C. or.O).	··· 0.	ay(s)/Shifl(s).Worked	
Robert & Byrd		C		14	
•Other Certified Plant Oderators (attac	ch additional sheets if n	ecessary):			
Namo	Cartificate Number		i O:	ay(s)/Shiil(s):Worked:	•
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ישוובויות ביצואביוווריווביוויידי ATRIEATIVIENT PLANT OPERATOR FOR THE MONTHIVE 1064 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my inculedge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

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Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available/for review upon request.

12/98 Signature and Date

Kabert A. Byrd, DW087483C Name and Cartificate Number (please type or print)

INSTRUCT

Page 1

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water	1521221	
System PWS Identification Number:	6534736	
Treatment Plant Name:	Hidden Cove	

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• Type of Residual Disinfectant Maintained in Distribution System Served by Plant; Cfree chlorine; C combined chlorine (chloramine); C chlorine dioxide • Summary of Daily Water Treatment Data for Month:

				Residual	Residual Disinfectant in Distribution System		
Day of. the Month	Plant in	Quantity of Finished Water	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Lowest Residual. Disin(ectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliforn Samoling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
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Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

I GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFOR	RWATION FOR THE MONTH YEAR OF
AUGUST 1998	
Water System Information	1
• System Name: HTIDDEN COVE	PWS Identification No.: 6534736
Name: <u>C. R.F.</u>	Telephone No.: (941)647-1581
Name: C. R.F. Address: P.O. Kox 5252	
City: LAKECAND	State: FC Zip Code: 33807
• System Type: K community; a non-transient non-community; a non-commu	unity; I consecutive
•No. of Service Connections at End of Month: 120 Total Population	ulation Served at End of Month: 279
Water Treatment Plant Information	
• Treatment Plant	law) was sou
Address: LUCEDNE DALK DAAD	Telephone No.: (941) 647-1581
Name: HIDDEN COUE Address: LUCERNE PALK ROAD City: WINTER HAVEN	State: <u>12</u> Zip Code: 33811
Permitted Maximum Day Capacity of Plant: <u>45,000</u> gpd	Otale: <u></u> _p code: <u></u>
Plant Category and Class per Rule 62-699.310(4), F.A.C.: 5C	
Lead/Chief Plant Operator:	······
Name Certificate Number." Class (A. B. C.	
Kobert A Byrd 007483 C	13
• Other Certified Plant Operators (attach additional sheets if necessary):	
Name	or D) () () () Day(s)/Shiil(s): Worked:

AUGUST 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my nowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

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•if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them review upon reguest. available for

6198 Signature and Date

Robert A: Byrd, DW107483C Name and Cartificate Number (please type or print)

hönthly Operation Report for Public Water Systems Usat Use Ground Water and for Consecutive Public Water.

and nearth	ieatment Plant Name:
982 7859	Systems that Treat Their Water System PWS Identification Number

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• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: 🗶 free chlorine; ב combined chlorine (chloramine); ם chlorine dioxide • Summary of Daily Water Treatment Data for Month;

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Reported Emergency or Operating Conditions	רסאיפגן הפגוטעזן סוביהופכנגמון סוביהופכנגמון סוגםן בסוונסויה דסנגםן בסוונסייה מיתקונה איני (שקוב)	י אטמוזטפרסו ווזגנאתכבג אוזרכים אליכי איז איז סוגותוככים א אוכמגערכית דמאבת אורמגערכים איז איז אורמגעריי אורמגערי אורמגעריי אורמגעריי אורמגעריי אורמגערי אורמגעריי אורמגעריי אורמגעריי אורמגעריי אורמגעריי אורמגעריי אורמגעריי אורמגעריי אורמגעריי אורמגעריי אורמגעריי אורמגעריי אורמגעריי אורמגעריי אורמגעריי אורמגעריי איי	ζονισεί Residual. Disinfectant Concentration at Remote Point Remote Point	בערכי המבוחטא במרץ ום סיביחטרוסת סורכיועביוסטי אנ סובוחוכבניוטרווסת סובוחוכבניוטרווסת סובוחוכבניוטרו	uantity of Finished Water اعتدا مراجع می Plant (gallons)	ร่างก่านธุญ	. τηυ . σι 'jo λ
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Department of Environmental Protection

	ive Public Water 3	systems that I	Freat Their Water
	· · · ·		
TRUCTIONS: See Page 4.			
ENERAL WATER SYSTEM AN	DWATER TREATMENT	PLANFINFORMATI	ON FOR THE MONTHIVEAR OF
SEPTIMAIN 199	8		
er System Information			
stem Name: Hibs	DW COUS		PWS Identification No.: 65 34 736
dem Owner			
ame: <u>C.2</u>	F. 100 5252		Telephone No. (941)647-1581
idress: P.o	mp 5252		
ty: Unit	·UN		State: <u>F</u> Zip Code: <u>33807</u>
stem Type: Community; a nor	- (ransient non-community;	, a non-community, a	Served at End of Month: 219
er Treatment Plant Information			• •
eatment Plant	W WUUS		Telephone No.: (941)647 - 158
anc	LANS AARA RUD		Telephone No.
	Achdy		State: R Zip Code: 33 Y H
emitted Maximum Day Capacity		gpd	etate. <u></u>
ant Category and Class per Rule	≥ 62-699.310(4), F.A.C.:	80	
ad/Chief Plant Operator.			
Name	Certificate Number	Class (A, 8, C, or 0)	- Day(s)/Shift(s).Worked -
Robert As Bynd	002183		/3
her Certified Plant Operators (al			ha π
Namo	Caruficate Number	" Class (a. 8: C. or D)	Day(s)/Shiil(s):Worked:
			n e in the second s
	÷	and the second	
			and a second second Second second
	the second s	••••	
· · · · · · · · · · · · · · · · · · ·			
		<u> </u>	and the second secon Second second

SEPTIMEN 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following accilication operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the olant during the month indicated above:

records of amounts of chemicals used and chemical feed rates; and
if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them

available for review upon request. 10/11/98

Signature and Date

opent A round , DIN007433C

Name and Certificate Number (please type or print)

Monthly Operation Report for Public	Water Systems that Use Ground Water and for Consecutive Public	Water
Systems that Treat Their Water	1	

Systems that Treat Their Water	1/-
System PWS Identification Number	653
Treatment Plant Name:	17102

54736 000

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والمرد وورد وا

III-SEUMMARY OF DAILY AWATER TREATMENT DATA FOR THE WONTH WEAR OF SCATEMAR 1998

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant of free chlorine; combined chlorine (chloramine); O chlorine dioxide
 Summary of Daily Water Treatment Data for Month:

en um kesjonemi

				Residual	Residual Disinfectant in Distribution System								
Day of the Month	Hours Plant in Operation	Quantity of Finished Water	Lowest Residual Disinfectant. Concentration at Entry to Distribution System (mg/L)	Lowest Residual: Disinfectant Concentration at Remote Paint (mg/L)	Oisinfectant Disinfectant Measurements Taken at Total Coliforn Samoling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions						
1	· ·		¢		2	1.0							
2		34,000	1.2	6.8			<u> </u>						
3						1	<u> </u>						
4		19,000	6.8	1.2			•						
5		·					3	•					
ô													
7		42,000	2.0	1.4									
3		20.000			1			٢٠					
9		22,000	1.8	1.5	 	<u> </u>	an a						
10	<u> </u>	2/ 1) 22	7 1				• •	n •"					
11		21,000	2.1	1.4	/		•						
13				l	1								
14		81,000	2.0	1.2		1	1						
15	<u> </u>	01,000	2.0	1.6		1	, 1						
16		24,000	1.8	1.2	1		1						
17	1	27/00		1.0	1	}	<u> </u>						
18	 	25,000	2.0	1.4]	1	1						
19	1		2.0	1-1		1	1						
20					<u> </u>	<u>+</u>	1						
21		32,000	2.2	1.6	1	1	1						
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23	-1	24,000	2-0	1.4									
24						1		a sector a t					
25		24,000	2.0	1.2			1						
26					· · · · · · · · · · · · · · · · · · ·]	!) di 1					
27						}	1						
25		38,000	1.8	1.0	<u>.</u>] ·					
29	1	 				1							
30		31,000	1.5	1.0	<u> </u>] 1					
31		<i></i>]	<u> </u>	1	·		1 .					
	¥//////////	387,000		<u> </u>	<u>z</u> .	{////////////////////////////////////		í					
	9////////												
	<u> </u>				<i></i>								

	July 1, 1991
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Part II - General Information

(i) Month OCTOBER Year 1997	
(2) Flant's DER Identification Number 4053P1004	<u>77</u>
(J) Flant Name Hidden Cove	
(4) Plant Address Lucerne Park Road	
5 civWinterhoven	
(6) County Polk	
71 Phone Number (941)647-1581	
(8) Permit Number <u>DO-53-252330</u>	
(9) Plant Type <u>III-C</u>	
(10) Test Site Identification Number NA	
(11) Fecal Coliform Sample Method	
X Membrane Filter 🗌 Most Probable Number	
(12) Type of Effluent Disposal or Reclaimed Water Reuse	<u></u>
Evaporation Pond	
(13) Limited Wet Weather Discharge Activated	
🗌 Yes 🛛 No 🗌 Not Applicable	
(14) Cumulative Days of Wet Weather Discharge NA	
(15) Flant Staffing	
Day Shift Operator Class Cart. No. 008	544
Evening Shift Operator Class Cert. No	
Night Shift Operator Glass Cart. No.	
Lead Operator Poly And C854	<u>4</u> Na
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Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mçd	050053	.007
(17) Permitted capacity	rrgd	-	,020
(18) Three-month average daily flow	mgd		,006
(19) Percent of permitted capacity	%		30%
(20) C2005 Efiluent .	mg/L	080082	1.1
(21) C3005 Effluent	lbs'day		NA
(22): TSS Effluent	mg/L	900201	1.6
(23) TSS Effluent	lts/day	<u> </u>	NA
(24) Minimum pH		-	7,1
(25) Maximum cH			7,2
(25) Total N	mg/L	000500	NA
(27) TKN	mç/L	000625	NA
(28) Ammonia (NH3 · N)	mg/L	000610	NA
(29) Nitrate	mg/L	071850	.01
(30) Total Phosphorus	mg/L	000665	NA
(31) Minimum Chlonne Residual	mg/L		0.8
(32) Maximum Chlonne Residual	mg/L	-	4.0
(33). Other Efluert Parameters	. 1		NA
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	(First to the preside
200-C	2007 No.
	July 1. 1991
1.44_	Comesoc Wastewater Treatment Plans Mominiv Coerabing Report
Form	Oomesoc Waster Weatment Plan

October

1997

Domestic Wastewater Treatment Plant Monthly Operating Report

34) •															Month	00	100	er	. Year	19.	21
Day of the Month	Flow (mgd)	Chlorine Residual alter Contact	Chlorine Residual alter Dechlorination	CBODs Inliuent (mg/L)	ISS Influent (mg/L)	CBODs Elluent (mg/L)	TSS Elltrient (mg/L)	pH Elluent	TKN Elltuent (mg/L)	(1/Gru) Ineulija V - cl·IV	Nilrate Ettuent (mg/L)	Total P Ethuent (mg/L)	Fecal Coliform (#/100ml)									
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Lead Operation. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. The reformation is frue, complete, and accurate.

Signed: Bynd Name (Please Type)

11/7/07 Oate:

(nai) (.47-158)

CER Form 4	17-601.900(1) Jomestic Watterster Realment Plant
Form Tate	Annestic Wastewater Realment Plant
Etective Date	July 1, 1991
067 400-04	xon Ma
	(Fried in by CER)

Part II - General Information

	Month NOVEMBER YEar 1997
(2,	Plant's DER Identification Number 4053 P100 47
(I)	Plant Name Hidden Cove
(4)	Plant Address Lucerne Park Road
(5)	CityWinterArauch
(6)	CountyPOIK
$\overline{7}$	Phone Number (941) 647-1581
	Permit Number D0-53-252330
	Plant Type
(10)	Test Site Identification Number NA
	Fecal Coliform Sample Method
. ,	Membrane Filter Most Probable Number
(12)	Type of Eifluent Disposal or Reclaimed Water Reuse
	Evaporation Pond
177	Limited Wet Weather Discharge Activated
(13)	
(14)	Cumulative Days of Wer Weather Discharge NA
(15)	Fiant Statiling
	Day Shift Operator Class Care No. 008544
	Evening Shift Operator Class Cert, No
	Night Shift Operator Class
	Lead Operator

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mgd	050053	,012
(17) Permitted capacity	rigd	_	,020
(18) Three-month average daily flow	mgd	-	,009
(19) Percent of permitted capacity	%	-	45%
(20) C3005 Effluent	mç/L	080082	2.07
(21) CBOD ₅ Effluent	lbs'day		NA
(22): TSS Effluent	mg/L	900207	175
(23) TSS Effluent	lbs/day	_	NA
(24) Minimum pH		-	7.1
(25) Maximum pH		_	7.3
(25) Total N	mg/L	000200	NA
(27) T.K.N	mç/Ĺ	000625	NA
(28) Ammonia (NH3 - N)	mg/L	000610	NA
(29) Nitrate	mg/L	071850	,92
(30) Total Phosphorus	mg/L	000665	NA
(31) Minimum Chlonne Residual	mg/L	-	1.5
(32) Maximum Chlonne Residual	mg/L	· _	4.0
(33) Other Effluent Parameters			NA
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CER Form - 17-001500(1) Domesoc Wasserater Jeaument Plant Form Tak Mompily Oberzang Record	
Eterne Osa_JUN 1, 1991	
CER אסטיבשטא אם	

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Domestic Wastewater Treatment Plant Monthly Operating Report

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เมของ จาย จากเก		ual	Chlorine Residual alter Dechlorination		ISS Inluent (mg/L)		TSS Elluent (mg/L)		TKN Elluent (mg/L)	TC .	Ξ	5	1		l		ļ		
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Ą	Flow (mgd)	Chlorine Residual alter Contact	into lier	BO	SS	BO	SS	pH Elluen	МN	NH1	litra	Tolal P	eč.						
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Lead Operator. This is to certify that I am lamiliar with the information contained in this report and that to the best of my knowledge and belief. The information is true, complete, and accurate,

-----Signed: ind Name (Please Type)

Oate: 12/2/97

- 1941/647-1581

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Comesiic Momesiic	Wasternater Teaument Plant Operating Report
Eterne Data July 1	. 1991
DER ADD-CADON MO-	
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Part II - General Information

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(1) Month DECEMBER Year 1997
(2) Plant's DER Identification Number 4053 P10047
(3) Flant Name Hidden Cove
(4) Plant Address Lucerne Park Road
5 city Winterhouch
(5) County Polk
(7) Phone Number (941) 647-1581
(3) Permit Number D0-53-252330
(5) Plant Type III - C
(10) Test Sile Identification Number NA
(11) Fecal Coliform Sample Method
Membrane Filter Most Probable Number
(12) Type of Effluent Disposal or Redained Water Reuse
Evaporation Pond
(15) Limited Wet Weather Discharge Activated
Yes XNO Not Applicable
(14) Cumulative Days of Wer Weather Discharge NA
(15) Flant Staifing
Day Shift Operator Class Cerr. Na. 008544
Evening Shiit Operator Class Cert. Na
Night Shiit Operator Gass Cert. No
Lad Operator Robits Byth C8544
Scharlo Cer. Na.

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mçd	050053	.015
(17) Permitted capacity	mgd	-	,020
(18) Three-month average daily flow	mgd	-	,011
(19) Percent of permitted capacity	%	-	55%
(20) C3OD₃ Efluent	mg/L	080082	3,1
(21) CBOO ₅ Eilluent	lbs'day	-	NA
(22) TSS Eilluent	mç/L	900201	6.3
(23) TSS Elluent	its/cay		NA
(24) Minimum pH			7.0
(25) Maximum pH			7.5
(25) Total N	mg/L	CCCECC	NA
(27) TKN	mç/L	000625	AN
(28) Ammonia (NH3 · N)	mg/L	000610	NA
(29) Nitrate	mg/L ļ	071850	2.01
(30) Total Phospharus	mg/Ľ	000665	NA
(31) Minimum Chlonne Residual	mg/L		05
(32) Maximum Chlonne Rescual i	mg/L	-	4.0
(33) Citter Efluert Parameters	1		NA
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Comestic Waster-ater Realment Plant Moment Coerating Report	
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Domestic Wastewater Treatment Plant Monthly Operating Report

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$\begin{array}{c c c c c c c c c c c c c c c c c c c $	101,016	4.0!				<u> </u>						l			:				1	1	
$\begin{array}{c c c c c c c c c c c c c c c c c c c $	111.013	14.01		140	158	3.1	6.3				2.0)	 		<u> </u>		1					
$\begin{array}{c c c c c c c c c c c c c c c c c c c $	121,020	11.51	1				<u> </u>				<u> </u>		i 	<u> </u>					1	1	1
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31.015.15	311,015	11.51	ļ			<u> </u>	;	7.2					1	<u> </u>		<u> </u>			·		<u> </u>

Lead Operation. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. The remation is true, complete, and accurate.

Signed: чrd Name (Please Type)

Oate: 01/10/98

THERE NO. (Plassa Type) (941)647-1581

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OGI Hum + 17-171 200(1)	
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Etome Che July 1. 1991	
DER 2000 אים	
(read in by cent	

Part II - General Information

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(1)	MORTH JANUARY Year 1998
(2)	Plant's DER Identification Number 4053 P10047
(3)	Flant Name Hidden Cove
(4)	Plant Address Lucerne Park Rod
(5)	CivWinterhauca
(6)	CountyPolK
(7)	Phone Number (941) 647-1581
	Permit Number D0 - 53 - 252 380
	Plank Type TTT - C
(10)	Test Sile Identification Number _NA
(11)	Feed Collorn Sample Method
	Membrane Filler Most Protable Number
(12)	Type of Eifluent Disposed or Reclamed Water Reuse
	Euoporation Pond
(15)	Limited Wet Weather Discharge Activated
(14)	Cumulative Days of Wet Weather Discharge NA
(15)	Flant Staifing
	Day Shiit Operator Class Care Na 008544
	Evening Shift Operator Class Cert. No
	Night Shift Operator Clars Cart. No
	Lad Operator Kowy And Carl, Na Carl, Na
	•

Units	STORET Code	Value
mçd	050053	,015
mgd	<u> </u>	,020
mgd		,01.4
%		70%
mg/L	080082	1,7
lbs'day		NA
المجال	90201	2.0
les/day		NA
		7.2
1		7.4
mg/L	000500	NA
ന്റ്റ്	000625	NA
mg/L	000610	NA
mg/L	071850	3.8
הקונ	000665	NA
mg/L		0.8
mg/L		4.D
		NA
İ	İ	
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	1	
		:
	mgd mgd mgd %r mg/L lbs/day mg/L lbs/cay mg/L mg/L mg/L mg/L mg/L mg/L mg/L mg/L	Offility Code mgd 050053 mgd mgd %r %r %r %r %r %r mg/L 080082 lbs/day mg/L \$C0201 lbs/day mg/L \$C0201 mg/L 000525 mg/L 000525 mg/L 071850 mg/L mg/L

ולשט עם די באייון

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Domestic Wastewater Treatment Plant Monthly Operating Report

34)															Mont	h <u></u>	NUM	ny	Yea	19	98
Flow (mgd)	Chlorine Residual alter Contact	Chlorine Residual after Dechlorination	(J/ບິໝ) ໄດະອຸມ]ໂກໄ _ຂ ີ່ ເປັນ	ISS Inlivent (mg/L)	CBODs Efficient (mg/L)	TSS Ellיופתו (mg/L)	pH Elliven	TKN Elluen! (mg/L)	NHI - N Ellivent (mg/L)	Nitrale Elfluent (rng/L)	Total P Eliluan! (mg/L)	Fecal Collorm (#/100ml)									
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	0.8						7.4										<u> </u>		<u> </u>		
025													1	<u> </u>	i	1	1	:		1	
- 1,020	1.4]	7.2							<u> </u>				:	<u></u>	·	<u> </u>
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- 1,011	2.0						7.2			;	 	<u> </u>	<u>.</u>	1		<u> </u>	1			<u></u>	
1,015	1.5		10.0	10.0			7.2			70		2	:	<u> </u>	<u></u>	1	:	;	<u>.</u>	·	· · · · · · ·
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1020	1,5			!		 ;	1.4			:	! 		;	<u>.</u>	<u>.</u>	÷	:	:	i	!	
21,016	1.0	·····!				: i	7.21						 !	1	1	i	i	!	!	1	i .
21,012	1.5		'i				7.2						;	; ;	1	1	!	1	1	1	· · .
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+ ,015	1,01	1		<u> </u>	i		7.21	1					1	1	!	:	1	1	1		1 :
51,016	1.5			i			7.2!	;	i				i	1	İ	l	1	:	!	1	!
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71.015	1	1		1		i	•	1	1	1					i	i	1	<u>:</u>	1	!	<u>.</u>
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	2.01		1			i	7.2	!							!	;	1	1	i	·	<u>. </u>
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.ad Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This tormation is rule complete, and accurate

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14/9 Oate:

Telectrone Na. (Plezza Type) (941) 647-1581

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סבא היחה א 17-איזן 200(11) ספרא איזער איזער איזער איזער איזער איזער איזער איזער איזער איזער איזער איזער איזער איזער איזער איזער איזער איזער	-
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Part II - General Information

1) MORTH FEBRUARY YEAR 1998	
(2) Mant's DER Identification Number 4053P10047	
(3) Fizht Name Hidden Cove	
(4) Piene Address Luceme RARK Road	
(5) City Winter heven	
(6) County Polk	
(7) Phone Number (941) 647-1581	
(8) Permit Number Do - 53 - 252330	
(5) Plant Type TH-C	
10) Test Sile Identification Number NA	
11) Feed Celiform Sample Method	
Membrane Filter 🗌 Most Probable Number	
12) Type of Effluent Disposal or Reclaimed Water Reuse	
EVAPORATION PORD	
(13) Limited Wet Weather Discharge Activated	
Yes XNo Not Applicable	
(14) Cumulative Days of Wet Weather Discharge NA	
	_
(15) Flant Staifing	
Day Shiit Operator Class Carr. Na 008544	
Evening Shift Operator Class Carr. No	
Night Shift Operator Glass Cart. No	
Lead Operator Robots April C8544	
Schartha Car. No.	

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	nçd	050053	,016
(17) Permitted capacity	mgd	.	,020
(18) Three-month average daily flow	mgd	-	,015
(19) Percent of permitted capacity	%		75%
(20) C2005 Effluent .	mg/L	080082	2.5
(21) CEODs Eilluent	lbs'day	-	.34
(22): TSS Eifluent	mç/L	90201	21
(23) TSS Efluent	les/cay	! -	2.14
(24) Minimum pH		-	7-1
(25) Махітит рН			7.2
(26) Total N	mg/L	000500	NA
(27) T.K.N	mç/L	000625	NA
(28) Ammonia (NH3 · N)	mg/L	000010	NA
(29) Nitrate	mg/L	071850	1.2
(30) Tarzi Phaspharus	mg/L	000665	NA
(31) Minimum Chlonne Residual	mg/L	_	0.5
(32) Maximum Chlonne Residual	mç/L	-	2.5
(33) Other Eilluert Parameters	1		AN
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CEA Form . 17-201200(1) Domestic Waster-alter Traument Plant Form Tale Montain Containing Record Effective Oate July 1, 1991

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Domestic Wastewater Treatment Plant Monthly Operating Report

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Day of the month	Flow (c	Chilorine Residual alter Contact	Chlorine Residual after Dechlorination	CBODs Inliuent (mg/L)	ISS Inlinent (mg/L)	CBODs Ellivent (mg/L)	TSS Ellivent (mg/L)	phi Elluent	TKN Eliluent (mg/L)	NI-13 · N Ellivent (mg/L)	Nitrale Ettuent (mg/L)	Total P Etlluent (mg/L)	Fecal Coliform (#1100ml)									
Ī	1,018	0,0					!	7.2							1	l		l <u> </u>	i •	<u> </u>		
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3	1,014	1.5					i	7.2						<u> </u>	1		1		:	1		;
4	1,022	2.0						72						<u> </u>	<u> </u>		1		 1		1	
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6	1,017	12.0						7.21			 			!	1	<u>;</u>	!					
7	1,016	11.5	1		1		<u> </u>	7.2					<u> </u>	:	1	<u> </u>	<u>.</u>			<u> </u>		
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17		10.8						7.2							<u>.</u>				:			
18		11.5		1				7.2											_			
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ead Operation. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This formation is true, complete, and accurate

ligned: Name (Please Type) Interney Name

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10198 Oate:

Telechone Na. (Plezse Type) (941) 647-1581

Come suc Wastewater Heatment Plant Oome suc Wastewater Heatment Plant Monthly Oberston Report
July 1, 1991
122 400-000 Mg

Part II - General Information

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(i) Month MARCH Year 1998
(2) Flant's DER Identification Number 4053 P10047
(J) Flant Name Hidden Cove
(4) Plant Address Lucerne Park Road
(5) Civ Winterhaven
(5) County Polk
(7) Phone Number (941) 647-1581
(8) Permit Number D0 - 53 - 252 330
(9) Plant Type TJT-C
(10) Test Sile Identification Number NA
(11) Fecal Coliform Sample Method
Membrane Filter Most Protable Number
(12) Type of Effluent Disposal or Roclaimed Water Reuse
Evaporation Pond
(13) Limited Wet Weather Discharge Activated
Yes XNo Not Applicable
(14) Cumulative Days of Wet Weather Discharge NA
(15) Plant Stating
Day Shift Operator Class Carr. No. 008544
Evening Shirt Operator Class Cert. No
•
Night Shift Operator Class Cart. No
Lead Ocerator Routh 19 Scrature Car. Na

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mçd	050053	.015
(17) Permitted capacity.	mçd		,020
(18) Three-month average daily flow	mgd	-	.015
(19) Percent of permitted capacity	%		75%
(20) C300s Eiluent	mg/L	080082	
(21) C3005 Efluent	lbs'day	-	0,49
(22): TSS Effluent	mç/L	90201	1,3
(23) TSS Efluent	lbs/day		0,16
(24) Minimum pH		-	7.0
(25) Maximum pH			7.2
(26) Total N	mg/L	000500	NA
(27) TKN	mç/L	000625	NA
(28) Ammonia (NH ₁ · N)	mç/L	000610	NA
(29) Nitrate	mg/L	071850	21
(30) Total Phasphorus	mç/L ¦	000665	NA
(31) Minimum Chlenne Residual	mg/L	-	1.0
(32) Maximum Chlonne Rescual	mg/L	-	4.0
(JJ) Other Effluent Parameters	. ľ	2. ¹	NA
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Domestic Wastewater Treatment Plant Monthly Operating Report

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	Flow (mgd)	Chlorine Residual after Contact	Chlorine Residual alter Dechlorination	CBODs Inliuent (mg/L)	TSS Influent (mg/L)	CBODs Elluent (mg/L)	TSS Elltuent (mg/L)	pH Ettuent	TKN Elluent (mg/L)	NI-13 · N Ellineut (m0/L)	Nitrale Elliuent (mg/L)	Tolal P Elluent (mg/L)	Fecal Coliform (II/100ml)									
1	,018	12,5	1				!	7.2			1		<u> </u>	<u> </u>	f	<u> </u>			l	<u> </u>	i	
z	,017	13.0					1	7.2					l						 	+	:	1
3	,016	3.0	1		1		1	7.2		1				<u> </u>	<u> </u>				: :	<u></u>	<u> </u>	
4	,016	13.0		1] .			17.2					<u> </u>	<u>i </u>						1	, ,	
5	,013	13.0	1	590	1506	13.9	1.3	17.2	L	1	11.5	<u> </u>	121	<u> </u>		<u>+</u>			1	<u> </u>	i	
6	1,015	13.0			ļ		1	17.1		1	<u> </u>		1	<u>!l</u>								
7	1,019	13.0	1	!	1	1	Cher.	17.1	L	<u>i</u>	<u>!</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>			1		
8	,014		1	i	1		1(!			<u> </u>	<u> </u>	!		<u> </u>						<u>. </u>	
q	1,013	13.0		1	1	1	1	17.2	ļ	<u> </u>	1	<u> </u>		<u> </u>		i		_	;	1	<u></u>	
10	1,018	13.5			1	1	<u> </u>	17.2	l	<u>.</u>	<u></u>	1		; 						. <u>.</u>		i
11	1,016	13.0			<u> </u>	<u> </u>	<u> </u>	17.2	[<u> </u>	<u> </u>	1	1	<u>i l</u>					: I	<u>.</u>		
12	1,011	13.0		1		<u> </u>	<u> </u>	7.2		<u> </u>	<u> </u>			1 1		<u>-</u>	i	_		1		1 .
13	1,018	12.5	1	<u> </u>	<u> </u>	<u> </u>	<u> </u>	17.1	1	1	<u> </u>	<u> </u>	1			<u> </u>	· · · · · ·		1	<u>.</u>		1 :
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15		13.0			ļ	1.	<u> </u>	17.1	1	<u> </u>	<u> </u>	1	<u> </u>	<u> </u>	<u> </u>	- 	<u>-</u> -					<u>. </u>
16		14.0	1]	!		!	17.1	1	!	<u> </u>	ł	1	<u> </u>					 !	<u></u>	 !	
רו	1,014	12.5	<u> </u>		<u> </u>	<u> </u>	1	17.1		<u> </u>	<u> </u>	1	·	<u> </u>			i		_	<u>.</u>		:
18	1,012	115	i	!	1	<u>i</u>	<u> </u>	17.1			i	i	<u> </u>							<u>.</u>		
14	1,013	11.0			!	<u> </u>		17.1	1	<u>!</u>	<u> </u>	<u> </u>	1	<u>! </u>		<u> </u>			:			
20		12.0			<u> </u>	1	<u> </u>	7.1		<u> </u>	<u> </u>	i	<u> </u>	<u>i i</u>						<u>i</u>		
21			1	1		1	i	1	<u> </u>		<u> </u>	<u>!</u>	;	<u>. </u>	·	<u> </u>	<u></u> ;		<u></u>	1		
27.	1,019	11.5	.] .	i	1		!	17.1	<u> </u>	<u> </u>	<u></u>	<u> </u>			<u>-</u>	<u> </u>						
23	1,011	12.5			1			17.1				:	•						:			
24	1,014	3,0	1			!	<u> </u>	17.0	\ 	<u> </u>	<u>.</u>	: i			i		 I					
25	1,019	12.5	1	<u> </u>	<u> </u>	1	<u> </u>	7.0	·	<u> </u>	<u> </u>	<u> </u>	<u></u>									
L		13.0	-	!	<u> </u>	!	! 				_	i i				÷	<u>:</u>		·	:		•
27		12.5	<u> </u>	1	!	<u> </u>	<u>i</u>	17.0		1	<u>. </u>	<u> </u>	<u> </u>	<u>· · ·</u>	<u> </u>				,			:
25				!		1	i	1710	¦	; ;	!		<u> </u>	1		i			;	÷		
251		13,0	<u></u>		<u> '</u>	<u> </u>	1	17.0	_	<u>!</u> !	1	1	i		1					<u>.</u>		1 .
30		14.0				1	!	17.0		1 i	1	1	i ·	! 1	i			_				:
.31	1016	13.0	1	!			i	17.0	!	<u>.</u>		·	1	· ·	1							

Lead Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This remained is rule, complete, and accurate.

Kaburts Br Signed: Name (Please Type) Ko •

Date: 4/1/98

Telechone Na. (Plezse Type) (941)647-1581

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	1651 'I Amr
ينين ۽ مرين سنڌھر اِد منظليفير کڙ	
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Part II - General Information

ביתר יאסי

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•			
(23) כומפי באוטפיר אשמהפפור	 !		AN
(12) אפאיתינת לאסחתפ הפכטפו	עלוך		0.4
(31) אנוחותינת כהוכחתפ הפכוטא	ר גר		9.6
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enenin (62)	ר של <i>ו</i> ך	DEBITO	٤.1
(N + CHN) ENDMAR (BS)	רע כֿיל	018000	
(ZV) EKN	עלוך	529000	
(22) וַכִּפּון א	עלקר	000,000	AU
(25) אפאותניה א		-	7.L
אומותוטא, דא אומותוטא, דא אומותוטא, דא אומותוטא, דא אומותוטא, דא א			0.7
123) 122 Educat	४३२/२२।	-	51.
(22) 725 Ediuent	עלוך	60201	2.1
(ZI) CEOD, Effuent	App,sqi	-	51
(20) CEODs Effuent .	על,ך	280080	
(19) צברבתו מ הפיחוונפר מבשכוע	₯	-	%5L
אסה אנובט בקבושעה לוחטתו-ששתה (Br)	p5w	-	510'
Videa capacity	עלק		020'
אסוג אובט פאפופגפ לנוא גראי (15)	עלק	550050	512.
raiandra	zinU	13R012 9200	antev

Contract the second in the sec	
NIGITE Shift Operator 5.355 Care No.	
ביגניות לאווג טבעבוסר נגשע כצור מת	
Day Shift Operator Class Corr No 008544	
רומהג צופוולותם ארואל אין אין אין אין אין אין אין אין אין אין	(SI)
Cumulative Oays of Wer Weather Discrarge	(7])
Cumulative Oays ci Wer Weather Discrarge AN	
Limited Wether Discharge Activated	
Everation Pard	
דערב כי בוועפתר Disposal כר אפרטותפל Water Aeuse	(21)
אופתוטרפרפר 🗌 אוסא איטשבופ איותרפר 🗌 אופער איינער איינאר	
Feed Californ Sample Metrod	
וצב גוני וכפתווכטוסה אטתוכפי AU	(01)
השעות אות אות אות אות אות אות אות אות אות א	(5) (0)
Bettie Nittlet , D9-93-525330	(B) (J)
$10C/1a^{2}/1172/$	
110	
Winterheuen	
olison Address	(7)
Plant Adress LUCENAE Park Road	
HISM NSME	(2)
FIRME NEM COMPANY COVE	(Z)
Month Hyper - 1990 Manths DEA Identification Mumber 4053 P16047	<u>()</u>
North APRIL 1998	,

Lead Operator

CER Form . 17-07-200(1) Oomenic Walter Jer Zeaument Plant Form Tal Monitiv Concern Report Electric Que July 1, 1201 CER Joorcason Na

Domestic Wastewater Treatment Plant Monthly Operating Report

34) ·					•										Mont	A AI	PRIL	<u> </u>	_ Yea	19	98
Day of the Month.	Flo./ (mgd)	Chlorina Residual alter Contact	Chlorine Residual alter Dechlorination	CBODs Inliuent (mg/L)	1SS Inluent (mg/L)	CBODs Ellivani (mg/L)	TSS Ellluent (mg/L)	pri Elluent	Tión Elluent (mg/L)	NH3 - N Ellivent (mg/L)	Nitrate Ettuent (rig/L)	Total P Etituent (mg/L)	Fecal Coliform (II/100ml)					-				
ΓĪ	,015	3.5						17.0					}			<u>}</u>	1		<u>i</u>	<u> </u>	<u>i</u>	
21	,011	4.0		300	250	1.2	1.2	7.0			1.3		121		ļ	!	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u>.</u>	
31	,018	4.0						17.0					<u> </u>			i	}	<u> </u>		<u>;</u>	<u> </u>	<u> </u>
4-1	1015				1	.								į	<u> </u>	<u> </u>	<u> </u>	<u></u>		<u>.</u>	:	<u>i</u>
5 1	,014	14.0			1			17.0					!	<u>.</u>	<u> </u>	<u>i</u>		<u> </u>	<u> </u>	<u> </u>	<u>i</u>	<u> </u>
6!	,014	13-0			!			17.0					j		ļ	<u>;</u>	<u> </u>	<u> </u>	1	1	. <u>;</u>	<u> </u>
7 1	,013	3.0	i i					17.0					!	<u> </u>		!	<u>.</u>	<u></u>	<u> </u>	<u> </u>	<u>:</u>	
9	,0/1	4.0	1		1			7.0				·	i) •	ļ	i	<u></u>	1	;	!	<u>;</u>	<u></u>
9	,015	14.0			i			7.0					1	l :	<u> </u>	<u>.</u>	<u>.</u>	<u>!</u>	<u>.</u>	<u>;</u>	<u> </u>	<u>.</u>
(0 i	,011	14.0	i					17.01		•			}	:	<u> </u>	<u>!</u>	<u>.</u>	<u> </u>	<u>;</u>	<u>!</u>		<u> </u>
(1)	,017	! !														<u> </u>	<u>i</u>		!	<u> </u>	<u> </u>	<u>i</u>
121	,016	14.01						7.01			!					!	!	!	<u>i</u>	<u> </u>	<u>i</u>	! .
131		4.0						7.0	;		!					1	<u>.</u>	<u> </u>		<u>!</u>		1
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151	,015	4.0			1	1		7.1	i			!		i		<u> </u>	<u> </u>		<u>!</u>	!	<u>;</u>	<u>!</u>
16	,014	3.5						7.11	!	!	!			i		<u>}</u>	<u>i</u>	-	<u>.</u>	!	<u>.</u>	<u>!</u>
<u>י רו !</u>	,014	3.01			{			7.1	<u> </u>		<u> </u>					<u>i</u>	;		<u> </u>	!	!	<u>;</u>
18		13.01			i	<u> </u>		7.1		!	·	i		<u> </u>		! 	<u></u>		:	<u> </u>	•	<u>;</u>
191	,022		[!		!		<u></u>		1						·		·	i 	•	<u>;</u>
201	,021	140	!					7.21	<u> </u>		· 1		;						<u>:</u>		_	;
21	,020	4-01			1	i	i	7.2		<u> </u>	į						<u>.</u>	_	<u>.</u>			<u>. </u>
221	,019	4.0.	<u> </u>			!		7.21	:	;		i		<u> </u>						: 		<u>.</u>
<u>25 i</u>	,015	4.0	<u> </u>				۲ ۱	7.2		;	!	<u> </u>	i					<u>.</u>				
24-1	,018	14.01			!			7.21		!	<u> </u>	<u> </u>		<u> </u>	;				:		<u>.</u>	
<u>ا کړ</u> لکا	015		ļ	i	<u> </u>	i	<u> </u>		;	; ;		· i	<u> </u>	1	;					·		<u>. </u>
		4.0		<u> </u>			÷	7-21		1		;	. <u> </u>	<u> </u>	!				: 			<u>i</u>
27!	510,				i	<u> </u>		7.1	1			- <u>i</u>			;						: :	,
<u>78i</u>	1011	0.6					<u> </u>	7.01 7.01	+	<u> </u>	+ 		<u> </u>	:	1		,					
151	,015	<u>7.0</u>		;			;		!	<u> </u>	<u> </u>	<u> </u>			······						:	
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<u>.) </u>		I I	<u> </u>	!	!		i	!		!	f					ز 						<u> </u>

Led Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This retimination is the complete and accurate.

Signed: ure Name (Please Type) _ ۰.__

15/98 Oate:

Telectrone Na. (Flezze Type) (941)647-1561

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0F3 mm (17-501 200(1)	
OEA rom + 17-001 200(11 Oomestic Wasterneter Treatment Plant Form Fish Monterior Operating Report	_
Electre Jun July 1, 1991	
GER LOOCLOON NO	

Part II - General Information

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Ĵ	i) Month MAY Year 1998
(2	2) Flant's DER Identification Number 4053P100 47
	i) Flant Name Hidden Cove
(4	1) Plant Address Lucenne Park Road
•	
19	1) Civ Winterflever
	CountyPolk
	Phone Number (941) 647 - 1581
•) Permit Number Do - 53 - 252330
•	Plant Type AL-C
	Test Sile Identification Number_NA
1)	Fecal Coliform Sample Method
	Membrane Filler Most Protable Number
2)	Type of Eifluent Disposal or Reclaimed Water Reuse
	Everporation Hond
3)	Limited Wet Weather Discharge Activated
4)	Cumulative Days of Wet Weather Discharge <u>NA</u>
S)	Plant Slaifing
	Day Shift Operator Class Cart. No. 008544
	Evening Shuit Operator Class Cart. No
	Night Shiit Operator Class Cart. No
	Lead Operator Robot Apel WW 0085440
	Senaruro Carl Na.

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mçd	050053	1,005
(17) Permitted capacity	mgd	_	,020
(18) Three-month average daily flow	mçd	-	,012
(19) Percent of permitted capacity	%	-	60%
(20) CEODs Eifluent	mg/L	080082	<1
(21) CEOOs Eilluent	lbs'day	-	1<,04
(22) TSS Effluent	mg/L	900201	۵.[>
(23) TSS Effluent	Its/day	-	1~,04
(24) Minimum pH		-	0.7
(25) Maximum pH		-	7. Zi
(26) Total N	mg/L	000300	NA
(27) TKN	നറ്റ/L	000625	NA
(28) Ammonia (NH3 · N)	.mc/L	000610	NA
(29) Nitrate	mg/L	071850	1.30
(30) Total Phosphorus	πς/Ľ	000665 į	NA
(31) Minimum Chlonne Residual	mg/L	-	3.0
(32) Maximum Chlonne Residual	mç/L	-	4.0 -
33) Other Eilluers Parameters	·1 1		NA
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17-501-500(1) Domessic Waster-ster Treatment Plant Momply Coeraling Record cra July 1, 1991 ora A DOM NO.

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Domestic Wastewater Treatment Plant Monthly Operating Report

34	·) ·														٨	lonin.	M	94		Year	199	8
Day of the worth	Flov (mgd)	Chilorine Residual alter Contact	Chlorine Residual alter Dechtonnation	CBODs Inlivent (mg/L)	TSS Influent (mg/L)	CBOD's Elliven (mg/L)	TSS Elltuent (mg/L)	pH Elluent	TKN Ettuent (mg/L)	(אטוי) וחפטוואד N - בויוא (אטר) אי בויוא	Nitrale Elliuent (mg/L)	Total P Ellivent (mg/L)	Fecal Coliform (II/100ml)					· · · · · · · · · · · · · · · · · · ·				
F	,005	4.0			1	1	!	7.1			1			1	1	1	1	i		i		
Z	,004														1			<u> </u>				
3	,003	14.0	1	}			<u> </u>	7.1						<u> </u>	i				÷			
4	,004	4.0						7.1		<u> </u>			<u> </u>				<u> </u>	<u> </u>		·····		
5	,005	4.0		<u> </u>	l			7.1						!	<u> </u>		<u> </u>					
6	,004	4.0		<u> </u>		<u> </u>		7.1							<u> </u>			<u> </u>				
$\frac{7}{2}$	1005	14.0		!				7.1		i	i		· · · · ·				<u></u>		<u></u>	·		
2	,004	14.0	l	(·		! <u></u>	7.1		i		·	/ 				· · · · · · · · · · · · · · · · · · ·		<u></u>	<u>'</u> i		
4	,005	4.0	l i	!	1	:	i i	7.1					·	<u>-</u>	<u> </u>			<u></u>	<u>-</u>			
<u>(0</u>)		14.0	:		·		·	7.1	<u>-</u>			I			i	<u>-</u>	<u>;</u>	<u>:</u>			i	
121	,005	14.01		i		i		7.(i	i	i	'		<u>-</u>		1	i	1	1	1	!	•.
(3)		4.0		——		i	1	7.11	;	1	1				i	1	1	i	!			<u> </u>
141	,004	14.0	i	595	11421	411		7.11]	!	1,301		<11	1	1		;	1		1	i	:
151	,007	14.0	1		i i	1		7.0	i	i	1	1	1		i	ļ	1	!	!	1	1	
16	,006				1	Ì	1	1		i		[í	1	1	í	i	!	:	i	
171	,006	4.0		Ī	1	Î	i	7.01		I	i	1			i	I		:	1	!	;	
181		4,01	-]	1	1	i	1	7-0!	i	i	1	1	i	i	ļ		i	:	;	:		
141		4.0		1	1		į.	7.01	ļ			1	i		ļ		i	i	i	•	ł	
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231	,034	1	.!	l	!	•	1	1		;	ļ		1					•	•	:	:	
141	1004	3.41		;	!	;		7.01	i	ļ	5		:	i	i	1	:	:	i	÷		
	-,005	4.0		i	1	1		71		. i	!		;	i	!	i	<u> </u>	<u>.</u>	i	:		
Lbi	,003	4.0			!			<u>2.(i</u>		<u> </u>	. <u> </u>		<u>i</u>	<u> </u>			!	;	i		<u> </u>	
27!	1005	3.5				<u>.</u>		2.11	<u> </u>	<u> </u>	<u> </u>			<u> </u>	<u> </u>	<u> </u>	<u></u>	•			•	
781	,003 1	4.0	<u> </u>					2.2	;	<u> </u>	<u> </u>	i	<u> </u>	<u> </u>	;	i		<u></u>	!	<u> </u>	<u> </u>	<u> </u>
251!	,0051	2.5			·	!		7.2	!	i	<u> </u>		<u> </u>		<u> </u>	<u> </u>	<u> </u>					;
30!	,003 1	4.01	<u>i</u>		<u> </u>	·		7.21		!		<u> </u>			!	<u> </u>		· ·	<u> </u>		!	·
311	.003	7.0	<u> </u>	!	!	···	1	1.6		<u></u>		<u> </u>				<u> </u>	<u>.</u>	•		·····	:	

Lead Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This remation is rule, complete, and accurate.

Signed: unt Kobe Name (Please Type) • ------

699 Oate:

Telechane Na. (Plezze Type) (947)647-1581

DER FOR 4 17-201 SOC(1) Domestic Wasternuer freatment start	
Domestic Wastewater Featment Flare	
Etama July 1. 1991	_
027 400-C2001 Mg	
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Part II - General Information

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(i) Month	JUNE	•	Year 199	8
	OER Identification	Number	4053 PI	0047
(3) Flant N	lameH	idden	love	
			~ ~ ~	
(4) .Plant À	ddress <u>L</u> V	ecine,	Park Roc	1
• ••	·			
(5) Ciy	Wi O	sterhaue	en	
(6) County		K	<u> </u>	·
(7) Phone		(1) 647		<u> </u>
	Number <u>Do</u>		23<350	
	nce	<u>11-C</u>	4	
10) Tea Silu	e Identification Nun	ncer	•	
	Cillorm Sample Me morane Filter	_	zable Number	
12) Type of	Eifluent Oisposel o EUCParet			
	Wet Weather Cisch	-		
			·	
14) Cumulai	ive Cays of Wer W	eather Disch	arge / - / 1	
15, Fient Su				
	it Operzior Class _	Ĉ	Car No DC	8744
			•	
	Shift Operator Class			
	niit Operator Class.	H fr	L Carr. No Wali	085442
	cerator	Squarura		Cert No.

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mçd	050053	,005
(17) Permitted capacity	mgd	_	,020
(18) Three-month average daily flow	mgd	-	,008
(19) Percent of permitted capacity	3/0	-	40%
(20) C2OC₂ Efluent	mç/L	080082	1.6
(21) CEOD, Effluent	lbs'day	-	,066
(22): TSS Effluent	mç/L	90201	<1
(23) TSS Efluent	lbs/day	-	.042
(24) Minimum pH		-	7.0
(25) Maximum pH			7.2
(25) Total N	mg/L	000500	NA
(27) TKN	ന്റ്റ്	000625	NA
(28) Ammenia (NH3 · N)	mg/L	000610	NA
(29) Nitrate	mg/L	071850	0.38
(30) Total Phosphorus	mç/L	CCC665	NA
(31) Minimum Chlenne Residual	mg/L	-	1.8
(32) Maximum Chlonne Residual	mg/L	-	4,0
(33) Other Efluent Parameters	. 1		NA
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CER Form - 17-30: SOC(1) Domestic Walter aler Stauthens Plant Form Tax Momphe Coerstong Report Electric Gala July 1, 1291 CER Approximation Na______

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Domestic Wastewater Treatment Plant Monthly Operating Report

34)														Month	JUNE		_ Year	. <u> 99</u>	78
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			CBODs Influent (mg/L)		CBOD's Ellivent (mg/L)				· N Elliven (mg/L)	(E E	Fecal Coliform (11/100ml)							
Ξ	al	Chlorine Residual after Dechtorination	Ĕ	ISS Influent (mg/L)	Ξ	TSS Elluent (mg/L)		TKN Etiluent (mg/r)	€. ≍	Elluent (mg/L)	Ellivent (mg/L)	15			•				
d the Marit	Chtorine Residual alter Contact	sich	les l	Ē	ŝ	E		5	Iner	eul.	ଟ୍	ε	1				{		
4 91 Jd)	He	Re	Influ	len		lien	eul	uer	Ē	III	Elliu								
	Sol 2	Dec	D.	- Iufr	ã.	EI	n	EIII	·z	19 E	4	<u> </u>				ļ			
Day of lite Flow (mgd)	Infor lier	tier high	BO	55	BO	<u>5</u> 5	pH Elluent	КN	ς. Ν.Ρ.	Nìlrala	Total	eca							
	1	9, C		<u> </u>	0		•				<u></u>	_ U				<u> </u>			<u>.</u>
1,007	13.5		<u> </u>				7.2							<u> </u>			<u>}</u>		<u> </u>
21,065	12.0	<u> </u>	}	 			7.2 7.2	 			<u></u>		<u> </u>				1		
31,004	1.0		I	1			7.2									<u> </u>			<u>;</u>
51.006	13.5		 	 			7.2	· · ·						1	1				;
61,004	13.0			, 	1		22				i		i	1		ł			, !
71,005	125						7.2	ļ			1		1			i			·
81,007	3.0	1	i	1			7.2	;			<u> </u>			<u>i</u>	1		<u>.</u>		<u>. </u>
91,005	2.0	<u> </u>		[!		7.1	l	i			!			<u> </u>		: <u> </u>		<u> </u>
101,007	12.5			000			7.1		<u> </u>	6 -7 81	<u> </u>					<u>.</u> 	<u> </u>		· ·
11,004	140		425	380	1.6	21	7.2	i		0.301		<u> </u>			<u>i</u>		: 		
121,005	4.0			 			7.2	i 1				'		<u>i i</u>	i 				
141,006						; ;		<u>i</u>			<u>,</u>		1	1		1	· · · · ·		:
151,005	14.0	'		i		i	7.1	<u>-</u>		i	í	i	L	1 1	1	!	1		
161,005	1401				ļ		7.1	[i	1	ł	1	i		1			i	
171.004	14.0			1	1	i	7.1		ļ	1	1						:	;	
181,004	14.0	-		ļ	i		7,1 !]	i	i	! !	i	:	:		
191,004	10.0		1		!		7.1	1						! ;	i				
201,004	14.0	<u> </u>					7.1					<u> </u>	- <u></u>	<u> </u>		:		1	
21,005	12 21				ii				!		<u> </u>		· <u> </u>	· · ·		i			<u> </u>
27005	13.5.1			;	!		7.1 1		;					<u></u>	<u> </u>	· · ·		: :	
231,004	14.0	<u> </u>		<u> </u>			$\frac{7.1}{7.1}$	i	·	· · ·	<u> </u>			<u> </u>		: ;			
251,005	4.0	I	·i				7.11			i	· · ·	;		<u>' :</u> ! :	·	· · · ·	· · · · · · · · · · · · · · · · · · ·		•
Lb: .005	14.0	1	 	i I	1		7.11		<u>_</u>	<u>;</u>		i	1	1	1	: 1	;	į	· · · · ·
271,004	1	;	!		1	1		i	!	į		į	1			•	;		
751,004	13.01			1	1		7.1 !		!	1	i	1	1	1	1	• 1	:	· · · ·	
2511,007	14.01	İ	1	•			7-11	!	į	1	!			!	!	1	!	;	
301,004	14.01		!	1	·		7.01	 i	<u> </u>		;			<u> </u>		<u>;</u>		<u> </u>	
311		!	<u> </u>		;	1	ļ			· · · ·	1	<u> </u>		<u> </u>	i	: :		<u> </u>	

Lead Operator. This is to cartify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This remained is true, complete, and accurate

Sic Name (Flease Type) 1......

Oate:

Telechone Na. (Plezze Type) (941)847-1581

EA room 4	17-001 SOC(1)
0000 Eda	omessic Wastewater freatment Plant
عدن ستحد	July 1, 1991
	م المع المع المع المع المع المع المع الم

Part II - General Information

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Month JULY Year 1998
2) Plant's OER Identification Number 4053P10047
3) Flant Name Hidden Cove
4) Plant Address Lucerne Park Road
5) City Winterhaven
5] CountyPo/K
7) Phone Number (941) 647-1581
3) Permit Number
3) Plant TypeTTT -C
3) Test Sile Identification Number NO
1) Fecal Caliform Sample Method
Membrane Filler Most Protable Number
Type of Eifluent Disposal or Reclaimed Water Reuse
EVeporation Fonds
J. Limited Wet Weather Discharge Activated
Yes XI No Not Applicable
- Cumulative Days of Wet Weather Discharge NA
3) Flant Stailing
Day Shiit Operator Class Cart. No _008544
Evening Shift Operator Class Cert, No
Night Shift Operator Gass Cart. No:
Lead Operator Robits And hwoossyyc
مريد من من من من من من من من من من من من من

			والمتحد ويعت المتناك منا استحدد
Pzrameter	Units	STORET Code	Value
(16) Monthly average daily flow	ngd	050053	,007
(17) Permitted capacity	rrgd	<u> </u>	,020
(18) Three-month average daily flow	mgd	<u> </u>	,006
(19) Percent of permitted capacity	%	-	30%
(20) C2005 Eiluent	mg/L	080082	1.8
(21) CEODs Eilluent	lbsday		.11.
(22) TSS Eilluent	mç/L	90201	0.5
(23) TSS Effluent	lts/day		.03
(24) Minimum pH			7.0
(25) Maximum cH	} 1 1		7.2
(25) Total N	mg/L	000500	NA
(27) TKN	mç/L	00C625	NA
(28) Ammonia (NH3 · N)	mg/L	000610	NA
(29) Nitrate	mg/L	071850	1.34
(30) Tarzi Phaspharus	mg/Ľ	000665	NA
(31) Minimum Chlonne Residual	mg/L		1.2
(32) Maximum Chlonne Residual	mg/L	-	4.0
(33) Other Eilluert Parameters			NA
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CER Form - 17-301.500(1)	
Domestic Mastervaler Treatment Plant	`
Etective DataUNY 1. 1391	
CER 100-CHON NG	'
inter an ay JEA	:

34	, .														Month	<u>JU1</u>	-Y	· `	rear <u>l</u>	998
·]													ি				i		1	
			c	CBODs Inlinent (mg/L)		CBOD's Ellinent (mg/L)			5	Ellivent (mg/L)	Nilrate Etlluent (mg/L)	Elluent (mg/L)	Fecal Coliform (#1100ml)							
Day of the Month		lual	Chlorine Residual alter Dechlorination	5	ISS Intruent (mg/L)	<u>ट</u> ह	Elliuent (mg/L)		TKN Elluent (mg/r)	100	l'.(ri	U T	10							
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IIC	უელ	Son F	lect F	S In	Mlue	μ	Illue	llue		·z	Ē	ū	CO					Ì		
2	Flow (mgd)	er C	er E	D D D	SIC	JOE	TSS E	pH Elluen	Ŋ	- ₅ 1 IN	Irale	Total P	scel				į			
na La	FIG	0 m	52	U U	IS	Ü	1	·	Ě	ź	Ξ,	ğ	Le Le							:
	,006	14,0		!			!	7.2					1			<u> </u>	. <u> </u>	<u> </u>		
21	,006	14.0			<u> </u>		<u> </u>	7.2					<u> </u>				<u> </u>	<u> </u>		
3	,006	3.5			1	}	i	7.2					<u> </u>		1					
41	1005		1	! 	1	<u>}</u>) 	~ 1	i				 				- <u></u>	i		; · · · · · · · · · · · · · · · · ·
51	,005	1.8	 1	}	1	1		7.2						i	i		· <u> </u>			
<u>t</u>	,004		} 	<u>!</u>	! 1	! !	<u>. </u>	7.6	i						<u>.</u>					
$\frac{1}{2}$,006	4.0	; ;	; i	1	!	:'	7.1			<u> </u>		··			<u> </u>	;	i		
31	.004	4.0	!	440	1570	1.8	0.5			i	1.34		1<1		:	1	:	:		
101	,005	14.0			1			7.01	i	. (;	;	:	1	i	1		
11	,005	!						1	1	į		I	:	i i	<u> </u> i	į	1	!	!	i .
121	,005	14.01				İ		7.01				1	;		1 1	<u> </u>			1	
131	.003	1.5			<u> </u>	1		7.01	!			!	<u> </u>		<u>i </u>		1	_ <u>_</u>		
14-1		4.0				i		7.01		!	!	!		<u>}</u>	<u> </u>	<u> </u>	!		i	:
151	,009							7.0!	<u> </u>					<u> </u>					<u> </u>	
16!		12.01			!	<u>ا</u>		7.21	<u> </u>			<u>;</u>		<u> </u>	<u> i</u>	<u> </u>				
17!	008	13.51			!	<u> </u>		7.21	<u> </u>		j	<u> </u>	<u> </u>	l	<u>1 i</u>	<u> </u>		!	<u> </u>	<u>`</u>
181		14.01					i*	7.2!	<u> </u>		;	<u> </u>				·····	<u>:</u>		•	
141	008					!			<u> </u>		<u> </u>	<u> </u>		;;	•i	· · ·	<u>.</u>			
201		12.4			<u> </u>	<u> </u>		7.21		i	i		i		<u> </u>			1		
211		3.5	!	· {				7.2	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u></u>	····	; 	<u> </u>			•	<u>.</u> !
2.7.	,008	3.2						7.21	;		·	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>	<u>.</u>	;	
231	1009	4.0			<u> </u>	<u> </u>		7.21	;	<u> </u>		<u> </u>						;	:	
141	,008	3.01	<u> </u>	- <u>;</u>	<u>!</u>	<u>;</u>	۱ ۱ ۱	<u> . L </u>	<u>-</u>		<u> </u>	·:	;							
751 261	,007	201					<u>}</u>	7.11	• 		!	<u> </u>	<u> </u>	1			· · · · · · · · · · · · · · · · · · ·	<u>'</u>	- <u>;</u>	
17!	.006	40	<u> </u>	<u> </u> 	! !		_	7.1				<u>, </u>		1		;	<u>-</u>			•
27!	,008	3.5	<u> </u>	<u> </u>)	7-1		 i	<u> </u>	' i	· í	: :		·i	•		:	
<u>781</u> 251!	1000	2.4	i		· · · ·			7.11	' !	<u>_</u>		<u> </u>	1			!	;		:	
30!	.008 .008	1.8			i	1		7.1 1	1	<u>-</u>	i	<u>.</u> i		1		; 	;			
30!	,009	4.01	i	i		;		7,1	!	:	1	i	1	1 1	i	;	:	;		:

Lead Operator. This is to carefy that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This information is true, complete, and accurate.

Sic Name (Please Type)

8/12/98 Oate:

Telesnone Na. (Plezze Type) (941)647-1581

• '
CER form & 17-101 (CC(1)
Comestic Waterester Treatment Plant
Eterne Juny 1, 1991
057 200-5200 PM
(היים אי סי נצוא

Part II - General Information

٠.

(i) Month AUGUST Year 1998
(2) Plant's DER Identification Number 4053 P100 47
(3) Flant Name HIDDEN COVE
(4) Plant Address LUCERNE PARK ROMS
(5) City WINTER HAVEN
(5) County POLK
(7) Phone Number (941) 647-1581
(3) Permit Number D0-53-252 330
(5) Plant Type III - C
(10) Test Sile Identification Number NA
(11) Fecal Coliform Sample Method
Membrane Filter Most Probable Number
(12) Type of Effluent Disposal or Reclaimed Water Reuse
EVAPORATION PONDS
(15) Limited Wet Weather Discharge Activated
Yes X No Not Applicable
(14) Cumulative Cays of Wet Weather Discharge NA
(15) Flant Stailing Day Shiit Operator Class <u>C</u> Cart. No. <u>008544</u>
Evening Shift Operator Gass Cert. No Night Shift Operator Gass Cert. No
Lad Operator Robutt By WW008544C
Scrature Cert. No.

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mçd	050053	,008
(17) Permitted capacity	mgd		,020
(18) Trree-month average daily flow	w mgd	-	,007
(19) Percent of permitted capacity	%	-	35%
(20) C3OOs Eiluent	mg/L	080082	3.9
(21) CEODs Eilluent	lbs'day		,26
(22) TSS Effluent	mg/L	90201	2.4
(23) TSS Efluent	lts/cay	-	,16 :
(24) Minimum pH	.	-	7.0
(25) Maximum pH		-	7.3
(26) Tetal N	mg/L	000500	NA
(27) TKN	mg/Ľ	000625	NA
(28) Ammonia (NH ₃ - N)	mg/L	000610	NA
(29) Nitrate	mg/L	071850	3,86
(30) Total Phasphorus	mç∕Ľ ¦	000665	AU
(31) Minimum Chlenne Residual	mc/L	-	1.8
(32) Maximum Chlonne Residual	mç/L	- 10	f.0
(33) Other Eifluert Parameters	1		NA
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17-301200011 CER Fo Domestic Waster-user Weathors Plant Memory Operating Record Data_July 1, 1001 £:•c= בא המעני-200 השט IFAN IN DY JEAN

Domestic Wastewater Treatment Plant Monthly Operating Report

34																Month	AUG	GUOT		Year _	1998
		sidual ti	sidual mination	(רויפת) וושר	('T/Gw)	Ellivent (mg/L)	Ellivent (mg/L)		ו (ישט <i>י</i> ר)	· N Ellivant (mg/L)	Ellucat (rig/L)	Ellluant (mg/L)	Fecal Coliform (#/100m!)								
Day a life month	Flo., (mgd)	Chlorine Residual after Contact	Chlorine Residual after Dechlorination	CBODs Inlinent (mg/L)	ISS Influent (mg/L)	CBOD ₅ EIII	TSS Elltuen	PH Elliuent	TKN Elluent (mg/L)	NIL N EI	Nitrale Elliu	Total P Elli	Fecal Collo								
<u> </u>	1008						!								·				<u> </u>	i	
21	1007	14.0			1			7.1					1			•					<u> </u>
3	,007	4.0					i	7.1											<u>;</u>		
4-	3001	14.0						7.1	1									<u> </u>	i		<u> </u>
5	,007	4.0						7.1	. <u> </u>				!		!						
6	,008	14.0		305	334	3.9	2.4	7.0			0.86		1 < 1								
7 ;	,009	4.0						7.1							i	· · · · ·					<u> </u>
31	,009			<u> </u>																	
<u>9</u>]	.008	3.0			i			7.1									<u> </u>	!		<u> </u>	
101	,008	3.0						7.1		<u> </u>				· · · · · · · · · · · · · · · · · · ·	;				<u> </u>		<u> </u>
11!	,00 8	12.41						7.21								i	!	<u>.</u>			<u> </u>
121	,008	13.4						7.2							<u>i</u>		!		<u> </u>	1	
131	,008	12.5						7.2					i		<u> </u>			<u> </u>			· · · ·
14-1	1008	1,8						7.2		!	!		i							!	
151	,008									1			i	i					!	<u> </u>	
16	,008_	12.81					<u> </u>	7.2	1	Ì		1		i					!		
17!	,008	12.41						7.2		1		!				i				·	
13	1008	1381	!		i	;	1	7.2		:		j	i	i			i	:		•	
14	,008	1221		1			l	7.2	!						!	1	1		;	· · · · · · · · · · · · · · · · · · ·	
201	,008	1351	İ			!		7.2	i	1	i				:	!		<u> </u>	1	·	
211	,008	30			1	i	1	7.3	<u>.</u>	!	i	!				i			1	:	÷
2.2.1	,007	.	i			!			<u> </u>	;					:		;	•	:		:
23 i	,007	2.4	į	1	!		e	7.21		:	!	1	i						•	:	<u> </u>
24-1	,009	13.41		;	1			7.)	1	!	!	<u> </u>						:		:	
251	1005	3.01		i		i	!`	7.2		i	į				!	i	!	<u> </u>		:	
16:	~ //>	17 7	!	<u> </u>	j	!		7.2	1		1	i		!			!	:	i		<u> </u>
1.7!	006 009 009 008 009	341					!·	7.2	i	!		<u> </u>	:	1							,
<u>78</u>	,009	12.41			1		i*	7.Z		!		<u> </u>	i		i	;		·		!	
751	1004				· /		l	7 - 1	!	<u> </u>			<u> </u>		!	<u> </u>	!	:	_!	<u> </u>	
30:	1008	2.01				!		7.21								- <u> </u>	;	· :	!		<u> </u>
.51	,009	3.1	!	!	!	i		1.4	!	1		1		i				·	:		<u> </u>

Lead Operator. This is to certify that I am familiar with the information contained in this recort and that to the best of my knowledge and belief. This ricmation is the complete and accurate

Signed: Name (Please Type) Byro F Sancaey Neme

9/6/98 Oate: _

Telechane Na. (Please Type) (941)647-1581

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OER from + 17-100 SCO(1) Domestic Wasternater Freatment Plant
אינה איפווער איפועיין איפוייין אינא אינאי איפוייין אינאי איפוייין אינאי איפוייין איפויין איפוייע איפויין איפויין איפויין איפויין איפויין איפויין איפויין איפויין איפויין איפויין איפויין איפויין איפוין איפוין איפויין איפויין איפויין איפויין איפוין איפוין איפויין איפויין איפויין איפויין איפויין איפוין איפוין איפויין איפויין איפויין איפויין איפויין איפויין איפויין איפויין איפוייע
ET-CT-+ JHA JUN 1. 1991
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Part II - General Information

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(7)	Month SEPTEMBUR Year 1998
(2)	Plant's DER Identification Number 4053 P10047
(J)	Plant Name HIDDON COVE
(4)	Plant Address LUCIONE PARK ROM
*')	
(5)	City WINT REHOVEN
•	Palik
•	
(/)	Phone Number (94) 647-1331 Permit Number Do - 53 - 252 33 0
(8)	TTT-C
• •	Plant Type 44 C
(10)	Test Sile Identification Number NA
(11)	Fecal Coliform Sample Method
	Membrane Filter Most Probable Number
(12)	Type of Eifluent Disposal or Reclaimed Water Reuse
	Eucporation Ponds
(TJ)	Limited Wet Weather Discharge Activated
• •	
(14)	Cumulative Days of Wet Weather Discharge NA
v. 1	
(15)	Plant Stailing
/	Day Shiit Operator Class Cart. No. 008544
	Evening Shirt Operator Class Cert. No
	Night Shift Operator Glass Cart. No
	Lad Ocerator Rebts And Worldo 5544C
	Sigheruro Carl Na

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	тçd	050053	,010
(17) Permitted capacity	ന്നൂർ		,020,
(18) Three-month average daily flow	mçd		,008
(19) Percent of permitted capacity	%		40%
(20) C2005 Eiluent	mç/L	080082	1.9
(21) CEOD, Eilluent	lbs'day		.16
(22) TSS Eilluent	ாடி/ட	90201	1.6
(23) TSS Efluent	lbs/day	-	.13
(24) Minimum pH			7.0
(25) Maximum pH	İ		7.4
(25) Total N	mç/L	000500	NA
(27) T.KN	mç/L	000625	NA
(28) Ammenia (NH ₃ · N)	mg/L	000610	NA
(29) Nitrate	mg/L	071850	
(30) Total Phasehorus	mg/Ľ	CCC665	NA
(31) Minimum Chlenne Residual	mg/L		1.2
(32) Maximum Chlonne Rescual	mg/L	-	4,0
(33). Other Eilluert Parameters	l 1		NA
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Lead Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This remained is the complete, and accurate

Signed: y rd Name (Please Type) Sampary Name

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Telechone No. (Plezza Type) (941)647-1581

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HIDDEN COVE, LTD.

ORIGINAL SHEET NO. 2.0

WATER TARIFF

ORIGINAL

Table of Contents

Table of Contents Sheet Number
Communities Served Listing 4.0
Index of
Rates and Charges Schedules 16.0
Rules and Regulations 6.0-6.1
Service Availability Policy
Standard Forms 25.0
Technical Terms and Abbreviations
Territory Served 3.0-3.1

HIDDEN COVE, LTD.

ORIGINAL SHEET NO. 6.1

WATER TARIFF

(Continued from Sheet No. 6.0)

	Sheet <u>Number</u>	Rule <u>Number</u>
Protection of Company's Property	10.0	12.0
Right of Way or Easement	11.0	14.0
Signed Application Necessary	7.0	3.0
Tax Clause	12.0	18.0
Temporary Discontinuance of Service	14.0	27.0
Type and Maintenance	9.0	9.0
Unauthorized Connections - Water	12.0	20.0
Withholding Service	8.0	5.0

HIDDEN COVE, LTD.

ORIGINAL SHEET NO. 8.0

WATER TARIFF

(Continued from Sheet No. 7.0)

- 4.0 <u>APPLICATIONS BY AGENTS</u> Applications for water service requested by firms, partnerships, associations, corporations, and others shall be rendered only by duly authorized parties. When water service is rendered under agreement or agreements entered into between the Company and an agent of the principal, the use of such water service by the principal shall constitute full and complete ratification by the principal of the agreement or agreements entered into between the agent and the Company and under which such water service is rendered.
- 5.0 <u>WITHHOLDING SERVICE</u> The Company may withhold or discontinue water service rendered under application made by any member or agent of a household, organization, or business unless all prior indebtedness to the Company of such household, organization, or business for water service has been settled in full in accordance with Rule 25-30.320, Florida Administrative Code.
- 6.0 <u>EXTENSIONS</u> Extensions will be made to the Company's facilities in compliance with Commission Rules and Orders and the Company's tariff.
- 7.0 <u>LIMITATION OF USE</u> Water service purchased from the Company shall be used by the customer only for the purposes specified in the application for water service and the customer shall not sell or otherwise dispose of such water service supplied by the Company.

Water service furnished to the customer shall be rendered directly to the customer through Company's individual meter and may not be remetered by the customer for the purpose of selling or otherwise disposing of water service to lessees, tenants, or others and under no circumstances shall the customer or customer's agent or any other individual, association or corporation install meters for the purpose of so remetering said water service without the prior written approval of the Utility.

In no case shall a customer, except with the written consent of the Company, extend his lines across a street, alley, lane, court, property line, avenue, or other way

(Continued to Sheet No. 9.0)

WATER TARIFF

(Continued from Sheet No. 8.0)

in order to furnish water service to the adjacent property through one meter even though such adjacent property may be owned by him. In case of such unauthorized extension, remetering, sale or disposition of service, the customer's water service will be subject to discontinuance until such unauthorized extension, remetering, sale or disposition of service is discontinued and full payment is made to the Company for water service rendered by the Company (calculated on proper classification and rate schedules) and until reimbursement in full is made to the Company for all extra expenses incurred for clerical work, testing, and inspections. (This shall not be construed as prohibiting a Customer from remetering.)

8.0 <u>CONTINUITY OF SERVICE</u> - The Company will at all times use reasonable diligence to provide continuous water service, and having used reasonable diligence, shall not be liable to the customer for failure or interruption of continuous water service. The Company shall not be liable for any act or omission caused directly or indirectly by strikes, labor troubles, accidents, litigations, breakdowns, shutdowns for emergency repairs, or adjustments, acts of sabotage, enemies of the United States, Wars, United States, State, Municipal or other governmental interference, acts of God or other causes beyond its control.

> If at any time the Company shall interrupt or discontinue its service, all customers affected by said interruption or discontinuance shall be given not less than 24 hours written notice.

9.0 <u>TYPE AND MAINTENANCE</u> - The customer's pipes, apparatus and equipment shall be selected, installed, used and maintained in accordance with standard practice, and shall conform with the Rules and Regulations of the Company, and shall comply with all Laws and Governmental Regulations applicable to same. The Company shall not be responsible for the maintenance and operation of the customer's pipes and facilities. The customer expressly agrees not to utilize any appliance or device which is not properly constructed, controlled and protected or which may adversely affect the water service; and the Company reserves the right to discontinue or withhold water to such apparatus or device.

(Continued to Sheet No. 10.0)

ORIGINAL SHEET NO. 16.0

HIDDEN COVE, LTD.

WATER TARIFF

INDEX OF RATE AND CHARGES SCHEDULES

Sheet No.

Customers Deposits	21.0-21.1
Fire Protection Service	20.0
General Service, GS	17.0
Meter Test Deposits	22.0
Miscellaneous Service Charges	23.0
Multi-Residential Service, MS	19.0
Residential Service, RS	18.0
Service Availability Fees and Charges	24.0

ORIGINAL SHEET NO. 20.0

WATER TARIFF

FIRE PROTECTION SERVICE

WATER

AVAILABILITY -

APPLICABILITY -

LIMITATIONS - Subject to all of the Rules and Regulations of this Tariff and General Rules and Regulations of the Commission.

BILLING PERIOD- N/A

RATE - Public Fire Protection - per hydrant

Private Fire Protection -

N/A

BASE FACILITY CHARGE -

TERMS OF PAYMENT -

EFFECTIVE DATE -

<u>TYPE OF FILING</u> - Grandfather Certificate

WATER TARIFF

CUSTOMER DEPOSITS

ESTABLISHMENT OF CREDIT - Before rendering water service, the Company may require an applicant for service to satisfactory establish credit, but such establishment of credit shall not relieve the customer from complying with the Company's Rules for prompt payment. Credit will be deemed so established, in accordance with Rule 25-30.311, Florida Administrative Code, if:

- (A) The applicant for service furnishes a satisfactory guarantor to secure payment of bills for the service requested,
- (B) The applicant pays a cash deposit,
- (C) The applicant for service furnishes an irrevocable letter of credit from a bank or surety bond.

<u>AMOUNT OF DEPOSIT</u> - The amount of initial deposit shall be the following according to meter size:

	<u>Residential</u>	<u>General Service</u>
5/8 x 3/4"	N/A	N/A
1"	N/A	N/A
1 1/2"	N/A	N/A
Over 2"	N/A	N/A

<u>ADDITIONAL DEPOSIT</u> - Under Rule 25-30.311(7), Florida Administrative Code, the Company may require a new deposit, where previously waived or returned, or an additional deposit in order to secure payment of current bills. The Company shall provide the customer with reasonable written notice of not less than thirty (30) days where such request or notice is separate and apart from any bill for service. The total amount of the required deposit shall not exceed an amount equal to the average actual charge for water service for two (2) monthly billing periods for the twelvemonth period immediately prior to the date of notice. In the event the customer has had service less than 12 months, the Company shall base its new or additional deposit upon the average actual monthly billing available.

(Continued to Sheet No. 21.1)

WATER TARIFF

METER TEST DEPOSITS

<u>METER BENCH TEST REQUEST</u> - If any customer requests a bench test of his or her water meter, the Company will require a deposit to defray the cost of testing; such deposit shall not exceed the following schedule of fees and shall be in accordance with Rule 25-30.266, Florida Administrative Code:

METER SIZE	FEE
5/8 x 3/4"	\$20.00
1" and 1 1/2"	\$25.00
2" and over	Actual Cost

<u>REFUND OF METER BENCH TEST DEPOSIT</u> - If the meter is found to register in excess of prescribed accuracy limits pursuant to Rule 25-30.262, Florida Administrative Code, the deposit shall be refunded. If the meter is found to register accurately or below such prescribed accuracy limits, the deposit shall be retained by the Company as a service charge for conducting the meter test.

<u>METER FIELD TEST REQUEST</u> - Upon written request of any customer, the Company shall, without charge, make a field test of the accuracy of the water meter in use at the customer's premises provided that the meter has not been tested within one-half the maximum interval allowed under Rule 25-30.265, Florida Administrative Code.

EFFECTIVE DATE -

TYPE OF FILING - Grandfather Certificate

WATER TARIFF

SERVICE AVAILABILITY FEES AND CHARGES

SERVICE AVAILABILITY FEES AND CHARGES
<u>SHEET</u>
DESCRIPTION AMOUNT NUMBER
Back-Flow Preventer Installation Fee
5/8 x 3/4"\$
1"\$
1 1/2" \$
2" \$
Over 2" [1]
Customer Connection (Tap-in) Charge
5/8 x 3/4" metered service \$
1" metered service \$
1 1/2" metered service \$
2" metered service \$
Over 2" metered service Actual Cost [1]
Guaranteed Revenue Charge
With Prepayment of Service Availability Charges:
Residential-per ERC/month ()GPD \$
All others-per gallon/month \$
Without Prepayment of Service Availability Charges:
Residential-per ERC/month ()GPD \$
All others-per gallon/month\$
Inspection Fee
Main Extension Charge
Residential-per ERC ()GPD \$
All others-per gallon\$
or
Residential-per lot (foot frontage) \$
All others-per front foot\$
Meter Installation Fee
$\frac{\text{Meter installation ree}}{5/8 \times 3/4"}$
1" \$
1 1/2"
2" \$
Over 2" \$ <u>Plan Review Charge</u> [1]
Plant Capacity Charge
Residential-per ERC ()GPD \$
All others-per gallon \$
System Capacity Charge
Residential-per ERC ()GPD\$
All others-per gallon \$

[1] Actual Cost is equal to the total cost incurred for services rendered by a customer.

EFFECTIVE DATE -

<u>TYPE OF FILING</u> - Grandfather Certificate

Ray Moats

President of General Partner

WATER TARIFF

APPLICATION FOR WATER SERVICE

HIDDEN COVE MOBILE HOME PARK LEASE AGREEMENT

THIS LEASE made and entered into this _____ day of _____, 19___, by and between Hidden Cove, Ltd., known as Hidden Cove Mobile Home park, hereinafter called the "Community" and ______, hereinafter called the Owner-tenant.

WITNESSETH, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Ownertenant the following described property: Street: ______, Lot No.:

TO HAVE AND TO HOLD the same from the ______ day of ______, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of \$_______ from the beginning of this Lease until the 31st day of December, 19______. Annual monthly base rental increases for the calendar years 19______ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1967 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.

2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.

3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.

4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Owner-tenant so long as permitted by Chapter 723, Florida Statutes.

(Continued to Sheet No. 27.1)

WATER TARIFF

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(Continued from Sheet No. 27.0)

5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm Drainage is included in the lot rental amount and charged in accordance with Sections VII and VIII(J) of the Prospectus.

9. Other financial obligations of the Owner-tenant, not including user fees, are as follows:

	•	
Yard Maintenance (not charg fails to maintain yard)	ed unless owner	\$ _20.00 per cut
Water and Sewer excess	up to 5,000 gallons s per 1,000 gal. over 5,000	\$ <u>15.71</u> \$ <u>1.05</u>
Tree Trimming/Removal, Deb (not charged unless Owner-tex to provide services himself)		<pre>\$billed amount</pre>
Late Check Charge		\$ <u>1.50 per day</u>
Bad Check Charge		\$ 15.00
Extra Resident Fee		\$
Debris Removal	charged in accordance with Se of the Prospectus	ction VIII(K)
Governmental Assessments, Fees, Surcharges, and and Charges	charged in accordance with Se of the Prospectus	ction VIII(J)

The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

(Continued to Sheet No. 27.2)

Ray Moats President of General Partner

Fees or Charges

ORIGINAL SHEET NO. 27.2

WATER TARIFF

(Continued from Sheet No. 27.1)

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

Community Representative

Owner-tenant

ORIGINAL SHEET NO. 2.0

HIDDEN COVE, LTD.

WASTEWATER TARIFF

Table	of	Contents	5
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	Sheet Number
Communities Served Listing	4.0
Index of	
Rates and Charges Schedules	16.0
Rules and Regulations	6.0-6.1
Service Availability Policy	27.0
Standard Forms	23.0
Technical Terms and Abbreviations	5.0-5.1
Territory Served	3.0-3.1

WASTEWATER TARIFF

(Continued from Sheet No. 5.0)

- 10.0 <u>"POINT OF COLLECTION"</u> For wastewater systems, "Point of Collection" shall mean the point at which the Company's piping, fittings, and valves connect with the customer's piping, fittings, and valves.
- 11.0 <u>"RATE SCHEDULE"</u> The rate(s) or charge(s) for a particular classification of service plus the several provisions necessary for billing, including all special terms and conditions under which service shall be furnished at such rate or charge.
- 12.0 <u>"SERVICE"</u> Service, as mentioned in this tariff and in agreement with customers, shall be construed to include, in addition to all wastewater service required by the customer the readiness and ability on the part of the Company to furnish wastewater service to the customer. Service shall conform to the standards set for in Section 367.111 of the Florida Statutes.
- 13.0 <u>"SERVICES LINES"</u> The pipe between the Company's mains and the point of collection which includes all the pipe, fittings and valves necessary to make the connection to the customer's premises.
- 14.0 <u>"TERRITORY"</u> The geographical area described by metes and bounds with township, range and section in a certificate, which may be within or without the boundaries of an incorporated municipality, and may include areas in more than one county.

WASTEWATER TARIFF

INDEX OF RULES AND REGULATIONS

	Sheet <u>Number</u>	Rule <u>Number</u>
Access to Premises	10.0	13.0
Adjustment of Bills	13.0	21.0
Applications by Agents	7.0	4.0
Billing Periods	11.0	15.0
Change of Customer's Installation	9.0	10.0
Change of Occupancy	12.0	19.0
Continuity of Service	9.0	8.0
Delinquent Bills	11.0	16.0
Evidence of Consumption	13.0	23.0
Extensions	8.0	6.0
Filing of Contracts	13.0	22.0
General Information	7.0	2.0
Held for Future Use	14.0-1	.5.0
Inspection of Customer's Installation	10.0	11.0
Limitation of Use	8.0	7.0
Payment of Wastewater and Water Service Bills Concurrently	11.0	17.0
Policy Dispute	7.0	1.0
Protection of Company's Property	10.0	12.0
Right of Way or Easements	10.0	14.0
Signed Application Necessary	7.0	3.0
(Continued to Sheet No. 6.1)		

ORIGINAL SHEET NO. 6.1

WASTEWATER TARIFF

(Continued for Sheet No. 6.0)

	Sheet <u>Number</u>	
Tax Clause	12.0	18.0
Temporary Discontinuance of Service	13.0	23.1
Type and Maintenance	9.0	9.0
Unauthorized Connections - Wastewater	12.0	20.0
Withholding Service	8.0	5.0

WASTEWATER TARIFF

RULES AND REGULATIONS

- 1.0 <u>POLICY DISPUTE</u> Any dispute between the Company and the customer or prospective customer regarding the meaning or application of any provision this tariff shall upon writ ten request by either party be resolved by the Florida Public Service Commission.
- 2.0 <u>GENERAL INFORMATION</u> The Company's Rules and Regulations insofar as they are inconsistent with any Statute, Law, Rule or Commission Order shall be null and void. These Rules and Regulations are a part of the rate schedules and applications and contracts of the Company, and in the absence of specific written agreement to the contrary, apply without modification or change to each and every customer to whom the Company renders wastewater service.

In the event that a portion of these Rules and Regulations are declared unconstitutional or void for any reason by any court of competent jurisdiction, such decision shall in no way affect the validity of the remaining portions of the Rules and Regulations for wastewater service unless such court order or decision shall so direct.

The Company shall provide to all customers requiring such service within the territory described in its certificate upon such terms as are set forth in this tariff pursuant to Chapter 25-9 and 25-30, Florida Administrative Code, and Chapter 367, Florida Statutes.

3.0 <u>SIGNED APPLICATION NECESSARY</u> - Wastewater service is furnished only after a signed application or agreement and payment of the initial connection fee are accepted by the Company. The conditions of such application or agreement are binding upon the customer as well upon the Company. A copy of the application or agreement for wastewater service accepted by the Company will be furnished to the applicant on request.

The applicant shall furnish to the Company the correct name and street address or lot and block number at which wastewater service is to be rendered.

4.0 <u>APPLICATIONS BY AGENTS</u> - Applications for wastewater service requested by firms, partnerships, associations, corporations, and others shall be rendered only by duly

(Continued to Sheet No. 8.0)

WASTEWATER TARIFF

(Continued from Sheet No. 7.0)

authorized parties. When wastewater service is rendered under agreement or agreements entered into between the Company and an agent of the principal, the use of such wastewater service by the principal or agent shall constitute full and complete ratification by the principal of the agreement or agreements entered into between agent and the Company and under which such wastewater service is rendered.

- 5.0 <u>WITHHOLDING SERVICE</u> The Company may withhold or discontinue wastewater service rendered under application made by any member or agent of a household, organization, or business unless all prior indebtedness to the Company of such household, organization, or business for wastewater service has been settled in full in accordance with Rule 25-30.320, Florida Administrative Code.
- 6.0 <u>EXTENSIONS</u> Extensions will be made to the Company's facilities in compliance with Commission Rules and Orders and the Company's tariff.
- 7.0 <u>LIMITATION OF USE</u> Wastewater service purchased from the Company shall be used by the consumer only for the purposes specified in the application for wastewater service. Wastewater service rendered to the customer for the consumer's own use and shall be collected directly into the Company's main wastewater lines.

In no case shall a customer, except with the written consent of the Company, extend his lines across a street, alley, lane, court, property line, avenue, or other way in order to furnish wastewater service to the adjacent property even though such adjacent property may be owned by him. In case of such unauthorized extension, remetering, sale, or disposition of service, the consumer's wastewater service will be is subject to discontinuance until such unauthorized extension, remetering, sale, or disposition of service discontinued and full payment is made to the Company for wastewater service rendered by the Company (calculated on proper classifications and rate schedules)

(Continued to Sheet No. 9.0)

ORIGINAL SHEET NO. 9.0

WASTEWATER TARIFF

(Continued from Sheet No. 8.0)

and until reimbursement in full made to the Company for all extra expenses incurred for clerical work, testing, and inspections. (This shall not be construed as prohibiting a Customer from remetering.)

8.0 <u>CONTINUITY OF SERVICE</u> - The Company will at all times use reasonable diligence to provide continuous wastewater service, and having used reasonable diligence, shall not be liable to the customer for failure or interruption of continuous wastewater service. The Company shall not be liable for any act or omission caused directly or indirectly by strikes, labor troubles, accidents, litigations, breakdowns, shutdowns for emergency repairs, or adjustments, acts of sabotage, enemies of the United States, Wars, United States, State, Municipal or other governmental interference, acts of God or other causes beyond its control.

If at any time the Company shall interrupt or discontinue its service, all customers affected by said interruption or discontinuance shall be given not less than twenty-four (24) hours written notice.

- 9.0 <u>TYPE AND MAINTENANCE</u> The customer's pipes, apparatus and equipment shall be selected, installed, used and maintained in accordance with standard practice and shall conform with the Rules and Regulations of the Company and shall comply with all Laws and Governmental Regulations applicable to same. The Company shall not be responsible for the maintenance and operation of the customer's pipes and facilities. The customer expressly agrees not to utilize any appliance or device which is not properly constructed, controlled and protected, or which may adversely affect the wastewater service; the Company reserves the right to discontinue or withhold wastewater service to such apparatus or device.
- 10.0 <u>CHANGE OF CUSTOMER'S INSTALLATION</u> No changes or increases in customer's installation, which will materially affect the proper operation of the pipes, mains, or stations of the Company, shall be made without written consent of the Company. The customer shall be liable for any change resulting from a violation of this Rule.

(Continued to Sheet No. 10.0)

WASTEWATER TARIFF

(Continued from Sheet No. 9.0)

11.0 <u>INSPECTION OF CUSTOMER'S INSTALLATION</u> - All Customer's wastewater service installations or changes shall be inspected upon completion by a competent authority to ensure that customer's piping, equipment, and devices have been installed in accordance with accepted standard practice and local Laws and Governmental Regulations. Where Municipal or other Governmental inspection is required by local Rules and Ordinances, the Company cannot render wastewater service until such inspection has been made and a formal notice of approval from the inspecting authority has been received by the Company.

> Notwithstanding the above, the Company reserves the right to inspect the customer's installation prior to rendering wastewater service, and from time to time thereafter, but assumes no responsibility whatsoever for any portion thereof.

12.0 <u>PROTECTION OF COMPANY'S PROPERTY</u> - The customer shall exercise reasonable diligence to protect the Company's property on the customer's premises and shall knowingly permit no one, but the Company's agents or persons authorized by law, to have access to the Company's pipes and apparatus.

> In the event of any loss or damage to property of the Company caused by or arising out of carelessness, neglect, or misuse by the customer, the cost of making good such loss or repairing such damage shall be paid by the customer.

- 13.0 <u>ACCESS TO PREMISES</u> The duly authorized agents of the Company shall have access at all reasonable hours to the premises of the customer for the purpose of installing, maintaining, inspecting, or removing the Company's property or for performance under or termination of the Company's agreement with the customer and under such performance shall not be liable for trespass.
- 14.0 <u>RIGHT OF WAY OR EASEMENTS</u> The customer shall grant or cause to be granted to the Company, and without cost to the Company, all rights, easements, permits, and privileges which are necessary for the rendering of wastewater service.

(Continued to Sheet No. 11.0)

WASTEWATER TARIFF

(Continued from Sheet No. 10.0)

- 15.0 <u>BILLING PERIODS</u> Customers pay the base charge monthly, in advance, in the lot rental amount but not in the base rent. Bills shall become due when rendered and be considered as received by the customer when delivered or mailed to the water service address or some other place mutually agreed upon. Non-receipt of bills by the customer shall not release or diminish the obligation of the customer with respect to payment thereof.
- 16.0 <u>DELINQUENT BILLS</u> Bills are due when rendered. However, the Company shall not consider the customer delinquent in paying any bill until the twenty-first (21) day after the Company has mailed or presented the bill to the customer for payment. Wastewater service may then be discontinued only after the Company has mailed or presented within five (5) working days a written notice to the customer in accordance with Rule 25-30.320, Florida Administrative Code. Wastewater service shall be restored only after the Company has received payment for all past-due bills and reconnect charges from the customer.

There shall be no liability of any kind against the Company for the discontinuance of wastewater service to a customer for that customer's failure to pay the bills on time.

Partial payment of any bill for wastewater service rendered will not be accepted by the Company, except by the Company's agreement thereof or by direct order from the Commission.

PAYMENT OF WASTEWATER AND WATER SERVICE BILLS CONCURRENT-17.0 LY - When both wastewater and water service are provided by the Company, payment of any wastewater service bill rendered by the Company to a customer shall not be accepted by the Company without the simultaneous or concurrent payment of any water service bill rendered by the Company. The Company may discontinue both wastewater service and water service to the customer's premises for non-payment of the wastewater service bill or water service bill or if payment is not made concurrently. The Company shall not re-establish or reconnect wastewater service and/or water service until such time as all wastewater and water service bills and all charges are paid.

(Continued to Sheet No. 12.0)

WASTEWATER TARIFF

(Continued from Sheet No. 11.0)

- 18.0 <u>TAX CLAUSE</u> A municipal or county franchise tax levied upon a wastewater or water public utility shall not be incorporated into the rate for wastewater or water service but shall be shown as a separate item on the utility's bills to its customers in such Municipality or County.
- CHANGE OF OCCUPANCY When a change of occupancy takes 19.0 place on any premises supplied by the Company with wastewater service, written notice thereof shall be given at the office of the Company not less than three (3) days prior to the date of change by the outgoing Customer. The outgoing customer shall be held responsible for all wastewater service rendered on such premises until such written notice is so received by the Company and the Company has had reasonable time to discontinue the wastewater service. However, if such written notice has not been received, the application of a succeeding occupant for wastewater service will automatically terminate the prior account. The customer's deposit may be transferred from one service location to another, if both locations are supplied wastewater service by the Company; the customer's deposit may not be transferred from one name to another.

Notwithstanding the above, the Company will accept telephone orders, for the convenience of its customers, to discontinue or transfer wastewater service from one service address to another and will use all reasonable diligence in the execution thereof. However, oral orders or advice shall not be deemed binding or be considered formal notification to the Company.

20.0 <u>UNAUTHORIZED CONNECTIONS - WASTEWATER</u> - Connections to the Company's wastewater system for any purpose whatsoever are to be made only by employees of the Company. Any unauthorized connections to the customer's wastewater service shall be subject to immediate discontinuance without notice. Wastewater service shall not be restored until such unauthorized connections have been removed and until settlement is made in full to the Company for all wastewater service estimated by the Company to have been used by reason of such unauthorized connection.

(Continued to Sheet No. 13.0)

ORIGINAL SHEET NO. 13.0

WASTEWATER TARIFF

(Continued from Sheet No. 12.0)

- 21.0 <u>ADJUSTMENT OF BILLS</u> When a customer has been overcharged or undercharged as a result of incorrect application of the rate schedule, incorrect reading of a water meter, or similar reasons, the amount may be credited or billed to the customer in accordance with Rule 25-30.340 and 25-30.350, Florida Administrative Code.
- 22.0 <u>FILING OF CONTRACTS</u> Whenever a Developer Agreement or Contract, Guaranteed Revenue Contract, or Special Contract or Agreement is entered into by the Company for the sale of its product or services in a manner not specifically covered by its Rules and Regulations or approved Rate Schedules, a copy of such contracts or agreements shall be filed with the Commission prior to its execution in accordance with Rules 25-9.034 and Rule 25-30.550, Florida Administrative Code. If such contracts or agreements are approved by the Commission, a conformed copy shall be placed on file with the Commission prior to its effective date.
- 23.0 <u>EVIDENCE OF CONSUMPTION</u> The initiation or continuation or resumption of water service to the customer's premises shall constitute the initiation or continuation or resumption of wastewater service to the customer's premises regardless of occupancy.
- 23.1 <u>TEMPORARY DISCONTINUANCE OF SERVICE</u> At any time a customer may request a temporary discontinuance of service in order to insure that customer is not billed for any wastewater usage during the period of time in which that premises is not occupied or otherwise utilized. The customer will, however, be liable for payment of the base facility charge during the entire period of time the temporary disconnect remains in effect, in order for the Company to be able to recover its fixed cost of having wastewater service available to those premises upon request by the customer.

ORIGINAL SHEET NO. 14.0

WASTEWATER TARIFF

HELD FOR FUTURE USE

ORIGINAL SHEET NO. 15.0

WASTEWATER TARIFF

HELD FOR FUTURE USE

ORIGINAL SHEET NO. 16.0

WASTEWATER TARIFF

INDEX OF RATES AND CHARGES SCHEDULES

Sheet No.

Customer Deposits	20.0-20.1
General Service, GS	17.0
Miscellaneous Service Charges	21.0
Multi-Residential Service, MS	19.0
Residential Service, RS	18.0
Service Availability Fees and Charges	22.0

WASTEWATER TARIFF

GENERAL SERVICE

RATE SCHEDULE GS

- <u>AVAILABILITY</u> Available throughout the area serviced by the Company.
- <u>APPLICABILITY</u> For water service to all customers for which no other schedule applies.
- <u>LIMITATIONS</u> Subject to all of the Rules and Regulations of this tariff and General Rules and Regulations of the Commission.

BILLING PERIOD- N/A

RATE - N/A

MINIMUM BILL - N/A

TERMS OF PAYMENT - Bills are due and payable when rendered and become delinquent if not paid within twenty (20) days. After five (5) working days' written notice is mailed to the customer separate and apart from any other bill, service may then be discontinued.

EFFECTIVE DATE -

<u>TYPE OF FILING</u> - Grandfather Certificate

ORIGINAL SHEET NO. 18.0

HIDDEN COVE, LTD.

WASTEWATER TARIFF

RESIDENTIAL SERVICE

RATE SCHEDULE RS

- AVAILABILITY Available throughout the area served by the Company.
- <u>APPLICABILITY</u> For water and wastewater service for all purposes in private residences and individually metered apartment units
- LIMITATIONS Subject to all of the Rules and Regulations of this tariff and General Rules and Regulations of the Commission.
- BILLING PERIOD- Monthly in advance
- <u>RATE</u> Water and Wastewater

Base Charge

\$15.00

- MINIMUM BILL \$15.00
- TERMS OF PAYMENT Bills are due and payable when rendered and become delinquent if not paid within twenty (20) days. After five (5) working days' written notice is mailed to the customer separate and apart from any other bill, service may then be discontinued.
- EFFECTIVE DATE -
- <u>TYPE OF FILING</u> Grandfather Certificate

ORIGINAL SHEET NO. 19.0

WASTEWATER TARIFF

MULTI-RESIDENTIAL SERVICE

RATE SCHEDULE MS

- <u>AVAILABILITY</u> Available throughout the Sumter County systems.
- <u>APPLICABILITY</u> For wastewater service to all master-metered residential customers including, but not limited to, Condominiums, Apartments, and Mobile Home Parks.
- <u>LIMITATIONS</u> Subject to all of the Rules and Regulations of this tariff and General Rules and Regulations of the Commission.
- BILLING PERIOD Monthly
- RATE Per Unit

Base Facilities Charge

All meter sizes

N/A

Gallonage Charge per 1,000 gallons N

N/A

BASE FACILITY CHARGE - N/A

TERMS OF PAYMENT - Bills are due and payable when rendered and become delinquent if not paid within twenty (20) days. After five (5) working days' written notice is mailed to the customer separate and apart from any other bill, service may then be discontinued.

EFFECTIVE DATE -

TYPE OF FILING -

WASTEWATER TARIFF

CUSTOMER DEPOSITS

ESTABLISHMENT OF CREDIT - Before rendering wastewater service, the Company may require an applicant for service to satisfactory establish credit, but such establishment of credit shall not relieve the customer from complying with the Company's Rules for prompt payment. Credit will be deemed so established, in accordance with Rule 25-30.311, Florida Administrative Code, if:

- (A) The applicant for service furnishes a satisfactory guarantor to secure payment of bills for the service requested,
- (B) The applicant pays a cash deposit,
- (C) The applicant for service furnishes an irrevocable letter of credit from a bank or surety bond.

<u>AMOUNT OF DEPOSIT</u> - The amount of initial deposit shall be the following according to meter size:

	<u>Residential</u>	<u>General Service</u>
5/8 x 3/4"	N/A	N/A
1"	N/A	N/A
1 1/2"	N/A	N/A
Over 2"	N/A	N/A

ADDITIONAL DEPOSIT - Under Rule 25-30.311(7), Florida Administrative Code, the Company may require a new deposit, where previously waived or returned, or an additional deposit in order to secure payment of current bills. The Company shall provide the customer with reasonable written notice of not less than thirty (30) days where such request or notice is separate and apart from any bill for service. The total amount of the required deposit shall not exceed an amount equal to the average actual charge for wastewater service for two (2) monthly billing periods for the twelve-month period immediately prior to the date of notice. In the event the customer has had service less than 12 months, the Company shall base its new or additional deposit upon the average actual monthly billing available.

(Continued to Sheet No. 20.1)

WASTEWATER TARIFF

(Continued from Sheet No. 20.0)

<u>INTEREST ON DEPOSIT</u> - The Company shall pay interest on customer deposits pursuant to Rule 25-30.311(4)(a). The rate of interest is six percent (6%) per annum. The payment of interest shall be made once each year as a credit on regular bills or when service is discontinued as a credit on final bills. No customer depositor will receive interest on his or her deposit until a customer relationship and the deposit have been in existence for at least six (6) months. At such time, the customer depositor shall be entitled to receive interest from the day of the commencement of the customer relationship and placement of the deposit. The Company will pay or credit accrued interest to the customer's account during the month of <u>N/A</u> each year.

<u>REFUND OF DEPOSIT</u> - After a residential customer has established a satisfactory payment record and has had continuous service for a period of twenty-three (23) months, the Company shall refund the customer's deposit provided the customer has <u>not</u>, in the preceding twelve (12) months:

- (a) made more than one late payment of the bill (after the expiration of twenty (20) days form the date of mailing or delivery by the Company),
- (b) paid with a check refused by a bank,
- (c) been disconnected or non-payment, or
- (d) at any time tampered with the meter or used service in a fraudulent or unauthorized manner.

Notwithstanding the above, the Company may hold the deposit of a non-residential customer after a continuous service period of twenty-three (23) months and shall pay interest on the non-residential customer's deposit at the rate of seven percent (7%) per annum upon retainment of such deposit.

Nothing in this rule shall prohibit the Company from refunding a customer's deposit in less than twenty-three (23) months.

EFFECTIVE DATE -

<u>TYPE OF FILING</u> - Grandfather Certificate

WASTEWATER TARIFF

MISCELLANEOUS SERVICE CHARGES

The company may charge the following miscellaneous service charges in accordance with the terms stated herein. If both water and wastewater services are provided, only a single charge is appropriate unless circumstances beyond the control of the Company require multiple actions.

> <u>INITIAL CONNECTION</u> - This charge would be levied for service initiation at a location where service did not exist previously.

NORMAL RECONNECTION - This charge would be levied for transfer of service to a new customer account at a previously served location or reconnection of service subsequent to a customer requested disconnection.

<u>VIOLATION RECONNECTION</u> - This charge would be levied prior to reconnection of an existing customer after disconnection of service for cause according to Rule 25-30.320(2), Florida Administrative Code, including a delinquency in bill payment.

<u>PREMISES VISIT CHARGE (IN LIEU OF DISCONNECTION)</u> - This charge would be levied when a service representative visits a premises for the purpose of discontinuing service for nonpayment of a due and collectible bill and does not discontinue service because the customer pays the service representative or otherwise makes satisfactory arrangements to pay the bill.

Schedule of Miscellaneous Service Charges

Initial Connection	
Normal Reconnection	N/A
Violation Reconnection	N/A
Premises Visit (in lieu of disconnection)	N/A

[1] Actual cost is equal to the total cost incurred for services.

EFFECTIVE DATE -

<u>TYPE OF FILING</u> - Grandfather Certificate

ORIGINAL SHEET NO. 22.0

WASTEWATER TARIFF

SERVICE AVAILABILITY FEES AND CHARGES

DESCRIPTION	AMOUNT	<u>SHEET</u> NUMBER
Customer Connection (Tap-in) Charge 5/8 x 3/4" metered service		st [1]
Guaranteed Revenue Charge With Prepayment of Service Availability Charges: Residential-per ERC/month ()GPD \$ All others-per gallon/month \$ Without Prepayment of Service Availability Charg Residential-per ERC/month ()GPD \$ All others-per gallon/month \$	es:	
Inspection Fee A	ctual Co	st [1]
Main Extension Charge Residential-per ERC ()GPD\$ All others-per gallon\$ or	i	
Residential-per lot (foot frontage) \$ All others-per front foot		
Plan Review Charge A	ctual Co	st [1]
Plant Capacity Charge Residential-per ERC ()GPD\$ All others-per gallon\$		
System Capacity Charge Residential-per ERC ()GPD\$ All others-per gallon\$		
[1] Actual Cost is equal to the total cost incurr rendered by a customer.	ed for se	ervices

EFFECTIVE DATE -

TYPE OF FILING -

ORIGINAL SHEET NO. 23.0

HIDDEN COVE, LTD.

WASTEWATER TARIFF

INDEX OF STANDARD FORMS

Sheet No.

APPLICATION FOR WASTEWATER SERVICE	25.0
COPY OF CUSTOMER'S BILL	26.0
CUSTOMER'S GUARANTEE DEPOSIT RECEIPT	24.0

ORIGINAL SHEET NO. 24.0

WASTEWATER TARIFF

CUSTOMER'S GUARANTEE DEPOSIT RECEIPT

N/A

WASTEWATER TARIFF

\$

APPLICATION FOR WASTEWATER SERVICE

HIDDEN COVE MOBILE HOME PARK LEASE AGREEMENT

THIS LEASE made and entered into this _____ day of _____, 19__, by and between Hidden Cove, Ltd., known as Hidden Cove Mobile Home park, hereinafter called the "Community" and ______, hereinafter called the Owner-tenant.

WITNESSETH, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Ownertenant the following described property: Street: ______, Lot No.:

TO HAVE AND TO HOLD the same from the ______ day of ______, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of \$______ from the beginning of this Lease until the 31st day of December, 19______. Annual monthly base rental increases for the calendar years 19______ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1967 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.

2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.

3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.

4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Owner-tenant so long as permitted by Chapter 723, Florida Statutes.

(Continued to Sheet No. 25.1)

WASTEWATER TARIFF

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(Continued from Sheet No. 25.0)

5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm Drainage is included in the lot rental amount and charged in accordance with Sections VII and VIII(J) of the Prospectus.

9. Other financial obligations of the Owner-tenant, not including user fees, are as follows:

		Fees or Charges
Yard Maintenance (not charge fails to maintain yard)	ed unless owner	\$ _20.00 per cut
Water and Sewer excess	up to 5,000 gallons per 1,000 gal. over 5,000	\$ <u>15.71</u> \$ <u>1.05</u>
Tree Trimming/Removal, Debr (not charged unless Owner-ter to provide services himself)		<pre>\$ billed amount</pre>
Late Check Charge		\$ 1.50 per day
Bad Check Charge		\$
Extra Resident Fee		\$
Debris Removal	charged in accordance with Sec of the Prospectus	rtion VIII(K)
Governmental Assessments, Fees, Surcharges, and and Charges	charged in accordance with Sec of the Prospectus	tion VIII(J)

The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

(Continued to Sheet No. 25.2)

WASTEWATER TARIFF

(Continued from Sheet No. 25.1)

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

Community Representative

Owner-tenant

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WASTEWATER TARIFF

COPY OF CUSTOMER'S BILL

No customer bills are issued. Customers pay the base charge monthly, in advance, in the lot rental amount but not in the base rent.

ORIGINAL SHEET NO. 27.0

HIDDEN COVE, LTD.

WASTEWATER TARIFF

INDEX OF SERVICE AVAILABILITY

Sheet Number

Schedule of Fees and Charges	22.0
Service Availability Policy	28.0
Table of Daily Flows	N/A

WASTEWATER TARIFF

SERVICE AVAILABILITY POLICY

N/A

WASTEWATER TARIFF

HELD FOR FUTURE USE

Ray Moats President of General Partner

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