

FINANCIAL, RATE AND ENGINEERING MINIMUM FILING REQUIREMENTS

ADDITIONAL ENGINEERING INFORMATION

UTILITIES, INC. OF SANDALHAVEN

DOCKET NO.: 060285-SU

CHARLOTTE COUNTY

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SCR	Test Year Ended December 31, 2005
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ADDITIONAL ENGINEERING INFORMATION

UTILITIES, INC. OF SANDALHAVEN

DOCKET NO.: 060285-SU

CHARLOTTE COUNTY

INDEX

	<u>TAB</u>
DETAILED MAP	1
CHEMICALS USED	2
CHEMICAL ANALYSIS	3
OPERATIONS REPORT	4
INSPECTION REPORTS	5
PERMITS	6
NOTICES	7
FIELD EMPLOYEES	8
VEHICLES	9
CUSTOMER COMPLAINTS	10

ADDITIONAL ENGINEERING INFORMATION UTILITIES, INC. OF SANDALHAVEN DOCKET NO.: 060285-SU CHARLOTTE COUNTY

Test Year Ended December 31, 2005

UTILITIES, INC. OF SANDALHAVEN

DOCKET NO.: 060285-SU

CHARLOTTE COUNTY

25.30-440 (1) Detailed Map

UTILITIES, INC. OF SANDALHAVEN

DOCKET NO.: 060285-SU

CHARLOTTE COUNTY

25.30-440 (2) Chemicals Used Dosage rates vary depending on various factors in order to produce potable water or treated effluent that meets all regulatory requirements.

Company	W/S	Invoice Number	Туре	Quantity	Per Unit	Amount	Tax	Total
UTILITIES, INC OF SANDALHAVEN	5	850	Sodium Hypochlorite	357	1.10	392.70		392.70
UTILITIES, INC OF SANDALHAVEN	S	850	Fuelsurcharge	1	8.00	8.00		8.00
UTILITIES, INC OF SANDALHAVEN	S	850	Total for invoice No. 850			400.70	÷	400.70
UTILITIES, INC OF SANDALHAVEN	S	2697	Sodium Hypochlorite	305	1.10	335.50		
UTILITIES, INC OF SANDALHAVEN	5	2697	Fuelsurcharge	1	8.00	8.00		
UTILITIES, INC OF SANDALHAVEN	S	2697	Total for invoice No. 2697			343.50	•	343.50
UTILITIES, INC OF SANDALHAVEN	S	3601	Sodium Hypochlorite	264	1.10	290.40		
UTILITIES, INC OF SANDALHAVEN	S	3601	Fuelsurcharge	1	8.00	8.00		
UTILITIES, INC OF SANDALHAVEN	S	3601	Total for invoice No. 3601			298.40	-	298.40
UTILITIES, INC OF SANDALHAVEN	S	3601	Sodium Hypochlorite	179	1.10	196.90		
UTILITIES, INC OF SANDALHAVEN	S	3601	Fuelsurcharge	1	8.00	8.00		
UTILITIES, INC OF SANDALHAVEN	S	3601	Total for invoice No. 3601			204.90		204.90
UTILITIES, INC OF SANDALHAVEN	S	4392	Histosol OP	21	11.92	250.32		
UTILITIES, INC OF SANDALHAVEN	S	4392	Freight	1	6.74	6.74		
UTILITIES, INC OF SANDALHAVEN	. S	4392	Total for invoice No. 4392			257.06	-	257.06
UTILITIES, INC OF SANDALHAVEN	S	4392	Histosol OP	220	13.71	3,016.20		
UTILITIES, INC OF SANDALHAVEN	S	4392	Freight	1	223.82	223.82		
UTILITIES, INC OF SANDALHAVEN	S	4392	Total for invoice No. 4392			3,240.02	-	3,240.02
UTILITIES, INC OF SANDALHAVEN	S	72844	Sodium Hypochlorite	249	0.85	211.65	-	211.65
UTILITIES, INC OF SANDALHAVEN	S	75934	Sodium Hypochlorite	404	0.85	343.40	-	343.40
UTILITIES, INC OF SANDALHAVEN	S	75934	Sodium Hypochlorite	469	0.85	398.65	-	398.65
UTILITIES, INC OF SANDALHAVEN	S	76612	Sodium Hypochlorite	252	0.95	239.40	-	239.40
UTILITIES, INC OF SANDALHAVEN	S	76612	Sodium Hypochlorite	128	0.95	121.60	•	121.60
UTILITIES, INC OF SANDALHAVEN	S	77188	Histosol OP	220	13.71	3,016.20		
UTILITIES, INC OF SANDALHAVEN	S	77188	Freight	1	204.82	204.82		
UTILITIES, INC OF SANDALHAVEN	S	77188	Total for invoice No. 77188			3,221.02		3,221.02
UTILITIES, INC OF SANDALHAVEN	S	78074	Sodium Hypochlorite	249	0.95	236.55	-	236.55
UTILITIES, INC OF SANDALHAVEN	S	78074	Hydrated Lime	40	7.75	310.00	21.70	331.70
UTILITIES, INC OF SANDALHAVEN	S	78642	Sodium Hypochlorite	205	0.95	194.75	-	194.75
UTILITIES, INC OF SANDALHAVEN	S	80525	Histosol OP	220	13.71	3,016.20		
UTILITIES, INC OF SANDALHAVEN	S	80525	Freight	1	207.97	207.97		
UTILITIES, INC OF SANDALHAVEN	S	80525	Total for invoice No. 80525		207.77	3,224.17		3,224.17
UTILITIES, INC OF SANDALHAVEN	5	80968	Sodium Hypochlorite	219	0.95	208.05		208.05
UTILITIES, INC OF SANDALHAVEN	S	80968	Sodium Hypochlorite	171	0.95	162.45		162.45
UTILITIES, INC OF SANDALHAVEN	S	81730	Sodium Hypochlorite	270	0.95	256.50		256.50
UTILITIES, INC OF SANDALHAVEN	S	83026	Sodium Hypochlorite	489	0.95	464.55		464.55
UTILITIES, INC OF SANDALHAVEN	5	83879	Sodium Hypochlorite	180	0.95	171.00	-	171.00
UTILITIES, INC OF SANDALHAVEN	<u>s</u>	83879	Sodium Hypochlorite	245	0.95	232.75		232.75
UTILITIES, INC OF SANDALHAVEN	5	83879		210	0.95	199.50		
UTILITIES, INC OF SANDALHAVEN	S	83886	Sodium Hypochlorite	220			-	199.50
	S	83886	Histosol OP		13.71	3,016.20	· · · · · · · · · · · · · · · · · · ·	
UTILITIES, INC OF SANDALHAVEN	<u>S</u>		Shipping/Handling	1	210.19	210.19		0.007.00
UTILITIES, INC OF SANDALHAVEN		83886	Total for invoice No. 83886	205		3,226.39		3,226.39
UTILITIES, INC OF SANDALHAVEN	S	84783	Sodium Hypochlorite	305	0.95	289.75	-	289.75
UTILITIES, INC OF SANDALHAVEN	5	85186	Sodium Hypochlorite	156	0.95	148.20	•	148.20
UTILITIES, INC OF SANDALHAVEN	<u>S</u>	87216	Sodium Hypochlorite	305	0.95	289.75		289.75
UTILITIES, INC OF SANDALHAVEN	S	88391	Sodium Hypochlorite	393	0.95	373.35		373.35
UTILITIES, INC OF SANDALHAVEN	5	90950	Sodium Hypochlorite	421	1.10	463.10		463.10
UTILITIES, INC OF SANDALHAVEN		91766	Histosol OP	220	13.76	3,027.20		
UTILITIES, INC OF SANDALHAVEN	5	91766	Freight	1	223.24	223.24		
UTILITIES, INC OF SANDALHAVEN	5	91766	Total for invoice No. 91766			3,250.44	-	3,250.44
UTILITIES, INC OF SANDALHAVEN	S	91843	Sodium Hypochlorite	402	1.10	442.20		442.20
UTILITIES, INC OF SANDALHAVEN	5	93624 ·	Sodium Hypochlorite	410	1.10	451.00	•	451.00
UTILITIES, INC OF SANDALHAVEN	S	95411	Sodium Hypochlorite	457	1.10	502.70	<u></u>	502.70
UTILITIES, INC OF SANDALHAVEN	S	97284	Sodium Hypochlorite	291	1.10	320.10		
UTILITIES, INC OF SANDALHAVEN	5	97284	Freight	11	8.00	8.00		
UTILITIES, INC OF SANDALHAVEN	S	97284	Total for invoice No. 97284			328.10		328.10
UTILITIES, INC OF SANDALHAVEN	S	99037	Histosol OP	220	13.71	3,016.20		
UTILITIES, INC OF SANDALHAVEN	5	99037	Freight	1	238.02	238.02		
UTILITIES, INC OF SANDALHAVEN	5	99037	Total for invoice No. 99037			3,254.22	-	3,254.22
UTILITIES, INC OF SANDALHAVEN	5	99185	Sodium Hypochlorite	427	1.10	469.70		
UTILITIES, INC OF SANDALHAVEN	S	99185	Fuelsurcharge	1	8.00	8.00		
UTILITIES, INC OF SANDALHAVEN	5	99185	Trichloroisocyanuric Acid Dry	1	130.85	130.85		
UTILITIES, INC OF SANDALHAVEN	S	99185	Total for invoice No. 99185			608.55	_	608.55
UTILITIES, INC OF SANDALHAVEN	S	99185	Sodium Hypochlorite	288	1.10	316.80	*	316.80
UTILITIES, INC OF SANDALHAVEN	S	99697	Sodium Hypochlorite	260	1.10	286.00		520.00
UTILITIES, INC OF SANDALHAVEN	S	99697	Fuelsurcharge	1	8.00	8.00		
UTILITIES, INC OF SANDALHAVEN	<u> </u>	99697	Total for invoice No. 99697		0.00	294.00		294.00
CHEMILO, MAC OF SAMPAGIAYEN	ب	77071	20.01 101 HITORE 140, 7707/			479,00	· · · · · · · · · · · · · · · · · · ·	474.00

UTILITIES, INC. OF SANDALHAVEN

DOCKET NO.: 060285-SU

CHARLOTTE COUNTY

25.30-440 (3) Chemical Analyses

Page: 1 of 2

Client Project: Sandalhaven Lah Project: N0507323 Report Date: 08/18/05



Laboratory Results

Utilitics, Inc.
Plant Operator
6811 Placida Rd
Englewood, FL 34224

	note: Describe	en.		Wasto Water		7/25/05 13:00		7/25/05 9:00
<u>Analysis</u>	Method_	Results	<u>Qual</u>	Detection Limit	<u>Units</u>	AnalysisDate/Time	Analyst	Cert ID
Arsonic	200.7	0,001	υ	0.001	mg/L	7/27/05 17:35	љм	E84380
Barium	200.7	0.006		0.001	mg/L	7/27/05 17:35	W¶	E84380
Cadmium	200.7	100.0	υ	0.001	mg/L	7/27/05 17:35	љМ	E84380
Chloride	4500CI-B	67		10	mg/L	7/26/05 8:30	EW	E84380
Chromium	200.7	0.001	υ	0.001	mg/L	7/27/05 17:35	љм	E84380
Copper	200.7	0.002		0.001	mg/L	7/27/05 17:35	љм	E84380
lron	200.7	0.020		0.007	mg/L	7/27/05 17:35	љм	E84380
Lead	200.7	100,0	บ	0.001	mg/L	7/27/05 17:35	љм	E84380
Manganese	200.7	0.005		0.001	ing/L	7/27/05 17:35	љМ	E84380
Mercury	245.1	100.0	U	0.001	mg/L	8/10/05 9:55	BY	E84380
Nitrate-N	353.2	4.84		0.01	mg/L	7/25/05 14:54	SJ	E84380
На	150.1	7.10	Q	0.01	std units	7/25/05 14:00	EW	E84380
See attached results	Subcontract					7/26/05 14:10	SUB	
Scienium	200.7	0.001	U	0.001	mg/L	7/27/05 17:35	JPW	E84380
Silver	200.7	0.001		100.0	mg/L	7/27/05 17:35	JPW	E84380
Sodium	200.7	96.0		24.5	mg/L	7/27/05 17:35	лw	E84380
Sulfate	375.4	65		2	mg/L	7/29/05 13:00	EW	E84380
Total Dissolved Solids	160.1	332		10	mg/L	7/27/05 12:00	EW	E84380

1050 Endeavor Court • Nokomis, FL 34275 • Phone: (941) 488-8103 • (800) 255-3108 • Fax: (941) 484-6774

SANDALHAVEN UTL

PAGE 04

Page: 2 of 2

Client Project: Sandalhaven Lab Project: N0507323 Report Date: 08/18/05

Laboratory Results

性性性性性性性性性性性			
NIOSO7223.01 Eff Rouse	Waste Water	7/25/05 13:00	7/25/05 9:00

darg

<u>Analysis</u>

Method

Qual

Detection Limit

<u>Units</u>

AnalysisDate/Time

Analyst

Cert ID

Zinc

200.7

Results 0.025

0.001

mg/L

7/27/05 17:35

E84380

Approved by:

Comments:

Andrew Konopacki/Lab Supervisor Kathrine Bartkiewicz/Lab Supervisor

Test Results meet all the requirements of the NELAC standards.



RECLAIMED WATER OR EFFLUENT ANALYSIS REPORT

Part I - Instructions

- (1) All applicable items must be completed in full. Note that if parts of this application do not apply, those parts of the form need not be executed.
- (2) All information is to be typed or printed in ink.
- (3) This form shall be submitted to the appropriate District Office in accordance with the schedule in the permit.
- (4) Analyses shall be performed using appropriate methods and shall be capable of achieving minimum detection limits less than or equal to the maximum contaminant levels shown.
- (5) The following instructions apply to Parts III through VIII of this form.
- (6) Column (a) List the parameters that are to be analyzed.
- (7) Column (b) List the STORET Code for these parameters.
- (8) Column (c) Record the results of the analysis If the result was below the minimum detection limit, indicate by showing a less than sign preceding the detection limit for the analytical method used (i.e. <0.01).
- (9) Column (d) List the primary or secondary drinking water standard from Chapter 62-550, F.A.C.
- (10) Column (e) Indicate the analytical method used. Record the number from Figure 1 in Chapter 62-601, F.A.C., or from other sources.
- (11) Column (f) Enter the date on which the analysis was run (MM/DD/YR).
- (12) Column (g) If the result shown in Column (c) is greater than the standard shown in Column (d) enter an asterisk (*) in Column (g).

Part II - General Information

1)	Facility Name:	Sandalhaven	-					
	Address:	6811 Placida Road						
	City:	Englewood		State:	FL	Zip:	34224-0000	
	Telephone Num	ber (including area code):	941-697-4797	·—————				

(2)	Owner or Authoriz	ed Representative						÷
	Name:							
	Title:							
	Address:							
	City:	Stat	e;		_ Zip:			
Tele	phone including are	a code:						
(3)	Method of Dischar	rge:						
	:							
(4)	Report Period				То			
` '	•	- Marian	(Beginning Date)	······································	_		(F	End Date)
(5)	Name of Laborato	ry conducting the a	nalysis: Sanders I	aboratories, I	nc			
	Address:	1050 Endeavor C	Court		<u>-</u>			
	City:	Nokomis		State:	FL		Zip:	34275-0000
	Telephone includi	ng area code:	941-488-8103			· .		
(6)	The facility DEP	identification number	er (WAFR or GMS I	D #):				
(7)	DEP test site iden	tification number (f	or the sampling loca	tion)			-	
(8)	Description of the	monitoring point:						
						-		
(9)	Date on which the	sample was taken ((MM/DD/YR)				(07/25/05
	Time of day at wh	ich the sample was	taken			9:00		⊠ AM □ PM
(10) Date of extraction	for the organic che	mical analysis perfor	med in Part V	I	07/28/	os 08/0	3 <u>/</u> 05 (MM/DD/YR)

Part III - Inorganic Analysis

(a) Parameter Name	(b) STORET Code	(c) Analysis Result (mg/L)	(d) Standard (mg/L)	(e) Analytical Method	(f) Analysis Date	(g) Above Standard
Arsenic	900208	<0.001	0.05	200.7	07/27/05	
Barium	900209	0.006	1.0	200.7	07/27/05	
Cadmium	900210	<0.001	0.010	200.7	07/27/05	
Chromium	900211	<0.001	0.05	200.7	07/27/05	
Fluoride	000951	0.17	4.0	SM 4500FC	08/01/05	
Lead	900212	<0.001	0.05	200.7	07/27/05	
Mercury	900213	<0.001	0.002	245.1	08/10/05	
Nitrate (as N)	071850	4,84	10	353.2	07/25/05	
Selonium	900214	<0.001	0.01	200.7	07/27/05	
Silver	900215	0.001	0.05	200.7	07/27/05	
Sodium	000929	96.0	160	200.7	07/27/05	

Part IV - Volatile Organic Analysis

(a) Parameter Name	(b) STORET Code	(c) Analysis Result (μg/L)	(d) Standard (µg/L)	(e) Analytical Method	(f) Analysis Date	(g) Above Standard
Ethylene dibromide	900222	<0.005	0.02	504	08/03/05	
Para-dichlorobenzenc		<0.5	75	601	07/27/05	
Vinyl Chloride	039175	<0.5	1	601	07/27/05	
1,1-dichloroethane	034496	<0.3	7	601	07/27/05	
1,2-dichloroethane	034531	<0.2	3	601	07/27/05	
1,1,1-trichloroethane	034506	<0.3	200	601	07/27/05	
Carbon tetrachloride	032102	<0.3	3	601	07/27/05	
Trichloroethene	-	<0.2	3	601	07/27/05	
Tetrachloroethene	_	<0.2	3	601	07/27/05	
Benzene	034030	<0.5	1	602	07/27/05	***

Part V - Trihalomethane Analysis

(a)	(b)	(c)	(d)	(c)	(f)	(g)
Parameter	STORET	Analysis	Standard	Analytical	Analysis	Above
Name	Code	Result (μg/L)	(µg/L)	Method	Date	Standard
Total THM	082080	190	100	601	07/27/05	*

05/11/2006 11:06 9416978959 SANDALHAVEN UTL PAGE 08

Part VI - Organic Chemical Analysis

(a) Parameter Name	(b) STORET Code	(c) Analysis Result (μg/L)	(d) Standard (μg/L)	(e) Analytical Method	(f) Analysis Date	(g) Above Standard
Endrin	039390	<0.01	0.02	608	08/02/05	
Lindane	039782	<0.01	4	608	08/02/05	
Methoxychlor	039480	<0.02	100	608	08/02/05	
Toxaphene	039400	<0.5	5	608	08/02/05	
2,4-D	039730	<1.0	100	SM 6640 B	04/18/05	
2,4,5-TP (Silvex)	039760	<0.25	10	SM 6640 B	04/18/05	

Part VII - Radiological Analysis

(a) Parameter Name	(b) STORET Code	(c) Analysis Result (pCi/L)	(d) Standard (pCi/L)	(e) Analytical Method	(f) Analysis Date	(g) Above Standard
Gross alpha excl. radon and uranium	001519	4.1	15	900.0	08/09/05	
Radium-226 and Radium-228 combined	011503	0.5	5	903.1 / Ra-05	08/09/05 08/16/05	

Part VIII - Secondary Chemical Analysis

(a) Parameter Name	(b) STORET Code	(c) Analysis Result (mg/L)	(d) Standard (mg/L)	(e) Analytical Method	(f) Analysis Date	(g) Above Standard
Chloride	000940	67	250	4500Cl-B	07/26/05	
Copper	900218	0.002	1	200.7	07/27/05	
iron	900219	0.020	0.3	200.7 07/27/05		
Manganese	900220	0.005	0.05 200.7		07/27/05	
Sulfato	000945	65	250	375.4	07/29/05	
Zinc	900221	0.025	5	200.7	07/27/05	
pH (units)	000403	7.10	6.5 - 8.5	150.1	07/25/05	
TD\$	070300	332	500	160.1	07/27/05	
Foaming Agents	900217	0.32	0.5	SM 5540 C	07/27/05	

Part IX - Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Date:	
Phone:	Signature of Lead Operator
	Name (please type) and Certification Number
	Address

SOUTHERN ANALYTICAL LABORATORIES, INC.

1 1 D BAYVIEW BOULEVARD, OLDSMAR, FL 34677 813-855-1944 fax 813-855-2219



Sanders Laboratories 1050 Endeavor Court Nokomis, FL 34275-3623 August 17, 2005 Project No: 52405

Laboratory Report

Parameters	Units	Results
Date/Time Received	07/26/05	09:55
Date/Time Collected	07/25/05	09:00
SAL Sample Number	52405.01	
Matrix	Wastewai	er
Sample Description	N0507323	-01D
Project Name	N0507323	

Date/Time Received	07/2						
Parameters	Units	Results	Method	Detection Limit	Date/Time Analyzed	Date/Time Prep	Analysi
Pesticide Analyses							
Date Extracted		08/02/05	EPA 504			08/02/05 16:00	MDB
Ethylene Dibromide (EDB)	ug/l	0.005 U	EPA 504	0.005	08/03/05 09:09	08/02/05 16:00	BTJ
Total Tringlomethane Analyses							
Bromodichloromethane	ug/l	21	EPA 601	0.3	07/27/05 19:18		JRW
Bromoform	ug/l	0.5 U	EPA 601	0.5	07/27/05 18:26		JRW
Chloroform	ug/l	170	EPA 601	0.2	07/27/05 19:18		JRW
Dibromochloromethane	ug/l	0.5 U	EPA 601	0.5	07/27/05 18:26		JRW
Total Trihalomethanes	ug/l	190	EPA 601	0.2	07/27/05 18:26		JRW
Organochtorine Pesticides and	PCBs						
Lindane	u g/]	0.01 U	EPA 608	0.01	08/02/05 01:42	07/28/05 14:00	JKS
Endrin	ug/l	0.01 U	EPA 608	0.01	08/02/05 01:42	07/28/05 14:00	JKS
Methoxychlor	ug/l	0.02 U	EPA 608	0.02	08/02/05 01:42	07/28/05 14:00	JKS
Toxaphene	ug/l	0.5 U	EPA 608	0.5	08/02/05 01:42	07/28/05 14:00	JKS
Chlorinated Herbicides							
2,4,5-TP (Silvex)	u g/ 1	0.25 U	SM 6640 B	0.25	08/04/05 15:28	08/03/05 08:00	BTJ
2,4-D	ug/l	1.0 U	SM 5640 B	1.0	08/04/05 15:28		BTJ
Purgeable Halocarbons							
Carbon tetrachloride	ug/l	0.3 U	EPA 601	0.3	07/27/05 18:26		JRW
1,4-Dichlorobenzene	ນ໘/ໂ	0.5 U	EPA 601	0.5	07/27/05 18:26		JRW
1,1-Dichloroethane	ug/l	0.3 U	EPA 601	0.3	07/27/05 18:26		JRW
1,2-Dichloroethane	υg/l	0.2 U	EPA 601	0.2	07/27/05 18:26		JRW
Tetrachloroethene	ug/l	0.2 U	EPA 601	0.2	07/27/05 18:26		JRW
1,1,1-Trichloroethane	ug/i	0.3 U	EPA 601	0.3	07/27/05 18:26		JRW
Trichloroethene	u g /l	0.2 U	EPA 601	0.2	07/27/05 18:26		JRW
Vinyl chloride	uġ/l	0.5 U	EPA 601	0.5	07/27/05 18:26		JRW
Purgeable Aromatics					•		
Benzene	ug/l	0.5 U	EPA 602	0.5	07/27/05 18:26		JRW

SOUTHERN ANALYTICAL LABORATORIES, INC.

110 BAYVIEW BOULEVARD, OLDSMAR, FL 34677 813-855-1844 fex 813-855-2218



Sanders Laboratories 1050 Endeavor Court Nokomis, FL 34275-3623 August 17, 2005 Project No: 52405

Laboratory Report

Project Name Sample Description Matrix N0507323 N0507323-01D Wastswater 52405.01

SAL Sample Number
Date/Time Collected
Date/Time Received

07/25/05 09:00

Date/Time Received	07/26/05	09:55					
Parameters	Units	Results	Method	Detection Limit	Date/Time Analyzed	Date/Time Prep	Analyst
Inorganics							
Fluoride	mg/l	0.17	SM 4500F C	0.02	08/01/05 08:23		MJW
Surfactants(MBAS as LAS, mol wt 342)	•	0.32	SM 5540 C	0.05	07/27/05 08:58		MJW
Radiochemistry							
Gross Alpha	pCi/I	4.1±1.3	EPA 900.0	3.0	08/09/05 09:20	08/05/05 08:00	AWW
Radium-226	рСіЛ	0.5±0.07	EPA 903.1	0.1	08/09/05 12:20	08/03/05 08:00	AWW
Radium-228	pCi/l	0.6±0.3 U1	EPA RA-05	0.6	08/16/05 15:09	08/14/05 14:45	AWW

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813-855-1844 fex 813-855-2218



Sanders Laboratories 1050 Endeavor Court Nokomis, FL 34275-3623

August 17, 2005 Project No: 52405

Laboratory Report

Footnotes

- Test results presented in this report meet all the requirements of the NELAC standards.
- A statement of estimated uncertainty of test results is available upon request.
- U Analyte was undetected. Indicated concentration is method detection limit.
- U1 Analyte was not detected; indicated concentration is method detection limit. Radiochemistry MDL is sample specific and matrix dependent.

Page (of N0507333 J/()-DIR. D//Q DATE REQUESTED DUE DATE: ACCEPTED BY / AFFILIATION Project Name Yearly Reclaimed Effluent KII # 05-133 Sample Supply: Customer Type: Field Report #: **PROJECT** TIME ANALYSES REQUEST/ >< Project Location: Sanda / haven DATE CHAIN-OF-CUSTODY RECORD **PRESERVATIVES** HCF RELINQUISHED BY ! AFFILIATION HNO os'H UNPRESERVED J.F Bill To: (Hillites TYPE 090d G Sample DATE TIME Report To: P.O. # Irick Godwin Fax 697-8959 COOLER # VIA Sago -aboratories inc. Environmental Testing Services SAMPLE DESCRIPTION Reuse Sanders Sandalham OUT / DATE RETURNED DATE * COMMENTS: Englawood Sampled By (PRINT) tt, Sampler Signature Address **68**11 Ш oltie Loi

1050 Endeovor Ct., Nakomis, Ft. 34275-3623 • (941)488-8103 • FAX 484-6774

COOLER SEAL

Se, Na, Ag, Cu, Fe, Min 2n

INTACT Yes No

16880 Gator Road. Fort Muers Al 33010 . 10301 GON CON . cox man

38

28

6968269146

As, Ba, Cd, Cr, Pb, Hg

Lab Project Summary

Lab Project #:

N0507323

Total Pages: 12

Client:

Utilities, Inc. of Florida 200 Weathersfield Ave.

Alamonte Spring&L

32714

Phone:

941-474-5191

Far:

E-mail:

Client Project Name: Laboratory Contact: Sandalhaven

Tami Bright

OUALIFIER DEFINITIONS

- B: Results based upon colony counts outside the acceptable range.
- 13: The reported value failed to meet the established quality control criteria.
- J4: The sample matrix interfered with the ability to make an accurate determination.
- 15: The data is questionable because of improper lab or field protocols.
- K: Off scale low, actual value is less than the value given.
- L: Off scale high, actual value is known to be greater than the value given.
- O: Sample held beyond acceptable holding time.
- U: The compound was analyzed for, but not detected.
- V: The analyte was detected in both the sample and the associated method blank.
- Y: The sample was unpreserved or improperly preserved.
- Z: Too many colonies present (TNTC).
- * Meets and/or exceeds acceptable drinking water limits, per FAC 62-550.
- ** This is an uncertified result.

HACH results are uncertified.

A statement of estimated uncertainty of results is available upon request. Laboratory report shall not be reproduced except in full, without the written approval of Sanders Laboratories Sanders Laboratories follows DEP standard operating procedures for field sampling.

Reports are archived for a minimum of 5 years. Copies of reports which are less than 1 year old are available for a fee of \$25.00 per report. Reports older than 1 year are available for a fee of \$50.00 per report. Copies will be provided within 1 week of the time of the request.

Nokomis Lab ~ 1050 Endeavor Ct. ~ Nokomis, FL 34275-3623 ~ Phone: 941-488-8103 ~ Fax: 941-484-6774 ~ HRS Certification # E84380 Fort Myers Lab ~ 16880 Gator Road ~ Fort Myers, FL 33912 ~ Phone: 941-590-0337 ~ Fax: 941-590-0536 ~ HRS Certification # E85457

UTILITIES, INC. OF SANDALHAVEN

DOCKET NO.: 060285-SU

CHARLOTTE COUNTY

25.30-440 (4) Operations Reports

Test Year Ended December 31, 2005

08:46

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DEPARTMENT OF ENVIRONMENTAL P. JECTION DISCHARGE MOUITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Fort Myers, PL, 33902-2549

Monthly Domestic	FEPORT: GROUP:	(BINIT	CFV22 SISE:	Sandsihaven WWTP	FACILITY: LOCATION:
		4023	PERMIT NUMBER: FLAOL	Utilities incorporated of Sandshaven 200 WesthersBeld Avenue Altamonte Springs, FL 32714	Agrand & Oldi lithle
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I certify under penalty of law (hat I have personally examined and am familiar with the information and person and including the possibility of those individuals immediately responsible for obtaining the information including the possibility of the and imprisonment.

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MONITORING GROUP NO.:

PERMIT NUMBER FLADIA053

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FACILITY NAME:

From: 1-01-04 MONITORING PERIOD 179-18-1

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DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail	his report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL 33902-2549
EXCEPT A AMERICAN A	1.0. Dux 2.45, FL 149(ES, FL 339)2-2349

PERMITTEE NAME: MAILING ADDRESS:

Utilities Incorporated of Sandalhaven

200 Weathersfield Avenue

Altemonte Springs, FL 32714

LIMIT: CLASS SIZE:

PERMIT NUMBER: FLA014053

REPORT: GROUP:

Monthly Domestic

FACILITY: LOCATION

Sandalhaven WWTP 6811 Placida Road

Englewood, FL. 33533

MONITORING GROUP NUMBER: NO DISCHARGE FROM SITE:

R-002

N/A

Final

COUNTY:

Charlotte

Parameter	·	Quantity o	r I oading	Limita			-01-04		To:	1-31-0	34
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I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/ITTLE OF PROVIDE A COMME	an pensions for submitting false information including the possibility of fine and impri	Souncial for onlying	ig the information, i
NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EVECTORIES CONTROL		
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME:

Sandalhaven WWTP

PERMIT NUMBER: FLA014053

MONITORING GROUP NO.:

R-002

MONITORING PERIOD

1-31-04

Parameter		Quantity	or Loading	Units	Qual	ity or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
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Facility: Sandalhaven WWTP

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COMMITTAL AND RYPLANDERS OF ANY WICE A LUMB (RESERVE ALL WINDINGS IN SEC.).

3

Discharge munitering report - Part à (Comined)

FACILITY MAKE

www.

PERMIT NUMBER: FLA014063

MONITORING GROUP NO.:

R-000

MONITORING PERIOD

Fronz

1-07-04

7-29-04

Parameter		Quantity or Loading	Units	Qua	ity or Concer	ntration	Units	No. Ex.	Frequency of Analysis	Sample Typ
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SANDA_HAVEN UTL

70-18-E

DEPARTMENT OF EUVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

ज्ञान

Charlotte COUNTY NO DISCHARGE FROM SITE: Eaglewood, FL 33533 R-001 and Influent MONITORING GROUP NUMBER: Sandalhaven WWTP 6811 Placida Road LOCATION: **EACULITY:** Y/N CLASS SIZE lani⁴ TIMIT Altamonte Springs, FL, 32714 Domestic GROUP Monthly REPORT: sunsyl blatteration W 000 MAILING ADDRESS: PERMIT NUMBER: FLA014053 navainimed to beassoquoni estitiid PERMITTER WANTE When completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myces, Ft. 33902-2549

MONITORING PERIOD

S-how FPC	Every Two	B	Ngm			86.0				Sample Measurement	Solids, Total Suspended
S-ison PPC	OAL LEAST		///			L.					
297 3 suori-8	Every Two Weeks	0	(Æu		Ş	7				Sample Measurement	BOD, Carbonaccous 5 day, 20C
S-lixer FPC	TARK LAO		100			CTR CTR					
294 mod-8	Fivery Two	B	l/gm			21.5				Sample	BOD, Carbonaccous 5 day, 20C
Flore ments	J. Ender Week						par .				
eratam wol'l erasilatot bua	APPM/XS	0			-		pāra		C	Sample Measurement	WOOL
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Sample Type	Frequency of Analysis	No. Ex.	ziaU	aoist	lity of Concentre	Ru Q	ziaU	Losqing	10 Vitingu		Parameter

the submitted information is true, accurate and complete. I am aware that there are significant penaltics for submitting false information including the possibility of face and imprisonment. tourity under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe

Liphay ho LOLD-L	69/11/6	Res Par	Robert Paver, Lead Operator
ONE NO DVIE	Hdalal i	SIGNYLINGE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED ACENT	

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

OCEDATIT NICHABER. 15. ANTARES

dimm alantinermes

FACELTY NAME

MONITORING PERIOD Frank

MONITORNIC COOLIN NO.

3-01.04

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R-001 and influent

Parameter .		Quantity	Quantity or Loading	Units	Qual	Quality or Concentration	tration	Inin	SN.	Frequency of	Cerminal Times
Solids, Total Suspended	Sample								EX	Analysis	odkt okimer
Measurement	ZH FILE				۲.0	1.5		mg/	B	Every Two Weeks	8-hour FPC
Hd											Separate PC
	Measurement				6.9	7.4		S.U.	0	5x/Wcek	Grab
Coliform, Fecal	Sample									THE PROPERTY.	- (m)
	Meaurement			5.00	-			#7100ml		Every Two	Grab
Coliforn, Fecal	Sample										TOTAL S
	Measurement				Ċ	,,		MISSI-W	8	Every Two Weeks	Grab
Total Residual Chlorine (For	Sample										nun.
Meaurement	Meaturement		A STATE OF THE STA		7.6			மதி	Ø	5x/Week	Grab
Nitrogen, Nitrale, Total (as N)	Sample	th to 3 Co.			1990			A		-3 Days Week	Grab
Westurning.	Messurenent				þ			J∕Bu₁	0	Eyery Two Weeks	8-tour FPC
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PARM CAR 10150 II		5,000	12								Flow meters and totalizers
Flow	Sample									5 Days/Week	Flow organs
ABM Code solve	Measurement	<u>ا</u>	D.0014						D	5x/Week	Flow meters
GUD, Carbonaccous 5 day, 200.	Sumple									5 Days/Week	Flow maters
	Mesqurement			~	30,67			J.Bu		Every Two 8-hour FPC Weeks	8-hour FPC
Solids, Total Suspended	Sumpic			. 22							
				2	500. T.			50E	as	Every Two 8 Weeks	8-hour FPC
		THE REAL PROPERTY.	The state of the s		STATE OF THE PARTY.			THE PERSON NAMED IN	- 15 to 15		

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Department of Environmental Projection, South Department, P.O. Sou 2549, Pt. https://pi. pt. 135922-2549

PERMITTEE NAME-MAILING ADDRESS: Utilities Incorporated of Sandalhaven

200 Weathersfield Avenue

Altamonte Springs, FL. 32714

Sandalhaven WWTP 6811 Placida Road

Englewood FL 33533

COUNTY:

FACILITY:

LOCATION:

Charlotte

PERMIT NUMBER: FLA014053

LIMIT: CLASS SIZE-

Final WA

REPORT: GROUP:

Monthly Domestic

MONITORING GROUP NUMBER: R-002

NO DISCHARGE FROM SITE:

MONITORING PERIOD

63-01-04

03.31-04

Parameter		Quantity o	r Loading	Units	Qu	ality or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.089		angd					0	3X/Week	Flow meters and totalizen
											Flow widers
Flow Code Street	Sample Measurement	0.108		mgd					Ø	5X/Week	Flow meters and totalizer
				nd)						Downwar.	and temper
30D, Carbonaccous 5 day, 20C	Sample Maasurement							mg/l	Ø	Every Two Weeks	8-bour FPC
OD, Carbonaceous 5 day, 20C											Adout SPC
os, cardanaceous y any, 200	Sample Measurement				2	2		ungyi	ø	Every Two Weeks	8-hous FPC
olids, Total Suspended	Sample										
	Measurement				1.5			me/l	0	4X/Week	Grab

I certify under penalty of law that I have personally examined and are familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Robert Faver, Lead Operator	Bet far	941/697-4797	04/03/17

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments lead):

B S

DISCHVECE MONITORING REPORT - PART A (Confined)

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Meter	ettotimuted.)								v. 4 7-≦8		
	A STATE OF THE STA					9.1	1 2 Mare I			Sample Measurement	Total Residual Chlorine (For Disinfection)
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	eracine.									Measurement	
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þ	3-1E-E		01	h0-10-						WMIS	EACHLITY NAME: Sandalbaven
	8-602	:0	GROUP N	MONITORING	£20410A	ta -eagining i	ariese			August a of All	

DAILY SAMPLE RESULTS - PART B

Permit humber: Monitoring Period

FLA014053 From: 3-01-44

To: 3 - 5) - 64

Facility: Sandalbaven WWIP

	Flow (mad)	CBODS (mg/l)	CBOD5 (mg/l)	TSS (mg/l)	T58 (mg/l)	TSS (mg/l)	pF. (s.u.)	Fecal Coliform Bacteria (#/100ml)	TRC (Fir Disinfect.) (mg/l)	TRC (For Disinfect.) (seq.71)	Nitroper: Nitrate, Fotal (sa N) (mg/l)	Turbic ^D (aba.
Code	50050	80092	80082	00530	00530	00530	00400	74055	50060	50060	(10623)	00070
Mon. St	OTH-IA&	EFA-1	INF-1	RFA-1	EFB-1	INF-1	EFA-1	EFA-I	EFA-1	BFA-1	EFA-1	EFB-T
1	0.068				(0,4		7.0	1	3,4		1 PROTEST NAME	1.77
2	0.100				(04	 	7.3	21	4,3			
3	0.084	2	158	40.6	0.7	228	7.1	131	50			1,43
4	0.087				506		6.4	<1	5,0			1.80
3	0.112						7.1	1	50			1.61
6	0.065						7.1	1	3.5			
7	0.115					.,	70	 	57.0			2.4/
8	0.110				10,6		7.1	<u> </u>	5,0			0.33
9	0.102				(06	***************************************	7-3	41.	2.5		·	1.14
10	0.112				10,6	***********	7.1	31	45			0.73
11	0. 109				40,6		7.1	1	50			0.82.
12	0.110				****		7.2.	1-1-	5,0			1.90
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MD. AV	UIIU	ول ا	230.67	0.7 0	1.69 2	30.67		</td <td>CONTRACTOR S MAN AND</td> <td>-</td> <td></td> <td>لا قارمة خفظي إنجابها</td>	CONTRACTOR S MAN AND	-		لا قارمة خفظي إنجابها

PLANT STAFFING:
Day Shift Operator
Evening Shift Operator
Night Shift Operator
cad Operator

Classic	_8_	Certificate No:
Class:	۵_	Certificate No:
Class:		Certificate No:
Class:	C	Certificate No:

7518) lama
6256	Plame
	Plane:
3946	Plame:

Pattrick Bob Off	<u>63:11:20</u>	(Lon	<u>,) </u>	
Robert ?				

UTILITIES, INC. OF FLORIDA

AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

Fax Transmittal

Attn:	Lead Operator	.Date:	34-20+04	
Company:	Sandalhaven	Fax #:		
From:	Garth Armstrong	Pages:	including this cover page.	
Subject:	DMR Review			
URGENT As Requ			Please Original: will not be Reply via U.S. M	
F	Messages:			
	R has been reviewed for the month/year e FDEP office.	of Marie	Please submit to the	
Thombs		·		
Thanks,				
GA				

The information contained in this facsimile may be privileged and confidential information intended only for the use of the individual or entity named above. If the reader of this facsimile is not the intended recipient, you are hereby notified that any dissemination, distribution, or copy of this communication is strictly prohibited. If you have received this communication in error, please notify us by phoning the number listed above. Thank you.

Garth's Mac 1836: Desktop Folder: Garth's File Dir.: Templates: UIF Templates: DMR Review Fax Template

DEFAITMENT OF ENVIRONMENTAL PROTECTION HIN HARRE MUNICORING NELON: - LANT A

Monthly

ho-02-/

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4.01

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MICHIELDINING HOUSE

When completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Mycrs, FL 33902-2549

KEN KI GRÜÜF: Name and software Terral A MONITORING GROOT NORDER. FLA014053 SLIB MVda ZVaYnJaki VII PERMIT NUMBER: LIMIT: CLASS SIZE: Unities incorporated of Sandalharen 200 Wombachield Avenue Attacomt Spring, 91, 32714 6811 Placida Road Centrality was WW 15 41" Charloite PERMITTE NAME. LOCATION COUNTY

Paralititis		Quantity or Loading	Loading	Units	3	Quality or Concentration	ration		5; Q	rrequency of	Saugac a y La
How	Semple	90000		pâm					\$	5X/Week	Flow meters and totalizers
	Measurement			- Par						5 Days Work	राज्यम्य क्यान् राज्यम्
Flow	Sample	9		par					Ø	5X/Week	Flow meters
	Wisconcerni										Fire organics
BOD, Carbonaceous 5 day, 20C	Sample				6/18			2	ϕ	Every Two Weeks	8-hour FPC
	Measurement			7				A T		Hybry Two	8-hour PPC
BOD, Carbonaceous 5 day, 20C	Semple				7	4		Tage?	Ø	Every Two Weeks	8-hour FPC
	Measurement				Transport of the Parket	100				Lovery Two	School PPC
Solids, Total Suspended	Sample Mersurement		100		660			mæf	\$	Every Two Weeks	S-kour FPC

I certify under penalty of law that I have personally examined and am familiar with the information submitting false information including the possibility of fine and imprisonment.

PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT TELEPHONE NO DATE (YYMAMIDD)	A PART LEMITER A	
SIGNATURE OF PRINCIPAL EXECUTIV	0	24 8 24
NAMETITILE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	The state of the s	

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all muschments here):

8

PACIE

EMININ TILLIDAY

CALLES BARRISTING

to-suffer loss 100-8

MONITORUNG GROUP NO.:

PERMIT NUMBER: PLA014053

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S-hour FPC	Every Two	V	i∕Bu							Semple Semple	BOD, Carbonarcous 5 day, 20C
er pieto hue											U:US-SX-SMUV
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and totalizers	4-4-1105						natu:	j	man	Sanybe Messurement	Jow
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den 7	ONLY ACM E				11000	on the second				Messurent	
वंडरह)	Every Two	9	1200T/#	·	17	12				Sample	oliform, Fecal
Harris No.	TEN PE		14, 04, 5								
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05/11/2004 14:13

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SANDALHAVEN UTL

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Department of Environmental Protection, S	South District, P.O. Box 2549, Ft	Myers, FL 33902-2549
---	-----------------------------------	----------------------

PERMITTEE NAME-MAHARIS SINKERS Disting Incorporated of Sandahaven

ARI WERRESTRICE AVERSE

Altemonte Springs, VI. 32714

PERMIT NUMBER- ET ANIANS

PERMIT: CHECK ID-

bearing. Domestic

. ١ ١ ١ ١٠٠٠ المنظلة LOCATION: TA SE STOPPOSITION 6811 Piacida Road Rigitourist W. 33533

CLASSMER MONITORING GROUP NUMBER:

LIMIT

N/A

R-002

Pinal

COUNTY:

Charlotte

41. Or , 50

रिश्चमाधित		Quantity o	r i Anding	Units	Qua	illy or Concent	tration	Units	No. Ex.	Proguency of Analysis	Sample Type
Flow	Sample Measurement	0.097		mgd					0	5X/Week	Flow meters and totalizers
										TAN W.A.	t on mens
Flow	Sample Measurement	0.097		bgm	Value (alexander				0	5X/Week	Flow meters
										A lings (Prod.	nod totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement	THE RESIDENCE OF THE PARTY OF T						mg/l		Every Two Weeks	8-hour FPC
BOD, Carbonaccous 5 day, 20C	Sample										& Joseph P. C.
	Measurement				2	_2_		mg/l	0	Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				1.5			me/l	0	4X/Week	Grab
										A Jay Work	a Grab ex

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

1		SIGNATURE OF PRI AGENT	INCIPAL EXECUTIVE OFFICER OR AUTHO	DRIZED TELEPHONE NO	DATE (YY/MM/DD)
;	Bribert Pauer I and Operator	Ωà ε	\bigcirc		(T (TASHUBES)
١		Tax y	Value	7711071-1171	<u>i</u>

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (CONCINEED)

FACILITY NAME:

Sandalhaven WWTP

PERMIT NUMBER: FLA014053

MONITORING GROUP NO.:

R-002

MONITORING PERIOD From:

4-30-04

Parameter		Quantity	or Loading	Units	Qua	lity or Concer	tration	Units	Na.	Proquency of Australia	Sample Type
М	Sample Measurement				7.2	7.4		S.U.	-	5x/Week	Grab
											- State
Coliforni, Fesal	Sample Measurement				(!	ر ؛		#/ICChmi	0	4x/Wook	Grab
										20 y (Yes)	
Total Residual Chlorine (For Disinfection)	Sample Measurement				3.2			mg/l	0	Continuous	Grab
										Liphy unit	100
Turbjeity [,]	Sample Measurement				1.56			neus		Continuous	Meter
-								193		Loraton	Merc
	Sample Measurement										
	Sample Measurement	• ### ## (P. 1									
	Sample Measurement										
	Sample Measurement						C Arra SELLACIA E RIV				
	Sample Measurement										
	Sample Measurement										

DAILY SAMPLE RESULTS - PART B

Permithlumber: Monitoring Period

FL-1014053

Fin: 4-01-04

To: 4-30-04

Ficility: Sant dhaws WWTP

	Code	Plow (mgd)	#1 9/ 1	i) (mg/		1) 15S (mg/	TSS (mg	/i) pli (s.u.	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinform)	Di	(Fo deet) (/l)	Mitter M. Mitter	Tentel
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·	17 E	2.091	l	<u> </u>				77.3	 ``` 	32	** ***			162
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	NT STAFFI		† :) legations	1.7.13	0,0	07 6	202		2/		# 17 40.			アリウ 作出・イン

PLANT STAFFING: Day Shift Operator Evening Shirt Operator Night Shift Operator ad Operator

Chasa; Certificate No: Clets: Certificate No: Class: Certificate No: Class; Certificate No:

6256 Hayar Name: i lame: 5946 Flame:

Rob OFFE Patrick Goliso -Robert Leves

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: MAILING ADDRESS: Utilities Incorporated of Sandalhaven

200 Weathersfield Avenue

Altemente Springs, FL 32714

6811 Placida Road

Sandalhaven WWTP

Englewood, FL 33533

PERMIT NUMBER: FLA014053

LIMIT: CLASS SIZE: **Final** N/A REPORT: GROUP:

Monthly Domestic

MONITORING GROUP NUMBER:

R-001 and Inflocat

NO DISCHARGE FROM SITE:

COUNTY:

FACILITY:

LOCATION:

Charlotte

MONITORING PERIOD

05-01-64

Parameter		Quantity of	r Loading	Units	Qui	ality or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.0009		mgd					-0-	5X/Week	Flow meters and totalizer
				light .						DaysWeek	Flow meters and total com
Flow	Sample Measurement	0.0		mgd					0	5X/Week	Flow meters and totalizer.
				P CO						i DayaWock	Flow meters and totalizen
BOD, Carbonaceous 5 day, 20C	Sample Measurement				2.17			mg√l	0	Every Two Weeks	8-hour FPC
					200 (All Ang)					Every Two	8-hour FPC
BOD, Carbonaccous 5 day, 20C	Sample Measurement				2	2		mg/l	0	Every Two Weeks	8-hour FPC
								øýl.		livery I wo	8-hour PPC
Solids, Total Suspended	Sample Measurement				0,99			mg/l	0	Every Two Weeks	8-hour FPC
										VIE.	S-Liony [24]

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Lead Operator Patrick Godwin	Fatrick Hodion	941/697-4797	04/06/23

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments bere):

DISCHARCE MONITORING REPORT - PART A (Continued)

211 mon-0	Every Two	0	1/802	j			l		İ	Sample	Solids, Total Suspended
8-poir EFC				r ac							
THE WORK	M. COLES					રાષ્ટ્	15455	Control of Alberta		Measurement	The state of the s
24-1 HOA-8	Every Two	-0	(Bu	mak	evinceres average	£1.6	7.44.4.6		Carrier (Conserved	Sample	BOD' Carbonaceons 5 day, 20C
Semolater Nap							20 3				
Rratem wolf	S Days/Week				Carried Branch Street	وأوراء مقاطعه دد مسرق	ingse.	Report	100E)	Measurement	DSOUS POST NAME
Flow meters end totalizers	Sx/Week	0					pՁw	<u> </u>	0	Sample	Flow
Plow esters	5 Days/Week)980a				d ding positiva
eraxilated bras			1				pau	i I	P000.0	Sample Insensuassivi	Flow
ZISISMI WOOT	\$20,Week										
344 MM 3	out took									Measurement	
S-hour FPC	Every Two	0	िश्चम				Nave et al.			Sample	(M as) Intelle, Total (as M)
7 10 7	ASSET E		iĝi.						202		
(PED)	1-9/10/2-1-1	0				11				Sample Sample	Total Residual Chlorius (For Disinfection)
Grab	Jac Wick		l (∄u			TOTAL PROPERTY OF		76.			
ein	oki jese		.P. (8)	杨 春春	\$ 400 X 2					Measurement	
darð	EVERY TWO	0	JE#001/#		>	17			<u> </u>	Sample	Coliforni, Pecal
429	Weeks Weeks		柳柳水			17				Sample Measurement	Coliform, Feest
Grab	EASTA LAGO	9	(m001/#							Signary .	Jack and Jack
gran .	150 N. F. TOLL V	1								Measurement	
	A33W/z2	1	s.u.		1 64	0.1				Sample	Hq
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Odf wod-8	Every Two	0	1/2hu		70	90		-	1	Sample	Solids, Total Suggended
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Sample Type	Prequency of	No.	taliaU	dotts	у от Сопсепіт	MenO	1 45:-11	1			
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مورز	18-2	70	oT	no-10-	Z mon'i	OBING PERIOD	THANK				
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DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL 33902-2549

PERMITTEE NAME:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER: FLA014053

REPORT:

Mouthly Domestic

MAILING ADDRESS:

200 Weathersfield Avenue Altamonte Springs, FL 32714

LIMIT: CLASS SIZE: Final N/A

GROUP:

FACILITY: LOCATION

Sandalhaven WWTP 6811 Placida Road

MONITORING GROUP NUMBER:

R-002

Englewood, PL 33533

NO DISCHARGE FROM SITE:

COUNTY:

Charlotte

MONETORING PERIOD From:

5-01-04

5-31-04

Parameter		Quantity or	Loading	Units	Qua	lity or Concentr	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0,089		angd					0	5X/Week	Flow meters and totalized
				TO:						3 1 W (1 W (1)	Flow indice med lotation
low	Sample Measurement	0,063		ngd					0	5X/Week	Flow meters and totalizer
				(gan						S Day of Week	and totalizes
SOD, Carbonaceous 5 day, 20C	Sample Measurement				2.17			ng/l	0	Every Two Weeks	8-how FPC
											* hour PPC
OD, Carbonaceous 5 day, 20C	Sample Measurement				a	٦		mg/l	0	Every Two Weeks	8-hour FPC
											X-bout 20
olids, Total Suspended	Sample Measurement				0,9			mg/l	0	4X/Week	Grab
					T 286					3 11 12	. On .

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMM/DD)
Lead Operator Patrick Godwin	Patrick Hodewin	941/697-4797	04/06/23

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME:

Sandalhaven WWTP

PERMIT NUMBER: FLA014053

MONITORING GROUP NO.:

R-002

MONITORING PERIOD

From:

Parameter		Quantity or Loading	Units	Qua	ity or Concen	tration	Units	No. Ex.	Frequency of Analysis	Sample Typ
pH	Sample Measurement			7,0	7,4		\$.U.	0	5x/Week	Grab
Coliform, Fecal	Sample						#/100ml		4x/Week	Trob Grab
	Measurement			<u> </u>	<u> </u>		# 100m	0	* Daysiyise	
Total Residual Chlorine (For Disinfection)	Sample Measurement						lygn	9	Continuous	Grab
	Measurement								a cyclinia we	
Turbidity	Sample Measusement			2.87			ntus	0	- Continuous	Meter
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	(bam) wolf	ชางยว	CBODS	(Ngm) 28T	(Nun) aat	(I/B:u) \$81	(ma) Hq	Incall	TRC (For	TOA) DAT	Almogen,	idaul

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Montaly Domestic

REPORT:

98:15

09/22/2004

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART

When completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL. 33902-2549 FERMIT NUMBER: FLA014053

Ubilities Incorporated of Sandalhaven 200 Weathersfield Avenue Altamonte Springs, Fl. 327 W

PERMITTEE NAME: MAILING ADDRESS:

FACILITY: LOCATION:

Sandalanyen WWTP 6811 Pincida Road Englewood, FL 33533

Charlotte

COUNTY

E S LINTE: CLASS SIZE:

MONITORING GROUP NUMBER: NO DISCHARGE FROM SITE:

R-001 and inflient

١ 6-30

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From MONITORING PERIOD

Parameter		Quantity or Loading	gaipeo	Units	Quali	Quality or Concentration	ion	Units	No.	Firequency of Armiyais	Sample Type
Flost	Sample	600000		13 11					Ø	5X/Week	Flow meters and totalizers
PARM Code 50050 V	Permix	0.15		1881						5 Days/Week	Flow meters
Mon. Site No. Offill B (Rapid Rate Pands)	Requirement	(An.Avg.)	·								ANTO INCHIENCES
Flav	Sample	000		pSna					K	5X/Week	Flow meters and totalizers
PARM Code 10050 1	Permit	Report		pau					1	5 Days Week	Flow meters
Mon.Site No. OTH-IB (Rapid Rate	Requirement	(Mo. Avg.)									and totalizers
Pourls)		<u> </u>									
BOD, Carbanaceous 5 day, 20C	Sample	-			7/ 5			No.	10	Erery I'wo	8-tour FPC
	Measument				アントア				3	Weeks	
PARM Code 80082 Y	Permit				30.0			Mg/H		Enery Two	Shora FPC
Mon. Site No. EFA-1	Requirement				(An. Arg.)					Weeks	
BOD, Carbonarcous 5 day, 20C	Sample				100	01 6			K	Exery Two	S-Room FPC
	Measurement				10.7	0,00			8	Weeks	
PARM Code 20082	Permit				Report	0'09		ign.		Every Two	& hous FPC
Mon Site No. EFA-1	Requirement				(Mo.Avg.)	(Max.)				Weeks	
Solids, Total Suspended	Sample				00			igen T	X	Every Two	8-hotus FPC
	Measurement				1. 1. 1. I				3	Weeks	
PARM Code (0530 Y	Permit				200			San I		Every Two	8-hour FPC
Mon Site No. EFA-1	Bequirement				(An Avg.)					Weeks	

i cenify unche persoly of leave personally examined and an familier with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information is true, accurate and complete. I am aware that there are significant penalties false information is true, accurate and complete. I am aware that there are significant penalties for submitting false information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

HORIZED AGENT TELEPHONE NO DATE (YYMRUDD)	941697.4797 04/06/26
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	Mich Hol
MAME/ITILE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	Street Lead Operator Offick (500 1291)

COMMENT AND EVERANATION OF ANY WOLATIONS (Reference all allaciments intex

09/22/2004 08:16

4078696961

UTILITIES INC OF FL

SANDALHAVEN UTL

PAGE 03

PAGE 03/05

DISCHARGE MONITORING REPORT - PART A (Continued)

People PERMIT NUMBER: FLA014055 MONITORING PERIOD

Sandalhawn WWTP

FACILITY NAME:

MONITORING GROUP NO.:

R-001 and Influent

Ğ 40-

Parameter		Quantity	Quantity or Loading	Units	Quali	Quality or Concentration	ation	Units	No.	Frequency of Analysis	Sample Type
Soluids, Total Suspended	Sample Measurement				イタ	マシ		l/Blαr	Ø	Every Two Weeks	8-boar PPC
PARM Cude 00530 1 Man. Sies No. EFA-1	Pennit Requirement				Report (Mo.Avg.)	60.0 (Max.)		Γ⁄8π		Eyery Two	8-hour FPC
рЫ	Sample Measurement				7.0	7.3		\$.0.	Ø	Sx/Week	Grab
PARM Code ODIO 1 Mon Sie No. EPA-1	Pernit Requirement				6.0 (Min.)	AS (Max.)		3.U.		5 DaysWeek	Grab
Coliforn, Fecal	Sample Measurement				ンソ			#4100ml	0	Every Two Wocks	Grab
PARM Cade 74055 Y Man Sile No. EFA-1	Pamil Requirement				200 (An.Avg.)			WiOomi		Every Two Weeks	Grab
Caliform, Pecal	Sample Measurement				- 	~ \ \		IW) Odmi	Ø	Every Two Weeks	Græb
PARM Cods 74055 Non Sile No. RFA-5	Permit Requirement				Report (MacGeadtern)	200 (Max.)		#/100m]		Every Two Weeks	Grab
Folial Residual Chlorine (For Disinfection)	Sample Mensmement				01			Digital Control	Ø	5x/Week	Crafe
PARM Cade 50060 A Man Sie Na EFA-1	Permit Requirements				0.5 (Min.)			Jan III		5 Days/Week	Grab
Narogen, Ninate, Total (as N)	Sample Mensurement				Ø			18m	Ø	Every Two Weeks	8-hour FPC
PARM Cade talezo Nan Ste Na EFA-1	Penuit Requirement				120 (Ma.)			E PLEASE		Drery Two Weeks	8-total FPC
ibw	Sample Measurement	0.0009		Tă _u	·				Ø	Sx/Week	Flow melens and totalizers
PARM Code 50050 P Mon Side No. OTH-1B (Rapid Bates Fords)	Femil Requirement	0.15 (An Avg.)		76						5 Days/Week	Flow meters and totalizers
Fibra	Sample Messurement	0.0	0.0	a a					E	SvWeek	Flow meters
PARM Code 20050 1 Mer.Sir. Yo. OTH-1B (Rapid Rate Ponds)	Permit Roquirement	Report (Mo.Avg.)	Report (J-Ma. Avg.)	T						5 Days/Week	How meters and totalizers
350	Saragle Mensurement				188			lgm	Ø	Every Two Weeks	8-Monar FPC
FARM Code 80182 G Modelie No. 1819-1	Permit Requirement				Report (Ma Avg.)			J	_	Every Two Weeks	8-Jour FPC
	Sample Mensirement				809			meni	Ø	Every Two Weeks	8-hour PPC
Mon Site No. 1945-1	Permis Requirement				Report (MacAve.)			m@4		Every Two	S.hour FPC

Monthly Domestic

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this	report to: Department of Environmental Protection, South District, P	O. Box 2549, Ft. Mytrs,	FL 13902-2549		
PERMITTEE NAME: MAILING ADDRESS:	Utilities Incorporated of Sandalhaven	PERMIT NUMBER:	FLA014053		
WINITED HDDINESS:	200 Weathersfield Avenue Allacronic Springs, FL 32714	LIMIT:		Final	REPORT: GROUP:
		CLASS SIZE		N/A	

Sandalhaven WWTP 6811 Placida Road MONITORING GROUP NUMBER: R-M2 Englewood, PL 33533

NO DISCHARGE FROM SITE: COUNTY: Charlotte

> 6-1-04 To 6-30-04 MONITORING PERIOD From:

Parameter		Quantity or Loading	Units	Qua	ity or Concentr	etion	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Mensurement	0.086	ragd			-		Ô	5X/Week	Flow meters and totalizers
PARM Code 50050 Y Mon.Site: No. OTH-IA (Reuse Storage Ponds)	Permit Requirement	Q.EOO (Am.Avg.)	Light					7-	5 Days/Week	Flow meters and tutalizers
Plow	Sample Measurement	0.046	ngd					8	5X/Week	Flow meters and intalizers
PARM Cod: 30050 1 Mon.Sita No. OTH-1A (Reuse Storage Ponds)	Permit Requirement	Report (Mo. Avg.)	ගසුම					7	5 Days/Week	flow meters and totalizers
BOD, Carbenaceous 5 day, 20C	Sample Measurement			(2.17			ngt	Ø	Every Two Weeks	3-hour PPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)			ngil	7	Every Two Weeks	& hour FPC
80D, Carbonaccour 5 day, 70C	Sample Measurement			12	12		lyn	Ø	Every Two Weeks	&-bour FPC
PARM Code 80082 (Mon Site No. EFA-)	Pennit Requirement			Report (Ma.Avg.)	60.0 (Max.)		ingil	/	Every Two Wacks	8-bour FPC
Solids, Total Suspended	Sample - Measurement			.9			Ngri	6	4X/Week	Grab
PARM Code 80530 Mon.Site No. EFB-1	Pennit Requirement			5.0 (Mael.)			mg/l	1	4 Days/Work	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted kerein; and based on my impury of those individuals introduced personally responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMM/DD)
Lead Operator Patrick Godwin	Patrick John	941/697-4797	04/06/26

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all stinchineous here);

FACILITY:

LUCATION:

9416978959

SANDALHAVEN UTL

PAGE **Ø**5

09/22/2004 08:15

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UTILITIES INC OF FL

PAGE 05/05

DISCHARGE MONITORING REPORT - PART A (Coathurd)

PERMIT NUMBER: FLAG14053 MONITORING PERIOD

Sandalharen WWTP

PACILITY NAME

MONITORING GROUP NO. 50-

FRUIT

40-08-9

Parameter	:	Quantity or Loesding	Units	() eadi	Quality or Concentration	ntion	Units	No.	Frequency of	Satzaple Type
							V-1-1-1	Ä	大日本	
ptd	Sample Meanweinent			2.0	7.2		3.0°	Ø	SaWeek	Grab
PARM Code (1000) Man Side No. EFA-1	Penalt Requirement			6.0 (Min.)	25.00		S.U.		5 Days Week	Grab
Coliforn, Focal	Sample			~ V			\$100mg	Ø	*NWeek	Grati
PARAN Code 74055 Man Site Na. EPA-1	Person Requirement			Non Detectable (73%)	(Apr.)		Moont		4 Days/West	Grab
8	Sample Mercentement			011			Van	Ø	Custicanous	Grab
PARM Code 50068 A Mon Sign No EFA-1	Permit Requirement			1.0 (Min.)			ust.	-	Coolingers	Grab
Durhidaty	Sample Measurement			1.320			4	Ø	Conferences	Meter
PARAK Code (0070 1 Morside No. EFB-6	Pennik Requirement			()4(312.)			etrs		Continuous	Meter
	Sample Messurament									
	Permit Requirement									
	Samtyle Prizzisi un secret ni									
	Penns Requirement									
	Sample Meerurament									
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	Sampte Mermusement									
	Formit Requirement									
	Semple Measurement									
	Permit Requisitors							T		
	Sample Mensurement							 		

DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period FLA014053 From: 6-0/-04

To: 6-30-04

Facility: Sandalhaven WWTP

					***********************					,	
	Flow (mgd)	CBC)55 (mµ/l)	CBOD3 (mg/l)	TSS (mg/l)	TBS (mg/l)	TSS(mg/l)	pH (s.u.)	Food Coliforn Bacteria (#/100mi)	TRC (Por Disinfect.) (my/l)	Nitrogen, Nitrate, Total (as N) (mg/l)	Turb/ (nh
Code	50050	80082	80082	00530	00530	00530	00400	74055	50060	00620	70000
Mon. Site	OTH-IA &	BFA-1	INF-1	EFA-I	EP B-I	INF-1	EFA-1	EFA-1	EFA-1	EFA-1	00070 EFB-1
1	0.052				1.1		7,3	3	4,2		1.051
2	0.039				1.0		7,3	171	2.5		1.143
3	0.037				<.6		7,3	177	3.2	-	1.320
4	0.052				<.6		7,3	121	2.3		0.811
5	0.048						7,0	,	1.9	· · · · · · · · · · · · · · · · · · ·	0.741
6	0.047						7,0		1.9		0,621
7	0.043				<.6		7.2	71	1,6		0.632
8	0.053	<u> </u>	200	5,6	<,6	324	7.0	71	1.8		0.721
9 🗷	0.055				4.6		7.0	/	5.0	, , , , , , , , , , , , , , , , , , , ,	1.121
10	0.045				<.6		7.0	1	1.5	· · · · · · · · · · · · · · · · · · ·	1.051
11*	0.045						7.1		1,2	+	1.013
12	0.049						7.2		5.0	***************************************	1,137
13	0.046						7.2		5.0	01. Mar. July	0.481
14 ×	0.046				4,6		7,2	71	5.0	V) (1) 	0.471
15 🖈	0.046				(.6	**************************************	7.0	21	5.0		0,541
16	0.044				<.6		7.0	21	5,0		0,635
17	0.052				<.6		7,0	21	4,2		0.587
18	0.051						7.0		3,4		0.574
19	0.050						7,0		3.4		0.491
20	0.052					*******************	7.0		7.8		0,643
21	0.059	· · ·			,7		7.0	71	1-5		0.756
2,2	0.048	<2	362	1.0	.9	892	7.1	21	1.6		0.754
23	0.046				.7		7.1	27	1.7		0.35/
24 🖈	0.046				3.6		7,1	21	_/_ is		0,325
25 🖈	0.046				·		7.1		1.2	• • • • • • • • • • • • • • • • • • • •	0,328
26	0.050				1		7,0		1065		0.318
	0.052						7.0	***************************************	7.8-1		0-356
28	0,045	و جوردی او روم رسمه مست ان نیون است			7.6		7,0	<1	1:3		0.367
29	0.045				2.6		7.0	27	1.0		0.483
	0.045				.9		7,0	21	1.8		0,321
31		وية فاستعدادها									<u> </u>
Total.	1.434	4	562	61.6		1216		<19			
Mo.Avg.	0.048	くる	281	<.8	3.6	608		<1			

PLANT STAFFING: Day Shift Operator Shift Operator Night Shift Operator Lead Operator Chun	Certific	ente No: ente No: ente No: ente No: ente No:	Name: Name: Name: Name:	at Mak Godwin
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Martinia V

REPORT:

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail fift report in: Department of Environmental Protoction, Seath District, P.O. Box 2549, Pt. Myres, Fl. 13952-2549

CLASS SECR Utilities transponented of Sandalhorer PERMITTER NAME:

200 Westkersfield Average Alemonte Street

Sandtiberts WWTP 6811 Photos Rond Hagiswood, FL 1333

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MONETONING CHOUP NUMBER

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7-31-04

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Paper	Semile Meseucinent	80000	-	Þ					Ø	5%/Week	Flow mens
PARM Code-50050 Y Most Sire Mo. OTTH-1B (Rapid Rate Posits)	Person Raguinament	O.15 (An.Avg.)		2					+	S Days Work	How sectors and totalizers
Bow	Semale Memoralism	0.0		P			,		Ø	SX-Week	Plant training
PARA Code 50050 1 Abra Sire No. OTH-IB (Rapid Rate Purth)	Persit Roginsment	Report (No. Avg.)		16						5 Days Week	Now motors and tetalizees
BOD, Calebraceurs 5 day, 20C	Manage Comments				く2.17			Þ	Ø	Escry Two	# Fees PPC
Man Site No. EFA-1	Percent Requirement				20.0 (An Ame)					Every Two	C-targe FPC
COLL, CENTRALES Say, INC.	Mercurement				۲×	なか			Ø	Ereny Two	T-PROF PPC:
Sefer Trees Comments	Manyaimer crown				Report (Mo.Avg.)	(Mex.)		1		Every Two Weeks	Piere PPC
PARM Cross Micro	Mesouverness			1	66,			ě	Ø	Brery Two Weeks	& hour FPC
Mon She No. EFA-!	Rougener				(All. Avg.)			\$		Ewery Tano	Litera FPC

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COMMENT AND EXPLANATION OF ANY VIOLATIONS (REGIMES ALIMINATIONS LEGIC

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DISCHARGE MONITORING REPORT - PART A (Cantinued)

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PARM Cade DRESO New São No. EPA-1

PARM Code BOIDD Man Files Ha. EFA-3 Collision, Real

PARM Code 19055 Man Sie No. 1874-1 Collisen, Peci

Quality or Concentration

FLAB(405)

Carafalares WWTP

FACILITY NAME:

SANDALHAVEN UTL

PASM Code N055 | Mon Sile Nn 17A-1 Ton Nasion Choise Por

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04/08/26

DEPARTMENT OF ENVIRONMENTAL PROFECTION DISCHARGE MONETORING REFORT - PART A

Pers completed mad this report toe Department of En

PLAK, FL. 339/EP-25/80	PERMIT NUMBER: FLADINGS
ASSECT, F.L., DER 2549, F. M.	PERMET NUMB
The state of the s	Utilities Incorporated of Sandalhawas 340 Wenters field Avenue
J	PERMETTEE NAME: UKE MARTING AUGRESS: 200

Orthogo Banchologos th Septializable 300 Weekerstool Avenue	WWTP Societ FL 3353
Mr. Wester	Sandalbown WWTP 4311 Planic Road Englowerd, FL 3333
MAH. INC. AUTRESS	FACILITY: LOCATION:

Carter

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MONITORING CRECITS SUBJECT.	Ton I	•
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PARM Code 16082 Y Mon Sto Yu. 1874-1 HOD, Codemonen S tay, 200

PARM Code MOST | Mos Site No. 1974.1

PANSAL Code BOSSO Mon. Site No. 1579-1

Report (Mr. Arg.)

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mentioned to their account of the complete of	SIGNATURE OF PRINCIPAL EXECUTIVE DESIGNATOR OF ATTENDED	1970 Vision Vision	1 1/1	S Lear you we
and complete, and many that there are significant permittee for a	IIVE OFFICER OR AUTHORIZED AGENT STGNATURE O		Palrick Godwin	
	NAMESTIFIE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIO	Load Operator O	La	

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PARM Code 50050 V Mor Size No. Oi'H-LA (Reuse Boorge Pards)

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PART.
MONITORING REPORT.
DISCHARGE M

MONITORING GROUP NO. A (Continued) PERMIT NUMBER: FLADISOS

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7			PARM Cote DOMAN	•				Market Line 1	Chaine For		1	k BFA-1			PARAI Code of the	-			MON	Perm	Repu

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FACILITY NAME:

Sentalbarea WWTP

FLA014053

Pennit Number:

m, Charage.

Come

DA 18.22 SAISSTOSSS RESULTS - PART 6

From: 3-01-04 Parilly: Sandallarus WWYP Monitoring Period TO 7-31-04 CEC 63 Flow (med) CE(003 T33 ((15)/1) T33 (page) 120 pH (8.4) Feed TRC (Per Distribut.) Nitrogen, Nitrata, Total (ma/l) (mg/l) 4... Parteria (9/100mi) (Ref) Code 50050 800(IZ 300E2 00530 **CENTED** 00530 80400 74055 50060 OTHER 00420 BYA. DAY-1 00070 野人 BOTAL T IN/-1 PAI E/CI OTH-IB 1// HA-1 EFB-1 0.051 0.371 0,051 1,2 0.353 0.044 7.1 0.041 0.423 0.046 0.325 .9 0.050 . 8 7. .9 0.386 0.041 <2 283 206 D 0.042 7.2 0.393 0.056 10 0.367 0.058 II 0.342 .8 0.049 12 £2 -8 0,375 OP52 6 13 0,321 0.054 Č 7.1 0,873 0.052 13 <u> Z. l</u> 0.364 0.635 17 7.1 1345 0.063 13 7.0 .2 037 0.067 <u>7.0</u> 0.325 **4.6** 25 7.0 7.5 292 7.0 Ď 0. 32 0.070 7.0 幺 0.070 0, 347 7.0 Ø 0.073 0.313 <u> 3.0</u> 50 0,794 7.0 D 0357 <u> 2064</u> 0,361 4 0.064 0,471 9 5.0 0.064 0.351 0.064 .O 0.32 30 4 <u>5, 0</u> 0.065 0.341 6-9 0.065 0,3/2 6.8 0.367 358 1 < 12 498 DATE 0_058 ANT STAFFING: y Shift Operator Curtifluste No: Name : Continue No Maria A Open Contidents No: Navae. La MALA Meanager

Cathate No.

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FIRST F. E. CHARLES

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DEPARTMENT OF KNVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART AND ADMINISTRATION OF THE PART AND ADMINISTRATION

When some paints mad this report to: Depositions of Kinstanascale Protection, South District, P.O. Box 2545, Ft. Mysts, Ft. 19903-2545 PERMITTER NAMES

PERMIT NUMBER CLASS SEZE Utilities Incorporated of Sandall 200 Worthers field Avenue Aboneous Springs, FL 32774

Sandalleaven WWTP 6611 Flacida Road Englamond, Ft. 55533

EACULTY: LOCATION

COUNTY:

R-001 and induced 12 MENTORING GROUP NEMBER:

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Merchanical Permit Regulament PAREN Code STRESO 1 Mon.Sinc No. O-TH-18 (Rapid Rate Number BOD, Carletonessons S day, 200

Man Site No. EFA-1 BOD, Carbonness ANEM Cade 40002

PARMICAL BOOK MAN Ste No. 1974. J Selbe, Total Supple

l centify make parally of law that I have parament and we feed for with the information sale hased on my inquiry of these individuals immediately responsible for obtaining the information is tong to consider, I was some last there are applicant peralties for information is tong to excitately of the sast inquirements. SIGMATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORITED ACENT MANNEYTITLE OF PRENCIENT EXECUTIVE OFFICER OR AUTHORIZED AGENT

Patrick Godwin Lond Operator

COMMENT AND EXPLANATION OF ANY VEGLATIONS (Baltimen ul attributes leg):

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Version 7/1 1/2001

Mon. Site: Mo. OTH-1B (Mappiel Base: Pands) Nany

PARM COLE SOIS

PARAI Cede 00530 Monator No. EFA-1

DISCHARGE MONITORING REPORT - PART A (Continued)

PERMIT MIMBER HADINGS MONITORING PERIOD

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MONTTOKING CROUP NO.:

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PARAK Code INIO 1 Mex Sate Me. 1974-1	Penel				9	a j		S.U.	1	S Days West	Grab
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Alibera, Feat	Semple Memorrania				- V	~>		T-005/4	Ø	Brary Two	Grade
PARM Code MOSS I Man Sile No. 10 A-1	Persolation :				Report (Matter Merc)			WIEDE		Every Year	Grafe
Form Maniform Coloring (Por Disjulatedien)	Monte				1.0			Þ	Ø	\$27.0 m.k	Graf
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Plbw		0,0005		}					Ø	Sartificant	The sector
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Figur	Sample Measurement	0.0	0.0	3					0	Seribook	How eachers
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BACK, LANDOMECOURS STORY, ZDC	Newportunes.				42			T T	0	Ebray Pao	Haur Mc
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PARTA COA BOOK

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P_A014053 PERMIT NUMBER:

F MONITOKKNIG PLIBLOD

カロード

MONITORING GROUP NO.:

1 3 3 G G G E E Srat 1 S Days Week 4 Days/West Continues Continuous Outsing Sal Wienk AT THE CO. 圣战 See See FIDOR 110012 H E Ē Ē 결 Quality or Concentration 6.9 2 4 Non Detectable (75%) 1.268 , a a 6.0 (Mm.) (Mar.) सम्बद्ध Quantity or Londing Sample

Menoment of Menoment o PAREM Code 74025 J Main Sile No. EFA.; Total Residual Colorine (For Distriction) PAREM Code 56060 A Main Sile No. BFA.; Turbicity Parameter PARM Cate (1007) Moo Site No. EFB-1

Version 7/11/2001

Sandalharen WWTP

PACILITY NAME

DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA014053 8-01-09 To: 8-31-09

Facility:

Sandalhaven WWTP

	Flow (mgd)	CBOD5 (mg/1)	CBOD5 (mg/t)	TSS (mg/l)	(Agm) 22T	TSS(mg/l)	pH (e.u.)	Focal Coliform Bacteria (#/100ml)	TRC (Por Disinfect.) (mg/l)	Nitrogen, Nitrate, Total (as N) (mg/l)	Turb' (mi
Code	50050	80082	80082	00530	00530	00530	00400	74055	50060		
Mon. Site	OTH-IA &	EFA~)	INF-1	EFA-1	EFB-1	INF-1	EFA-1	EFA-1	EFA-1	00620 EFA-)	00070 EFB-1
1	0.072						6.9			-	
	0.080				ح.6	•	6.9	121	5-0 1.7		0.3/6
3	0.080				.6		6.9	131			0.36
4	0.088	< &	93	4,6	26	74.0	6.9	1>:-	5.0		0.38
5 🚜	0.084				.9		6.8	121	2.2		0,37
6	0.082								100		0.33
7	0.107					······································	6.8		433 5 D		0.31
8	0.081						6.8				0.369
9	0.087				.6		6.7		5.0		
10	0.090				.6			21	3.2	···- T	0.38
	0.076		****		<.6		6.7	21	5.0		0.28
	0.091				<.6		6.7	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ 	3.7		0.39
13	6008								1.5		0.456
14 *	0.082						6.7		50		0.39
	0.084						6.7		50		0,673
16	0.084				₹.6		6,7		2.7		1,2'63
	0.071				2.6			<u> </u>	1.3		0.381
1 6	0.069	2	130	.6	₹.2	121	6.7	<1	5.0		0.39
4 M	0.080			-	16	136	6.7	4	4.3		0,527
20	0.063			-	40		6.7	<u> </u>	5.0		<u> 2,357</u>
21	2077	-					6.7		5.0		0.342
22	2.07/						6.7		50		5-32
	0.069				7.6		6.7		50		2.342
	0.065				5.6		6.8	-	5.0		.371
	7.076		-		2.6		6.9	<u> </u>	5,0		2357
26	2.088						6.9	<1	1.5		2383
	2062				<,6		6.9	<u> </u>	50		.328
	0.063			·			69		1.6		,392
	0.060					<u> </u>	6.9		4.0	C	,473
	0.052				7-		6.9		5.0		.492
	0,066	cal	94		5.8			<	5.0		387
		The second second		<1.8	(.6	156	6.9	<1	5.0		351
				< .6				<1			

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Night Shift Operator
Lead Operator

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	Name:
7518	Name:

Patrick	GodWin

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

989

When Complesed mail this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3550, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

	REPORT: Monthly GROUP: Domestic	6	// 48	7-00-07
FLA014053	Final N/A	R-401 including influent		7-01-07 To
PERMIT NUMBER	LIMIT: CLASS SIZE:	MONITORING GROUP NUMBER: MONITORING GROUP DESC:	NO DISCHARGE PROM SITE:	MONITORING PERIOD From:
Patrick Hyan	200 Weathersheld Avenue Attamont Springs, Florida 32714	Sandalhaven WWTP 6811 Piscida Road Bagkweod, Florida 33533	Charlotte	
PERMITTEE NAME:	MAILING ADDRESS:	FACILITY: LOCATION:	COUNTY:	

Parameter		Quantity or Loading	Loading	Units	Qual	Quality or Concentration	ation	Units	Š. Š.	Proquency of Analysis	Sample Type
How (Rapid Rate Ponds)	Sample	0.15		MGD							
	Measurement Permit Requirement	(An Avg)		3				0	3 3 1	S days/week	& Days Work
Plow (Rapid Rate Ponds)	Sample Measurement	0,0004	0.0						Ø		
	Permit Requirements	Report (Mo Ayg)	Report (3 Mo Avg)	a 077				9		* Sauverine &	Plow meets and greateness
BOD, Carbonaccous 5 day, 20C	Sample Measurement				111				Ø		
	Parall And			1.60°E	Report (Mo Avg)			\$		Brery Two	Shour PPC
Solids. Total Suspended	Sample				120				Ø		
	Retuit Requisment			mø/L	Report (Mp Avg)				V -	Every Two	SHOOT S
BOD, Carbonaceous 5 day, 20C	Sample Measurement				2.17				Ø		

l certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel property gather and evaluate the information, the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and bebef, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

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TELEPHONE NO DATE (YYMMID)	90/01/ho than-469
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	Tathick Hah
NAMBITILE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	Patrick Godwin Lead Operation

2 10 x EX

S. S. S. P. F. F. C.

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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

BOD, Carbonaccous 5 day, 20C

FACILITY NAME:

Saudalhaven WWTP

PERMIT NUMBER: FLA014053

MONITORING GROUP No.:R-001 including influent 9-01-04 To 9-30-04

MONITORING PERIOD

Parameter		Quantity o	r Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Туре
Solids, Totals Suspended	Sample Measurement				4,98						
				oget.						Every Two Works	19-Juan 1890
Solids, Totals Suspended	Sample Measurement	N.			<.6	1,6	4.6		0		
	Captiently				A SHE		AUC.			** Every Two	N-hom FPC
pH	Sample Measurement	PATER SPANNE			6.7	75			0		
	Bergunangal -		and and	- su	to the second	(Mus)		BU 7		'S DAYWWEEL	Grab
Coliform, Fecal	Sample Measurement		A STATE OF THE PARTY OF THE PAR		<1				Ø		
	Permit			WILES TIL	PARÁVEI					Pop Teo.	Cirel*
Coliform, Fecal	Sample Measurement	and bearing massess, the	ALBERTA L. S. MIN	1,711-142		<1	</td <td></td> <td>Ø</td> <td></td> <td></td>		Ø		
	Penni Kandinanan			W.W		Report (Mr. 188 Mars)				Brey I'wi Walt	Gro
Total Residual Chlorine (for disinfection)	Sample Measurement		244100000000000000000000000000000000000		1.5			1. h	0		
	Legistronen.			W L							12 DW
Nitrogen, Nitrate, Total (as N)	Sample Measurement				Ø				Ø		
										Bvery Two Weeks	#-boor PTY
				1 16							
									F12-91		

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SANDALHAVEN UTL

9416978959

11/04/2004

PERMITTEE NAME:

MAILING ADDRESS:

Patrick Flynn

200 Weathersfield Avenue

SANDALHAVEN UTL

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

FLA014053

PERMIT NUMBER

When Completed mail this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3550, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

CU					CLASS:	SIZE:	ini Aili	•		GROU		Monthly Domestic			
							MONITORING GROUP NUMBER: R-002 MONITORING GROUP DESC:								
	COUNTY:	: Charlotte					CHARGE FROM SI		3-01-04		a ·	30-24			
						MONIT	ORING PERIOD	From:	1-01 01	То	7	30-01			
	Parameter			Quantity (or Loading	Units	Qua	lity or Concentr	ation	Units	No. Ex.	Frequency of Analysis	Sample Type		
15	Flow (Reuse)		Sample Measurement	0.081							0				
			Compli Residence ni	0.10 (Ab Ave)		MOD	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			40		3 Days/Wook	5 Days/Work		
¥H.	Flow (Reuse)		Sample Measurement	0.071	0.067						0	*			
SANDALHAVEN				(Raport D&GAVE)			19.16				H.	3 Days/West	5 Days/Week		
Ω	BOD, Carbonaceous 5 day,		Sample Measurement				<2			23.5-24.0	10	300 50 100			
			Maria Registration			***	200				AND SERVICE	ERENTAN.	* Chair Fre		
	BDD, Carbonaceous 5 day.	.20C	Sample Measurement				<2	<2	<2		0				
			Manufacturent			79	allo Moving)	45.0 (W. Ave)	- 100 m			Every Two	8-hour PPC		
	Solids, Total Suspended		Sample Measurement				2.6				0	7.06.00			
ற	De Stering Stering		Permit Recolested			my).	OŽ.			444		4 Days/Wook	Grab		
6978959	Colliform, Pecal		Sample Measurement				21	41			0				
169			Andrew Contractors			MIDO	Nan Detectable	Mari		W100 PA		- Jaye/Week	Grab		
4 941	l certify under penalty of la information submitted. Ba belief, true, accurate, and c	sed on my inc	uiry of the person	or persons who man	lage the system.	or those persons	directly resonnsible	with a system desig	formation the inform	nation enlers	itted is to	perly gather and ex the best of my kn	valuate the nowledge and		
5:1	NAME/TITLE OF PRINCE								R AUTHORIZED A	-	TELEPHO	ONE NO DA	TE (YY/MM/DD)		
٦	Patrick Go	dwin	Lead	Operat	or	Peter	ch Do.	L		9	41-69	7 4797 09	1/10/26		
2004	COMMENT AND EXPLA	NATION OF	ANY VIOLATIO	NS (Reference all at	tachments here):								•		

FACILITY NAME:

Sandalhaven WWIP

DISCHARGE MONITORING REPORT - PART A (Continued)

PERMIT NUMBER MONITORING PERIOD From:

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R: F1_A014053	
MONITORING GROUP NUMBER: R-002	
23	

						diametrical (notice)				Parameter
Sample Measurement	Sample Measurement	Sample Measurement Hemili Hemili	Sample Measurement Minut Minut	Sample Measurement	Sample Mitasurement	Measurement	Measurement	Measurement	Measurement	
										Quantity
										Quantily or Loading
						•	N			Units
						5.7	4.59'0	で,ひ	<u> </u>	Q
								S. Y. S. Y.	<u>^</u>	Quality or Concentration
								* * *		tration
								23.534		Units
						Ø	Ø	Ø	\mathcal{O}	E No
						S Daya Wood	Omidipinou	5 Days/Work	4 Day Was	Frequency of Analysis
						Grab (IV)	Meter	(Gratio	Onto	Sample Type

DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period FLA014053 9-01-04 To: 9-30-04

9416978959

Sandalhaven WWTP Facility:

	Flow (mgd)	CB()D5 (mg/l)	CBODS (mg/l)	TSS (mg/l)	TSS (mg/l)	TSS(mg/l)	pH (s.u.)	Pecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/f)	Nitrogen, Nitrate, Total (as N) (mg/l)	Tert (al
Code	50050	800/82	90082	00530	00530	00530	00400	74055	50060	00520	00070
Mon. Site	OTH-IA & OTH-IB	EFA-1	INF-I	EFA-I	AFB-1	INF-I	EFA-1	EFA-J	EFA-1	EFA-1	EFB-
I 🚜	0.059				Z.6	10 10 10 10 10 10 10 10 10 10 10 10 10 1	6.9	<	5.0		0.365
2	0.052				5.6		6.9	181	5.0		0.342
3	0.074						16.8		5.0		0.321
4 4	0.079						6.8		5.0	,	0,364
. 5 g	0.084						6.7		5.0	1	0,357
6 🗷	0.90	109			the Commence of the Commence o		16.7		5.0	i i	0.32/
7 5	0.100				<,6		6.8	<	5.0		0.3//
8	0.105				.7		6,9	<1	5.0		0.657
9	0,110				<6	*	6.8	< (1.5		0.582
10	0.080				.8		6.8	< 1	3.2		0,349
11	0.078	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					6.8	н	5.0		0.356
12	0.061						6.8		5.0		0.348
14	0.060				46		8.8	<(5.0		0.307
	0.083	<2	124	<.6	<.6	164	6.8	<	5.0		0.321
15 16	0.080	· · · · · · · · · · · · · · · · · · ·			2.6		6.8	1	50		0371
17	0.061		<u> </u>		16		6,8	 	5.0	11	03/
17	0.063						6.8		5.0		0.395
19	0.056		, , , , , , , , , , , , , , , , , , ,				6.8		5,0		0.3/6
20	0.075						6,8		5.0		0.302
	0.071			· ·	5.6		6.8	<	5.0		0.3/6
22	0.068				<.8		7.5	41	50		0,357
	0.064				< <u> </u>	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	7.4	<1	5.0		0.312
	0.067				<.6	10. 0101111	7.2	$\leq L$	5.0		0.342
	0.066						6.9		5.0		0.520
	0.068						6.8		5.0		0.361
	0.074				- 35		6.8	₹. V	5.0		0.357
	0.082				5.6		6.9	41	5.0		0,386
70 11	0.069	<2	98	<.6	5,6	76.0	6.9	<1	3.8		0.351
20	-						6.8	,	2.7		0.342
3)	0.060				.6.		6.8	<	2.8		0.363
Total.	0100										
	0,073	<u> </u>	222	41.2		240		<17			
	ST.	<u> </u>	///	5.6	5.3	120		71) District Conjugate	
LANT STA	Tring:		, br			7		رافقت مجبوب ب			
hay Shift Ohift Operat	int .	Chas: Class:	<u></u>	rtifleme No:	W	Name:					
ight Shift (Operator tor	Chasa:	Ce	rtificate No:		Name; Name;					, and the same

B Certificate No: B:7518 Narrie:

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DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

MS 3550, 2600 Blair Stone Road, Tallahassee, FL 32399-2410	Wastewater Compliance Evaluation Section. 1	to: Department of Environmental Protection,	Then Completed mell this report
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nel properly gather and evaluate the sed is, to the best of my knowledge and	ncoroq badifar timefer coman	ned to assure that de formation, the inform	gisəb məseys a driw ini ədd yninədisig xif	sion in secondance sidiameter visconib	PERSONAL SECURITY SEC	sed under my directions of the	व्यापन्यायः अस्यक्षः क्राप्टमान्या अस्यायः व्यापः अस्यक्षः अस्याः	टाकाटाच अबद्र आ अपक राजाटाच अबद्र आ अपक	ob zidt telt w gai yaa go bəs	l centify under penalty of ba- information extensited. Bas
								444		40°8
Ø		てフ	て>	7>				्रक्राम्ब्रोट प्रस्तिताहरणस्या	20C	BOD, Carbonaceous 5 day,
									1 - 1	
Ø				£1.6			44 F 75 - 1947	Sample Messurental	SOC	ВОД, Ситропъссова 5 day,
								Measurement		
\mathscr{A}				541				अवसम्बद्ध		Solids. Total Suspended
								Measurement	w.k	
l l)			26				Signific		нОВ, Світопасьски 5 дау,

2	3					0.0	40000	Sample Measurement		Flow (Rapid Rate Pends)
		-			MGD		21.0 (gvA nA)	Sample		Mow (Rapid Rate Ponds)
Mo. Frequency of Sample Type Ex. Analysis		noù	ity or Concentra	lsuQ	ziinU	Saibsed 1	Quantità a	:		Parameter
\$0-18-0	or -	h9-10-0	17 manu	DELING PERIOD	MONILC		-			
); G 12 -		,		THARGE FROM ST	NO DIZ				Sitology)	COUNTY:
		भक्तमित्रं हुन्द्वानितः [SENG ORONG DES					Sandalhav 6811 Placi Englewood	FOCKALION: BYCH'UA:
(Manoky 7 7 30)			lsarī AVA	HZI	CIPAIT.		\$1	ISE shinofi , squings	inomilA	
Advu a II		£\$0¢10	IALFI	NUMBER	TIMAFI			on Statistic Avenue	Patrick FG	PERMITTER WAMESS:

belief, tree, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of time and imprisonment for knowing violations.

61/11/hotbth-t69-146	Whit Shill	Load Openator	Patrick Godwin
THE SPHONE NO DATE (YYMMDD)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	PICER OR AUTHORIZED AGENT	NYMELLLITE OF PRINCIPAL EXECUTIVE OF

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all athichments here):

PERMIT NUMBER: FLA014053

MONITORING GROUP No.: R-001 including influent

MONITORING PERIOD

10-01-04 To 10-31-04

Parameter		Quantity or Los	ding Units	Qua	lity or Concentr	ation	Units No		Ѕвиріє Турс
Solids, Totals Suspended	Sample			<.99		T	0	1	
	Measurement								
			70.3						
Solids, Totak Suspended	Sample			11	16	16	A	3	
	Measurement		mest very state and the second	\ \ b			-		erowe mareh part
"我们是我们的人,我们就是我们的人,我们就不是我们的人,我们就不是我们的人,我们就不是我们的人,我们就不是我们的人,我们就不是我们的人,我们就不是我们的人,我们									5-1 5 -2
PH	Sample			6.5	6.9		10		
	Measurement		33.05		0, (250
						للدائدة فلموال ويوايد بوسوا مناي		والمعاورين والويد	-
Coliform, Pocal	Sample			ノー			0	<u> </u>	
	Measurement						4		
					and the second	7	The State of the S		
Coliform, Fecal	Sample				/ 1	11	0	7	·
	Measurement								
otal Residual Chlorine (for isinfection)	Sample Measurement			1.3			D		
	Measurement								
			51.00		21				- 1
litrogen, Nitrate, Total (as N)	Sample Measurement			Ø			0		
	MERCHANI								- Ingle - The state of the stat
是是1000 的						_	No.		
	.]								
	1								
			Park Hills		4.77				

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

			DEP	AKLWRUL OF EVAIRONME	WIALKI	KOIECTION DISCURNO	M. Mewall Committee				
	When Completed mail this	report to:	Department of Bovi	ironmental Protection, Wastrwater Comp	tiance Evalu	nation Section, MS 3550, 2600 Bla	in Stone Road, Tallahasso	e. Pl. 32399	-2400		
	PERMITTEE NAME:	Patrick Ply			PERMI	NUMBER	PLAD14053				
	MAILING ADDRESS:		enstield Avenne Springs, Florida 327	714	LEATT: CLASS:	etyu-	Final N/A		REPOI GRUU		Monthly Domestic
	PACILITY: LOCATION:	Sandalbaye 6811 Placia Englewood				DRING GROUP NUMBER: DRING GROUP DESC:	R-002				
	COUNTY:	Charlotte				CHARGE FROM SITE: DRING PERIOD From:	10-01-09	<u>Г</u> то	10-	31-04	
_	Parameter			Quantity or Loading	Units	Quality or Conc	entration	Units	No.	Prequency of Analysis	Sample T

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Prequency of Analysis	Sample Туре
Flow (Reuse)	Sample Measurement	0.082							Ø		
		en v						0.	7 4 6 4 4 A		24
Flow (Rease)	Sample Measurement	0.085	0,077						0		
											-
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<2,17				0		
									3.7		77.
BOD, Carbonaceous 5 day, 29C	Sample Measurement				<2	42	42		0		
Solids, Total Suspended	Sample Measurement				.7				0		
		All of the second	in the factor of	MEXIC.	***		A SALE				
Coliform, Fecal	Sample Measurement				41	<1			0		
		A	Reference of the					Na.			

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assume that qualified personnel properly gather and evaluate the information. Submitted is, in the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Patrick Godwin Lead Operator.	Falrick Holer	941-697-4797	04/11/19

DAILY SAMPLE RESULTS - PART B

9416978959

Permit Number: Monitoring Period

FLA014053 10-01-04 To: 10-31-04

Facility: Sondalhaven WWTP

i Planti					ومدالانظان انتجاب					
Flow (mgd	d) CBCiDs (mg/l)	CBOD:	TSS (mg/	TSS (me	A) TSS(mg/l)) pH (s.u.)	Food Coliform Bacteria (#/100ml)	(mg/f)	Nitrogen, Nitrate, Total (as N) (mg/l)	Turb' (m
Code 50050	80022	80082	00530	00530	00530	00400	74055	50060	00620	00070
Mon, Sits OTH-1A & OTH-1B	EFA-I	INF-1	EFA-1	EFB-1	INF-1	EFA-1	EFA-1	EPA-1	EFA-1	00070 EFB-1
0.08				<.6	to produce the party of	6.8	1 < 1	1.4		0.371
2 0.087	1					6,8		1.3		0.35
3 0.07	7					6.7		45	ļ. 	
1 0.066	5			126		6.7	121	2.6	}	0.36
3 0,072				15.6		6.7	121	5.0		0.32
0.062				12.6		6.8	+>+	5.0	}	0.31
7 0.05	2			17		6.8	121	12.8		0.42
8 0.068						6.8		2.0		0.34
9 0.070					******	17 7	 	2.2		0.315
10 0,066				· · · · · · · · · · · · · · · · · · ·		19.7	 			0.36
11 0.160				136		18.7	1 < 1	1/2		0.31
12 0,265	122	68	14.6	156	152	6.9	121	50	A+	0:36
13 0,082				12,6		6.9	121	5.0		0.4/7
1 0.092				14,6			121	5.0		0.58
15 0.100							- 1 -	5.0		2310
16 0,090					·	6.8	ļ	5.0		0.6/9
17 0.081								5.0		13/2
18 0.09/				<.6		6.8	127	5.0		2362
19 0.074				12.6		6-8		5.0		2379
20 0083			-	3.6			<1	2-4		0,380
21 0.086				7.6	<u> </u>	6.8		5.0		2-42
22 0./0/				1		6.8	<1	3.0		0.376
0.068			-			but		7,3		0 337
24 0.062						6.6		1.5		2.35
25 0.060				<.6		6.5		5.0		0.381
26 0,091	<2	128	<.6	<.6	134	6.8	5!	5.0		2365
0,085		,		17	(27	6-8	<u> </u>	1.3		451
0.082				<.6		6.8	<u> </u>	1.3		381
29,0.085							< [5.0	0	,441
0.085						6.7		5.0	//	,362
0,085	/					6.7		3.5		,107
AND 2,704	24	196	7/2			6.7		9,9		.46
Avg. 0.087	32	98	\$1,2	2/0.4			C/7			
EST.	بيدروه بينسانه		<.6	<16]	143		SII		A STREET, SQUARE, STREET, STRE	
hift Operator	Class;	_							de Production	
Operator Shift Operator	Class:	Co	rtificate No:		Name:					
Operator	Chosa; "Cinas; "	Ct	rtificate No:		Name:					
	A == (101)	Ce	rtificate No:	7518	Name:	Patr	ies G	edwin	-	`
										_



	40-08-11 "	10-10-11	IG PRIMOD From:	MONITORD		
	•		KCE HOW ZILE:	MO DISCHY	अस्टिकारी	COPMIX
		tesetlai gaiholəni 100-A	NG GBONS DRZC: NG GBONS NGWREK:		Sendalbayen WWTP 681 i Fiscais Hosel Highwood, Florida 33533	PACATON:
Mentaly Demostic	КВРОКТ: СІКОUР:	AW.		CI VEZ SINE	Altst shings, Provide Altst	TAN EAST
		FLAGIGISS	MBER	PERMIT NU	Third Hynn Son Westberfield Avenue	TERMITTEE WANTE: MAKING ADORES:
	32399-2400	Blair Stone Road, Tallahassee, FL	a Section, MS 3550, 2600	opiantava sonaitqu	sreport to: Department of Environmental Protection, Wastewaler Con	When Campleted real W
	PORT - PART A	BCE WONILOBING BE	LECTION DISCHA	ENTAL PRO	DELYKLWEAL OF ENVIRONM	

Sample Type	Prequency of Amalysis	No.	atinU	ttogr	lity or Concentr	Oua	ztinU	a Loading	Quantity o		Parameter
							MCD		21.0 (3vA aA)	Sample Measurement	(shoof staff hiquid) wal-
* ***********************************	. prosperies									The same	
		Ø	್ಷ ನಂ ಆಕಾಹಾಕ್					0.0	0,000 ك		Pow (Dayld Kate Ponds)
		E os e	desi				œ.	Parish ()	(Exy of)	The parties of the pa	
		Ø				66.				Sample Measurement	SOD, Carbonaccous 5 day, 20C
Disert.	Owl Clang					nogaže (gvA:nM)	1/800			OPPE C	
4		Ø				८९/				श्रह्मकाराज्या श्रह्मकाराज्या	baltasqued fatol suffect
	a de la compansión de l		101	e O	•	(EXP. CPR)	1 6 m	18 18 18 18 18 18 18 18 18 18 18 18 18 1		TOTAL STATE OF THE PARTY OF THE	
		Ø				41.2				Sample Measurement	OD. Carbonaceous 5 day, 20C
	THE COURT					(SAVIN)					
		Ø		ح ک	۲>	てフ				Sample Measurement	OOD, Carbonaceous 5 day, 20C
144	MALE TO					PO	11500				

belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. informations redemitted. Besed on my inquiry of the persons or persons who manage the 1/2 term, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and comply made, beneath of he this document and all attachments were proportion or supervision in accordance with a system designed to assume that this proportion and all attachments and all attachments and all attachments are proportions and evaluate the

40 Kbth-t69-166 DATE (YYMMYDD) TELEPHONE NO SIGNATURE OF PRINCIPAL EXECUTIVE OPPICER OR AUTHORIZED AGENT NAMESTRILLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMPRENT AND EXPLANATION OF ANY VIOLATIONS (Reference all strachments here):

88

FACILITY NAME:

Sandalhaven WWTP

PERMIT NUMBER: PLA014053

MONITORING GROUP No.: R-001 including influent

MONITORING PERIOD

Prom:

11-01-04 To

11-30-04

					OMMO PERIOD						
Parameter		Quantity of	or Loading	Units	Qua	tity or Concentr	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Salide, Totals Suspended	Sample Measurement				<.99	The second section (s. 1) and the second sec	project a company to the control of		Ø		
										la red	
Solids, Totals Suspended	Sample Measurement				<0.6	<0.6	<0.6	2 22	Ø	Sabing and The State of State	
										4	
Hq	Sample Measurement	and the state of t			6.5	€.8			Ø	2.6840	
Coliforn, Focal	Sample		7.7.7 W. 19.2.2								*
	Measurement			100	200	A STATE OF THE			0		
Coliforn, Fecal	Sample			300	(An Avg)						
	Measurement					Acesari	<		Ø		
Potal Residual Chlorine (for	Sample		4.4			Olo (Ser Man)			1 77		
disinfection)	Measurement			e and a	1.2		100	A CONTRACT	Ø		
Nanogen, Nitrate, Total (as N)	Sample			wyl.	(Vin)	* ***		e de la			
	Masurement		min talijan tak	್ ಎತ್ಯಾ	Ø		Name of the Control o	220000	0		
				MP.						40.0	
						,					
Mark Company of the Company											in the state of th
			1 3 3 5 6 2								
								1000			

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PAGE

SANDALHAVEN UTL

9416978959

01/26/2005 13:08

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail thi	a report to: £	Separtment of Envir	rommental Protecti	on, Wastewater Co	empliance Evalu	ation Section, MS 3	550, 2600 Blair Slor	SE ROZG, TRIEDZESO	6, FL 32377	- DYCKI		
PERMITTEE NAME:	Patrick Plys	an				NUMBER	PLA	014053				
MARLING ADDRESS:	200 Weaths Alternosit S	ersfield Avenue prings, Plorida 327	14		LIMIT:	~~~	Fina NA			GROU	- •	Identialy Domestic
PACILITY:	Sandalhaye	m WWTP			CLASS S							
LOCATION:	6811 Placid					OR ING GROUP NU ORING GROUP DE		32				
COUNTY:	Charlotte				NO DES	CHARGE FROM SI		_				,
				ı	MONTO	DRING PERIOD	From: 1	1-01-04	То	11-	30-04	
Parameter			Quantity	or Loading	Units	Qua	lity or Concentra	ation	Units	No. Ex.	Frequency of Analysis	f Sample Type
Plow (Reuse)		Sample		T						Ø		
The state of the s	ing a supplied of 2 to 19	Measurement	0.083	G 78 6 - 18 5 5 5	Media			9.00				To See See
Maria San Andrews			140.6904									
How (Reuse)		Sample Measurement	0.086	0.083	2					Ø	Section 200	
				Autor	A MAP						¥4	A CONTRACTOR
MCD, Carbonaceous 5 day	v. 20C	Sample	(Western	3 MO AY	A STATE OF THE STA	<2./7				0		
	ACT CAMPAGE STATE	Measurement	Section Constitution		me/L	\(\frac{1}{2}\).		No.		****	500000	
	10 m	474								i de la constante de la consta	112	
BOD, Carbonaceous 5 day	y, 20C	Sample Measurement		ŀ		< 2	< 2	1 < 2		Ø		
			19-18-11-12-1		***				700		V. 2	170
Solids, Total Suspended		Sample		- 9 6,36,022 11;	*	A V	1200			0		
THE STATE OF THE S	narismaris	Measurement				0.8				12	10.000	
		The photograph				(Man)	+1000		Contract of	4		in the state of
Coliform, Fecal		Sample Measurement				111	<1			I D	A11 - 1477 V	
And the second		3.2		77 11E		11.5° m						
I contify under possity of	law that this c	locument and all at	tachments were pr	spared ander my	direction or supe	rvision in accordance	e with a system desi	gned to assure that	palified pe	reconnel pr	operly gather at	ad evaluate the av knowledge and
I cartify under penalty of information submitted. I belief, true, accurate, and												,
NAME/ITTLE OF PRIN					SIGNATURE OF	PRINCIPAL EXE	CUTIVE OPPICER	OR AUTHORIZED	AGENT	TELEP	HONE NO	DATE (YY/MM/DD)
Patrick Ge			Open		Va	Trick)	Jodion	>		941-6	97-4797	04/12/22
COMMENT AND EXP					e):			•				

PACTUTY NAME: Saudabavca WWTP PERMIT NUMBER: 1

PERMIT NUMBER: FLAD14053 MONITORING GROUP NUMBER: R-002 MONITORING PERIOD From: II-OI-O4 To II-3O-O4

Sample Type Z X Units Quality or Concentration Units E Quantity or Loading Sample Monsurement Parameter Confessors Feer

DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA014053 From: 11-0(=09

01-04 To: 11-30-04

Facility: Sandalhaven WWTP

	Flow (mgd			5 TSS (m	g/ī) TSS (m	(I) TSS(mg/) pH (s.u.)	Fecul	7000	No spinore trans	
		(mti/1)	.(mg/l)) .) pri (s.u.)	Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Nitrogen, Nitrate, Total (as N) (mg/l)	Turb (m)
Coc	50050	80682	80082	00536	00534	00:30	-			(11401)	
Mon.	Site OTH-IA &	- EFA-1	INF-1		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		00400 EFA-1	74,055	50060	00620	00070
-						,,,,,	EFA-I	EFA-1	EFA-1	EFA-J	EFB-1
1 2	0.085				0.8		6.7	171	2.6		.35
3	0.073				<0.6		6.7	131	2.8		
1	10073				<0.1	6	6.7	131	3.8		.96
5	- 0,072				<0.		6.8	121	3.5	···	1.26
6	0.060						6.8		3.6		-57
7	0.048						4.7				0.30
8	0.092						16.7		5.0		0.70
9	0,093	 	<u> </u>		<0.€		6.8	121	3.5	·	0.49
10	0.097				<0.6		6.7	121	2.5		0.62
I	0.099	<2	136	<0.6	<0.6		6.7	2	4,2		0.85
11	0.106				<0.6		6.7	21	3.6		0.87
12	0.193						6.7		3.1.1		0.56
13	0.082						6-5	<u> </u>	3.6		0.91
14	0.074						5.5		1.6		1.60
15	0.085				<0.€				1,5		2-41
16	0080				<0.6		6.7	<1	4.6		0.65
17	0.080				<0.6		6.8	51	4.6		7.84
18	0.080				20.6		6.5	<u> </u>	4.5		2.62
19	0.078				120.0		6,7	<	50	/	1.22
20	0-123					 -	6.7		Sull.		178
21	0.085						6.6		1-2	. 0	2.55
22	0.084				₹0.6	 	6.5		5.0		0.92
23	0.081	<2	187	<0,6		190	6.6	<u> </u>	5.0		1.17
24	0.125			2010			6.7	511	4.8		1.28
25	0,085		·		50.6	 	6.7		3.0		97
26	10005				<0.6	 	6,5		5.0		68
27 🕳	0.098				10.0	 	6.6	≤ 1	5.0		93
20	0.///		***		·	 	6.6		5.0	5.	33
29	0.100				101		6.8		5.0	<u></u>	28
30	0.091				<0.6		6.7	51	44	1	34
31	/				KO.6		6.6		5.0		76
Total,	2628	<4	202								70
Mo.Avg.	THE RESERVE TO SHARE THE PARTY OF THE PARTY	كالكاركان بدائد والمدارية	323 162	<1.2	<11.					-	
ANT ST	ECT	7-5-	101	50.6	<0.6				-		

LANT STAFFING:

hift Operator
Shift Operator
end Operator

Class: C Class: C Class: C Class: R

Certificate No: Certificate No: Certificate No: Certificate No: /3850 /3394 824/ 35/8

Name: Name: Name: Name: Mike Monat Red Ruleson Raymond Hoone Rather God Win

· ·			

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT. PART A

	When Completed mail the PERMITTEE NAME:	Patrick Hynn				DEDLA	T SHUADED		FLA014053	- 5		E CO	
	MAKING ADDRESS:	200 Weathers	dield Avenue							•	, as ansis		
		Autamont Spr.	ings, Plorida 327	/14		LIMIT: CLASS	,	-	Final N/A		REPO GRO!		Monthly Domestic
	EMCELTY: LOCATION:	Sandalhaven ' 6811 Placida	Road				ORING GROUP N	UMBER:	R-001 including influe	at .		.	Dougsit
		Englewood, F	10102 31533		-	MONII	ORING GROUP D	ESC:					
	COUNTY:	Charlotte				NO DIS	CHARGE FROM S		_				
,						МОМП	ORING PERIOD	From:	12-01-04	To	12	-31-04	
	Parameter			Quantity	or Loading	Units	Qua	lity or Concer	ntration	Units	No.	Prequency of	Sample Type
Ì	Flow (Rapid Rate Ponds)	- s	ample	0.15	1	MGD	 	T			Ex.	Analysis	
	**************************************		deasurement	(An Avg)								1	
	Marine 10111-18		erinit Requirement	and the second second			-94		200	MOD	2004	pió daya/wock	5 Days/Week
- 1	Flow (Rapid Rate Ponds)		ample Acasurement	Q 0003	0.0						/X	and the state of the	10.04
į	PARTICIPATION AND	THE PARTY OF THE P	c roult	Report	Report	MOD	18 TO 16 TO	1 1874 5	4.7.00 St. 7.4.2.00 S. C. C.	MGD	Ø		
	BOD, Carbonaceous 5 day.		lequirement :	(Mo Avg)	(3 Mo Avg)		4.3 4.5			MOD		5 daywybek	Plow moters and totalizers
		N	leasurement				.80				Ø		
֓֞֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	NAME AND COOK STORES OF		orngi eqpirement			mg/L	Report (Ma Avg)			emp/L	1	Bvery Two	8-hour PPC
	Solids. Total Suspended	S	ample						1			Weeks	-
1		Carrier Communication of Communication	icasurement		COLOR DESCRIPTION	mg/L	205 Report		*****	Comments	$ \varphi $	n. In the second process	
ä	BOD, Carbonaceous 5 day,	20C S	equirement				(Mo Avg)			mg/L		Every 1 wo	8-hour last.
	GUALGE - Property	N	leasurement				2.08				0		
1			ermi equiteratur			mg/L	20			Table .	¥ 1	favery Two	B-Mogr PPV
•	BOD, Carbonaceous 5 day,	20C S	ample	1		<u> </u>	(An Avg)	/ 0				Weaks	1
n i	ENEXAN GOLGODS2 - 1	The state of the s	leasurement	33 (Mark 2017)		V Z V SSNE SIII	< 2	く ユ	1 < 2		Ø		
ה ס			equirement		CANAL AND	mg/L	30.0 (Mo Avg)	(Wk Avg)	60.0 T	c was		Every Two	B-bout TPC
ת ם	l cessify under penalty of law information submitted. Bas	that this docum	nent and all attac	chments were prepa	red under my directi	on or superv	dsipa in accordance			ulified a			Barrish Historia
41.	information submitted. Bas belief, true, accurate, and co	ed on my inquir mplete. I am so	y of the person o	or persons who man	age the system, or th	ose persons	directly responsible	for gathering the	information, the inform	natios submi	muci prop itted is, to	peny gainer and ev o the best of my kn	atuate the owledge and
٠.	belief, true, accurate, and co	•	-	Francisco	see set attempting to	re iniounali	oo, including the po	subility of fine a	nd imprisonment for k	aloiv gaiwon	tivos.	•	D

Patrick Godwin Lead Operator COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): Patrick Godwin Lead Operator

01/25/2005

FACILITY NAME:

Sandathaven WWTP

PERMIT NUMBER: PLA014053

MONITORING GROUP No.: R-001 including influent

(Z)						IT NUMBER: FI		MONITORING GRO	OUP No.:R-00	H includi	ug influent	
	Parameter	· · · · · · · · · · · · · · · · · · ·	· ·	_	MONI	TORING PERIOD	From: [2-01-04	To		31-04	
7 7 7	ratameter		Quantity	or Loading	Units	Q	uality or Concer	tration	TT-it-		•	
-	Solids, Totals Suspended	Sample		1		<u> </u>	,		Units	No. Ex.	Prequency of Analysis	Sample Typ
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	Solids, Totals Suspended	Planetterit Sample				illa Ny					Every Two	Nobbur PPC
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		Permi			34 D(a)	6.5	6.8			0		Treff to early
I	Coliform, Fecal	Requirement Sample		*** *********************************	Sti	(Min)	85 (Max)		\$10		5 Days Week	Grab
	ENV CONTROLS Y	Measurement				<1				M		
		Reguliterical			W/100	200			a summer	9		
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L	Market Service	Partiti Rokukuman			SW/100 W		< 1	<	<u> </u>	0		1 5 5 7 7
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						2011 SEC 1014 EN			}			
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MONILORING GROUP NUMBER: K-002

PERMIT NUMBER: FLAO14053

TIWW asveallabras2

BYGITLL NYME:

ho-18-81 12-10-81

7 3

MONITORING PERIOD From

Sample Type	Frequency of Analysis	EX.	æinU	иоп	ity or Concentra	ieu)	siinU	gnibso.1 r	о уливиО		Parameter	PAGE
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2015-1602-160	MANUAL S	Ø	√/B uz ←			0'/	7/8ur			Sample Measurement	charafection)	1_
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										Sample Sample		
			11,347.07					anaceta Succession		Measurement		59
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												9416978959
										Sample Measurement		
	ANTIGO 15									Hemeunders Julie		39:53

DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period FLA014053 From: 72-01-04

-01-04 To: 12-31-04

Facility:

SandaFhaven WWTP

		Flow (mgd)	CBOD5 (mg/l)	CBODS (mg/l)	TSS (mg/l)	TSS (mg/l)	TSS(mg/l)	pH (s.u.)	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Nitrogen, Nitrate, Total (as N) (mg/l)	Turt (n.
	Code	50050	80082	80082	00530	00530	00530	00400	74055	50060	00620	00070
	Mon. She	OTH-IA & OTH-IB	EFA-1	INF-1	EFA-1	BFB-1	INF-)	EFA-1	EFA-1	EFA-1	EFA-I	EFB-1
	1	0.089		Ĺ		<0.6	و بين راهندستان د يخ	6,6	<1	5.0		1.32
	2	0.080				<0.6		6,5	<1	5.0		-83
	3	0.082						6.6	1	5.0		.60
	4	0.081						6.6		4.8		,50
	5	0.081						6.5	<u> </u>	5,0		.63
	6	0.088				0.7		6.5	<1	5.0		,86
	7	0.082	< 2	204	20.6	<0.6	164	6.6	<1	1.5		.87
		0.083				<0.6		6.5	< 1	1.4		1.52
	9	0.083				50.6		6.7	< 1	1.3		.86
	10	0.086						6.6		1.0		1.36
	13	0.086						6.5		1.4.		1.52
i	12	0.067						6.5		1.7		1.22
		0.090				<0,6		6.6	< (1.5	No. 11. 11. 11. 11. 11. 11. 11. 11. 11. 1	1.20
	14	0.091				<0.6		6.7	41	1.9		1.46
	15	0.068				0.7		6.6	41	1.7		1.02
	16	0.073				<0.6		6.7	< 1	1.8		1,20
75 - 71		0.078						6.8		2.0		1.10
j	18	0.082		<u></u>				6.5		2.0		.96
	19	0.085						6.5		2.7		1-86
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1		0.080				<0.6		6.6	51	5.0		\&\&
]		0.172			<u> </u>	KO.6		6.5	<1	5.0		1.22
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Ì		0.123						6.6		2.4		1.18
ł		0.150						6.8		2.0		2.01
l		0.081				1.3		6.8	<1	5.0		2.48
		0.091	<u> </u>			KO.6		6.7	<	5.0		1-94
		0.094				50.6		6,5	<1	4.3		1,22
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		0.064	<i>i</i>					6.7		4,6		2.25
		2,789			41.6	12.4						
ا إمام جور أنا. المام جور أنا	Mo.Avg.	0.090	52	198	₹0.8	<0.7	205					

PLANT STAFFING: Day Shift Operator Shift Operator Night Shift Operator Lead Operator

Cluss: C Certificate No: Chuse: C Certificate No: Cluss: C Certificate No: Cluss: C Certificate No: Certificate No:

/3850 Name; 8.14/ Name; /3794 Name; 75/8 Name; Mike Monat Raymond Hogue Tol Burlesons Patrick Godwin

SANDALHAVEN UTL

Эокошос 83/24/2005 Monthly

Sample Type

PERMIT HUMBER FEGHIOA.FI

CFY28 2IXE TIMIL

Quality or Concentration

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WOMILORING GROUP DESC.

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MONITORING GROUP NUMBER:

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2000 Weathersfield Avenue

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Charloune.

HEISTELLES NYME:

Parameter

COMMIX

CHURLY-FEE !

EACHTEL)

When Camplesed until this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3550, 2500 Blan Stone Road, Tallahassee, Ft. 32399-2400

Quantity or Loading

being man, accounts, and complete. I am aware that there are significant penalties for submitting false informedion, including the possibility of this and imprisonment for knowing violations.

REPORT

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EE/E/SOHLH-609-146

(GOLMMAN) STAG | DATE (YYMMADD)

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

THIRD STORY AND STANDARD AND STANDARD STANDARD STANDARD AND STANDARD AN

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inframetics achorised. Based on my inquary of the persons who meanige the system, or those persons directly responsible for gainering the information, the information submitted is, to the best of my knowledge and I coming under penalty of in what this document and all attachments were prepared under my direction or supervision in accordance with a system designed to manus that qualified pensonnel property gather and evaluate the

SKINATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENT AND BXPLAUATION OF ANY VIOLATIONS (Releases all stackness free;

NAME OF PRINCIPAL BARCUTUR OFFICER OR AUTHORIZED AGENT

FACILITY NAME:

Sandalhaven WWTP

PERMIT NUMBER: PLA014053

MONITORING GROUP No.: R-001 including influent

1-01-05 to 1-31-05

MONITORING PERIOD

From:

Parameter		Quantity	or Loading	Units	Qua	lity or Concent	ration	Units	No.	Frequency of Analysis	Sample Type
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03/24/2005

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SANDALHAVEN UTL

03/24/2005

14:02

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SANDALHAVEN UT

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DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

	AF #31	SHANDALL OF BUILDING	mariad e	れいしたしけひい かねてはなか	OR MOMINUM AN	KEPUK.	ı - Par	CIA	
When Completed mail the	in report to: Department of Boy	ironmental Protection, Westerrates Co	ospliance Eval	aatica Section, MS 3550, 2600 Bl	air Stone Rosti, Tallahass	cc. FL 32399	-2400		
PERMITTEE NAME: MAELING ADDRESS:	Patrick Flynn 200 Weathersfield Avenue			NUMBER	PLA014053				
	Altamont Springs, Florida 32	714	LIMIT:		Man		To your or	?~	or of the large
FACILITY:	Sancialhaven WWIP		CLASS	SIZE:	WA		GROU	P;	Domestic
LOCATION:	6811 Placida Road Englewood, Florida 33533			ORING GROUP NUMBER: ORING GROUP DESC:	R-002				
COUNTY:	Charlotte			CHARGE FROM SITE: DRING PERIOD FROM:] 1-01-05	- To	1-	31-05	
Danamata									
Parameter		Quantity or Loading	Units	Quality or Cond	centration	Units	No. Ex.	Prequency of Analysis	Sample Ty

Parameter		Quantity of	or Loading	Units	Qua	lity of Concent	ration	Units	No. Ex.	Prequency of Analysis	Sample Type
Plow (Reuse)	Sample Measurement	0,080					7	<u> </u>	0		
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low (Reuse)	Sample Measurement	0.078	0.084	786	E 11 5 12 5 12 5 12 5 12 5 12 5 12 5 12			A Comment	Ø		
			Report (1 MB Avg)	MGD				(iii)			
OD, Carbonaceous 5 day, 20C	Sample Measurement			E3192017 755	<2.08				8		
				144				100000			
OD, Carbonaceous 5 day, 20C	Sample Measurement		4		< 2	<2	<2		0		
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liform, Fecal	Sample Measurement		NEVENTAL VALUE OF	300	< 1	<			0		
			er ell targets	and a							

Lestify under penalty of law that this document and all attachments were prepared order my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and testif, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

	YY/MM/DD)
Patrick Godwin Lead Operator Talied Hodin 941-697-4797 05/	2/23

SANDALHAVEN UTL

DISCHARGE MONITORING REPORT - PART A (Continued)

Sandalhaven WWTP

FACILITY NAME

Security Constitute of Leading Units Constitution Units Par Analysis		ļ			MONITORING PERROD	MONITORING PERROD	Freen	1-01-05 To 1-	10	1-3	50-1	
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DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA014053 From: 1-1-05

Ta: 1-31-05

Facility: Sandalhavan WWTP

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31	3491				<.6	وي مستركا إليان إلى الوا	6.8	</td <td>3,4</td> <td></td> <td>1,13</td>	3,4		1,13
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29	0,//3						6.9		2:1		1.35
28	0.107						6.8	, ,	3,3		1.25
27	0.108		,		0.6		6.8	<u> </u>	3.8		1.65
	0.107				0.8		6.9	<	3.2		1.21
25	0.099				CO.6	-	6.8	4i	2,5		.60
24	0.095				0,9		6.7	<u> </u>	2.7		-82
23	0.13.5						6,6		8.2		1.36
22	0.138			,			6.7		3,9		6.240
21	0.106	_					6,8		3.2		1.10
20	0.105				₹.6		6.8	\leq \Box	4.5	.,, -	1.37
19	0.077				<.6		6.8	4 /	8-6		1-94
18	0.101	<2	209	2.9	1.0	236	6-9	<1	5.0	12,77	1.75
17	0.111				2,5		6.9	<1	3.8		2.45
16	0.143						6.7		4.# 3.7		1.11
15	0.1:59						6.8				·72
JA	0.141		·				6.8		5.0		117
13	0.1.33			.,	2.6		7,0	<.1	3.3		1,43
12	0.124				1.8		6.8	21	44		1-65
11	0.1828				3.8		6.8	< 1	1.0		5.00
10	01518				28.3	IVW.	6.8	<1	2,2	5.04	5.00
9	0./36						6.7		1.0		4.85
- 8	0.141						6.8		1.0	"A winnings-	1.35
7	0.110				3.9	7.7 74 7 11 11 11 11 11 11	7,0	27	1.0		5.06
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5	0.098				.9		7.1	21	5.0		·85
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	OTH-18	#4.Ve1	M4E+1	E.V.	E.FH-i	INF-1	EFA-1	EFA-1	EFA-1	EFA-1	EFB-1
Non. Site	OTH-1.1 &	80082 EFA-1	80082 INF-1	00530 EPA-1	00530 EFB-1	00530 INF-1	00400	74055	50060	00620	00070
Code	50050	gocon	110000	00000	40.5			Bacteria (#/100mi)	(mg/I)	(as N) (mg/l)	(14)
	Libw. (trigg)	(mg/l)	CBODS (mg/l)	TSS (mg/l)	TSS (mg/l)	TSS(mg/l)	pH (s.u.)	Focal Coliforns	TRC (For Disinfect.)	vitrogen, N trate, Total	Turb (n)
ì	Flow (nigd)	CBOD5									

PLANT STAFFING: Dr / Shift Operator

Sn ft Operator Night Shift Operator Lead Operator

Class:

Certificate No: Certificate No: Certificate No: Curtificate No:

Name: Name: Name:

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4 1 0 02 2 - 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2
13 1:3 3.3 70 1.43 .131 Ø 0.660	3
7 1.11 5.06.8 1.17,060,079 0.870	9
5 1:9 416.8.72 Ø 159 a6 90 16 :1433.76.71.11 Ø 143 a6 93	- 3
7 / / 38.76.7 / / / Ø / / 43 96 93	
18 111 57 15 137 002 08 86	团
18 111 50 68 1.75.099 19 75	
19 03 7 5.06.8 1944.075 Ø 1085 20 165 46 68 1.37 103 Ø 1079	19
21.106 32 68 110 110 4 8 40 70	
[22 /38 B.7 6.7 1,440 / 36 P. 0. 79]	93
13 (35)22 66 1.36 (33 0 06 83	- 2
67,05512716.71,82 090 or 10001	971
0901256.9.60 097 0 0985	86
26 1073.26.91.21.105 Ø 0.886	
	72
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21 / 31/6 2 5.045	3
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3492 1032 1038 033	

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DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMIT NUMBER FLA014053

From:

Final

N/A

Visca Completed mail this	report to: Department of Environmental Protecti	on, Wastewater Compliance Evaluation Section, MS 3550, 2600	Blair Stone Road, Taliahassee, FL 32399-240
PERMITTEE NAME:	Patrick Flynn	PERMIT NUMBER	FLA014053

PERMITTEE NAME: 200 Weathersfield Avenue MAILING ADDRESS: Altament Springs, Plorida 32714 LIMIT

CLASS SIZE:

REPORT. GROUP:

Monthly Domestic

FACELITY: LOCATION:

COUNTY:

Sandalhaven WWIP 6811 Placida Road Englewood, Florida 33533

Charlotte

MONITORING GROUP NUMBER: MONITORING GROUP DESC:

R-001 including influent

NO DISCHARGE FROM SITE:

MONITORING PERIOD

2-01-05 To

Parameter		Quantity o	ntity or Loading		Quality or Concentration				No. Ex.	1 4 4 1	Sample Type
Plow (Rapid Rate Ponds)	Sample Measurement	0.15 (An Avg)		MGD							
COMMENT SOCIOL Y	Pormit Requirement							MOD		5 days/week	5 Days/Wesk
Flow (Rapid Rate Ponds)	Sample Measurement	0.0	0.011						Ø		
	Permil Requirement	Report (Mo Avg)	Report (3 Mo Avg)	MOD				MGD	379	days/wedi	Flow meters
BOD, Carbonaceous 5 day, 20C	Sample Measurement				228				Ø		
FANTAL TO SERVICE CO.	Permit Regularment	,		mg/L	Report (Ma Avg)			MIL		Every Two Weeks	8-liour RPC
Solids. Total Suspended	Sample Measurement				CO.6				Ø		
	Permit Requirement		Kung King S	mg/L	Report (Mo Avg)			mg/L		Every Tom Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<0.8				Ø		
	Perindi Requirement			Ingri	20). (An Ayr)				75.67.56 200.000	Every ITwo	8 hour PPC
BOD, Carbonaceous 5 day, 20C	Sample Measusement				<2	<2	<2		0		
PANCHERSE 1	Permit Réquirement	Salah Salah Salah Salah		mg/L	30.0 (Mo Ave)	45±0 (Wk Avg)	60.0 (Max)	myt.		Every Two	8-hour PPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, one, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

_	NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
77.00	Patrick Godwin Lead Operator	Papick Hodwn	941-697-4797	05/03/24

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

PERMIT NUMBER: FLA014053

Sandalhaven WWFP

FACELTY NAME:

MONITORING PERIOD

MONITORING GROUP No.:R-001 including influent

2-28-05 . I 2-01-05 From:

S Lour PPO Sample Type 8-hour PPC Gab # boar PPC Frequency of Analysis Beery Theo Works Every fluo Wester 5 Dayswell Weeks Š Š 0 Ø Units 唐为 (Max) Quality or Concentration 40.94 Report (Mo Gén Mean) 7.7 8'0> 10.6 6,5 19.0 0.5 (Min) 7. Units 100 #/100 Jam 201/# DS. Ŧ 78m mg/L Quantity or Loading Measurement Petrili Requirement Sample Measurement Measurement Femili Requirement Sample Sample Sample Sample Sample Nitrogen, Nitrate, Total (as N.) Parameter Fotal Residual Chlorine (for Souths, Totals Suspended Solids, Totals Suspended Colliform, Fecal Colliform, Fecal

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: MARLING ADDRESS:	Patrick Ply	BB ersfield Avenue			PERMI	T NUMBER		FLA014053				
		Springs, Florida 32	714		LIMIT:			Final		REPO	DRT:	Monthly
FACILITY:	Sandalhav				CLASS		-	N/A		GROU	JP:	Domestic
LOCATION:	68) i Placi Englewood	da Road I, Florida 33533				ORING GROUP N ORING GROUP D		R-002				
COUNTY:	Charlotte				NO DIS	CHARGE FROM S	SITE:					
					MONIT	ORING PERIOD	From:	2-01-05	То	2-	28-05	
Parameter			Quantity (or Loading	Units	Qu	ality or Conce	ntration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Reuse)		Sample Measurement	0,080							3	,,,,	
	(C)	Respuirement	O 10 (An Avg)		MGD				MOD	W	5 Days/Work	5 Days/Week
Plow (Reuse)		Sample Measurement	0.113	0.093					3	Ø	Education (Control	
		Permit Regulmentent	Report (Me Ave)	Report (3 Mo Avg)	MGD				/ JAGO	9	.5 Days/Work	3 Direction
BOD, Carbonaceous 5 day		Sample Measurement	1115			< 2	建 在3年。(学育系)(《注)。		**************************************	Ø	, in the state of	
		Réquirement			ngī.	20.0	F3 45	+ 1/2	and a		Bwy Iwo	
BOD, Carbonaccous 5 day		Sample Measurement		<u> 11 200 s de equen</u>	<u>De Pair de Cito</u> ns	(ADAM) <	<2	<2		Ø	West,	30
		Constitution (e jaka se ka	1.54 P. 146	mg/L	30.0	95.0		-ingt		Every Two	6 hour FAC
Solids, Total Suspended	ASSESSED MAN	Sample	<u> 11 57 (Ved 1948</u>	(1996年) [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	, May position	(Mp.Avg)	(VA Ave)	(11)		X	Works	
MAN CANADO N		Measurement Pennut			mgL	3,2			net	9	4 Days/Week	Gab
Coliforni, Fecal		Requirement Sample				(Max.)				-,	4 Days Hera	CHED
		Measurement			#/100 ml	< 1 Non Detectable	<1		lite in the second	0		
		Residients)		144		(75%)	25 (Max)		W100 ha	<i>'</i>	# [Jagys/Week	(drah)

information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/ITILE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO DATE (YYMM/DD)
Patrick Godwin Lead Operator	- 1 A A A A A A	941-697-4797 05/03/24

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

FACILITY NAME:

Sandalhaven WWTP

PERMIT NUMBER: FLA014053

MONITORING GROUP NUMBER: R-002

MONITORING PERIOD

From:

2-01-05 To 2-28-05

PAGE	Parameter		Quantity (or Loading	Units	Qu	ality or Concentr	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
	Collidarra, Pecal	Sample Measurement				21	<1			0		
		Requirement	anga e		#1100 ml	Non Detectable (33%)	25 (Max	1.10			4 Days/West	Grab
	ЬN	Sample Measurement				6,5	7,2		100000	Ø	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	State of Colon Co.
		Page benealt				6.0 (Min.)	85 (Mix.)		รับ		5 Days/Work	Grab
	Turbidity	Sample Measurement			טדט	2,97				0	No. of the Assessment	<u> </u>
		Permit Requirement				Report (Max)		Programme Section 1977	MIN		Continuous	Meter
5	Total Residual Chlorine (for distillection)	Sample Measurement				1,4				0		4 1 1 1 1 1 1 1
SANDALHAVEN		Requirement			me/L	03 (Mip)		66	m¢/L.,		5 Days/Wook	Ónab +
A T T		Sample Measurement										
SAND		Permit Requirement				gyyrkin Ti,			1847218 34-37-48			
		Sample Measurement										
		Requirement				garina arabi Masasilanin dan						
		Sample Measurement										
	接了了。	a Constrainent						100				
		Sample Measurement										
323		Pennit Rightnement							Links a			
978		Sample Measurement										
9416978959		A STATE OF THE STA	Company of the Compan		5 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)				Total California	A PART TO A	tink page 10 20 1 20 1	
J.		Sample Measurement										
: 53		Penut Requirement							Sins ?			

Permit Number: Monitoring Period FLA014052 - 01-05 To: 2-28-05

Facility: · Sandalhaven WWTP

	Flow (mgd)	(m _l yl)	CBOD5 (mg/l)	TSS (mg/	TSS (mg/t)	TSS(mg/l)	pH (s.u.)	Focal Coliform Bacteria (#/100mi)	TRC (Por Disinfect.) (mg/I)	Nitrogen, Nitrate, Total (as N) (mg/l)	Turt'
Code	50050	800/82	80082	00530	00530	00530	00400	74055	50060	00620	00070
Mon. Site	OTH-IA &	EFA-1	INF-)	EFA-1	BFB-1	INF-1	EFA-1	EFA-1	EFA-1	EFA-I	EFB-1
3	0.102	< 2	266	100	5 0.9	238	6.8	121	130	0.61	1,65
3	0.083	ļ		<u> </u>	0.9		6.9	121	3.8	0.01	1.81
4	0.102	ļ		<u> </u>	0.8		6.8	131	5.0		1.34
	0-103						7.2		3.9	***************************************	2./2
6	0.093	 					6.5		3,5		2.62
7	0.107	 		 	-		6.9		4.0		1.21
- 8	0.107		 	 	10,6		6.9	< 1	2.3		2.36
9	0.106		 	 	1.6		7.0	</td <td>5.0</td> <td></td> <td>1.13</td>	5.0		1.13
10	0.106	 	 	 	1./		6.8	<1	1.4		1,20
	0.106		 		2.2		6.9	1<1	3,0		1225
	0.089		ļ	 	<u> </u>		_7:/		3,5:1		2.95
14	2.096						6.8		3,6		1.02
	0.110		 	 	<0.6		6,7		4.6		-89
	0,109	42	186	0.6	10.6	1/0	6.8	-> -	3.4		1.36
	0./37	- Control of the last	700	0,0		168	6.9	~!		(0.01	1.21
12	0-144				0.6		7,0		2,8	/	51
	0.120				10,6		7.0		2.6		1.85
10.	0-108				 	-	7,0		2.1		2,76
20	2.115						6.8		1.5		2.85
	0,109	,		(4.1.7.11) - 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1			6.8		2.7		297
22 (2.095				1.1		6.9		4.8		1.82
	2/22				1.0		7.0	21	1.8		1.83
24	0,123				0.8		7.0		2./		1.69
25	0-129				0.7		7.0	} 	2/		1.29
26	0.139						6.8	>	1.8		1.10
27	0./88						6.5		2.6		-80
28	1.153				0.9		7.0	</td <td></td> <td></td> <td>196</td>			196
30							7.0		4,0		,96 .98
31											
	,206	7	455	713	2127						
o.Avg. O	.115	<2	455	>//*	<0.96					0.63	
NT STAF			700	70,6	70.76			<		D.31	

PLANT STAFFING: Day Shift Operator Shift Operator Night Shift Operator Lead Operator

Cinas: Cinas: Ches: Class:

Certificate No: Cartificate No: Certificate No: Certificate No:

13850 Name: Name: Name: Name:

		DEP.	ARTMENT O	ENVIRONM	ENTAL PR	OTECTION	DISCHARGE	MONITORING	REPOR'	F - PAE	RT A L	EG	P
When Completed mail thi	is report to:	Department of Env	irosmental Protecto	on, Wasiewater Co	mpliance Evalua	tion Section, MS 3	350, 2600 Blair S	tone Road, Taflahassi	×, FL 32399	2100			r
PERMITTEE NAME: MAILING ADDRESS:	Patrick Fly 200 Westli	rnn sersfield Avenur			PERMIT	NUMBER	, F	LA014053			60	20	į
		Springs, Florida 32	714		LEMIT: CLASS SI	ZE:		nal A		REPO GROU		Monthly Domestic	. 7
FACILITY: LOCATION:	Sandalhav 6811 Placi Englewood					RING GROUP NU RING GROUP DE		auflus gnidurlani 100-	34				E C
COUNTY:	Charlotte					HARGE FROM SI RING PERIOD	·	3-01-05	To	<u>3 -</u>	31-05		, K
Parameter			Quantity	or Loading	Units	Qua	lity or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Ty	9416 9416
How (Rapid Rate Ponds)		Sample Measurement	0.15 (An Avg)		MGD								687.6
PARM Code 50050 Y	٠.	Permit				1			MGD		5 days/week	5 Days/We	

Parameter		Quantity	or Loading	Units	Que	dity or Concentra	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
How (Rapid Rate Ponds)	Sampte	0.15		MGD		l		1			<u> </u>
DATES CONT. COOCO. U	Measurement	(An Avg)	ļ					 			
PARM Code 50050 Y Mon Site No OYH-16	Permit		ì	1		ļ		MOD		5 days/week	5 Days/Week
	Requirement		 	 	ļ		ļ	-			
Flow (Rapld Rate Ponds)	Sample Measurement	0.0	0.011		•	į			0		1
PARM Code 50050 1	Permit	Report	Report	MGD				MOD	1	5 days/week	Flow meters
Mas Site No OTH-18	Requirement	(Mo Avg)	(3 Mo Avg)					1		,	and totalizers
BOD, Carbonacoous 5 day, 20C	Sample				170				1		
	Measurement			<u> </u>	179				9		
PARAM Code 80082 G	Permit			mg/L	Resport			mg/L		Every Two	8-hour FPC
Mon Site No INF-1	Requirement				(Mo Avg)					Weeks	
Solids. Total Suspended	Sample			1		I		T			
	Measurement				193				$ \mathscr{D} $		
PARM Code 00330 G	Permit			mg/L	Report		· · · · · · · · · · · · · · · · · · ·	rog/L	1	Every Two	R-hour FPC
Mon Site No INF-1	Requirement				(Mo Ave)	L	į .			Weeks	
BOD, Carbonaceous 5 day, 20C	Sample				4				1		
	Measurement		<u> </u>	_	CO.85	į			Ø		l
FARAM Code 80082 Y	Permit.			ing/L,	20.			mg/L		Every Two	8-hour FPC
Mon Site No BPA-1	Requirement				(An Avg)		ŀ			Weeks	
BOO, Carbonaceous 5 day, 20C	Sample				1 0	10	10	1	To the		
	Measurement				1 < 2	1 < 2	42	Į.	Ø		1
PARAM Code 80082 1	Permit		T	mg/L	30.0	45.0	60.0	mg/L	1	Every Two	8-hour FPC
Moo Site No BPA-1.	Requirement]	(Mo Avg)	(Wk Avg)	(Max)	1		Weeks	1

I certify under penalty of law that this document and all attachments were prepared under say direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evolute the information submitted. Based on my inquity of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accounte, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/ITTLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE LYY/MM/DD
Patrick Godwin Lead Operator	Patrick Hodow	941-697-4797	05/04/25

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

			MONTE	MONITURING PERIOD	From: 3	3-01-05 10 3-31-0	1	*	3-31-05		47 23
Parameter		Quantity or Loading	Units	රිගා	Quality or Concentration	dion	Units	S X	Frequency of Applysis	Sample Type	/2005
Solids, Totals Suspended	Sample			<.85				ø			<u></u> т
EARTH LINE WATER			Indiana.	20.			ragif.		Every Twa	6-hour FPC	5:2
Solids, Totalis Suspended	Sample			2 /	<1.0	6.7	<u> </u>	E	11.0000		: / • y
PARMICOde 00530 3	Permi		mg/L	30.0	45.0	0.09	mg/l.	X	Every Two	8-how FPC	94
H	Sample			9.9	1,7	(Variable)		Ø			169
PARM Code 00400 11 Mor Sin No IPA-1	Permit Requirement		SU	6.0 (Mis)	8.5 (Mex)		DS.		5 Days Week	Grab	7895
Coliform, Pecal	Sample			1>				Ø			9
PARM Code 74155 Y	Permit Requirement		97100 180	240 (At Ave)			DC 78		Every Two Works	Grab	
	Sample Messurement				- - - -	7		B			
PARM Code 74955 1 Min She No EFA-1	Permit Requirement		#/100		Report (Mo Gen Mcan)	800 (Max)	S 7		Every Two	Grab	
Total Residual Chlorine (for disinfection)	Sample Measurement			æ'/				Ø			·
PARM Code 50068 1 Mon Site No. RFA-1.	Penni! Requirement		mg/L	0.5 (Min)			img/L		5 Days/Week	Qug R	SAI
Nitrogen, Mitrate, Total (as N)	Sample Measurement			0.53				Ø			VDAL
PARM Code (0620 1 Mon Site No EPA-1	Permit Requirement		mgA	12:D (Max)			7,Alu	_	Every Two Weeks	8-how FPC	HAVE
											N L
											ITL
											T" }
	-			1.							

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: MAILING ADDRESS:		no ersfield Avenue Spriogs, Florida 32	31.3	•	PERMI LIMIT-	TNUMBER		FLA014053		b E ex	D.GP	
			714		CLASS	Sizie-		Final N/A		REPO GROU		Mombly Domestic
PACILITY: LOCATION:	Sandalbace Gölü Fraci Englewood					ORING GROUP NU ÖRING GROUP DE		R-003				
COUNTY:	Charlotte			-		CHARGE FROM SI ORING PERIOD	TE:	3-01-0	5 To	3-	31-09	5
Parameter			Quantity (x Loading	Units	Qual	lity or Cond	entration	Units	No. Ex.	Frequency of Analysis	Sample Type
Plow (Reuse)		Sample Measurement	0.083							Ø		
PARM Code 50050 Y Mon Site No CITH-1A		Permit Requirement	0.10 (An Avg)		MGD				MGD		5 Days/Week	3 Days/Week
Flow (Reuse)		Sample Measurement	0.135	0,109						0		
PARM Code 50050 1 Main Site No OTH-1A		Permit Requirement	Report (Mo Avg)	Report (3 Mo Avg)	MGD				MGD		5 Days/Week	5 Days/Week
BOO, Carbonaceous 5 day	y, 20C	Sample Measurement	"139			42				0		
PARM Code 80082 Y Mod Site No. BFA-1		Pérmit Requirement			ng·L	20.0 (An.Avg.)			mg/L		Bvery Two Weeks	8-hour FPC
BOD, Carbonoceous 5 day	y, 20C	Sample Measurement				く 2	<2	\ \ \2		0		
PARM Code 80082 Mon Site No. HPA-1		Permit Requirement			rug/i.	30.0 (Mo.Avg.)	45.0 (Wk Avg	60.0 (Max.)	Fgan.		Brery Two Weeks	8-hour FPC
Solids, Total Suspended		Sample Measurement				0.7				\$		
PARM Code 00:30 1 Kon Site No. BFB-1		Permit. Requirement			mgiL	5.0 (Mak.)			"Irgen		4 Days/Week	Grab
Coliform, Fecal		Sample Mensurement				100%	<1			0		
PARM Code 74055 Y Mog. Site No. EPA-1	<i>'</i>	Permit Requirement			#7100 xx3	Non Detectable (75%)	25 (Max)		#V100 ml		4 Days/Week	Grab
l conify under penalty of l information submitted. B belief, true, accorde, and	used on my inc	juiny of the person	or persons who man	age the system, or t	hose persens	directly responsible	for gathering t	he information, the inf	ormatica subm	illed is, t	perly gather and o the best of my	evaleate the knowledge and
NAME/ITTLE OF PRINC								ER OR AUTHORIZE	AGENT	TELEPI	IONE NO [ATE (YYMM/DD)
Patrick Go	1.0	lead	Organit	or -	I de la constante de la consta	rick for	0=	2	Ţ,	941.1	93-430	05/04/25

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME:

Sandalhaven WWTP

PERMIT NUMBER: FLADI-1053

MONITORING GROUP NUMBER: R-002

MONITORING PERIOD

3-01-05 To

3-31-05

Parameter		Quantity or Loading	Units	Qua	lity or Concentra	ntion	Units	No. Ex.	Frequency of Apalysis	Sасаріс Турс
Coliforn, Fecut	Sample Measurement			100%	<1			0		
CARGO COMO PROSA	District		M/IDO pol	Non Detrotable	25		#//00 ml	T-	4 Days/Week	Orab
Mon Site No. EFA-1	Requirement	į	i	(75%)	(MER	ł S	ŧ	!	•	Į.
pH	Sample				- ,		1	77		
	Measurement			6,6	7.1			Ø		
PARM Code 00400 L	Permit		~	6.0	8.5		SU	1	5 Days/Week	Grab
Mon.Site No. EPA-F	Requirement	į	1	(Min.)	(Max.)	Ì	1	i	•	ļ
Turbidity	Sample		NTU				1	1		
•	Measurement		1	2.45	_		1	0		l
PARM 00070 1	Permit			Report				1	Continuous	Meter
Mon Site No EFB-1	Requirement		I	(Max)		<u>}</u>	NTO	I		L
Total Residual Chlorine (for	Sample						1	0		
disinfection)	Measurement	L		1.2		L	1	12		
PARM Code 50060 I	Permit		mg/L	0.5			neg/L		5 Days/Week	Chrah
Mon Site No EPA-L	Requirement			(Min)		1	Ĺ	<u> </u>		
	Sample						I			
	Measurement		1	ł i		}	1	•	l	
i en la propertional de la companya	Permet.				·					
	Requirement		. i		-	£, .	l		-	<u> </u>
	Sample							1		
	Measurement		. 1	i			ļ	<u> </u>	<u> </u>	i
	Permit					1	1		<u> </u>	
· · ·	Requirement		1		· _		<u> </u>	<u>-}</u>		
	Sample									
	Measurement							<u></u>		
	Peninit					[1			
	Requirement			L				1	1	
	Sample								<u> </u>	
	Measurement								<u> </u>	
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	Sample			}	1					}
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_	Permit									1
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	Sample					1				
	Measurement	İ	\		<u> </u>		1		<u> </u>	<u> </u>
e central de la companya de la companya de la companya de la companya de la companya de la companya de la comp	Permit							-		
	Requirement		1	1	į	1	1 .		I ·	ł

Sandothavia WWTP Permit Number.

Facility:FLA014053

Monitoring Period Press: 3-01-05 To: 3-31-05

Three-month Average Daily Flow:_ Daily Flow % of Permitted Capacity:_

	Flow (MGD)	Flow (MGD)	(mg/L)	TSS (mg/L)	PH (SU)	TRC (For Disinfect.) (mg/L)	Fecal Coliform Bacteria (#/100mD)	Nitrogen. Nitrate, Totals (N) (mg/L)	TSS (mg/L)	Turbickley (NTU)
		no ada	80082	00530	00400	50060	74055	00620	00590	00070
Code	50050	50050				EFA-1	EFA-1	EFA-1	EFB-1	EFB-1
Mon. Site	OTH-1A	OTH-1E	BFA-1	EFA-1	EFA-1				0.7	.91
1	0./32	Ø	<2	1.9	6.9	2.6	۷.	0.53	40.6	1.34
2	0.110	<u>Ø</u>			7,0	4.2	41		20.6	1.45
3	0./32	Ø,		[7.0	4,3	<1		-0.6	1.60
4	0,153	Ø			7.1	3.3				
5	0.123	8			6.7	3.0				1,40
6	0.114	0			6.7	3.8	<u> </u>			1.10
7	0.136	Ø			6.8	5,0	1		KO.6	-8/
8	0.134	Ø			6.8	3,1	21		<0.6	1111
9	0.132	01			6.8	1.2	<1		(0.6	1.50
10	0.451	Ø			6.9	2.2	1		20.6	2.45
11	0.146	Ø			6.8	2,2				1.15
12	0.121	Ø			6.7	3,2				1.31
13	0.118	Ø	Ī		6.7	2.8				.80
LA	0./32	2			6.7	2.4	< 1		10.6	- 58
15	0.121	Ø	122	<0,6	6.8	3.4	<1	<.01	0,7	84
16	0.144	Ø.			6.8	2.8	<1		<0.6	1.12
17	0.196	Ø			6.7	1.6	<1		10,6	1.15
18	0.121	92			6,6	1,6				1.31
19	0.127	2			6.7	3,4				1.25
20	0.134	or or			6.6	2.7				1,22
21	0.149				6.7	2-5	<1		0.6	. 67
22	0,145	2			6.7	2.6	</td <td></td> <td>0.6</td> <td>.68</td>		0.6	.68
23	0.153	2			6.8	2,5	<1		0.6	180
24	0.155	e			6.8	3.1	51		<0.6	83
25	0.146	25			6.8	1.9				.85
28	0.140	<u>@</u> 5			6.7	2.9				. 85
27	0.153	Q!			6.7	2,3				1.12
28	0.159	es	1		6.8	2.2	1		0.6	1.72
29	0.127	Q!	<2	0,9	6.8	2.0	<1	0,50	10.6	1.44
30	0.128	08			6.8	1.8	1		140.6	1.68
31	0/28	Q5	1	<u> </u>	6.9	1.5	री		10,6	1.86
Total	14.259	109	126	K3.4		 				
	0./37	65	1 3	1.3	6.8	2.7	21	0.35	10,6	1.19

PLANT STAPFING: Day Shift Operator	Cinsa	_C	Certificate No:	0013850 Name:	Michael Monat
Evening Shift Operator	Chas;		Certificate No:	0013794 Name:	Ted Burleson
Shift Operator	Claus:		Contificate No:	Name:	
Lead Operator	Class:	<u> </u>	Certificate No:	0007518 Name:	Patrick God win

PAGE 07 DAILY SAMPLE RESULTS - PART B Sandalhav m WWTP Facility:FLA014053 Permit Number: Three-month Average Daily Flow: 0.122 mg/ Monitoring Period Prom: 3-01-05 To: 3-31-05 Daily Flow % of Permitted Capacity:____ CBOD5 TSS (MO/.) (MO/L) 80082 00530 Code INF-1 INF-1 Mon. Site 195 18th 2 3 5 6 B 10 12 13 14 188 15 1,6 17 18 19 20 21 22 23 24 25 36 27 28 29 2/6 153 30 31 Total Мо. Лув.

PLANT STAPFING: Day Shift Operator	Class:	C Certificate No:	00/3850 Name:	Michael Monat
Evening Shift Operator	Class:	Cortificate No:	0013794 Name:	Ted Burleson
Night Shift Operator	Class:	Certificate No:	Name:	
Lead Operator	Class	B Certificate No:	0007518 Name:	Patrick Godwin

•	
	•

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05/31/2005

14:39

8136261030

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DEDVIKENE OF ENVIRORMINGEL PROTECTION DISCHARGE MONITORING REPORT - PART ${f v}$

MONITORING GROUP DESC:

MONITORING GROUP NUMBER: R-001

Distribution

CKOUP REPURTE

YIN [gold

FLABIA053

CCY22 SISTE TIMIT

PERMIT NUMBER

Alternonic Springs, PL, 327 L4 MAILING ADDRESS: 200 Weathersfield Avenue PERMITTED MANEE: Utilities becomested of Sandollaveo

FACILITY:

Englewood, FL. 34224 boosi abiseli 1180 EOCATION: TWW novedischas?

Charlow

COUNTY:

NO DISCHARGE FROM SITTE ALOUTORING FERION FROM: \$4-01-05

50-08-h

including laffacat.

24H most-8	Every Theo		אפער		0.03	ODE (3vA.old)			~	teramental	
ļ		10			8.0>	£'0>			 	Justinativesty McZelitericki	WRM Code 00530 A
a research and a	Weeks	 	 			(3rA-0A)	ļ			Sample	bolids, Total Suspended
S-Bour 199C	Every Two		אפער		. Ala	20.0				Requirement	FOR SUC NO. EPA. 1
•		10	1			8.0>	 		- S. 101	Measurement	
	Wocks	₩.	 	<u> </u>		I	L		į	Signish	
8-hour FPC	Ewth The	1.	WOV		0.06 (xaM)	(Mo.Ave.)			(J. 10)	Requirement	
		1				30.0€	<u> </u>	A HOME TO BE	1,10	Pennit	A SWOOM SECOND
		0	<u></u>		< 3	\bar{7}	Ì			Measurement	i
S-bow PPC	Meeks	1		. 7 ·		(MAY:UY)				Sample	
2 Miles	Every Two	-/	MGC		7,45	20.0				Permit Requirement	F
	•	Ø				< 5				Mensurement	
socalizies		1~								29 ample	
Flow melets and	5 Days/Week			-					(Mayak)	Requirement	Mon Site No. OTH-18
		0					- MGD		Report	lims4	PARKA CODE 50050 P
totalizeta		120							0.0	Measurement	
bas zisism woff	5 Days/Week	1 1			7.0				· (34A.nA)	Requirement Sample	
	4-70-1105	-21	<u> </u>				COM		\$10)iami'	Mon. Size No. OTH-III
		P							0.003	Mensurement	Y 62002-boOMAA9
	sizykanA	.x3								Sample	WDFI
Sample Type	Frequency of	No.	sinU	tions	dity or Concentra	לתש	41114	a			
					- Jacobs Jorg		stinU	gnibsod re	ytiunuQ		Parameter

knowledge and belief, true, accurate, and complete. Lam aware that there are significant penalties for submitting false information, including the prostibility of fine and imprisonment for knowing violations. the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons durody responsible for galhering the information, the information, the information, the information solumined is, to the best of my l certify noder penalty of has that this document and all athechnetic were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel property gather and evaluate

1 7		TO MAN THE STANKED BY A THE MINOUS
te/50/50 totat69-166	1 acres Jasans	
E0/20/20 100/20/20/20		Patrick God Win Lead Operator
TELESTONE NO DATE (YYANGOD)	1	
TELEMONE NO DATE (YYANDD)	SICAY TORE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	
***************************************	ZCATTIBEOG DAROLL	MAXIO TITLE OF PAINCHAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

MMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all allachments hore):

SANDALHAVEN UTL

16:52

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8136251030

DISCHARGE MONITORING REPORT.	- PART A (Continued
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FACILITY:

Sondallaven WWTP

MONITORING GROUP NUMBER: R-001 MONITORING PERIOD FROM: 4-01-05

Parameter	T	Osteronic		· · · · · · · · · · · · · · · · · · ·	DRING PERIOD	From: 4-01	- 05 To	4-	30.	MIR: FEADINOS3	
	1 1	Quantity	or Loading	Units	Qı	natity or Concent	tation	Units	No.		·
рH	Sample							CELIZ	Ex.	Frequency of Analysis	Sample Typ
PARM Code 00400 A .	Measurement				6.6	6.9		 	7		
THE OLD ST. THE E	Permit Requirement				6.0	8.5	-		Ø]	I
Coliforn, Pecul	Sample			-i	(Man.)	j 0.3 <u>I</u> (Max.)	!	2n	1	5 Days/Week	Grab
ARM Code 74055 Y	Measurement		1		21		 	 	-		<u> </u>
don Site No. EPA-1	Permit				200		<u> </u>	_	0		Ī
oliform, Pecal	Requirement Sample				(An.Avg.)			MAQOAM.	1	Every Two	Grab
	Measurement		I				 	 	1	Weeks	
ARM Code 74055 A Log. Site No. EFA-1	Permit		·		<1	<u> </u>] < {	1	0		
otal Residual Chlorine (For	Requirement				Report (Mo.Gco.Mcan)	400	800	4/100MIL	 - 	Every Two	Orab
minfection)	Measurement					(90%)	(Max.)			Weeks	ÇMBD.
ARM Code 50060	Pérmit -		1 2 2 2 2	+	1.0		ĺ		0		
on Site No. EPA-I itrogen, Nitrate, Total (as N)	Requirement	·			0,5 (Min.)	· · · · · · · · · · · · · · · · · · ·	# 1 . 1 .	MGA	 2 -	5 Days/Week	
	Sample Measurement						: 1 .			3 Days WOOK	Grab
ANNI CODE UMAZII A	Permit.			11	0.67			1	0		
on Site No. EFA-1	Requirement		10 개설(14 개설)	14-1-4				MQ/L -	19		
	Sample			 	(Max.)		. 李. 亚			Every Two Weeks	8-hour FPC
TRIM COOK ROOKS G	Measurement Pennit				135				196		
Da. Site Na. INP.	Requirement		- 1 300 v - 150 - 100		Report		2	МСЛ	9		
ids, Total Suspended	Sample			 	(MacAvg.)		<u> </u>	MONE		Every Two Weeks	8-hour FPC
RM Code 00530 G on Site No. INP-1	Measurement Penult				195				1	- CFEES	
om Site No. INF-1	Requirement				Report				φ		
j.	Sample				(Mo.Avg.)			MGVL	•	Every Two	8-hour FPC
3.2.3.3.3.3.3.3.3.3	Measurement		·		l				一	Weeks	
	Consit.		The state of the s	Service i	9-4×.				L		
	Sample								[
	Measurement				1						
	eruit.		1.0							Ī	
	lequirement lample						2. Pr				
<u>l</u>	Acasurement	1		T					-		
	erinit		7.20 MB		. 12			j		i	
- 1,8 mm 3, MA	lequirement	. , <u>. (.)</u> . (.).				T. 444 T				- F. P. 12 .	

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9416978959

DEPARTMENT OF ENVIRONMENTAL	PROTECTION DESCRIPTION AND ADDRESS OF THE PROTECTION OF THE PROTEC	fl t 157' 4

When Completed mall this report to: Department of Environmental Protection, South District, Pletida Department of Environmental Protection, 9 O Box 2549-42, Morre 12, 1980, 19	K 111
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PERMITTEE NAME: Utilities Incorporated of Sandalhaven

PERMIT NUMBER

FLA014053

MAILING ADDRESS: 200 Weathersfield Avenue

Altamente Springs, FL 32714

LIMIT CLASS SIZE: Final AVK

REPORT: GROUP:

Monthly Domestic

FACILITY: LOCATION: Sandalhaven WWTP 6811 Placida Road Englewood, FL 34224

MONITORING GROUP NUMBER: R-002 MONITORING GROUP DESC:

CUCINITY:

Cannotte

NO DISCHARGE FROM SITE: \times 4-01-05 to 4-30-05

Parameter	;	Quantity	or Loading	Units	Qua	lity or Concentr	ation	Units	No.	Frequency of Analysis	Sample Type
Flow	Sample		[1		T	1	-	Ex.		<u> </u>
Dathi Calatoneo vi	Measurement	0,088				{			Ø		1
PARM Code 50050 Y Mon.Site No. OTTH-1A How	Pennil Requirement	0.19 (An.Avg.)		MOD					/	5 Days/Week	Flow meters and
PARM Code 50050 P	Sample Measurement	0.104							0	7 - 17	
Mon.Site No. OTH-1A BOD, Curbonateous 5 day, 20C	Permit Requirement	Report (Mo.Avg.)		MGD .						5 Days/Week	Flow meters and totalizers
	Sample Measurement				<2				0		Tomarcorp
PARM Code 80082 Y Mon Site No. EFA-1	Pennit Roguirement				20.0 (An.Avg.)		• •	MGAL	~	Every Two Weeks	8-bour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<2	<2			0	ALCERZ	
PARM Code B0082 A Men.Site No. BFA-1	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)		MGAL		Every Two Wocks	8-hour FPC
Solids, Total Suspended	Sample Measurement				0.8			 	0	WOOKS	
PARM Code 00530 B Man Site No. EFB-1	Permit Requirement				5.0 (Max.)			MG/L	7	4 Days/Week	Grab
P\$q	Sample Measurement				6,6	6.9		-	0		
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement	-	•;		6.0 (Min.)	85 (Mix.)		SU	7	5 Days/Week	Grab

l certify under penalty of law that this document and all attackments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons or persons who manage the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAMEDITILE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		mont to knowing troublous.
THE STATE OF THE CALL OF WORLD WOFF!	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO DATE (YYAMMOD)
Patrick Godwin Lead Operator	Patrick John	941-697-4797 0/05/27

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

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<u>=</u>	SKOD
	F. 19
MACHINE	
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	:			MONTED	RING GROUP AU! RING PERIOD	MONITORING GRUIP NUMBER: R.192 MONITORING HERKID FIRM: 4-0/-0<			N.W.	PERMIT NUMBER: FLADIA053	
Parameter		Cushing	Ottantito or Londian				2		202	32	
			generalise	Sign	ੌ	Quality or Concentration	alion	Units	Ž	Frequency of	Complete Two
	Semple				1.				Ē,	Analysis	
<	Permit				\ 				K		
	Requirement				23			WATEONA	¥		
Distriction Chlorine (For	Sample				(Same)			THE STATE OF THE S		4 Days Week	Gab
SOUNCE	Measurement		-		1.0				1		
	Permit				9				8		
Tustidity	Samule				(Min.)	. ,,	,	MOM		Continuous	Grafe
	Measurement				1						
A	Permit				2.55				Ì		
FIGURE NO. 27'8-	Regulariment				Report			MTU	1	Confirm	
	Sample				Max				• · · •	Company	Meter
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No.	Permit Receirement		100					1	\dashv		
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Sandufhaven WWITP

FACILLITY

Permit Namber:

Sandalbaven WWTP

Pacifity:FLA014053

Musituring Period Prom: 4-01-05 To: 4-30-05

Three-month Average Daily Flow: O. 119 Mg. C
Daily Flow % of Permitted Capacity: 59 %

							Dauly 1	riow yo di Parmi	thed Capacity:		
g ort wheat said	Figur (MCTS)	(hIGD)	CBODS (mg/L)	TSS (mg/L)	pH (SU)	TRC (For Disinfect.) (mg/L)	Fecal Collform Bacteria (#/100ml)	Nitrogen, Nitrate, Totals (N) (mg/L)		TSS (r:g/L)	mbigity NTU)
Cusa	500.(1)	51050	80082	00530	00400	50060	74055	00620		0:1530	
N can fait		O H-IB	PFA-1	EFA-1	EFA-1	BFA-1	EFA-1	EFA-1		E: B-1	20070 2PB-1
1	0.134	10			6.9	1,4					(144) T. 2 HOLL
2	0./30				6.7	1.7	 	 			1,45
3	0.110	9-			6.6	1,4					1.495
4	0.107				6.7	1.5	21				1.00
5 5	0,089	13	1		6.8	1.4	<1			50.6	.68
6	0.118	13		-	6.8	1,2	31			<u>8</u>	96
7	0.124	13			6.8	/ 3	3)			10	58
8	0.150	130			6.7	1.0	-			42.6	. 66
9	0.122	سوا_		-	6.6	3.0		<u> </u>			255
10	0.114	13	1		6.7	3.0					.52
11	0.116	43			6.7	3,2	۲,				.4/6
7.7	0.108	سھ ئے	 	0.8	6.7	3.4	21	~ /-		40,6	.6.2
13	0.103	_43-			6.7	3.5	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ 	0.15		<u>਼-7</u>	.51
ŢŸ	0.101	43		1	6.7	2.0	21			1.4	55
15	0.091	.63			6.8	3.1				1-1	1.25
16	0.100	_47			6.7	5.0					1.90
17	0.093	_65		-	6.8	5.0		-			98
78	0.089	_19			6.7	5.0	21				1.35
19	0.092	4>-			6.7	5.0	<u> </u>			0.6	03.
2.)	0.094	_6>			6.6	5.0	31			0.6	.90
21	0.095	سري.			6.6	124.6	21			(36	82
22	0.057	45			6.7	5.0				50.6	65
2.4	0.104				6.6	5.0					1.70
24	0.083	_6>_			6.7	5.0				~	-61
25	0.079	42			6.7	5.0	21			(126	:7/
20 4	0.096	LE T	< 2	40.6	6.7	5.0	<1	0.67		7.6	.62
2	0.113	er			6.7	1.5	21	-,0,1			.45
28	0.118	er			6.7	5.0	2 1				
2ý	0.084	er			6.7	5.0				C-6	1.72
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31											775
	3/34	e	< 4	<1.4						Con Con	
Mo. A g.	0.104	0	< 2	40.7	6.7		21	0.41		1.9	
r E		اسيب سب						J. 77		50.8	, 92

".ANT STAFPIN":		•		
Shift Operator	i Dinne:	Cartificate No:	/3850 Name:	Mike Monat
i caing Shift Cockair	Days:	Certificate No:	13794 Namo	Ted Burleson
sight sheft Openace	(Diame:	Certificate No:	Name:	
and Operator	(Zas():	B Cordificate No:	7518 Name:	Patrick Godwin

Parmis Number:

See dellaren WWTP

DAILY SAMPLE RESULTS - PART B

Facility:FLA014053

Monotoring Pentis From: 41-01-05 To: 4-30-05 Three-month Average Delly Flow: 0-117 mgo.

Daily Flow & of Parolited Conscient 68

	CRO(S)	TSS (MO/L)			T		Flow % of Paru			THE OF SHAPE
	(MG: ·)									
100°	EQOCE	0)530					 	 		-
in Site	INF.	DIFI				 	 	 	<u> </u>	
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18										
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31										*
012.	and and any of the last									**************************************
108	/35	195							10.00	THE PERSON NAMED IN COLUMN 2 I

NT STAFFING Shift Operator	C'inss:	Cardificate No:	13850 Name:	Mike Monat
Syoning Shift Openites	Class	C Contrificate No:	13794 Name:	Ted Burleson
Visibi Shift Operator	Ciase	Corridonte No:	Name:	
d Operator	Class:	B Certificate No:	7518 Name:	Patrick L. Godwin

	COMMENT AND EXP
06/28/2005	

DEPARTMENT OF ENVIRONMENT	L PROTECTION DISCHARGE MONITORING REPORT - PA	RTA
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When Completed mult this report to: Department of Environmental Protection, South District, Harida Department of Environmental Protection, P.O. Rox, 2549, Ft. Myers, PL, 33902-2549

LIMIT:

CLASS SIZE:

PERMITTEE NAME: Utilities Incorporated of Sandalhaven MAILING ADDRESS: 200 Weathersfield Avenue

Alternante Springs, FL 32714

PERMIT NUMBER

FLA014053

Final

N/A

REPORT:

GROUP:

FACILITY: LOCATION:

COUNTY:

Sandalhaven WWTP 6811 Placida Road

Charlotte

Englewood, FL 34224

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC: , including influent

NO DESCHARGE FROM SITE: MONTTORING PERIOD From:

5-01-05 = 5-31-05

Parameter		Quantity	w Loading	Units	Qua	dity or Concentra	ntion	Units	No. Ex.	Prequency of Analysis	Sample Type
Flow	Sample Measurement	0.003							Ø		
PARM Code \$0050 Y Mag.Site No. OTH-1B	Permit Requirement	0.15 (Ап. Аук.)		MGD	:					5 Days/Wesk	Flow meters and totalizers
Flow	Sample Measurement	0.0							0		totenzers
PARM Code 50050 P May Site No. OTH-1B	Permit Requirement	Report (Mn.Avg.)	*	. MGD						5 Days/Week	Flow meters and totalizers
BOD, Carbonaccous 5 day, 20C	Sample Measurement				< 2				0		iocalizes.
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement	· · · · · · · · · · · · · · · · · · ·			20.0 (An Avg.)			MG/L	/	Bvery Two Works	8-how FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<2	<2			0		
PARM Code 80082 A Mon.Site No. EFA-1	Pennit Requirement		•		30.0 (Ma.Avg.)	60.0 (Mět.)		NGA		Byesy Two	8-bour FPC
Solids, Total Suspended	Sample Measurement		·		<.87	,,,,,,			0	· WOERS	
PARM Code 00530 Y Mon.Site No. BFA-1	Permit Requirement	એ <u>સિં</u> દ કર્યું. જ			20.0 (An Avg.)			MG/L		Every Two Weeks	8-bour EPC
Solids, Total Suspended	Sample Measurement				<1.0	1.4		1	0	FFCSES	
PARM Code 00530 A Mon Site No. BPA-L	Pennit Requirement				30.6 (Mo.Avg.)	50.0 (Max.)		MGAL	7	Every Two Weeks	. 8-hour FPC

I certify woder penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on any inquiry of the persons who manage the system, of those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTH	ORIZED AGENT	TELEPHONENO	DATE (YYB(M/DD)
Patrick God win Lead Operator	Patrick Holiva			05/06/24

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all stractionesis bere):

9416978959

SANDALHAVEN UTL

DISCHARGE MONTORING REPORT - PARTA (Confidued)

Sandalhaven WWIF

FACILITY:

	<u>.</u>
	707
₹-EK31	5-01
(UMB) ER	From:
GROUP	PERKOD
ACHITICIENCE	MUNITORING PERIOD FROM: 5-01-05
Σ	*

				MONLO	MONITORING PERKOD	From: 5-0	50-10-5		NIMBE	PERMIT NUMBER: PLACE 1053	
Parameter		Quantit	Quantity or Loading	Unite				į	7	3	
17.0			P.		# -	Quality or Concentration	ration	Chils	N.	Freducing	Control Ti
	Sample							·	ij	Analysis	adki anime
PARM Code NOVA	Measurement			,	ソ	7 /					
Adam Cite May STRA 1	Permet				0.9	200			Ø		
Coliforn, Feen	Samole		-		(Pelin)	Phr.		8		5 Days/Weck	(Sa)
	Меазыстви				-			_	_		
Mon.Site No. BFA-1	Permit		-	1	- SE				Ø		
Coliforn, Fecal	Samole				(An.Avg.)			#NIDONEL.		Every Two	100
,	Measurement				- \				1	Wecks	
FARM Code 74665 A	Permit			 	7		1		É		
Total Residual Chloring Co.	Requirement			· ·	Report	400	800	# COOME.	1		
Disinfection)	Mercul				Water County of the	(30%)	(Max.)		_	Weeks	Oraș
	Perent				1.1				8		
	Requirement				.0.5				R		
Nitrogen, Nitrate, Total (as N)	Sample				(Min.)			MGT		5 Days/Week	Grab
	Measurement				CD				+		
 	Permi				5				E		
HON Catalogue	Requirement		- 1. - 1. - 1.		27.0			150M	+		
	Sample				(Mar.)					Every Two	8-hour PPC
PARM Code 80082 G	Permis				151				1	1	
	Requirement	,			Report			7	0		
Solids, Total Suspended	Sample			1	(Marky)			YOU		Every Two	8-hour PPC
PARM Code moral	Measurement				1241				+	Weeks	
2 ,	Permit		,		Report			_	$\overline{\varrho}$		
	Sample			11/2	(MO.Avg.)			NG.		Every Two	8-bour FPC
	Мезяненыем							+	+	Weeks	
	Permit			1 (0.00)				-			
	Samuel Same								-		
	Measurement					+					
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æ	Requirement	,	•					+	+		
<u>, 19</u>	Sample			1							
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X X	Formsi Roguiremeni			-	+	+	1		-		
		•									

05/28/2005 11:34

8136261030

COMMITY:

Charlonic

DEFAILMENT OF EVVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

FLAOLIOS PERMITTEE NAME Dilities Incorporated of Sandalinven PERMIT NUMBER

MONIBORING GROUP DESC. Eaglewood, FL 34224 WONLLOKING CRODS MINNBER: R-003 bank shineff 1180 **FORVAJOS** Spitelalhaven WWTP PACILITY: Dimestic GROUP CIV22 2ESE-Mounthly RELUBL: lenA ALCO A Agoing Summall A TWILL MAILING ADDRESS: 200 Weatherstick Avenue

MONITORING MERIOD FROM: S-01-05 TO NO DISCHERCE FROM SITE:

dmD	5 Days/Week		ns		8.8 (.xsM)	0.0 (nitd)	T			Requirement	Mon.Site No. EFA-1
		1		 			 	 	}	Perpet Of Costanting	PARM Code 00400 A
		Ø		i i	£'9	5'9		ŧ	\	Sangle	g d
				13.44		(Max.)				Requirement	I-HIH ON SIEROM
Gritab	4 Days/Week	-4	MOVE			0.2	1			Pennal (PARM Code 00530 B
		D		i		1 1 -1				โกวการเยะธวรณ์	
							<u> </u>			3 angle	Solids, Total Suspended
Out more.	Weeks				(A8IA)	(MoAre)				патытырэЯ	I-ARE ON SIZ now
Strow FPC	Every Two	-4	MOL		0.09	30.0	<u> Li</u>		<u> </u>	time4	PARM Code 80082 A
,		0			C>	して>		1		Measuement	
	Certur						<u> </u>			Sample	BOD, Carbonsceods 5 day, 20C
2473 mod-8	Every Two Weeks	1 1				(37A/A)	1.		1	Requirement	Mon Site No. HPA-1.
- Jac 3 * 20 3 8	ca(Lumi)	 /- 	MONL		<u> </u>	20.0		<u> </u>	<u> </u>	Permit	PARM Code 80082 Y
i		0]		て>	İ		l .	Measurement	_
\$122118701							1	<u> </u>		Sample	BOD, Carbonaccous 5 day, 20C
Das excusts and	5 Days/Work	l I		1			i		(Ma-Ave.)	Jeansuiupe#	AI-HTO ON SHE ROM
her myon wolf	Analthural ?	/-					MGD		Report	Pennit	PARM Code 50059 P
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\$192USE12		-							1	Sample	Wolf
Flow meters and	S Days/Week	1	İ			1	-		(-gyA.nA)	Requirement	A1-HTO AN SIE LOM
	4-10-40	1 2					MOD		01.0	Pennit	PARM Code 50050 Y
ł		Ø		Ì]	f l		0600	Measurement	
		'				<u> </u>	<u> </u>		<u> </u>	Sagma2	E-JOW
Sample Type	frequency of Analysis	Wo.	zlinU	noite	ity or Concentra	lau Q	ainU	Ruipeot	Quantity or]	Parameter

knowledgo and belief, ione, accumate, and complete. I am aware that there are significant penalties for submitting take information, including the possibility of fine and imprisonment for knowing violations. the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my security under penalty of tam that this document and all adachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gainer and evalues.

45/20/SO LUH E69-146	Johnsk Hostins	Patrick God win Lead Operator
THERIONE NO DATE (YYMANDD)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	WAMENTALE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED ACENT

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all allachments bere):

DISCHARGE MONITORING REPORT - PART A (Continued)

Quantity or Loading Units	FACILITY: Sanda	Sandahawa WWTP			MONITOR	ING GROUP NUM	THER RANG	o temining)	PERMITAL	MISER- E angares	
Name Comparison Compariso	Parameter			,		ING FEMALE	170m: 5 - 0		5-3	-05	
Sample S			Cuantity	or Loading	Units	Ou	ality or Concentr	ation	_	_	Same Day
With Code 1 (1992) Western Wes	Coliforn, Ferat	Sample							_		ik.
No. of the control	PARM Code 14055 A	Persit				· /				×	
Standard Charles (For Surveyor Conditions Condition	the Challe Bill I	Bostonia		,		S			+	4	
Microscope Mic	Folal Residual Chloring (For	Sample				Africa.				4 Days/Work	Grab
State No. 1974 Vernit		Measurement				1-1			'		
Marian M	No. EPA-1	Permis		,		91			٦		
National Continues Nationa	urbidity	Samue				(Min.)			MGA	Continueus	Grah
Size the ESF9. Requirement Requirement Requirement Sample Requirement Sample Requirement Sample Requirement		Measurement				,					•
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Neutronian Neutronian		Cample				Aax.			NTE.	Continuous	Mober
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Registration		Measurement									
		Remit			-		+				

Sandathawen WWTP

PACILLITY

FLAD14053
From: 5-01-05
To: 5-31-05
Facility: Sandalhaven WWTP Permit Number: Monitoring Period

	CBOD5 (MG/L)	Pacs) Coliform Balteria (#/1/XXML)	Nitrogen, Nitrate, Total (as N) (MO/L)	pH (SU)	TSS (MG/L)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	CBODS (MG/L)	TŠ3 (MG/)	.) Flow (MGI
Code Mon. Site	80082 EFA-1	7/ 055 El A-1	00620 BFA-1	00400 EFA-1	OD530 EFA-1	50060 EFA-1	_00530 EPB-1	00070 EPB-1	80082 INP-1	00530 INF-1	\$0050 OTH-1A
)				6.7	100,000	5.0	Ern:	, 23	1/4F-1	144-1	0.106
2		<1		6.7		1 /	KO.6	1.11			0.104
3		<1		6.6		5.0	20.6	.35			0.095
4		<1		6.6		2.3	₹0.6	.67			0.144
5		<1		6.6		5.0	<0.6	.56	 	- 	0.141
6				6.7		5,0	1278	.50	 	-	0.109
7				6.6	1	5.0	 	,28			0.106
8				6.3		5.0	 	,62	 		
9		<1		6.7		3.1	40,6	2.10	 	~	0.088
10	<2	21	,43	6,6	<0.b	5-0	11/	51	82	88.0	0.075
()		< i	7.3	6.6	COLB	5.0	<0.6	152	0 x	90.0	0.096
12		21		6.6		5.0	40.6	.53	 	 	0.116
1,3				6.6	 	5.0	7000	.50			0.102
14				6.5		5.0		.45		* 	0.080
15				6.5		5.0	 	.62	 	 	0.069
16		Z T		6.6		5.0	<0.6	,53			0,037
17		<		6.6	·	5.0	<0.6	-48			0.078
18		<		6.4	, , , , , , , , , , , , , , , , , , ,	1.3	20.6	.71		 	0.068
19		< 1		6,7		2,7	10.6	.86			0.070
20				6.7	-	3, 5		1.00		<u> </u>	0,066
21				6.7		5.0		87			0.071
22				6.5		2.6		1.09			0.062
23		< -		6.6		5.0	0.9	1,28			0.061
	<2	<	.23	6.7	1.4	5.0	1.0	1.05	220	160.2	0.065
25		<l td="" <=""><td></td><td>6.7</td><td></td><td>5,0</td><td>0.8</td><td>1,35</td><td></td><td></td><td>0.061</td></l>		6.7		5,0	0.8	1,35			0.061
26		4		6.7		5.0	0.7	. 82		<u> </u>	0.065
27				6.7		3.8		1.21		<u> </u>	0,066
28				6.6	ĺ	2.3		.92			0.068
29				6.7		3.2		1,22	···········		0.060
30				6,6		3.3		157		1	0.079
31		< 1		6.6		5.0	20.6	.43			0.150
Total	<4		.66	ين ب عاقبان	<2.0	Y-1			302	248.2	2,685
Mo. Avg.	< 2	71	.33	6.6	<1.0	4.17	< .69	77.23	151	124.1	0.087

LANT STAFFING: Day Shift Operator	Class:	Certificate No:	0013850 Name:	Michael Monat
vening Shift Operator	Class:	Certificate No:	0013794 Name:	Ted Burleson
Shift Operator	Class	Certificate No:	Name:	
çad Operator	Ches	B Certificate No:	000 7518 Name:	Patrick Godwin

DEP Form 62-620.910(10). Effective November 29, 1994

DAILY SAMPLE RESULTS - PART B Permis Number: FLAII14053 Pacifity: Sandalhaven wwTP Fron: 5-01-05 To: 5-31-05 Monitoring Period Flow (MGD) 50050 OTH-18 Code Man. Site 1 Ø 2 0 3 4 5 6 7 Ø 0 10 0 ΪÌ Ø 12 13 15 16 Ø 17 Ø Ø Ø ŽO 21 Ø 22 23 Ø 24 25 27 0 28 30 Ø 31 Ø Total 10. Avg. LANT STAFFENG: ay Shift Operator Conflicate No: 0013850 Name: Michael Monat
Conflicate No: 0013794 Name: Ted Burleson Class: ening Shift Operator C Certificate No: 0013794 Name: ght Shift Operator Class: Cortificate No: Name: ad Operator Class: Certificate No: 000 75/8 Name:

DEP Form 62-620.910(10), Effective November 29, 1994

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07/27/2005

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9416978959

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A LEGISLATION OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A LEGISLATION OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A LEGISLATION OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A LEGISLATION OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A LEGISLATION OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A LEGISLATION OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A LEGISLATION OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A LEGISLATION OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A LEGISLATION OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A LEGISLATION OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A LEGISLATION OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A LEGISLATION OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A LEGISLATION OF ENVIRONMENTAL PROTECTION When Completed and this report to: Department of Environmental Protection, South District, Florida Department of Environmental Protection, P.O. Box 2549, Pt. Myers, N., 33902-2549

LIMIT:

CLASS STZE:

PERMITTEE NAME: Utilities Incorporated of Sandaffraven

MAILING ADDRESS: 200 Weathersfield Avenue Altumonte Springs, FL 32714 PERMIT NUMBER

PEA014053

Final

N/A

REPORT: GROUP:

Monthly Domestic

FACILITY: LOCATION Sandathaven WWTP 6811 Placida Road

Englewood, FL 34224

MONITORING GROUP NUMBER: R-DOI

MONITORING GROUP DESC:

including influent,

COUNTY:

Charlotte

NO DISCHARGE FROM SITE: \times 6-01-05 to 6-30-05

Parameter		Quantity o	r Loading	Units	Qual	lity or Concentra	noiti	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0,003							Ø		
PARM Code 50050 Y Moa.Sile No. OTH-IB	Permit Requirement	0.15 (An.Avg.)		MGD						5 Days/Work	Flow meters and totalizers
Flow	Sample Measurement	0.0							0		
PARM Code 50050 P Mon.Site No. OTH-IB	Permit Requirement	Report (Mo.Avg.)		MOD	. 45 ⁵		•			5 Days/Work	Flow meters and
BOD, Carbonaceous 5 day, 20C	Sample Measurement				4 2				Ø		
PARM Code 80082 Y Mon.Site No. BFA-1	Permit Requirement				20.0 (An Avg.)		-	MGAL		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				< 2	42			Ø		
PARM Code 80082 A Mon. Site No. EPA-1	Permit Requirement	1. 14 E \$250	: _		30.0 (Mo.Avg.)	60.0 (Méx.)		MGAL		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				<0.86				Ø		
PARM Cod= 90530 Y Mon. Site No. PPA-t	Permit Requirement				20.0 (An.Avg.)			MG/L	1	Every Two Works	8-hour FPC
Speids, Total Suspended	Sample Measurement				0.65	0,7		<u> </u>	0	notal s	
PARM Code 00530 A Mon.Size No. EPA-1	Permit Requirement				30.6 (Ma.Avg.)	- 60.0 (Max.)		MGIL	1	Every Two Weeks	8-how FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

MAMETHILE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONENO	DATE (YYMMUD)
Patrick Godwin Lead Operation	Patrick Hoder	697-4797	05/07/26

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments bere).

DEP Form 62-620.910(10). Effective Nowmber 29, 1994

FACTLETY

DISCHARGE MONITORING REPORT - PART A (Confined)

9416978959

SANDALHAVEN UTL

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THE CARLESISM OF BINVERGINATION LAR	PROTECTION DISCHARGE MONITORING REPORT - P.	E ELL I
	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	

When Completed mail this report to: Department of Environmental Protection, South District.	Florida Department of Environmental Protection, P.O.Box 2549, Ft. Myers, FL, 33003-2549
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PERMITTEE NAME: Utilities Incorporated of Sandalhaven

PERMIT NUMBER

MAILING ADDRESS: 200 Weathersfield Avenue

Altamunic Springs, FL 32714

LIMIT:

CLASS SIZE:

PLAULOS3 Gnat

REPORT: GROUP:

Membly Domestic

FACILITY: LOCATION:

COUNTY:

Sundalhaven WWTP 6811 Placida Road

Englawood, FL 34224

MONITORING OROUP NUMBER: R-001

MONITORING GROUP DESC:

Charlotte

NO DISCHARGE FROM SITE: 6-0(-05 To 6-30-05

Parameter		Quantity of	or Loading	Units	Qua	lity or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0,095					T	 	Ø	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
PARM Code 50050 Y Mon Site No. OTH-IA	Permit Requirement	0.30 (An.Avg.)	·	MOD					4	5 Days/Week	Flow meters and
flow	Sample Measurement	0.105							10		1023,723
PARM Code 50050 P Mon.Site No. OTH-IA	Permit Requirement	Report (Mo.Avg.)		MGD	*	· :	·	:	,	5 Days/Week	Flow meters and totalizers
BOD, Carbonicoous 5 day, 20C	Sample Measurement				<2				1	· · · · · · · · · · · · · · · · · · ·	цорилист
PARM Code 80082 Y Mon Site No. BFA-1	Permit Requirement				- 20.0 (An.Avg.)			MO/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				< 2				0	HOLES	
	Permit Requirement				30.0 (Mo.Avg.)	. 60.0 (Max.)		MG/L		Every Two Weeks	8-hour FPC
Salids, Total Suspended	Sample Measurement				1.4				0	WILLES.	
PARM Code 00530 B Mon Site No. EFB-1	Permit Requirement	Cart		1. (4. d.) 1. (4. d.)	5.0 (Max.)			MG/L		4 Days/Week	Grab
pH	Sample Measurement				6.4	6.8		<u> </u>	0		
PARM Code 00400 A Mon. Site No. EPA-1	Pennit Requirement				6.0 (Min.)	8.5 (Max.)		SU	7	5 Days/Week	Grab

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penulties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMMIDD)
Patrick Godwin Lead Operator	Fatrick Hoden	697-4797	05/07/26

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DESCHARGE MONFTORING REPORT - PART A (Continued)

Eaville 2000	;			WENT HIN MINN	O I MANAGEM	See to have medical Oction REPORT - PARTA (Continued)	T - PARTA (C	ontinued)				
	1	sandadaven www.			MONITOR	MONITORING FERIOD FINES: R-DD2 MONITORING PERIOD FINES:	18ER: R-002	1-05 To	PERMIT A	O-O	FERMIT NUSTBER: FLADIAUS3	
Parameter	<u>بر</u>		Quantity	Quantity or Loading	Units	Our	Ouality or Concentration	alion				
Coliform, Frest		Sample				- [5 P	racquency of Analysis	Samp.
PARM Code Tangs	•	Measurement				17				3		
Men Site No. HFA-1	<	Pennitratent	~	,		23			K/100Jal.	+	J. Denie O.	1
Total Residual Chlorine (For	c (For	Sample				(Ma.)					יישלא שכבו	Ī
PARM Code 50060		Measurement				121				Ī		
Mon.Site No., EPA-1		Requirement		*1.		1.0			MGA	1	Component	10
Jurbidily		Sample				(ellip)				- 1		5
PARM Code 00070		Permit				1.30				B		
Mon. Site No. EFB-1		Requirement				Max			ULL		Continuous	×
		Menument								+		
:		Permit								_		
		Requirement					,			_		
·		Meximent								+	1	
		Permit	,		1							
	Ŧ	Requirement			,					_		
	1	Mensurement								-		
	¥,	Permit								+		
•		Stante										
	71	Measurement			₩					-		
		Koquirenent			Q			1000	1	+	1	
		Sample						1		+		
		Permit		1.00	1				-			
		Requirement	,							1		
	<u> </u>	Sample							1	+		
		Permit		1.								
		Requirement							- .			
	<i>×</i> ×	Sample							+	+		-
Parisit		Gradi			1	1						

semmi valurbet	FL-1014053 A		1 ALK L	
Munitoring Period	Fring: 6-01-05	Ta 6-30-05	Pacifity:	Sandalhaven WWTP

o. Avg.		<	8.75	6.6	0.65		20.7	.48	116		145
Total			17.5		1.3	,			231	344 3	مداء ا
31				6.5		5.0	<0.6	.48			,091
30				6.5		5.0	40.6	.30			152
29				6.5			<0.6	,20			-120
28		<u> </u>		6.6		5.0	<0.6	,30			1088
27		_,		6.6		5.0		.32			,085
26				6.5		1.1		,45			0.09
25				6.5		5,0		.3/	 		0.107
23				6.6		1.1	10.6	-71 -53	 		2.137 2.149
22		<1		6.6		5.0	<0.6	-41	138		2.10
	<2	≤ 1	11,2	6.5	0.7	5.0	0.9	.31	100		209
20		$\leq L$		6.5	-	5.0	<0.6	.40	-		2.07
19				6.4		5.0	 	.70	 		0.08
18				6.5		5.0		.50			008
17				6.6		5.0	120.6	.42	-		0,08
16		$\frac{1}{2}$		5.6	 	3,6	40.6	186			0.08
15		3		6.6		1.2	40.6	78			0.09
14		<u> </u>		6.6		5.0	10.6	.32			0.10
13				6.5		5.0		13/			0.13
12				6.5		2.4		,40			0./3
10				6.6		1.6		145		 	0.18
9		<1		6.6		5.0	10.6	, 38			0.10
8		<1		6.7		5.0	0,6			166	0.12
7	< 2	< 1	6.30	6.6	0.6	4.8	10.6	.35		111	0.10
6		<1		6.5		5.0	1.4	41		 	0.10
5				6.6	-	5.0		-48			0.10
4				6.6	 	4.7	<0.F		_		0.09
3		21		6.7	-	2.3	<0.6				0.00
2		27	 	6.7		1,4	10,6				0.09
l l	EFA-I	EPA-I	EFA-1	EFA-1	EFA-1	EFA-	EFB-1	EFB-1	INF-1	00530 INP-1	S00
Code Ion. Site	80082	(W 00ML)	(MG/L)	00400	00530	50060	00530	90070			
İ	(MG/L)	Ciliform Bicteria	Nitrate, Total	4	TSS (MO/L)	TRC (Fo Disinfect (MG/L)	3	L) Turbidi((NTU)	(MG/L)) Flow (

PLANT STAPPING:		_		
Day Shift Operator	Class:	Contificate Not	00/3850 Name:	Michael Monat
Evening Shift Operator	Class:	C Cartificate No:		
Night Shirt Operator		CALDITICATO (40:	00/3794 Name	Ted Burleson
water and the control	Class:	Cartificate No.	Name:	
Lead Operator	Class:	B Cartificate No.	00075/8 Name:	Diolo
			O O O TO TO Name:	Palvick God WIN

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DAILY SAMPLE RESULTS - PART B FLI.014053 Prom: 6-01-05 To: 6-30-05 Permit Number: Facility: Sandalhaven WWTP Monitoring Period Flow (MGD) Code 50050 OTH-1B Mon. Site Ø 1 ž Ø 3 0 4 Ø Ø 6 Ø 7 B 8 Ø 0 10 0 IJ Ø 12 Ø 9 14 0 15 0 16 0 17 0 0 19 0 20 0 21 0 22 23 Ø 24 0 25 0 26 Ø 27 0 28 Ø 29 Ø 30 0 31 Total Ma Ave LANT STAFFING: Class: C Certificate No: 0013850 Name: Michael Monat Jay Shift Operator C Certificate No: 00/3794 Name: vening Shift Operator Classic ight Shift Operator Certificate No: Class Name: ലർ Operator Certificate No. 0007518 Names Closs:

DEP Form 62-620.910(10), Effective November 29, 1994

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

pers, FL, 33902-2549 When Cangstered usall this report to: Department of Environmental Protection, South District, Florida

PERMITTED NAME	Additional Projection, Parties, Multi District, Fightia Department of Environmental Projection, P.O. Bux 2549. Ft. My.	un existici, Fiorida Department of En	ivironmental Protection, P.O. Bux 2549, Fi	Ź
MAILING ADDRESS:	MAILING ADDRESS: 200 Weathersfield Avenue	PERMIT NUMBER	FLA014053	
	Aflamonic Springs, FL 32714	LIMIT		i
FACILITY:	Santalbanes Whyth	CLASS SIZE:	NYA	₹ (

Final N'A

KEPORT: GROUP:

Monthly Domestic

, including Influent

MONITORING GROUP NUMBER: R-401

Englewood, FL 34224 Sandalhaven WWTP 6811 Placeda Road

LOCATION: FACILITY:

Chartotte

COUNTY

MONITORING GROUP DESC.

7-31-05	
AARGE FROM SITE. STANG PERIOD FROM: 7-01-05	: : :
NO DISCH MONITOR	Quantity of Loading IInits

					2011		3	<u> </u>	7-01-05		
rarameter		Quantity	Quantity or Loading	Thite							
		•	Đ	2		Quality or Concentration	ation	Units	No. Frequency of	ncy of	Sample Tyne
TOTAL	Sample								_	VSIS	34(. a.d.
DADM Cat-	Measurement	0,003							1		
Mon-Site No OTH, 13	Permit	0.15		MGD					Ø		•
Flow	Kequirencat	(An.Avg.)							5 Days/Week	+	Flow meters and
-	Measurement	0,0								_	totafizers
PARM Code 50050 p	Permi	Percent							3		
Mon.Site No. OTH-1B	Requirement	(Ma.Ave.)		<u>2</u>					4	+	
BOD, Carbonaceous 5 day, 20C	Sample) Days week		Flow meters and
;	Measurement				с У	i				+	COMMISCES
≻ -	Permit			7, 57	1				0	•	
	Requirement				20.0			MGJ		1	
BOD, Carbonaceous 5 day, 20C	Sample				(An Avg.)			}	Every Jwo) M	8-hour FPC
PARM Code goods	Measurement				s V	у У			L	-	
€		124 F			/ 005	1			Q		
ded	Kequirement	123			(McAve.)	60.0 (Max.)		MGL	Every Two	- P	8-hour FPC
	Measurement				00				Weeks	S	
Mon Site No. HEA.	Permit				25.50				$\overline{\varrho}$		
ded	Requirement				(An Ave)		•	MGL	Every Two	Pwo Own	X-lion Fib
	Sample				(3.U.m.)				Weeks	s	
★	Permit				<0.6	10.0V			3	-	
Mon Site No. PFA-1	Requirement				30.0	60.0		MGIL	Every	on.	O house
l certify under penalty of law that this document	door many				(morange)	(Max.)			Waske		J. C. MOIL-O

l certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel property gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and befief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. Every Two Weeks

SANDALHAVEN UTL

1	TELEPHONE NO DATE I YYMMIND		11 4 -0/20 FOC! ESY	1217-174 July 02/07/14
THE STATE OF THE STATE OF ALTHORIZED AFFAIT		2/18/11	Let for the	76 2001 - 1
	- 0 -	1111 JOSA BIS LOSA OSESSALS	,	IMENT AND EXPLANATION OF ANY VIOLATIONS

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY;

Sandalhaven WWTP

MONITORING GROUP NUMBER: R-001
MONITORING PERIOD From: 7-01-05 To

PERMIT NUMBER: FLA014053 7-31-05

Parameter		Quantity	or Loading	11.					3/~		
Н		Quantity	or continue	Units	Qua	ality or Concenti	ration	Units	No.	Frequency of	Sample Typ
•	Sample Measurement				6.3	6,7		-	Ex.	Analysis	
PARM Code 00400 A Mon.Site No. EPA-1	Permit Requirement		†	 	6.0	8.5	<u> </u>	SU	10		
Coliform, Fecal	Sample		<u> </u>	 	(Min.)	(Мах.)		30		5 Days/Week	Grab
ARM Code 74055 Y	Measurement Permit		 	ļ	<1			İ	0		
Mon.Site No. EFA-1 Coliform, Fecal	Requirement Sample		·		200 (An.Avg.)			#/100ML	ļ ·	Every Two	Grab
ARM Code 74055 A	Measurement				<1			1	0	Weeks	
Ion Site No. EFA-1	Permit Requirement				Report	400	800	#/100ML	19	Every Two	Grab
otal Residual Chlorine (For isinfection)	Sample Measurement			 	(Mo.Geo.Mean)	(90%)	(Max.)			Weeks	CHAD
ARM Code 30060 A fon Site No. EFA-1	Permit Requirement				0.6			1	0		
itrogen, Nitrate, Total (as N)	Sample				(Min.)			MGAL		5 Days/Week	Grab
ARM Code 00620 A	Measurement Permit				9.29				0		
on Site No. EFA-1 OD, Carbonaceous 5 day, 20C	Requirement Sample				12.0 (Max.)			MG/L		Every Two	8-hour FPC
ARM Code 80082 G	Measurement				153					Weeks	
on.Site No. INF 1 lids, Total Suspended	Permit Requirement				Report			MG/L	9	Every Two	8-hour FPC
-	Sample Measurement				(Ma.Avg.) 296					Weeks	0-DOM FFG
RM Code 00530 G on Site No. INF-1	Permit Requirement					era e e e e			Ø		
	Sample Measurement				(Mo.Avg.)			MG/L		Every Two Weeks	8-hour FPC
	Permit Requirement								\dashv		
	Sample Measurement								_		· · · · · · · · · · · · · · · · · · ·
	Permit Requirement										
	Sample Measurement								_		
	Permit Requirement										
						No. Ten. Sept. 1		· [1		

DEBYBLIGHAL OF EUVIRONMEUTAL PROTECTION DISCHARGE MOUITORING REPORT - PART A

va of	100003									
Parameter		Quantity or L	gaibso.1 1	stinU	o ytilauQ	r Concentration	atinU	No.	Prequency of Analysis	dwrs
CONNLA	Shorted		•	MONITORII NO DISCHA	ARGE FROM SITE.	50-10-E	Ξ-Ε	7-19	50	
LOCATION:	Sandalhaven WWTP 1811 Placida Road Englewood, PL 34224				NG GROUP DESC: NG GROUP MUMBER:	Z00-A				
WYITING YDDIKESS	200 Weathersfield Avenue Alamonte Springs, PL 32	a		EIMIT: CLASS SIZE	æ	\. \. \. \. \. \. \. \. \. \. \. \. \. \	жековт: -чиояо		ytanot4 Sincon	
	mamnagaCl tot Inogan zid 2 to batanogrosal zaitifitU		izi C st unC , nobasio	Biet, Pletida D PERMIT NU		ntal Protection, P.O Box 2549,	. Myens, 14.	Z-Z061E	6rs7	

]]			(Max.)	(Min.)				Requirement	Mon.Site No. EFA-?
dent	5 Days/Week		20		5.8	0.5	i			1ians4	ARM Code 00400 A
		1			1.9	₹'9				Measurement	•
		Ø			_ T_ /	2 /]	Sample	H
		r		1 3.4 s	factor in	(Max.)			18 3 VIII 18 18 18 18 18 18 18 18 18 18 18 18 18	Вединетнеп	Non.Site No. EPB-1
Grab	4 Days/Week		WGW.			0.8	}			Permit .	ARM Code 00530 B
		1				20				Measurement	
	L	Ø							}	Sample	folids, Total Suspended
	Weeks				(Mak)	(Mo.Avg.)		1000	1.10%	Requirement	Non.Site No. EFA-1
8-hour FPC	Every Two	<u> </u>	אפער		0.65	30.0	\			Jimo4	VEW CODE 80082 V
		0			X	< 3	i			Measurement	•
		1			0/]	aldones	30D, Carbonaccous 5 day, 20C
	Weeks				1.5	(AvA.nA)				Requirement	Mon-Site No. EPA-1
8-hour FPC	Every Two		MC/L		y the terms	20.0	·		V1 - 1	Permit	ALRIA Code 80082 Y
		Ø				73	1			Measurement	
		ممكار				6/	<u> </u>			Sample	3OD, Carbonaceous 5 day, 20C
ยาวเมียงง									(Mo.Avg.)	Requirement	A1-HTO .oM sti2.goh
Flow meters and	5 Days/Work			· · · · · · · · · · · · · · · · · · ·	N N		MGD		Report	Permit	PARM Code 50050 .P
		0						}	111'0	Measurement	_
		اعرا					i	<u> </u>	177	Sample .	WOF
totabzers									(AYA.RA)	Requirement	Mon. Site No. OTH-1A
Plow meters and	5 Days/Week						MCD		01.0	Permit	SARM Code 50050 Y
		Ø				i			660'0	Measurement	·
										Sample	WOIL
1	sizylenA	Ex.		i							
Sample Type	Frequency of	.oN	21inU	noite	lity or Concentra	Qual	stinU	gaibso.1 10	Quantity o		Parameter
				1							

knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information, the information, the information submitted is, to the best of my secutly under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate

he/4.0/50	£6£15-£69	The Goluna	Patrick God win Lead Operator
DATE (YYMMADD)	TELEPHONE NO	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AAMENTILE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

* Super chlorinating filters, made it spike up

for just a few minutes.

just a few minates, (on 7/14) stopped working. It was on

one time, for * Stenuer pum

DISCHARGE MONITORING REPORT - PART A (Continued)

Sandalbaven WWTP

FACILITY

MONITORING GROUP NUMBER: R-0112
MONITORING PERIOD From: 7-01-DS

Parameter					GOING LEWIOD	From: 4-01-05	70	7-31	7-31-05	
		Cuantit	Quantity or Loading	Units	Qui	Quality or Concentration		Units No	J. Annual Co.	
Cobtorn, Feral	Sample									Sample Type
PARM Code 74055 A	Measurement				~>			8		
Mon.Sile No. EFA.1	Requirement				25			+	4	
Julai Residual Chlorine (For Disinfection)	Sample				(Max.)		*	JW0WE	4 DaysAVeck	Grab
PARM Code 50060 A	Permit				0.6			E		
T	Requirement				1.0					
urotaty	Sample				(Min.)		-	MGJ.	Continuous	Grab
PARM Code 00070 H	Measurement				3,51		_	1		
	Requirement				Radont			0		
	Sample				Mex			DIN	Cantinuous	Meter
•	Measurement						+	$\frac{1}{1}$		
	Permit						_			
	Requirement							+		
	Sample						•			
	Measurement							+		
	Permit									
	Kequirement				٦,٠ ٠.					
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	D. Casurement							-		
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	Measurement									
	Permit	4 4 64 64						•		
	Requirement									
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	neent							7	-	
	Sample							•		
	Measurement							1		
	Requirement				+					
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DEP Form 62-620.910k t0k. Effective November 29, 1994

Permit Number:	
Monitoring Period	

Monno	ing Period	From:	3701-09	DAILY	∞_ <u>7-3</u>	1-05	Fa	icility:	Sandalhave	n WWT	P		
	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TSS (MO	Disinfo (MG/	:ct.)	'SS (MG/L) Turbid (NTL		CBOD5 (MG/L)	TSS (MG/I	L) Flow
Code Ion. Site	80082 EFA-1	74055 EFA-1	00620	00400	00530	5006	_ -						ĺ
1		LIAM	EFA-1	EFA-1	EFA-1	EFA-	1	00530 EFB-1	00070 EFB-	}_	80082	00530	50
2		1	-	6.6	-	4.3		-	1.0	-	INF-1	INF-1	OTI
3				6.4		1.4			0.7	- -		 	Dak
4		 		6,4	-	4.0	7		21	-		<u> </u>	0-6
5		121		6.5		5.0	2		2	<u>_</u>			0.1
6				6.5		5.0	7 2	66	-24	_	·		0.0
7	<2	51		6,5		5.		66	123				0,0
8	- ohn	<1	9,29	6.5	LONE	1,5		36	10				0,00
9		<1		6.5		5.0			.30		42	452	0,0
10				6.5		5.2		46	,22				0.10
11				6.3		1.2			, 28				0,70
12		≤ 1		6.4			<u></u>		3.51		T		0.74
3		<1		6.5		2,2		,6	19.				0./2
4		<1		6.6		2.8		16	.42				0.80
5		≤ 1		6.5		5.0		2.7	.43				0,10
5				6.5		0.6	↓≤	0.6	.53				0./2
				6.4		5.0	+		.55				
7				6.3		5.0			.51				1.09
3		<1		6-4		50	<u> </u>		-43				2.139
	2	<1				4.2		.6	.50				25/
		<1			<0.6	5.0	<0	6	.81	16	4		0./75
		<1		5		5.0	40		39				0,091
						1.9	50.		,95				09/
				2.7		1.1			.52		- -		096
				6		5.0			53			T.	2.100
		<1		.5		5.0			51		_ + -		0.082
			- 6	7.00		5.0	<0.	6				0	.088
		-		3.6		5.0	<o.< td=""><td></td><td>59</td><td></td><td></td><td></td><td>122</td></o.<>		59				122
		7	, ,	.6		5.0	0,1	- 1 —	53			0.	102
		· -		.6		1,9	<u>∠o,</u>	_	65				/32
			6	,7		5.0	<u> </u>		71			0.	142
				-5		5.0			73				119
} -			6	4		5.0						0.	
1 < :						200		10.	,42				095
1 < .		1 7	74 6	5 20	0.6	3.9							154
AFFING:		_				1.7	<0,0	- 0.	61	<i>(5</i> ′3	29	6 0.	

ertificate No: 0013850 Name: ening Shift Operator Michael Movat Class: Certificate No: 0013794 Name: sht Shift Operator Class: Certificate No: id Operator Class: Certificate No: 000 75/8 Name:

Permit Number: Monitoring Period Flor (MGD) Code 0050 Mon. Site OTH-1B Ø 1 2 Ø 3 2 1 2 5 2 6 25 Ø 8 0 Ø 10 11 Ø 12 Ø 13 0 14 0 13 Ø 16 Ø 17 Ø 18 Ø 19 2 20 2 21 2 22 Ø 23 0 23 <u> 22</u> 25 Ø 26 27 Ø 28 Ø 29 30 Ø 31 Ø Total Mo. Avg. Ø PLANT STAFFING: C Certificate No: 00/3850 Name: Michael Monat
C Certificate No: 00/3794 Name: Ted Burleson Day Shift Operator Class: Evening Shift C perstor Class: Night Shift Operator Name: Class: Certificate No: Lead Operator Class: Certificate No: 000 75/8 Name:

DEP Form 62-620,910(10), Effective November 29, 1994

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1/0	51.105	12	3 8		01 1999	D																_	
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-		۲	1 11	-	Flow					1	<u>ሁ</u> ሉለ	Sign	1342	nuk		100	2	1		49.	F.77_	14	4
					.049		1.4	70					1			1			-			11	1
2	090	V.	464	0.25	.088	Ø	14	73							П				Ţ	Li.	ļ	\prod	2
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SANDALHAVEN UTL 9416978959

08:01 89/28/2005 DEPARTMENT OF ENVIRONMENTAL PROTECTIO SCHARGE MONITORING REPORT - PART A When Completed mail this report to: Department of Environmental Protection, South District, Florida Department of Environmental Protection, P.O. Box 2549, Ft. Myers, Pt. 33902-2549

PERMITTEE NAME: Utilities Incorporated of Sandalbaven

MAILING ADDRESS: 200 Weathersfield Avenue

Altamonte Springs, FL 32714

PERMIT NUMBER

FLA014053

LIMIT: CLASS SIZE: Final N/A

REPORT: GROUP:

Monthly Domestic

FACILITY: LOCATION: Sandalliaven WWTP 6811 Placida Road

Englewood, FL 34224

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

, including influent

COUNTY:

Charlotte

NO DISCHARGE FROM SITE: 8-0/-05 To 8-3/-05

Parameter		Quantity o	or Loading	Units	Qua	lity or Concentr	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.003							Ø		
PARM Code 50050 Y Mon.Site No. OTH-1B	Permit Requirement	0.15 (An-Avg.)		MGD						5 Days/Week	Flow meters and totalizers
Flow .	Sample Measurement	0.0							Ø		
PARM Code 50050 P Mon Site No. OTH-1B	Permit Requirement	Report (Mo.Avg.)	i, in	MGD						5 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<2				0		
PARM Code 800B2 Y Mon Site No. EFA-1	Permit Requirement			1. 340	20.0 (An Avg.)		1 1 1	MG/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<2	<2			0		
PARM Code 80082 A Mon Site No. EFA-1	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)		MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				<0.86				0		
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Requirement			4, 41	20.0 (An.Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				<0.6	<0.6			0		
PARM Code 00530 A Mon.Site No. BFA-1	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)	3 - 17.	MG/L		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMM/DD)
Patrick Godwin Lead Operator	Patrick Hodwo	697-4797	05/09/26

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

FACILITY:

Sandalhaven WWTP

MONIFORING GROUP NUMBER: R-(0)1
MONIFORING PERIOD From: 8-01-05 To

PERMIT'NUMBER: FLA014053

Parameter		Quantity	or Loading	Units	Qua	lity or Concentr	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				6.3	6.8			0		
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)	8.5 (Max.)		SU	1	5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				< (Ø		
PARM Code 74055 Y Mon.Site No. EPA-1	Permit Requirement		:		200 (An.Avg.)			#/100ML		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				< 1				Ø		
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement				Report (Mo.Geo.Mean)	400 (90%)	800 (Max.)	#/100ML	1	Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1,				0		
PARM Code \$0060 A Mon.Site No. EFA-1	Permit Requirement				0.5 (Min.)			MG/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				3.11				0		
PARM Code 00620 A Mon.Site No. EFA-1	Permit Requirement	4.4.		1 Post 1/2 1	12.0 (Max.)			MG/L	10 mg	Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				85.3				Ø		
PARM Code 80082 G Mon. Site No. INF-1	Permit Requirement				Report (Mo Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				/33				Ø		
PARM Code 00530 G Mon Site No. INF-1	Permit Requirement				Report (Mo.Avg.)			MG/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement				(1) 被 (2)						-
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	Permit Requirement		1 - 1 - 1 - 1	1 1 2 12					3.7		

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed shall this report to: Department of Environmental Protection, South District, Florida Department of Environmental Protection, P.O. Box, 2549, Ft. Myers, 41., 33902-2549

PERMITTEE NAME: Utilities Incompated of Sandalhaven

PERMIT NUMBER

FLA014053

MAILING ADDRESS: 2(R) Weathersfield Avenue Altamonte Springs, FL 32714

LIMIT

CLASS SIZE:

Final N/A

REPORT: GROUP:

Monthly Domestic

FACILITY: LOCATION: Sandalhaven WWTP

6811 Placida Road Englewood, FL 34224 MONITORING GROUP NUMBER: R-002

MONITORING GROUP DESC:

COUNTY:

Charlette

NO DISCHARGE FROM SITE:

MONITORING PERIOD From:

Parameter		Quantity o	r Loading	Units	Qua	lity or Concentr	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Гюч	Sample Measurement	0.099							Ø		
PARM Code 50050 Y Mon.Site No. OTH-LA	Permit Requirement	0.10 (An.Avg.)		MGD						5 Days/Week	Flow meters and totalizers
Flow	Sample Measurement	0.074							Ø		
PARM Code 50050 P Mon.Site No. OTH-1A	Permit Requirement	Report (Mo.Avg.)		MGD						5 Days/Week	Flow meters and totalizers
BOD, Carbanaceous 5 day, 20C	Sample Measurement				<2				Ø		
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement				20.0 (An.Avg.)			MG/L		Every Two Weeks	8-hour FPC
BOD, Carbonaccous 5 day, 20C	Sample Measurement			_	<2	<2			0		
PARM Code 80082 A Mon.Site No. EFA-1	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)		MG/L	'	Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				0.7				0		
PARM Code 00530 B Mon.Site No. EFB-1	Permit Requirement				5.0 (Max.)			MG/L		4 Days/Work	Grab
pH	Sample Measurement				6.3	6.8			05		
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)	8.5 (Max.)		SU	7	5 Days/Week	Grab

I certify under penalty of law that this document and all attackments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Patrick Godwin Lead Operator	Patrick Godwn	697-4797	05/09/26

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here);

,		

DISCHARGE MONITORING REFORT - PART A (Continued)

Sandalhaven WWTP

FACTURY:

MONITORING CROUP NUMBER. R-402
MONITORING PERIOD From: 8-6/

PERMIT NUMBER: FLACIONISA 8-31-05

PARM Code 74055 A Remain Measurement Mon. Site No. EFA-1 Requirement Disinfection) PARM Code 50060 A Remain Measurement Parm Code 50060 A Remain Measurement Turbidity PARM Code 00070 B Requirement Sample Measurement Mon. Site No. EFB-1 Sample Measurement Mon. Site No. EFB-1 Sample Requirement Sample Measurement Mon. Site No. EFB-1 Sample Measurement Requirement Sample Measurement Requirement Sample Measurement Sample Sample Measurement Sample Sample Sample Measurement Sample Sampl	Channey of Loading		, danner	Quality or Concentration		S 12	Frequency of Analysis	Sample Type
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DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA014053 From: 8-01-05 To: 8-31-05

Facility:

Sandalhaven WWTP

	CBOD5 (MG/L)	Fecal Coliform	Nitrogen, Nitrate, Total	pH (SU)	TSS (MG/L)	TRC (For Disinfect.)	TSS (MG/L)	Turbidity (NTU)	CBOD5	TSS (MG/L)	Flow (MGI)
		Bacteria (#/100ML)	(as N) (MG/L)	·		(MG/L)		(NIU)	(MG/L)		
Code Mon. Site	80082 EFA-1	74055 EFA-1	00620 EFA-1	00400 EFA-1	00530 EFA-1	50060 EFA-1	00530 EFB-1	00070 EFB-1	80082 INF-1	00530	50050
1		<1		6.7		5.0	<0.6	.68	I DAL-1	INF-1	0.094
2	<2	<1	2,55	6.7	20.6	4.8	<0.6	.62	78	110	0.084
3		<1		6.8		4.8	<0.6	.65		1	0.086
4		<1		6.8		4.2	<0.6	.70			0.077
5				6.8		5.0		.45			0.068
6				6.4		5.0		25			0.068
7				6.3		5,0		,23			0.079
8		<1		6.5		3,3	0.7	.64			0.078
9		<1		6.6		3.8	(0.6	.54			0.089
10		<1		6.7		4.6	<0.6	-51			0.080
11		Si		6.6		5.0	20.6	-58			0.069
12		<u> </u>		6.6		3.5		.45			0.081
13				6.3		2.6		,45			0.085
14				6.3		2.9		.46			0.074
15		<1		6.4		5.0	<0.6	. 33			0.075
16 17	<2	<1	3.11	6,7	<0.6	5-0	<0.6	. 41	62	92	0.063
18		<1		6.8		5.0	<0.6	.33			0.069
18		<1		6.7		5,0	<0.6	<u> 138</u>			0.065
				6.8		1.1		1.20			0.058
20 21				6.4		1.7		.45			0.052
21				k. 3		5.0		.34			0.074
23		41		6.5		5.0	< 0.6	40			0,086
24		<1		6.5		1,7	<0.6	:28			0.074
25		<1		6,6	,	5.0	LO.6	-41			0.079
26				6.6		5-0	<0.6	.24			0.076
27				6.6		2.4		-29			0:066
28				6.4		1.2		,28			0.076
29		<(6.3		5.0	ا . ـ ـ ـ ا	./3			007/
30		< !	(5)	6.5	/8/	1.1	<0.6	,43	,,,		0.071
30	く 2	4!	163	6.5	<0,6	3.0	<0.6	. 40	116		0.071
Total	7	51	, , , ,	6,5		5.0	0.7	151	2 = 7		0.067
	< 6	<19	6,19		1.8	70	11.6	117	256		1,30.5
Mo. Avg.	< 2,	<	2,10	6,6	<0.6	3,9	0.6	.46	85,3	133	0.074

PLANT STAFFING: Day Shift Operator	Class:	Certificate No:	0013850 Name:	Michael Monat
vening Shift Operator	Class:	Certificate No:	0013794 Name:	Ted Burleson
light Shift Operator	Class:	Certificate No:	Name:	
and Onemiar	Class:	R Certificate No:	00075/8 Name:	Patrick Godwin

DAILY SAMPLE RESULTS - PART B

FLA014053 From: 8-01-05 Permit Number: Pacility: Sandalhaven WWTP Tax 8-31-05 Monitoring Period Flow (MGD) Code Mon. Site 50050 OTH-1B 1 D 2 3 4 5 6 7 Ĩ 9 10 Ø Τī 12 13 14 Ø 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Ø Total Mp. Avg. Certificate No: 00/3850 Name: Michael Monat
Certificate No: 00/3794 Name: Ted Buyleson LANT STAFFING: hay Shift Operator Class: ivening Shift Operator Class: Certificate No: Name: light Shift Operator Class: 00075/8 Name: Certificate No: ead Operator Class:

UTILITIES, INC. OF FLORIDA

AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919
Flor da: 800-272-1919
Fax: 407-869-6961
florida@utilitiesine-usa.com

Confidential Fax Transmittal

Attn:	Mike Dunn	Dat	e:	11/1/2005 11:50) AM			
Company:	UIF	Fax	#: 4	407-869-6961				
From:	Richard W. Retz	Pag	jes:	13 including this cover page.				
Subject:	DMR, September 2005	A Alexander						
URGENT	For Your Review ested Please Comment	For your Information		ease Original: ply	: vill not be sent via U.S. Mail			
Mike,	Messages:							
·	d with this fax cover letter	the September 2005 DM	R for S	Sandalhaven, l	think there still is a			
	d with this fax cover letter with this DMR as far as recl							

old form

Richard W. Retz

opinion.

Thanks.

Assistant Operations Manager

This message is for the named person's use only. It may contain sensitive, private or protected information. No confidentiality or privilege is waived or lost by any mis-transmission. If you are not the intended recipient, please notify the sender immediately at the telephone number listed above. It is also requested that you immediately mail the transmission to the address above. You must not, directly or indirectly, use, disclose, distribute, print or copy any part of this message if you are not the intended recipient. Thank you,

EASTLAKE WATER SERVICE, INC.

AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714 FUED

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Fax Transmittal

Attn:	Rick Retz	Da	Date:	11/7/2005 12:02 PM (813) 626-1030					
Company:	Utilities, Inc. of Sandalhave	n Fa	x #:						
From:	Michael Dunn	Pa	iges:	2 including this cover page.					
Subject:	Manager Meeting								
☐ URGENT ☐ As Requ		⊠ For your Information		Please Reply	Original:		not be sent U.S. Mail		
	<u> </u>			-					



<u>Messages:</u>

The attached sheet for Sandalhaven shows that coliforms are reported as a number. I would keep it the same until FDEP revises the sheet.

This message is for the named person's use only. It may contain sensitive, private or protected information. No confidentiality or privilege is waived or lost by any mis-transmission. If you are not the intended recipient, please notify the sender immediately at the telephone number listed above. It is also requested that you immediately mail the transmission to the address above. You must not, directly or indirectly, use, disclose, distribute, print or copy any part of this message if you are not the intended recipient. Thank you.

EASTLAKE WATER SERVICE, INC.

AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS. FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

Fax Transmittal

Attn:	Rick	Retz		Date:	11/7/2	005 12:02	PM			
Company:	Utili	ties, Inc. of Sandalhave	n	Fax #:	(813) 626-1030					
From:	Micl	nael Dunn		Pages:	2 inclu	ding this cov	ver page.			
Subject:	Man	ager Meeting								
URGENT As Requ		☐ For Your Review ☐ Please Comment	⊠ For your Informatio		Please Reply	Original:	⊠ will not be sent ☐ via U.S. Mail			
	7									



Messages:

The attached sheet for Sandalhaven shows that coliforms are reported as a number. I would keep it the same until FDEP revises the sheet.

This message is for the named person's use only. It may contain sensitive, private or protected information. No confidentiality or privilege is waived or lost by any mis-transmission. If you are not the intended recipient, please notify the sender immediately at the telephone number listed above. It is also requested that you immediately mail the transmission to the address above. You must not, directly or indirectly, use, disclose, distribute, print or copy any part of this message if you are not the intended recipient. Thank you.

PARTINA DOPONARIAMENTO ANTO TOTAL	TRISTINGUES AND PROS TO THE REPORT OF THE PROPERTY OF THE PROP		
COST MICERITARY OF 121	ENVIRONMENTAL PROTECTION DISCHARGE MONITORIN	VC REPORT.	. Part a

When Completed mail this report to: Department of Environmental Protection, South District, Florida Department of Environmental Protection, PO Box 2549, Pt. Myers, FL, 33902-2549

PERMITTEE NAME: Utilities becorporated of Sandafiniven

MAILING ADDRESS: 200 Weathersfield Avenue

Altamonic Springs, FL 32714

PERMIT NUMBER

FLA014053

LIMIT: CLASS SIZE:

Final N/A

REPORT: GROUP:

Monthly Dunestic

FACILITY: LOCATION:

PAGE

SANDALHAVEN UTL

Sandalhaven WWTP 6811 Pacida Road Englewood, FL 34224

MONITORING GROUP NUMBER: R-001 MONITORING GROUP DESC:

, including Influent

COUNTY:

Charlotte

NO DESCHARGE FROM SITE: $\sqrt{9-01-05}$ To $\sqrt{9-30-05}$

Parameter	Quantity or Loading			Qua	Units	No. Ex.	Frequency of Analysis	Sample Type			
Row	Sample Measurement	0.003							Ø		
PARM Code 50050 Y Mon Site No. OTH-111	Pennit Requirement	0.15 (An.Avg.)	建数 CMM 1964	MGD						.5 Days/Week	Paw Totalizer
Flow	Sample Measurement	0.0							Ø	1122	
PARM Code 50050 P Mon Site No. OTH-1B	Permit Requirement	Report (Mo Avg.)	通数 数	MGD		人對對意			Ţ.,	5 Deys/Week	Fow Totalizer
BOD, Carbonaccous 5 day, 20C	Sample Measurement				<2				Ø	3	S. 2
Mon Site No. EPA-1	Permit Requirement	学、增强			20.0 (An.Avg.)			MG/L	'	Every Two !	8-bit PPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<2	<2	<2		0	AT AT LONG LAW	14 College (2014) 11 (1
PARM Code #0082 A Mon Site No. EPA-F	Requirement				30.0 (Mó Avé 1	(Weekly Avg)	60 (Mart)	MCA.		Byery Two	3 tr. FPC
Solids, Total Suspended	Sample Measurement				<0.87				0	SAC MEETS STOR	N 84753.2 . 1 34.
	Pennil à Recuirément				20.0. (An Avg.)	经企业的 高型新名		MGI.		Erby Two	A.hr. FPC
Solids, Total Suspended	Sample Measurement				<0,65	<0.65	0.7	ு இழுந்திற இதி	0	Wicks	\$500 00 10 100
さいばいいごう アクリ ぶんしょ おどがた とず 洋の 私 ニーケッキ さ	Pennit Requirement	No.			30.0 (Mo.Avg.)	45.0 (Workly Ave)	60 (Max)	MGAL	Y	Every Two	am.ric.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accessate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge violations.

1	NAMESTITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
r t	Patrick God win Lead Operator	Fatich Holwn	697-4797	05/10/25

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

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	MONITORING PERIOD	MONTORING CROUP MIT
	From: 9-01-05	ABER: RAMI
50-05-4	PERMIT NUMBER: FLAGINGST	

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DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed shall this report to: Department of Environmental Protection, South District, Florida Department of Environmental Protection, P.O. Box 2549, Ft. Myers, FL, 33902-2549 FLA014053 PERMITTEE NAME: Utilities focomprated of Sandalhaven PERMIT NUMBER MAILING ADDRESS: 200 Weathersfield Avenue REPORT: Monthly Final Altamonte Springs, FL 32714 LIMIT: GROUP: Domestic CLASS SIZE: N/A PACILITY: Sandolhaven WWTP MONETORING GROUP NUMBER: R-002 6811 Placida Road LOCATION: MONITORING GROUP DESC: Englewood, FL 34224 NO DISCHARGE FROM SITE: COUNTY: Charlone MONITORING PERSOD Prom: 9-0/-05 To 9-30-05 Prequency of Sample Type Units No. Quantity or Loading Units Quality or Concentration Parameter Analysis Ex. Samule Flow Ø 0.098 Measurement 5 Days/Week Flow Totalizer Permit 0.10 MGD PARM Code 50050 Y Mon Site No. OTH-1A Requirement (An Avg.) Flow Sample 0.067 Measurement 5 Days/Work Flow Totalizer Report MGD PARM Code 50050 P Permit ... 1. 编译 Mon Site No. OTH-LA Requirement (Mo.Avg) BOD, Carbonaceous 5 day, 20C Sample <2 Measurement Every Two MGA 8-hr TPC 20.0 PARM Code 80082 Y Permit-An Ayr Moo Sic No EPA-L Requirement BOD, Carbocaccous 5 day, 20C Sample くユ < 2 < 2 Measurement 30.0 60 MGAL Every Two 38-hr. FPC Permil - Requirement M5.0 * PARM Code 80082 A Weeks (Weekly Avg) (Max) Mon Site No EFA-1 (Mo Avg.) Solids, Total Suspended Sample 20,6 Measurement - ARI/L Giab PARM Code 00530. B Pemilion Car Moo Site No. EFB-1 Requirement Sample 6.3 Measurement . . **5**U 5 Days Week 8.0 PARM Code D0400 A Permit : (Min Mon Site No. EFA-1 Requirement I certify under penalty of law that this document and all attackments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant possibilities for submitting false information, including the possibility of line and imprisonment for knowing violations.

NAME/ITILE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMM/DD)
Patrick Godwin Lead Operator	Patrick Holwo	697-4797	05/10/25

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

SANDALHAVEN

941697895

10/25/2005

FACILITY:

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SANDALHAVEN UTL

Sandalhaven WWTP

Permit

Permit ...

Requirement: Sample

Measurement Pennît

Requirement. Sample Measurement Permit Requirement

MONITORING GROUP NUMBER: R-002

PERMIT NUMBER: FLA014053 9-30-05

Frequency of

Analysis

Sample Type

TNo.

Ex.

Units

From: 9-01-05 To MONITORING PERIOD Parameter Quantity or Loading Units Quality or Concentration Coliform, Fecal Sample <1 Measurement PARM Code 74055

PARM Code 74055 A	Permit	1000	A 300	F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	HE 180 EZ	200	-		10		,
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Disinfection) PARM Code 50060 A	Measurement				1.2	1	1	l	M	}	
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ANTONIO DAMA DATO	Measurement				1.25				18	100	11.02
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IGESHE NO. EPB-1	Requirement		学校管理 空	图 图片	(Max)		建	UIN	400	Continuous	· Motor
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11/01/2005

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9416978959

DAILY SAMPLE RESULTS - PART R

Permit Ivan Sper:	TO ANIANED	· CITTOTON BUILDING VON	LWKID	
Monitoring Period	From: 9-01-05	. 7. 35. 60	Pacility:	Sandalhavon WWTP
CONTRACTOR A SUSTAIN	1 Mail:	Ta: 9+30~05		

	Fi∞ (MCD)	ਗਿਆ (VI O D)	CBOD5 (MG/L)	TSS (MO/L)	pH (S(I)	TRC (For Disinfect.) (MG/L)	Feeal Coliform Hacteria (#/100ML)	Nitrogen, Nitrate, Tota (as N) (MG/L)	CHODS (MG/L)		
Code	19050	501)50	80082	00530	00400	50060	74055	00620	80082	00030	
Mon. Si	e C19-14	OTF-118	INP	INF-1	EPA-1	EPA-1	BFA-1	EFA-I	EFA-1	EFA-1	
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9	0.067	43			6-8	5.0	121				-
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PLANT STALLING				
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Evening Shiff Coeraice	Class;			Michael / lonal
Night Spift Couraing		Certificate No.	0013794 Nume:	Ted Burleson
TATEM SHILL DANNE	Class:	Certificate No:	Name:	
Lead Operatur	Class:	B Certificate No:	000 75/8 Name:	0+01,010
			000 75 (8) Name:	talrick God win

DEP From \$14-20.9 (C(10) Effective November 29, 1994

	Nuriber: ring Period	PLAN14053 Front	9-01	- 05	To:	9-30	2-05	- PART B Facility:	entlubre2	on wwith		
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DEP Roll 604 (70.9) 0/16). Effective November 29, 1994

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GROUP

REPORT

S.III. FPC

When Completed mail this report for Department of Euriconnental Protection, South District, Florida Department of Environmental Protection, P.O. Box 2549, Fl. Myers, Fl., 33902, 2549

CTV22 SISE

TIMIT

F. AOI 4053 **BEKINLL NOWBEK** PERMITTEE NAME: Utilities Incorporated of Sandallarvan

AISC of spaings amomallA MAILING ADDRESS: 200 Weathersfield Avenue

TWW naveilfebrie?

buoß shiokly 1180

LOCATION: FACILITY:

Englewood, FL 34224

Charlotte COUNTY

50-12-01 MONITORING PERIOD From: _ °1 50-10-01

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ં આ ાપ 8	SJS-W		7	(xsM)	(Nockly Avg.)	(AvA.oM)	S. P. A. S. S.	SHARES II'MES	化氢化 经营业 医水	Requirement	Mon. Site No. PPA-1
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MONILORING CROIL DESC:

MONITORING GROUP NUMBER: R-001

NAMETITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT knowledge and belief, une, securate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel property gather and evaluate

±6±1-±69 DVIE(YYMMDD) **TELEPHONE NO** SIGNATURE OF INDICOPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

(Mo.Avg.) - (Weekly Avg.)

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

9416978959

SANDALHAVEN UTL

PAGE

DISCHARGE MONITORING PORT - PART A (Continued)

	MONITORING PERIOD	MONFORING GROUP NU
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Coliform, Fecal	Sample				(An.Avg.)			#/IooML		Every Two	Grab
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DEP Form 62-620.910(10), Effective November 29, 1994

DEPARTMENT OF ENVIRONMENTAL PROTECTY. DISCHARGE MONITORING REPORT - PART A

When Completed shall this report to: Department of Environmental Protection, South District, Florida Department of Environmental Protection, P.O. Box. 2549, Pt. Myers, FL, 33902-2549

CLASS SIZE:

8	PERMITTEE NAME: MAILING ADDRESS:	200 Weat	ncorporated of S hersfield Avenu e Springs, PL 32	c
PAGE	FACILITY: LOCATION:	GRII Plac	ven WWTP cida Road od, FL 34224	
	COUNTY:	Charlotte		
	Parameter			Qua
	Flow		Sample Measurement	0.0
	PARM Code 50050 Mon Site No. OTH-1A	Y	Permit Control Requirement	01.Q vA.aA)
Ę	Flow		Sample Measurement	0.08
SANDALHAVEN UTI	PARM Code 50050 Mon Site No. OTH-JA	P	Requirement	Repor (Mo Av
ALHA	BOD, Carbonaceous 5 d		Sample Measurement	Tasti dire
AND	PARM Code 80082 Mon Site No. EFA-1	Permit Requirement		
ഗ	BOD, Carbonaceous 5 d PARM Code 80082	A	Sample Measurement Permit (* 3.1)	in the
	Mon Site No. EFA-1 Solids, Total Suspended		Requirement Sample	建士雅。
	PARM Code 00530 Mon Site No. EPB-1	B	Measurement Permit house Requirements	內條語
	рН		Sample Measurement	
6.0	PARM Gode 00400 Mon Site No. EPA-1		Permit Requirement	影響
9416978959	I certify under penalty of the information submitte knowledge and belief, to	d. Based o	on my inquiry of	the person of
94	NAME/TITLE OF PRINCIP	PAL EXECU	TIVE OFFICER O	R AUTHORE
56	Patrick G	sodi	sin Le	ad C
14:5	COMMENT AND EXP	LANATIO	OF ANY VIO	LATIONS (R

PERMIT NUMBER FLA014053

LIMIT:

Final N/A

REPORT: GROUP:

Monthly Domestic

MONITORING GROUP NUMBER: R-002 MONITORING GROUP DESC:

NO DISCHARGE FROM SITE: 10/01/05 To 10/31/65

Parameter		Quantity of	or Loading	Units	Qua	lity or Concer	stration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.098							7		
PARM Code 50050 Y Mon Site No. OTH-1A	Permit Requirement	Q IO (AM AVE.)		MGD		翻译 130				5 Days/Work	
Flow	Sample Measurement	0.087							Ø	25.11.47.2. 25.	
PARM Code 50050 P Mon Site No. OTH-JA	Permit 22	Report (Mo Avg.)		MGD				1 秦深		5 Date/Week	Plow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<2				0		4.00
PARM Code 80082 Y Mon Site No. EPA-1	Permit Requirement				20.0 (An Avg.)	W W		MGA		Every Two W	268-hr FPC
BOD, Carbonaccous 5 day, 20C	Sample Measurement				42	<2	<2		0		
PARM Code 80082 A Mon Site No. EFA-1	Permit				30.0 (Mo.Avg.)	45 0 Weekly Avg	60 (Max)	MG/L		Every Two	7 18-bi. FPC
Solids, Total Suspended	Sample Measurement				0.7				0	1300	
PARM Code 00530 B Mon Site No. BPB-1	Pennit :	自由。	建	建學	50 . (Max)			MGA		A Days/Week	Grab
рH	Sample Measurement				6.4	6.8			Ø	Francis of Section 2000	200 4 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
PARM Code 00400 A Mon Site No. EFA-1	Permit Requirement	数		1000mm	6.0 (Min.)	(Max)		SU 7		D'd Days/Week	ke Grab

ents were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYAMM/DD)
Patrick God win Lead Operator	Patrick Hodeva	697-4797	05/11/22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

11/23/2005

9416978959

Sandalhaven WWTP

MONITORING GROUP NUMBER: R-002
MONITORING PERIOD From: 10-01-05 To

PERMIT NUMBER: FLA014053

Parameter		Quantity	or Loading	Units	Qı	ality or Concen	tration	Units	No.	Frequency of	Sample Typ
Coliform, Fecal	Sample Measurement		T		<1	T		 	Ex.	Analysis	Sunday 136
PARM Code 74055 A Mon Site No. BPA-1	Permit Requirement		里 2 4		25			#/IOOML	Ø		
Total Residual Chlorine (For Disinfection)	Sample Measurement		Section 1997		(Max.)			,m300,m1		€ 4 Days/Work	Grab
PARM Code 50060 A A	Permit Requirement		### J		r 1.0 s			MGA	Ø	1800	
Furbidity	Sample Measurement		AREA STREET, N. S.		2.81		<u>.</u>			Continuous	Grab,
ARM Code 00070 B	Permit 35			1200714	a Marka Alika Karasa	ি সুর সামের সাম্ভর		NOTE OF	Ø		
· 以表现是不是现在 (4)。	Sample Measurement		THE STATE OF STATE OF		(Max)	4.00g(E)(1.00g(E))	7 (1.55)				Mcler
事。	Permit Requirement		是對語言	建艺			· 生、方:			Assertation	- Sanda (1871)
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(MG/L) (MG/L) (MG/L) (MG/L) (MG/L) (MG/L) (MG/L) (MG/L)			2000	}		0900\$	00000	00500	28008	05005	05005	Code
			(MG/L)	Intof, settin (N 24)	Cotiform Eacteria	Disinfect.)			(wevr)			
TOO WAY TO LOOK WAY		7.7	2000		Iu⊅49	TRC (Por	(U2) Hq	122 (MG/L)	CRODS	Flow (MCD)	Flow (MGD)	

DAILY SAMPLE RESULTS - PART B Permit Number: FLA014053 Facility: Sundalhaven WWTP From: 10-01-05 To: 10-31-05 Monitoring Period TSS (MG/L) Turbidity (NTU) Code 00530 00070 Moa. Site EFB-1 EFB-1 1 60 2 19 3 20.6 12 4 <0.6 ,58 5 0.6 27 6 KO.6 30 7 15 8 45 26 10 42 11 0.7 51 12 <0.6 .48 13 20.6 52 14 <0.6 35 15 45 16 ,50 17 <0,6 44 18 <0.6 45 19 <0.6 .44 20 50.6 45 21 45 22 40 23 .40 24 2.81 25 <0.6 1.40 26 <0.6 1.11 27 <0.6 .63 28 (0.6 29

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31	0.6	,31				 	 					
Total	0,0	,71										
	0,6	0.55										
LANT STAFFIN Day Shift Operate vening Shift Op	or .	Class:	_ <u>C</u>	Certificate No:		1850 Na	me:	Mi	chael	Mon	at	
ight Shift Opera		Class: Class:		Certificate No:		794 Na	me;			leson		
ead Operator		Class:	_B	Dertificate No:	000	7518 Nau	me;	Patu	ick E	sod us.	и	

PARM Code 80182 + A'
Most Site No. ERA |

Solids, Total Suspended

PARM Code 00530

Solids, Total Suspended

Mon Sile No. EFA-1

12/22/2005

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SANDALHAVEN UTL

When Completed mail: PERMITTEE NAME:	this regor	to Debasemen	II of Environmental	ENVIRONMEN Protection, South Di	istrict, Plorid	is Department of En	vintemental Protect	tion BO the agen		4 // //				
PERMITTEE NAME: MAILING ADDRESS:	200 Wea	thersfield Aven	UE CHARLES		PERMIT	NUMBER	FLA01403		R. Myers, F	L, 3390)2-254			
FACILITY:		le Springs, FL 3	12714		LIMIT: CLASS S	ZE:	Final N/A		REPORT		Monit	aly .		
LOCATION:	6811 Plac	ven WWTP ida Road			MONITORING GROUP NUMBER: R-001				GROUP.		Dome	Domestic		
CONT 16 mm.		xl, Ft.34224			MONITO	RING GROUP DES	nder: R-001 C: including	influent		1,40				
COUNTÝ:	Charlotte				NO DIZCI	HARGE FROM ST	#- ×							
Parameter					MONTIO	RING PERIOD	Feorn: _// - 6	01-05 To	11-	30	-05			
			Quantity or Loading		Units Quality or Concentration					No.	Frequency of	Sample Type		
DW	4	Sample Measurement	0.003				Γ	Т	 	Ex.	Analysis			
BM Code 50050 J a.Sile No. OTH-LB	(Permit Rogphement	0.15	a The Case of	MGD	12 ty () 16 1 1 1		Library and the same		0				
W		Sample	(An Ave)	The Post of	No. mass	1990年					5 Days/Work	Flow Totalizer		
RM Code 50050 P		Measurement Permit	O.O Report	Ter-en-section 1	45000					0				
n Sile No. OTH-18. D. Carbonarcous 5 day	27	Requirement	(Ma Avg.)		MGD			· 传统等。文化	蒙尔湖	3	1 Days Work	Flow Totalizer		
	·	Sample Measurement				42	1,30,80		i i	X	在我们们。"·	A (4)		
RM Code 80082 - Ty a Side No. HPA-1		Perma Regularment			建 的 中央	20,0	Side Francisco		MGA	2	S. Commence of the control	7.		
D, Carbonaceous 5 day	y, 20C	Sample	STATE OF STATE		\$100 Sec. 200	1 1 1 1 1 1 1	8 3 - 1 33 - 1 3d		MGAL	3	Every I wo	M.PC		
	1	Measurement		1 1		く 2	< 2	1 < 2		~				

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Erry Two

8-hr. FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquity of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and boilef, true, accurate, and complete. I am aware that there are significant penalties for subsaliting false information, including the possibility of fine and imprisonment for knowing violations.

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(Ma Avg.)

30.0

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45.0

NAMETITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	and impriso	nment for knowing violations
THE OTHER OR AUTHORIZED AGENT	SKINATI PEOE DEDIVINAL ELECTRICAL	The state of the s
Diologi	AGENT	TELEPHONE NO DATE (YYAMM/DD)
Patrick Godwin Lead Operator	Who I do	
7.0-17	Patrick Hoder	697-4797 05/12/20
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachmen	The state of the s	1117
TO CALLADA TACK CHARGE SIL SUSCEMEN	ils here):	

Permit :

Sample Меавительсь

Sample Measuremen

Permit A

12/22/2005

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DISCHARGE MONITORING REPORT - P.	ART A (Continued)
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FACILITY:

Sandulbaves WWTP

Parameter	T	Oxenneits	y or Loading		RING PERIOD	UMBER: R-001 From;//- C	01-05 To	LL-	30	BER: FLA014053 - OS	
p H 4	Sample	Quantiti	A or moraling	Units	C	uality or Concen-	ration	Units	No.	Proquency of	
PARM Code 00400	Measurement				6.4	60			Ex.	Analysis	Sample Type
Mon Site No. HFA-1	Permit Requirement			र्वे दृष्ट्		6.9		i	10		T
	Sample		1		6.0 (Mill.)	8.5 (Max.)		SU		5 Days/Week	-
PARM Code 74055 Y Mon Site No. ERA-1	Measurement Permit				<1			· 新海 。 :	-	7-75-1142	Grab
Coliform, Focal	Transport Cities III		· 第130 年	· 图 · · · · · · · · · · · · · · · · · ·	200	Section 1982	113 1117 11 27 2	-	9		
	Sample		1	2.1763213	(An Avg.)			4/100ML		Byery Two	Grab
ARM Code 74055	Measurement Permit	Land Service Control		_	21	1 < 1	71			Weeks	
doe Site No. HPA.	Requirement			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Report	400			Ø		
otal Residual Calorine (Por Disinfection)	Sample		W. F. 17, 17, 18	1.00	(Mo Geo Mean)	(90%)	800 (Max.)	WIOOMIL	22.01	Every Two	Orab
ARM Code spoke	Measurement Pennit	V		1 1	0.6		(Max.)	- ap 4 7 7 7 1		Weeks	San .
TURE SHE NO. EPALT	Requirement	接着主题		- Maria	\$ 0.5 L				0	-	
itrogen, Mitrate, Total (as N)	Sample		1000	1	(Min.)		等資理的	MG/L	7	5 Days/Work	
ARM Chile thich Section	Measurement					200 gr. 100 gr 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	25 (12 C. 13 C. 15	1-	7		Gnb.
COLUMN TILL ESPACE CENTER COLUMN	Pennii Requirement			365,000 .2	5.02	 	j	ł	1		
	Sample	学和法 為顛毛	40 M		33 120: *(Max)	****	ASSESSED NO	MGIL	\sim 1	46	
fel a best a more some and	Менинелин	}					***			Buery Two	8 In. FPC
	Penalty 1	ALTER.	and the Park Sec	- 6 Sep No. 1 22 1	116]			0	T. CONTRACTOR	Ne la Land All Vinces
	Regulrement Sample	* 32 3°			Report	公司	10 20 22 24 24 24 24 24 24 24 24 24 24 24 24	Sleen 1	41		
[Measurement			- VEX.5 1 2 1 2	(Ma Avg)	(2) 医艾哥德		MG/L		Every Two	, 8 m. FPC 🕸
	Pound :	CHICATON S	ishabitar and		233				\overline{A}	Weeks	to San
	Requisement.	本的	10.00		Report				91		1
	Sample		A CAN A SHAPE OF SECURE	- A	(Maxiva)	- Hit are Life	宝宝	MS/C	多	Hyeny Two	Bur, PPC.
	Measurement	Grant Control of Control			l			Section 5	** B	Weeks	
	emi.			建设	New York						
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SANDALHAVEN UTL

	DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PAR	_
When Completed mall this report to:	Descriment of Environmental Description Could be a first but the first b	

When Considered mall t	his report to: Danastonant of Francisco			MO WOLDET - LVKI V	L .	
DEDMITTOR MAND.	fils report to: Department of Environmental Protection, S	iouth District, Florida Department of En	vironmental Protection, P O Bo	x 2549, Ft. Myers, Ft., 33902-25	40	
MAILING ADDRESS:	200 Weathersfield Avenue	FERMIT NUMBER	FLA014053			
	Altamonte Springs, FL 32714	LIMIT: CLASS SIZE:	Final N/A	REPORT:	Monthly	
LOCATION:	Sandaliuven WWTP 6811 Placida Road Englewood, FL 34224	MONITORING GROUP NUM MONITORING GROUP DES	ABER: R-002	GROUP:	Domestic	
COUNTY:	Charlotte	NO DISCHARGE FROM ST	re. 527			

Parameter		Quantity	or Loading	Units	Ou	ality or Concents	entin-	1			
Row	Camerta.					ancy or Concent	auon	Units	No. Ex.	Requency of Analysis	Sample Type
	Sample Measurement	0.098				T	T	 	1	71001/313	
PARM Code 50050 Y Mon Stic No. OTH-1A	Permit	0.10	STATE OF THE STATE	MBD	Mark You	Communication	Service And	<u> </u>	Ø		
Flow	Requirement Sample	(An Avg)		246.23	持行的	污点类块				5 Dwys/Work	Flow Totalize
PARM Code \$0050	Measurement	0.089	106:					·	d	ALCOHOLD STORY	57.1
	Pennit Requirement	Report		MGD		SALI LIEDZIANE -	+ 200 4817 - 1	1 2 2 2	Ø		
	Sample	(Mo Avg)	S-945,45.57 (22.35)	4.4		西州、沙雪等,唯			13.25	5 Dayw Week	Flow Totalize
ARM Code 10082 1/17	Measurement	~~			ベ ユ				0		The state of the s
from Site No. EFA-1	Permit Requirement	***	7	學學	Y(ALAVE)			MGVL		District Library	ATTREE WILLIAM
MAD O	Sample			- New (Sec. 5)					2 0	Week	8-br FPC
ARM Code \$0002 (NVA	Meanurement Permit	Color Constitution			< 2	く ユ	<2		0		
400.8de No. RPA-1				100	(Mo AVE)	(Weekly Avg)	60	MGAL	*	Every Took	
olids, Total Suspended	Sample			-Manifeston		(Weekly Avg)	· (Mix)		ger v	Every Two	8 br (FPC
ARM Code 00530	Measurement Permit	2057 (1583)59	51-20-35-30-30-30-30-30-30-30-30-30-30-30-30-30-	of Super-State of Page	0.8		ŀ	1	0		
NON-SOC NO. BEE-1 188-15-15-15-15-15-15-15-15-15-15-15-15-15-	Requirement	17.36.56			PAGE 1	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		MGIL		4 Divivor	CONTRACTOR OF THE PARTY OF THE
	Sample Measurement			77			and the second			新茶/ 樣	Child
ARM Code 00400 - A	Permit 1				6.4	6.9		1	0		
log Sile No. EPA 1	Requirement	是特定计划这	2. 74. 7	速度	(Mio)	85 # (Max.)		25 .20 .€	- 1	'S Diyt/Week	Gab .

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND THE PROPERTY OF THE P	ar penames for submating late information, including the possibility of fine and impri	SOUTHERS for knowing a significant
NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TO ADDRONG VANIKADIN.
Dioioi		TELEPHONE NO DATE (YYMM/DO)
Patrick Godwin Lead Operator	Hatrick Hoder	100
		697-4797 05/12/20
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachment	of a farman and a	
A LINE TO SERVICE AND INSCRIPTION OF	es accel:	

12/22/2005

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PAGE 82

DISCHARGE MONITORING REPORT - PART A (Co)

PACILITY:

Sandalhaven WWIP

MONITORING GROUP NUMBER: R-002 MONITORING PERIOD Prom: ______

PERMIT NUMBER: FLA014053

Parameter	1	Quanti	ty or Loading				_		11-05	10 11	-3c	DER: FLADI40	
Coliform, Fecal		- Z-23/10	.) or resmuß	Units	1	Qи	ality or Co	ncente	stion				
PARM Code 74055	Sample Measurement				 ,		7		arioli	Unit	No.	Frequency e Analysis	Sample Ty
INCOD NITA WAR DIDA a	Parmit Requirement		· 基础的		│	<u>[</u> \$	<u> </u>				0		
Total Perident Chlorine (Per Disinfection)	Sample Measurement	12 May 18	14 生物学。		(M	ur.)				#/00M	1	4 Days/Wee	ke e Grab
PARM Code 50060 A Mon. Site No. , EPA-1	Permit Reguliement		S STATE TO S	201 2012	0.						Ø	AND THE P	
	Sample				OMI	0 n)~~				MG/L	+	ar constant	V
	Measurement Permit	Signification and the second				90	1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -					Continuous	C Crab
STATE OF THE PARTY	Requirement Sample	1,213.33	1 新學社	有珍珠	3000	E C	2.4、	Bis rafe		V	0		
Market of the contract of the	Measurement				(Ma	0	选《学集》	S.E.		NIV		Continuous	Maa.
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DAILY SAMPLE RESULTS - PART B FILMO14053 Morensher (Permit Number To: Neventeer 30 Pacility: Sundalbaven WWTP Monitoring Period TSS (MG/L) Terbidity GALO) 00070 Code 00530 EFB-1 EFB-1 Mon. Site <0.6 155 2 .30 C0.6 65 <0.6 0.69 5 74 6 0.8 1.28 1.29 0.6 0.6 10 40.6 1.68 11 121 12 2.90 13 1,74 14 20.6 15 1.24 20.6 16 <0.6 17 18 19 1,40 20 1.34 21 1.26 ८७.6 22 1.12 <0.6 23 1.11 20.6 152 24 <0,6 25 36 37 23 28 22 <0.6 29 <0.6 3 (30 <0,6 31 Total 7,06 10.61 Mo. Avg. Certificate No: 0013850 Name: Michael Monat PLANT STAFFING: Class Day Shift Operator 00/3794 Name Caralicate Nox Chance Evening Shift Operator Certificate No: Name Night Shift Operator Class: Conference No: 0007518 Name: B Class: Lead Operator

DEP Form 62-620.910(10), Effective November 29, 1994

PAGE 84

SANDALHAVEN UTL

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DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

Winn Completed mail this report to: Department of Basiconnectal Protection, South Estrict, Florida Department of Environmental Protection, P.O. Rox 2549, Pt. Myers, FL. 33302-2549

PERMITTEE NAME: Utilities incorporated of Sandallaven

MAILING ADDRESS: 209 Weathersfield Avenue Altemoute Springs, FL 32714 PERNIT NUMBER

F)_A014053

LIMIT: CLASS SIZE: Figs N/A

REPORT: GROUP:

Hoolidy Demestie

FACKLITY: LOCATION: Stadalheren WWTP 6811 Placida Road Baglewood, FL 31224

MONTORING GROUPHUMBER: R-COL MONITORING GROUP BESC:

includies influent

COUNTY:

Charlotte

NO DISCHARGE FROM SITE: MUNITORING PERIOD

12-31-05

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destify under pensity of the that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personned properly gather undervaluate the information automated. Based on my inquiry of the person or persons whomenage the system, or those persons directly responsible for gathering the information, the information arbuinted is, to the best of my knowledge and belief, tour, accurate, and complete. I am somethat there are significant populates for submitting false information, including the possibility of fine and impaisonment for knowing violation

NAMEDITIE OF PRESCIPAL BISECUTIVE ON AUTHORIZED AGENT SIGNATURE OF PENCIPAL EXECUTIVE OF AUTHORIZED AGENT TELEMENTENO DATE (NYMANDO) Patrick Godwin Lead Operator Patrick Holis (697-4797-06/01/16			and the same of th	-COMPAIR
	NAME/TITLE OF PRESCITAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PEINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEMENTO	DATE OCYMPATOR

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments berek

SANDAL HAVEN UTL

DISCHARGE MONITORING REPORT - PART & (Continued)

FACILITY:

Sandalhoven WWTP

MONITURING ORDER NUMBER: R-001 MONITORING ORDER FROM: 12-1-05 TO

PERMIT NUMBER: FLA014051

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PERMITTEE NAME: Utilities incorporated of Sandahavea MAILING ADDRESS: 200 Worthomfield Avenue

Altamonie Springs, FL32714

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NVA

LIMET: CLASS SIZE:

PERMIT NUMBER

REPORT: GROUP:

Mosthly Domestic

FACILITY: LOCATION: Sandalhaven WWTP 6811 Placids Road Engleward, FL 347M

MONITORING GROUP NUMBER: R-002

LEGISTANDIST OFFICE PARTY

COUNTY:

Charlotte

NO DISCHARGE FROM SITE: MONTORING PERIOD PROBE 12-01-05

Parameter		Quantity of	or Loading	Units	Qua	lity or Concentr	etion	Units	No. Bx.	Frequency of Assignia	Sample Type
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I certify ander penalty of law that this document and all attackments were prepared under my direction or supervision is accordance with a system designed to assure that qualified personned properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or from persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and bestef, true, accurate, and complete. I am aware that there are significant possibles for submitting lake information, including the possibility of the and imprisonment for knowledge violations.

NAME OF THE OF PRINCIPAL EXECUTIVE OFFICER OR AUTEORISED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONENO	DATEGYYMOODE
Patrick Godwin Load Operator	Patish Hodeve	697-4797	06/01/16

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference of emichance here):

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DISCHARGE MONITORING REPORT - PART & (Candinued)		orLoading					一般がある機能																	
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DBPB0an 62-620914(10), Effective November 19, 1994

DAILY SAMPLE RESULTS - PART B

Pannis Number: Monitoring Period

PLI-014053 From 12-01-05 To: 12-31-05

Pacility: Sandalhaven WWTP

	Flow (MGI	Plow (MGD)		TSS (MG/L)	pH (SU)	TRC (Por	Fecal				
A	-		OME/L)			Disinfect) (MG/L)	Coliforn Bacterin (#100ML)	Nilvogen, Nilvate, Total (IIS N) (MG/L)	CBODS (MG/L)	TSS (MG/L)	
Cone Mon. Site	50050 07%-1A	511050	80082	00530	00400	50060	74055	00620	80082		
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6	0.099	9			6.6	1.4	21	-			
7	0.093	-6	114	13.6	66	1.2	21	W 22			
8	0.090	-6			6.5	1.4	21	0.72	<2	40.6	
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PLANT STAFFING:				
Day Shift Operator	CINE	C Certificate	No: 00/3850 Nag	Michael Monat
Evening Shift Operator	Chies	C Conficen		7.17
Night Shift Operator	Class	Certificate		THE SON
рена Орегьюя	China	B Conificate		0101

DEP Form 62-620.010(10), Effective November 29, 1994

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Month Named Name RADI-033 DAILY SAMPLE RESULTS - PART B MONth Candidates WWTP Month Named Results (2-0/-05 Pacilly: Sandahanea WWTP Pacilly: Sandahanea WWTP

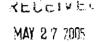
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UTILITIES, INC. OF SANDALHAVEN

DOCKET NO.: 060285-SU

CHARLOTTE COUNTY

25.30-440 (5) Inspection Reports





Department of Environmental Protection

CO: RR

South District P.O. Box 2549 Fort Myers, Florida 33902-2549 Ph. (239) 332-6975 Fax (239) 332-6969 Colleen M. Castille Secretary

May 25, 2005

FILE 19.2 SH 4/14/02 691

Patrick Flynn, Vice President 200 Weathersfield Avenue Altamonte Springs, FL 32714

RE:

Charlotte County-DW Sandlhaven WWTP FLA014053

Dear Mr. Flynn:

A file review and a field inspection of the above referenced WWTP on April 14, 2005 indicate that you may be in violation of Chapter 403, Florida Statutes and the rules promulgated thereunder. Department personnel observed the following:

- The Department found that the required permitted information was not being properly recorded on the discharge monitoring report (DMR). The Department is issuing a corrected DMR form that allows the operator to report flows for the two discharge sites, OTH-1A and OTH-1B. Please see enclosures.
- Please submit to the Department an updated copy of the reuse protocol indicting the correct turbidity alarm set points. The June 18, 2001 reuse protocol indicated a 5.0 NTU alarm set point for turbidity.

You are advised that any activity that may contribute to violations of the above described statutes and rules should cease immediately. Continued operation of a facility in violation of state statutes or rules may result in liability for damages and restoration, and the judicial imposition of civil penalties pursuant to Sections 403.141 and 403.161, Florida Statutes.

Please notify the Department in writing within 15 days as to what actions you intend to take in order to address these deficiencies.

Continued . . .

"More Protection, Less Process"

Mr. Flynn May 24, 2005 Page 2 of 2

If you have any questions, please do not hesitate to contact <u>Doug Wells</u> at (239) 332-6975, ext. 108. Your cooperation is appreciated.

Sincerely,

Keith Kleinmann

Environmental Manager

KK/EJ/mv

cc: Lenny Godwin, Operator

Allen Slater, FRWA (allen.slater@frwa.net)

enclosures

MATER COMPLETER HAY	his report	to: Department	of Environmental P	rotection, South	District, Florida	Department of Env	ironmental Protectio	oo, P O Box 2549, Ft	. Myers, FL	, 33902-	2549		
PERMITTEE NAME: MAILING ADDRESS:	Utilities la	ecorparated of S	audalhaven		PERMITN		FLA014053		•				
		Springs, FL 32			LIMIT: CLASS SIZ	LE:	Final N/A		REPORT: Monthly GROUP: Domestic				
FACILITY: LOCATION:	6811 Plac	en WIVTP ida Road & FL J4224				ING GROUP NUM ING GROUP DESI							
COUNTY:	Charlotte					IARGE FROM SITE							
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Flow		Sample Measurement	·										
Maa Site No. OTH-1B	P	Permit Requirement	Report (Mn.Avg.)		MGD						5 Days/Week	Flow meters and totalizers	
BOD, Carbonaceous 5 d	Ť	Sample Measurement											
Mon. Site No. EFA-1	Y	Permit Requirement				20.0 (Ab.Avg.)			MC/L		Every Two	8-hour FPC	
BOD, Carbonaceous 5 d	•	Sample Measurement											
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Sandalhaven WWTP

MONITORING GROUP NUMBER: R-001 MONITORING PERIOD Prom:

PERMIT NUMBER: FLA014053

Parameter		Quantity or	Loading	Units	Qua	lity or Concentra	noin	Units	No. Ex.	Frequency of Analysis	Sample Type
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Coliform, Fecal	Sample Measurement										<u> </u>
PARM Code 74055 Y Mon.Site No. EFA-L	Permit Requirement	·			200 (All.Avg.)			W100MIT	•	Every Two	Grab
Caliform, Fecal	Sample Measurement					· · · · · · · · · · · · · · · · · · ·					
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PARM Code 50060 A Mon. Site No. EPA-1	Permit Requirement				0.5 (Min.)			V(OV)		5 Days/Week	Grab
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PARM Code 00620 A Mon.Site No. EPA-1 BOD, Carbonaccous 5 day, 20C	Permit Requirement				12.0 (Max.)			MOAL		Every Two Weeks	8-bour FPC
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PERMITTEE NAME: Utilities Incorporated of Sandalhaven MAILING ADDRESS: 200 Weathersfield Avenue					PERMIT NUMBER FLA014053							
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DEP Form 62-620.910(10), Effective November 29, 1994

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DAILY SAMPLE RESULTS - PART B

Permit N Monitori	umber: ng Period	FLA014053 From:					Facility: Si	indalhaven W	WTP		
	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TSS (MG/L)	TRC (For Disinfect.) (MG/L)	T\$S (MO/L)	Turbidity (NTU)	CBOD5 (MG/L)	TSS (MG/L)	
Code	80082 EFA-1	74055	00620	00400	00530 EFA-1	50060	00530 EFB-1	00070	80082 INF-1	00530	50050 OTH-1A
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DAILY SAMPLE RESULTS - PART B

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INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT

Read these instructions as well as the SUPPLEMENTAL INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT before completing the DMR. Hard copies and/or electronic copies of the required parts of the DMR were provided with the permit. All required information shall be completed in full and typed or printed in ink. A signed, original DMR shall be mailed to the address printed on the DMR by the 28th of the month fullowing the monitoring period. The DMR shall not be submitted before the end of the monitoring period.

The DMR consists of three parts-A, B, and D-all of which may or may not be applicable to every facilities may have one or more Part A's for reporting effluent or reclaimed water data. All domestic wastewater facilities will have a Part B for reporting daily sample results. Part D is used for reporting ground water monitoring well data.

When results are not available, the following codes should be used on parts A and D of the DMR and an explanation provided where appropriate. Note: Codes used on Part B for raw data are different

CODE	DESCRIPTION/INSTRUCTIONS	
ANC	Analysis not conducted.	
DRY	Dry Well	
FLD	Flood disaster.	
IFS	Insufficient flow for sampling.	
LS	Lost sample.	
MNR	Manitaring not required this period.	

CODE	DESCRIPTION/INSTRUCTIONS
NOD OPS OTH SEF	No discharge from/to site. Operations were shuldown so no sample could be taken. Other, Please enter an explanation of why monitoring data were not available. Sampling equipment failure.

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When reporting analytical results that fall below a laboratory's reported method detection limits or practical quantification limits, the following instructions should be used:

- 1. Results greater than or equal to the PQL shall be reported as the measured quantity.
- 2. Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter and when determining compliance with permit limits.
- 3. Results less than the MDL shall be reported by entering a less than sign ("c") followed by the laboratory's MDL value, e.g. < 0.001. A value of one-half the MDL or one-half the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limitation.

PART A DISCHARGE MONITORING REPORT (DMR)

Part A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring requirements are interim or final, and the required submittal frequency (e.g. monthly, annually, quarterly, etc.). Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The following should be completed by the permittee or authorized representative:

No Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number; however, if the monitoring group includes other monitoring locations (e.g., influent sampling), the "NOD" code should be used to individually denote those parameters for which there was no discharge.

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Sample Measurement: Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row in the non-shaded area above the limit. Be sure the result being entered corresponds to the appropriate statistical base code (e.g. annual average, monthly average, single sample maximum, etc.) and units.

No. Ex.: Enter the number of sample measurements during the manitoring period that exceeded the permit limit for each parameter in the non-shaded area. If none, enter zero.

Frequency of Analysis: The shaded areas in this column contain the minimum number of times the measurement is required to be made according to the permit. Enter the actual number of times the measurement was made in the space above the shaded area.

Sample Type: The shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.

Signature: This report must be signed in accordance with Rule 62-620.303, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comment and Explanation of Any Violations: Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area.

PART B . DAILY SAMPLE RESULTS

MAY-09-2006

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Daily Monitoring Results: Transfer all analytical data from your facility's laboratory or a contract laboratory's data sheets for all day(s) that samples were collected. Record the data in the units indicated. Table 1 in Chapter 62160, F.A.C., contains a complete list of all the data qualifier codes that your laboratory may use when reporting analytical results. However, when transferring numerical results onto Part B of the DMR, only the following data qualifier codes should be used and an explanation provided where appropriate.

CODE	DESCRIPTION/INSTRUCTIONS
<	The compound was analyzed for but not detected.
A	Yalue reported is the mean (average) of two or more determinations.
J	Estimated value, value not accurate.
Q	Sample held beyond the actual holding time.
Y	Laboratory analysis was from an unpreserved or improperly preserved sample.

Add the results to get the Total and divide by the number of days in the month to get the Monthly Average.

Plant Staffing: List the name, certificate number, and class of all state certified operators operating the facility during the monitoring period. Use additional sheets as necessary.

PART D - GROUND WATER MONITORING REPORT

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the date on this report were collected and analyzed. Date Sample Obtained: Enter the date the sample was taken. Also, check whether or not the well was purged before sampling.

Time Sample Obtained: Enter the time the sample was taken.

Sample Measurement: Record the results of the analysis. If the result was below the minimum detection limit, indicate that

Detection Limits: Record the detection limits of the analytical methods used.

Analysis Method: Indicate the analytical method used. Record the method number from Chapter 62-160 or Chapter 62-601, F.A.C., or from other sources.

Sampling Equipment Used: Indicate the procedure used to collect the sample (e.g. airlift, buckerbailer, centrifugal pump, etc.)

Samples Filtered: Indicate whether the sample obtained was filtered by laboratory (L), filtered in field (F), or unfiltered (N).

Signature: This report must be signed in accordance with Rule 62-620.105, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comments and Explanation: Use this space to make any comments on or explanations of results that are unexpected. If more space is needed, reference all attachments in this area.

SPECIAL INSTRUCTIONS FOR LIMITED WET WEATHER DISCHARGES

Flow (Limited Wet Weather Discharge): Eater the measured average flow rate during the period of discharge or divide gallons discharged by duration of discharge (converted into days). Record in million gattons per day (MGD).

Flow (Upstream): Enter the average flow rate in the receiving stream upstream from the point of discharge for the period of discharge. The average flow rate can be calculated based on two measurements; one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit.

Actual Stream Dilution Ratio: To calculate the Actual Stream Dilution Ratio, divide the average upstream flow rate by the average discharge flow rate. Enter the Actual Stream Dilution Ratio accurate to the nearest 0.1.

No. of Days the SDF > Stream Dilution Ratio: For each day of discharge, compare the minimum Stream Dilution Factor (SDF) from the permit to the calculated Stream Dilution Ratio. On Part B of the DMR, enter an asterisk (*) if the SDF is greater than the Stream Dilution Ratio on any day of discharge. On Part A of the DMR, and up the days with an "*" and record the total number of days the Stream Dilution Factor was greater than the Stream Dilution Ratio.

CRODs: Enter the average CRODs of the reclaimed water discharged during the period shown in duration of discharge.

TKN: Enter the average TKN of the reclaimed water discharged during the period shown in duration of discharge.

Actual Rainfall: Enter the actual rainfall for each day on Part B. Enter the actual cumulative rainfall to date for this calendar year and the actual total mouthly rainfall on Part A. The cumulative rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January I of the current year through the month for which this DMR contains data.

Rainfall During Average Rainfall Year: On Part A, enter the total monthly rainfall during the average rainfall year and the cumulative rainfall for the average rainfall year. The cumulative rainfall for the average rainfall year from lanuary through the month for which this DMR contains data.

No. of Days LWWD Activated During Calendar Year: Enter the cumulative number of days that the limited wet weather discharge was activated since January 1 of the current year.

Reason for Discharge: Attach to the DMR a brief explanation of the factors contributing to the need to activate the limited wet weather discharge.

UTILITIES, INC. OF SANDALHAVEN

AN AFFILIATE OF UTILITIES, INC.

200 WEATHERSFIELD AVENUE
ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-5440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

June 3, 2005

Mr. Keith Kleinmann
Environmental Manager
Department of Environmental Protection
South District
P.O. Box 2549
Fort Meyers, Florida 33902-2549

Re:

Sandalhaven WWTP

FLA014053

Dear Mr. Kleinmann:

Please find listed below the responses concerning the file review and field inspection of the Sandalhaven WWTP conducted by your Department personnel on April 14, 2005.

 STATEMENT: The Department found that the required permitted information was not properly recorded on the discharge monitoring report (DMR). The department is issuing a corrected DMR form that allows the operator to report flows for the two discharge sites, OTH-IA and OTH-IB. Please see enclosures.

RESPONSE: Department personnel provided the Sandalhaven WWTP operator a revised DMR by mail on approximately May 30, 2005. A revised DMR for April 2005 was mailed to your Department on June 2, 2005. Utilities, Inc. requests an electronic copy in a word document of the revised DMR.

 STATEMENT: Please submit to the Department an updated copy of the reuse protocol indicating the correct turbidity alarm set points. The June 18, 2001 reuse protocol indicated a 5.0 NTU alarm set point for turbidity.

RESPONSE: Attached with this correspondence is the Revised Operating Protocol dated October 10, 2001. Please note under ACCEPTABILITY CRITERIA -TURBIDITY that "the proposed set-point for alarm will be 3.0 NTUs and diversion of the effluent will also be when the turbidity exceeds 3.0 NTUs." Utilities, Inc. of Sandalhaven will verify that the set point is set at this value.

If you have any questions, please contact Richard Retz at the telephone number or address listed on the letterhead or by e-mail at rretz@utilities-usa.com.

Very Truly Yours, UTILITIES, INC. OF SANDALHAVEN

Michael T. Dunn Regional Manager

ec: Richard Retz., Assistant Operations Manager

Patrick Flynn, Regional Director

cc: Scott Stewart, Area Manager

Page 1 of 1 \\\100.0.4.10\Operations\19\2\690\resp \tr to 041405 inspect.doc

June 2, 2005



Department of Environmental Protection

South District P.O. Box 2549 Fort Myers, Floride 33902-2549 Ph. (239) 332-8975 Fex (239) 332-8969 College M. Castille Secretary

SENT VIA ELECTRONIC MAJI

Mr. Patrick Flynn
Regional Director
Utilities, Inc. of Florida
200 Weathersfield Avenue
Altatmonte Springs, FL 32714
Emeil: floride@utiliesinc-usa.com

RE:

Highlands County-DW Lake Placid Utilities aka Sun-n-Lakes of Lake Placid FLA014386

Dear Mr. Flynn:

A file review and a field inspection of the above referenced WWTP on May 5, 2005 indicate that you may be in violation of Chapter 403, Florida Statutes and the rules promulgated thereunder. Department personnel observed the following:

- The above referenced permit expires August 29, 2005. An application to renew the permit should have been submitted no later than March 2, 2005. Florida Administrative Code (F.A.C.) Rule 62-620.410(5) states an applicant shall apply to the Department to renew an existing wastewater permit at least 180 days before the expiration date of the existing permit.
- 2. A review of the Discharge Monitoring Reports (DMRs) revealed that the August and September 2004 DMRs reported total residual chlorine (TRC) violations of 0.0 and 0.4 milligrams per liter (mg/L) respectively. F.A.C. Rule 62-600.440(4)b requires a total chlorine residual of at least 0.5 mg/L to be maintained after at least 15 minutes contact time at peak hourly flow:
- 3. The lift station lid and power panel was not locked. F.A.C. Rule 62-604.400(2)(d) states that pumping stations shall be enclosed with a fence or otherwise designed with appropriate features that discourage the entry of animals and unauthorized persons.

Continued . . .

"More Protection, Less Process"

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Mr. Flynn June 2, 2005 Page 2 of 2

You are advised that any activity that may contribute to violations of the above described statutes and rules should cease immediately. Continued operation of a facility in violation of state statutus or rules may result in liability for damages and restoration, and the judicial imposition of civil penalties pursuant to Sections 403.141 and 403.161, Florida Statutes.

Please notify the Department in writing within 15 days as to what actions you intend to take in order to address these deficiencies.

If you have any questions, please do not hesitate to contact Doug Wells at (239) 332-6975, ext. 108. Your cooperation is appreciated.

Sincerely,

Keith Kleinmann Environmental Manager

KK/WDW/mv

CC: Pugh Utilities, Operator

Allen Slater, FRWA (allen.slater@frwa.net)

Rick Retz, Utilities Inc. (Lretz@utilitiesInc-usa.com)

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LAKE PLACID UTILITIES, INC.

AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS. FLORIDA 32714



CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

June 16, 2005

Mr. Doug Wells
Department of Environmental Protection
South District
P.O. Box 2549
Fort Meyers, Florida 33902-2549

Re: Lake Placid Utilities WWTP
File Review and Field Inspection

FLA014386

Dear Mr. Wells:

Please find listed below the responses concerning the file review and field inspection of the Lake Placid Utilities, Inc. WWTP conducted by your Department personnel on May 5, 2005. Responses are presented using the same numbering system presented in the Department's letter dated June 2, 2005.

- 1. The operating permit renewal application was mailed before the March 2, 2005 deadline. A copy of the transmittal letter is attached.
- 2. The contract operating service was contacted for an explanation of the chlorine residual deficiencies occurring in August and September. This occurred during the time periods that Hurricane Charley and Jeanne swept through the area. A copy of their explanation is attached.
- 3. The lift station lid and power panel lids have been locked.

Sincerely

LAKE PLACID UTILITIES, INC.

Michael Dunn, P.E. Regional Manager

Ec: Richard Retz

Patrick Flynn

Cc: Scott Stewart

Page 1 of 2 Document 1

UTILITIES INC OF FL

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Pugh Utilities

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Pugh Utilities Service, Inc. 760 Henscratch Road Lake Placid, Florida 33852 (863) 465-6911

Rick Retz Utilities, Inc. of Florida 200 Weathersfield Ave. Aliamonte Springs, Florida 32714

June 13, 2005

Reference: Sun & Lakes of Lake Placid

Water and Wastewater Treatment Plant

Dear Mr. Retz.

Water Plant:

The following are the dates and readings of the generator at the water plant.

April 26, 2005 424.1 May 3, 2005 425.6 May 9, 2005 426.6 May 17, 2005 427.7 May 24, 2005 428.7 May 31, 2005 429.8 June 7, 2005 430.8

A copy of the logbook pages will be enclosed with this letter.

The MOR's DMR's and lab we have the following numbers for faxing:

(407) 869-6961, 468-3268 and (813) 626-1030.

The DMR's for the month of May are not finished. All information is faxed to your office as soon as all reports are ready.

In reference to the June 1, 2005 DEP letter, we have put a preventive maintenance plan in place at the water plant. The flushing program and valve exercise programs we do not do.

Wastewater Plant:

In reference to the June 2, 2005 DEP letter, item #2.

On August 14-16, 2005 a zero reading for chlorine was logged. During this time Hurricane Charlie had came through the area.

On September 27, 2005 a 0.4 reading for chlorine was logged. During this time Hurricane Jeanne had came through the area.

If you have any further questions please do not hesitate to call.

Lisa Holmes

Pugh Utilities

Enclosures

UTILITIES, INC. OF SANDALHAVEN

DOCKET NO.: 060285-SU

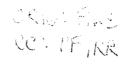
CHARLOTTE COUNTY

25.30-440 (6) Permits

Test Year Ended December 31, 2005



Department of Environmental Protection



Jeb Bush Governor South District P.O. Box 2549 Fort Myers, Florida 33902-2549

Colleen M. Castille Secretary

March 10, 2006

CERTIFIED MAIL NO.: 7005 0390 0005 8539 7971 RETURN RECEIPT REQUESTED

Patrick Flynn, Regional Director Utilities Inc. of Sandalhaven 200 Weathersfield Ave. Altamonte Springs, FL 32714

Re: Charlotte County - DW
RFI (Sandalhaven WWTP)
DEP Permit No: FLA014053
Application No.: FLA014053-007-DW1

Charlotte Harbor EMA

Dear Mr. Flynn:

Thank you for your application to substantially modify the wastewater permit for the above referenced wastewater treatment facility. However, the application is incomplete and pursuant to the provisions of Section 62-620.510, Florida Administrative Code (F.A.C.), please provide the information as requested in Attachment "A."

The application will remain incomplete until receipt of the requested information. Please refer to this letter in your response and submit two (2) copies of your response and supporting documentation. Also, it is important that your response to this letter be signed, sealed and dated by an engineer registered in the State of Florida.

Please note that pursuant to Rule 62-620.510(5), Florida Administrative Code, Section 120.60, Florida Statutes and Rule 62-4.055, Florida Administrative Code (F.A.C.), failure of an applicant to provide the timely requested information by the applicable deadline shall result in denial of the application. Please submit the requested information within 30 days of this letter.

Should you have any questions, please contact Ron Walters of this office at (239) 332-6975, extension 177.

Thank you for your continued cooperation.

Sincerely,

Charles Davault, P.E.

Wastewater Section Manager

CDR/RW/jli

Enclosures: Attachment "A"

Guide to Permitting Wastewater Facilities

Copies (with attachments) furnished to:

Stephan Romano, P.E.

Richard Orth, P.G., DEP—Fort Myers Keith Kleinmann, DEP—Fort Myers

Printed on recycled paper.

Attachment "A"

Additional Information Required Sandalhaven WWTP

Application No.: FLA014053-007-DW1

March 10, 2006

- 1. Item 6 in Section 1 of Form 2A is incomplete.
- 2. Reference Section 1, Item 7 of Form 2A: Here you indicate two reuse land application sites. You also indicate no ground water disposal by underground injection. This is inconsistent with the rest of your application and the Capacity Analysis Report.
- 3. Reference Section 3 of Form 2A: Complete a separate Section 3 for each current or proposed method of reuse or effluent disposal identified in Section 1, Item 7 of Form 2A. Separate descriptions of each reuse or effluent disposal system (e.g., R-001 and R-002 for land application, and U-001 for underground injection) are required even if the discharge or reuse system originates at the same treatment facility.
- 4. Items 9.a, 9.c and 9.d in Section 1 of Form 2A are incomplete.
- 5. The last four lines of Item 2 in Section 3.C of Form 2A are incomplete.
- 6. Reference Section 3.B, Item 8 of Form 2A: For each pond, provide the average loading rate expressed as inches per week.
- 7. Reference Section 8, Item 1.d of Form 2A: The information contained in Section 8, Item 1.d is inconsistent with the rest of your application. You indicate you have provided an Agricultural Use Plan or Dedicated Site Plan with your application. However, neither an Agricultural Use Plan nor a Dedicated Site Plan was provided.
- 8. Please provide a reclaimed water or effluent analysis report (DEP Form 62-620.910(15) http://www.dep.state.fl.us/water/wastewater/forms/pdf/620_15_.pdfof) for the effluent discharged to the restricted access spray site.
- 9. Please provide a reuse feasibility study to include all or a portion of the proposed 0.500 MGD disposal capacity.
- 10. Are the on-site existing wastewater treatment ponds (pond 2, pond 3, pond 4 and sedimentation ponds) scheduled to be abandoned or converted to additional reject storage, storage for mechanical integrity testing of the injection well or reuse disposal? If the ponds are to remain, please provide new design details of the ponds along with a mounding analysis if the ponds are proposed to be unlined or configuration will change dramatically.
- 11. Please provide a schedule and proposed procedure of abandonment of the existing ground water monitoring wells when the percolation ponds are taken offline or abandoned.
- 12. <u>Reference the Process Configuration Diagram (Figure 4) that you have provided</u>: Revise the diagram. Show <u>all</u> the <u>existing</u>, <u>proposed</u>, and <u>intermediate</u> sample locations for **influent and effluent**.
- 13. Please describe how flow through the plant is presently being measured. Also describe how flow through the plant will be measured <u>after</u> the proposed USBF plant is constructed and operating.
- 14. <u>Reference your application's Table of Contents</u>: Condition number V.5 of your current DEP permit requires a detailed **Operation and Maintenance Performance Report** prepared in accordance with the requirements of Rule 62-600.735, F.A.C. You did not include a detailed Operation and Maintenance Performance Report in your application package.

Attachment "A"

Additional Information Required Sandalhaven WWTP Application No.: FLA014053-007-DW1 March 10, 2006

- 15. The **Preliminary Design Report** was reviewed. The information submitted in inadequate for a Preliminary Design Report. Please refer to <u>Guide to Permitting Wastewater Facilities</u> (copy enclosed). Please use the guide and provide the information as outlined. Also provide design calculations.
- 16. Reference Section 2, Item 5 of Form 2A: You indicate the plant is designed for Class I reliability. Please provide a plant schematic flow diagram that affirmatively demonstrates that the plant will contain all the design features, equipment, piping, valves, controlled diversion, unit operation bypass, backup pumps, and redundancy necessary for Class I reliability. For guidance, refer to the EPA document entitled "Design Criteria for Mechanical, Electrical, and Fluid System and Component Reliability-MCD-05" referenced in Rule 62-600.300(2)(L), F.A.C.
- 17. Indicate where at the wastewater treatment plant site the annual sludge sample is collected.
- 18. The Reuse Operating Protocol was reviewed. The protocol is deficient and does not meet the requirements of Rules 62-610.320(6)(d) and (e), F.A.C., and Rules 62-610.463(1) and (2), F.A.C.
 - a. A turbidity diversion set point of 2.0 NTU or less is required, unless you can provide monitoring data to justify an increase in NTUs.
 - b. The total residual chlorine diversion set point must be at least 1.5 mg/l.
 - c. During equipment malfunction, manual samples must be collected every fifteen (15) minutes unless there is backup on-line continuous monitoring equipment in place.
 - d. The protocol must describe the procedure employed to reduce turbidity or increase chlorine residual when reclaimed water of substandard quality is being generated (i.e., a turbidity level greater than 2.0 NTU or a total residual chlorine level less than 1.5 mg/l at the location of continuous monitoring).
 - e. The protocol must indicate the operator response time for alarm conditions.
 - f. All diversion valves, sample locations, and alarms must be clearly labeled at the wastewater treatment plant site.
 - g. All diversion valves must be tested routinely and in accordance with the manufacturer's instructions. Provisions for timely repair must be specified in the protocol.
 - h. The operator must record the <u>turbidity</u> and <u>chlorine residual readings when daily samples for total suspended solids (TSS) and fecal coloform are collected.</u>
 - i. Additional reliability features must be in place (e.g., automatic diversion system to manual diversion alternate disposal system when the operator leaves the wastewater treatment plant site).
 - j. The protocol must include provisions for routine maintenance of continuous monitoring equipment (e.g., the cleaning of turbidity monitoring equipment lenses, etc.). Equipment must be maintained in accordance with the manufacturer's operation and maintenance instructions.

Attachment "A"

Additional Information Required Sandalhaven WWTP

March 10, 2006

Application No.: FLA014053-007-DW1

- k. The continuous monitoring equipment must be calibrated by trained, authorized persons before equipment installation, each time the instruments are taken off-line, after preventative maintenance activity, and immediately after determining that the chlorine residual or turbidity levels are off by greater than 20% of the calibrated instrument reading. Calibration must conform to wastewater sampling standard operating procedures contained in DEP-SOP-001/01, FT 1900 and FT 2000 (refer to http://www.dep.state.fl.us/labs/qa/sops.htm).
- 1. Daily checks of equipment are required. Daily checks must be conducted and documented in accordance with the wastewater sampling standard operating procedures contained in DEP-SOP-001/01, FT 1990.
- m. The protocol must contain a schematic or site plan (depict all the unit processes from the wastewater treatment filters to the reuse system), clearly identifying sampling locations, location of alarms and valves for diversion (automatic diversion valves and manual diversion valves), and location of automatic monitoring equipment.
- n. Include the name of the automatic monitoring equipment's manufacturer(s) in the protocol.
- o. Include in the protocol, a copy of the automatic monitoring equipment manufacturer's specifications for sample flow through, calibration frequency and factory checks of instruments.
- p. Each time a diversion occurs because of the on-line monitoring equipment, the return of reclaimed water to the public access reuse disposal system can only take place after satisfactory review of what caused the diversion to occur. After the treatment process is corrected to produce reuse quality water, any portion of the reuse disposal system that may have been contaminated due to the diversion <u>must be flushed</u>. A detailed description of the flushing process must be included in the protocol. Also specify volume or time span of flushing necessary to ensure contaminated water is **not** discharged to the public access reuse disposal system.
- 19. The Capacity Analysis Report does not meet all the requirements of Rule 62-600.405, Florida Administrative Code. Please provide a Capacity Analysis Report that meets the requirements of Rule 62-600.405, Florida Administrative Code:
 - a. Revise the Capacity Analysis Report in accordance with the requirements of Rule 62-600.405(6), F.A.C. In **Table 1**, include the Monthly Average Daily Flow, Three-Month Average Daily Flow, and Annual Average Daily Flow for the **past ten years** of historical data (i.e., from January 1996 through December 2005).
 - b. Incorporate the past ten years of historical data into your calculations of the future flows anticipated from year 2006 through at least year 2016.
 - c. Revise **Figures 1, 2, and 3** of the Capacity Analysis Report in accordance with the requirements of Rule 62-600.405(6), F.A.C. Incorporate the **past ten years** of historical data (i.e., from January 1996 through December 2005). On the abscissa of each graph, adjust the origin to be (Jan-96, 0.000).
 - d. Verify the totals shown in **Table 2**.



Department of **Environmental Protection**

leb Bush Governor

South District P.O. Box 2549 Fort Myers, Florida 33902-2549

(941) 332-6975

David B. Struhs Secretary

STATE OF FLORIDA NOTICE OF PERMIT ISSUANCE

CERTIFIED MAIL No.: 7000 1670 0005 5300 2529 RETURN RECEIPT REQUESTED

In the matter of an Application for Permit by:

Sandalhaven Utilities, Inc. Mr. Donald Rasmussen, Vice President 200 Weathersfield Avenue Altamonte Springs, FL 32714

Charlotte County - DW Sandalhaven WWTP

DEP File Nos. FLA014053-004-DW2P and

FLA014053-005-DW2MR

Charlotte Harbor EMA

Enclosed is Permit Number FLA014053 to operate the referenced wastewater treatment facility and reclaimed water disposal system. This permit is issued under Section 403.087, of the Florida Statutes.

A person whose substantial interests are affected by the Department's proposed permitting decision may petition for an administrative hearing in accordance with sections 120.569 and 120.57 of the Florida Statutes, or all parties may reach a written agreement on mediation as an alternative remedy under section 120.573 before the deadline for filing a petition. Choosing mediation will not adversely affect the right to a hearing if mediation does not result in a settlement. The procedures for petitioning for a hearing are set forth below, followed by the procedures for pursuing mediation.

The petition must contain the information set forth below and must be filed (received) in the Department's Office of General Counsel, 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida, 32399-3000. Petitions filed by the permit applicant or any of the parties listed below must be filed within fourteen days of receipt of this notice of intent. Petitions filed by any other person must be filed within fourteen days of publication of the public notice or within fourteen days of receipt of this notice of intent, whichever occurs first. A petitioner must mail a copy of the petition to the applicant at the address indicated above, at the time of filing. The failure of any person to file a petition (or a request for mediation, as discussed below) within the appropriate time period shall constitute a waiver of that person's right to request an administrative determination (hearing) under sections 120.569 and 120.57 of the Florida Statutes, or to intervene in this proceeding and participate as a party to it. Any subsequent intervention will be only at the discretion of the presiding officer upon the filing of a motion in compliance with rule 28-5.207 of the Florida Administrative Code.

A petition must contain the following information:

- (a) The name, address, and telephone number of each petitioner; the Department's permit identification number and the county in which the subject matter or activity is located;
- (b) a statement of how and when each petitioner received notice of the Department's action;

Page 1 of 3

"More Protection, Less Process"

- (c) a statement of how each petitioner's substantial interests are affected by the department's action;
- (d) a statement of the material facts disputed by the petitioner, if any;
- (e) a statement of facts that the petitioner contends warrant reversal or modification of the Department's action;
- (f) a statement of which rules or statutes the petitioner contends require reversal or modification of the Department's action; and
- (g) and a statement of the relief sought by the petitioner, stating precisely the action that the petitioner wants the Department to take.

Because the administrative hearing process is designed to formulate final agency action, the filing of a petition means that the Department's final action may be different from the position taken by it in this notice of intent. Persons whose substantial interests will be affected by any such final decision of the Department on the application have the right to petition to become a party to the proceeding, in accordance with the requirements set forth above.

Any person may elect to pursue mediation by reaching a mediation agreement with all parties to the proceeding (which includes the Department and any person who has filed a timely and sufficient petition for a hearing) and by showing how the substantial interests of each mediating party are affected by the Department's action or proposed action. The agreement must be filed in (received by) the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida 32399-3000, by the same deadline as set forth above for the filing of a petition.

The agreement to mediate must include the following:

- (a) the names, addresses, and telephone numbers of any persons who may attend the mediation;
- (b) the name, address, and telephone number of the mediator selected by the parties, or a provision for selecting a mediator within a specified time;
- (c) the agreed allocation of the costs and fees associated with the mediation;
- (d) the agreement of the parties on the confidentiality of discussions and documents introduced during mediation;
- (e) the date, time, and place of the first mediation session, or a deadline for holding the first session, if no mediator has yet been chosen;
- (f) the name of each party's representative who shall have authority to settle or recommend settlement;
- (g) either an explanation of how the substantial interests of each mediating party will be affected by the action or proposed action addressed in this action or a statement clearly identifying the petition for hearing that each party has already filed, and incorporating it by reference; and
- (h) the signatures of all parties or their authorized representatives.

As provided in section 120.573 of the Florida Statutes, the timely agreement of all parties to mediate will toll the time limitations imposed by section 120.569 and 120.57 for requesting and holding an administrative hearing. Unless otherwise agreed by the parties, the mediation must be concluded within sixty days of the execution of the agreement. If mediation results in settlement of the administrative dispute, the Department must enter a final order incorporating the agreement of the parties. Persons whose substantial interests will be affected by such a modified final decision of the Department have a right to petition for a hearing only in accordance with the requirements for such petitions set forth above, and must therefore file their petitions within fourteen days of receipt of this notice. If mediation terminates without settlement of the dispute, the Department shall notify all parties in writing that the administrative hearing processes under section 120.569 and 120.57 remain available for disposition of the dispute, and the notice will specify the deadlines that then will apply for challenging the agency action and electing remedies under those two statutes.

This action is final and effective on the date filed with the Clerk of the Department unless a petition (or request for mediation) is filed in accordance with the above. Upon the timely filing of a petition (or request for mediation) this order will not be effective until further order of the Department.

Any party to the order has the right to seek judicial review of the order under section 120.68 of the Florida Statutes, by the filing of a notice of appeal under rule 9.110 of the Florida Rules of Appellate Procedure with the Clerk of the Department in the Office of General Counsel, 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida, 32399-3000; and by filing a copy of the notice of appeal accompanied by the applicable filing fees with the appropriate district court of appeal. The notice of appeal must be filed within 30 days from the date when the final order is filed with the Clerk of the Department.

Executed in Fort Myers, Florida.

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

Richard W. Cantrell

Director of

District Management

CERTIFICATE OF SERVICE

The undersigned duly designated deputy agency clerk hereby certifies that this NOTICE OF PERMIT ISSUANCE and all copies were mailed by certified mail before the close of business on August 14, 2001 to the listed persons.

Clerk Stamp

FILING AND ACKNOWLEDGMENT

FILED, on this date, under section 120.52(11), Florida Statutes, with the designated Department Clerk, receipt of which is hereby acknowledged.

RWC/MHR/jli Copies furnished to:

> Patrick C. Flynn David A. Weber, P.E. Keith Kleinmann, FDEP



Department of Environmental Protection

Jeb Bush Governor South District P.O. Box 2549 Fort Myers, Florida 33902-2549

David B. Struhs Secretary

STATE OF FLORIDA DOMESTIC WASTEWATER FACILITY PERMIT

PERMITTEE:

PERMIT NUMBER:

FLA014053

PA FILE NUMBER:

FLA014053-004-DW2P and

FLA014053-005-DW2MR

ISSUANCE DATE: EXPIRATION DATE: August 14, 2001 August 13, 2006

Utilities Incorporated of Sandalhaven

RESPONSIBLE AUTHORITY:

Mr. Donald Rasmussen Vice President 200 Weathersfield Avenue Altamonte Springs, FL 32714

(407) 869-1919

FACILITY:

Sandalhaven WWTP 6811 Placida Road Englewood, FL 33533 Charlotte County

Latitude: 26° 52' 23" N

Longitude: 82° 18' 22" W

This permit is issued under the provisions of Chapter 403, Florida Statutes, and applicable rules of the Florida Administrative Code. The above named permittee is hereby authorized to operate the facilities shown on the application and other documents attached hereto or on file with the Department and made a part hereof and specifically described as follows:

TREATMENT FACILITIES:

Operate an existing 0.150 MGD annual average daily flow, AADF, extended aeration domestic wastewater treatment plant consisting of a surge tank, dual pumps, 150,000 gallons of aeration volume, dual blower-motor assemblies, clarifier, dual backwashable filters, dual chlorine contact chambers, lime mix tank, aerobic digester, blower-motor assembly for the digester, continuous monitoring equipment for chlorine residual and turbidity, automatic valving for diversion of reject water to on site ponds, a 0.100 MG lined storage pond, a transfer pumping station and associated piping to deliver water from the on site lined storage pond to an isolated reuse storage lake at Wildflower Country Club Golf Course.

REUSE:

Land Application: An existing 0.150 mgd annual average daily flow (AADF) permitted capacity rapid infiltration basin system (R-001). R-001 consists of three evaporation/percolation ponds (32,670 sq. ft. bottom area). These ponds are located approximately at latitude 26° 52′ 23″ N, longitude 82° 18′ 22″ W.

Land Application: An existing 0.100 mgd annual average daily flow (AADF) permitted capacity slow-rate public access (R-002) consisting of a 100,000 gallons on site lined storage pond for reuse water. The reuse water is pumped from the treatment facility's storage pond to an isolated (no overflow structure) lake (Identified as reuse storage lake) located at the Wildwood for country Club Golf Course. From this isolated reuse storage lake, it can be pumped and introduced into the golf course irrigation system or pumped to a second clay lined isolated lake (Identified as High Lake) from where it also can be introduced into the golf course irrigation system. The golf course irrigation system can also be supplied by the main irrigation lake which is supplied by the on site storm water management system. This main irrigation lake is back flow protected through its irrigation pump's check valve.

IN ACCORDANCE WITH: The limitations, monitoring requirements and other conditions set forth in Pages 1 through 26 of this permit.

Page 1 of 26
"More Protection, Less Process"

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FACILITY: PERMITTEE: Sandalhaven WWTP

Utilities Incorporated of Sandalhaven

PERM., NUMBER:

FLA014053

PA FILE NUMBER: FLA014053-004-DW2P and

FLA014053-005-DW2MR

I. RECLAIMED WATER AND EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS

A. Reuse and Land Application Systems

1. During the period beginning on the issuance date and lasting through the expiration date of this permit, the permittee is authorized to direct reclaimed water to Reuse System identified as WAFR System I.D. number R-001. Such reclaimed water shall be limited and monitored by the permittee as specified below:

	Reclaimed Water Limitations									
Parameter	Units	Max/Min	Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequency	Sample Type	Monitoring Location Site Number	Notes
BOD, Carbonaceous 5 day, 20C	mg/l	Maximum	20.0	30.0	45.0	60.0	Every Two Weeks	8-hour flow proportioned composite	EFA-1	
Solids, Total Suspended	mg/l	Maximum	20.0	30.0	45.0	60.0	Every Two Weeks	8-hour flow proportioned composite	EFA-I	
рН	s.u.	Range	-	-	-	6.0 to 8.5	5 Days/Week	Grab	EFA-1	
Coliform, Fecal	#/100ml	Maximum		See Permit Co	ndition I.A.4.		Every Two Weeks	Grab	EFA-1	
Total Residual Chlorine (For Disinfection)	mg/l	Minimum			-	0.5	5 Days/Week	Grab	EFA-1	See Cond.I.A.5
Nitrogen, Nitrate, Total (as N)	mg/l	Maximum	-	-	-	12.0	Every Two Weeks	8-hour flow proportioned composite	EFA-1	

FACILITY:

Sandalhaven WWTP

described below:

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER:

FLA014053 PA FILE NUMBER: FLA014053-004-DW2P and

FLA014053-005-DW2MR

2. Reclaimed water samples shall be taken at the monitoring site locations listed in Permit Condition I. A. 1. and as

Monitoring Location Site Number	Description of Monitoring Location
EFA-1	Sample taken after disinfection and at the discharge of the chlorine contact chamber.

- 3. Grab samples shall be collected during periods of minimal treatment plant pollutant removal efficiencies or maximum hydraulic and/or organic loading. [Rule 62-600.740(1)(a) 2.]
- 4. The arithmetic mean of the monthly fecal coliform values collected during an annual period shall not exceed 200 per 100 mL of reclaimed water sample. The geometric mean of the fecal coliform values for a minimum of 10 samples of reclaimed water, each collected on a separate day during a period of 30 consecutive days (monthly), shall not exceed 200 per 100 mL of sample. No more than 10 percent of the samples collected (the 90th percentile value) during a period of 30 consecutive days shall exceed 400 fecal coliform values per 100 mL of sample. Any one sample shall not exceed 800 fecal coliform values per 100 mL of sample. Note: To report the 90th percentile value, list the fecal coliform values obtained during the month in ascending order. Report the value of the sample that corresponds to the 90th percentile (multiply the number of samples by 0.9). For example, for 30 samples, report the corresponding fecal coliform number for the 27th value of ascending order. [62-610.510, 8-8-99 and 62-600.440(4)(c), 12-24-96]
- A minimum of 0.5 mg/L total residual chlorine must be maintained for a minimum contact time of 15 minutes based on peak hourly flow. [62-610.510, 8-8-99 and 62-600.440(4)(b), 12-24-96]

FACILITY:

Sandalhaven WWTP

PERMITTEE: Utilities Incorporated of Sandalhaven

PERMII NUMBER:

FLA014053

PA FILE NUMBER:

FLA014053-004-DW2P and FLA014053-005-DW2MR

6. During the period beginning on the issuance date and lasting through the expiration date of this permit, the permittee is authorized to direct reclaimed water to Reuse System identified as WAFR I.D. number R-002. Such reclaimed water shall be limited and monitored by the permittee as specified below:

	Reclaimed Water Limitations				Monitoring Requirements					
Parameter	Units	Max/Min	Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequency	Sample Type	Monitoring Location Site Number	Notes
BOD, Carbonaceous 5 day, 20C	mg/l	Maximum	20.0	30.0	45.0	60.0	Every Two Weeks	8-hour flow proportioned composite	EFA-1	
Solids, Total Suspended	mg/l	Maximum	-	-	-	5.0	4 Days/Week	Grab	EFB-1	
рН	s.u.	Range	-	-	-	6.0 to 8.5	5 Days/Week	Grab	EFA-1	
Coliform, Fecal	#/100ml	Maximum	See Permit Condition I.A.9.			4 Days/Week	Grab	EFA-1		
Total Residual Chlorine (For Disinfection)	mg/l	Minimum	-	-	-	1.0	Continuous	Grab	EFA-1	See Cond.I.A.10
Turbidity	ntus	Maximum	See Permit Condition I.A.11.			Continuous	Meter	EFB-1		

FACILITY:

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER:

FLA014053

PA FILE NUMBER:

FLA014053-004-DW2P and FLA014053-005-DW2MR

7. Reclaimed water samples shall be taken at the monitoring site locations listed in Permit Condition I. A. 6. and as described below:

Monitoring Location Site Number	Description of Monitoring Location
EFB-1	Sample taken after filtration and prior to disinfection in the chlorine contact chamber (Filter back wash supply basin).
EFA-1	Sample taken after disinfection and at the discharge of the chlorine contact chamber.

- 8. Grab samples shall be collected during periods of minimal treatment plant pollutant removal efficiencies or maximum hydraulic and/or organic loading. [Rule 62-600.740(1)(a) 2.]
- 9. Over a 30 day period, 75 percent of the fecal coliform values (the 75th percentile value) shall be below the detection limits. Any one sample shall not exceed 25 fecal coliform values per 100 mL of sample. Any one sample shall not exceed 5.0 milligrams per liter of total suspended solids (TSS) at a point before application of the disinfectant. Note: To report the 75th percentile value, list the fecal coliform values obtained during that month in ascending order. Report the value of the sample that corresponds to the 75th percentile (multiply the number of samples by 0.75). For example, for 30 samples, report the corresponding fecal coliform value for the 23rd value of ascending order. [62-600.440(5)(f), 12-24-96]
- 10. The minimum total chlorine residual shall be limited as described in the approved operating protocol, such that the permit limitation for fecal coliform bacteria will be achieved. In no case shall the total chlorine residual be less than 1.0 mg/L. [62-600.440(5)(b), 12-24-96; 62-610.460(2), 8-8-99; and 62-610.463(2), 8-8-99]
- 11. The maximum turbidity shall be limited as described in the approved operating protocol, such that the permit limitations for total suspended solids and fecal coliforms will be achieved. [62-610.463(2), 8-8-99]

FACILITY: PERMITTEE: Sandalhaven WWTP

Utilities Incorporated of Sandalhaven

PERMII NUMBER:

FLA014053

PA FILE NUMBER:

FLA014053-004-DW2P and FLA014053-005-DW2MR

B. Other Limitations and Monitoring and Reporting Requirements

1. During the period beginning on the issuance date and lasting through the expiration date of this permit, the treatment facility shall be limited and the influent, WAFR System I.D. number R-001 and R-002, monitored by the permittee as specified below:

				Limita	tions					
Parameter	Units	Max/Min	Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequency	Sample Type	Monitoring Location Site Number	Notes
Flow (Rapid Rate Ponds)	mgd	Maximum	0.15	-	-	-	5 Days/Week	Recording flow meters and totalizers	OTH-1B	See Cond.I.B.4
Flow (Reuse)	mgd	Maximum	0.10	-	-	-	5 Days/Week	Recording flow meters and totalizers	OTH-1A	See Cond.1.B.4
BOD, Carbonaceous 5 day, 20C	m <i>g/</i>]	Maximum	-	Report	-	-	Every Two Weeks	8-hour flow proportioned composite	INF-1	See Cond.I.B.3
Solids, Total Suspended	mg/l	Maximum	-	Report	-	-	Every Two Weeks	8-hour flow proportioned composite	INF-1	See Cond.I.B.3

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER: PA FILE NUMBER:

FLA014053

FLA014053-004-DW2P and

FLA014053-005-DW2MR

2. Samples shall be taken at the monitoring site locations listed in Permit Condition I. B. 1 and as described below:

Monitoring Location Site Number	Description of Monitoring Location
INF-1	Influent sample taken at the surge pump discharge.
OTH-1A	Continuous recording flow meter located in equipment room. This measures flow at the effluent weir of the chlorine contact chamber. Records what goes to reuse.
OTH-1B	Continuous recording flow meter located in equipment room. This measures flow at the effluent weir of the chlorine contact chamber. Records what goes to the evaporation/percolation ponds.

- 3. Influent samples shall be collected so that they do not contain digester supernatant or return activated sludge, or any other plant process recycled waters. [62-601.500(4), 12-24-96]
- 4. Recording flow meters and totalizers shall be utilized to measure flow and calibrated at least annually. [62-601.200(17) and .500(6), 12-24-96]
- 5. The treatment facilities shall be operated in accordance with all approved operating protocols. Only reclaimed water that meets the criteria established in the approved operating protocol may be released to system storage or to the reuse system. Reclaimed water that fails to meet the criteria in the approved operating protocols shall be directed to the on site evaporation/percolation ponds. The operating protocol shall be reviewed and updated periodically to ensure continuous compliance with the minimum treatment and disinfection requirements. Updated operating protocols shall be submitted to the Department for review and approval upon revision of the operating protocol and with each permit application. [62-610.320(6) and 62-610.463(2), 8-8-99]
- 6. Instruments for continuous on-line monitoring of total residual chlorine and turbidity shall be equipped with an automated data logging or recording device. [62-610.463(2) and .865(8)(d), 8-8-99]
- 7. Parameters which must be monitored as a result of a surface water discharge shall be analyzed using a sufficiently sensitive method in accordance with 40 CFR Part 136. Parameters which must be monitored as a result of a ground water discharge (i.e., underground injection or land application system) shall be analyzed in accordance with Chapter 62-601, F.A.C. [62-620.610(18), 3-2-00]
- 8. The permittee shall provide safe access points for obtaining representative influent, reclaimed water, and effluent samples which are required by this permit. [62-601.500(5), 12-24-96]
- 9. Monitoring requirements under this permit are effective on the first day of the second month following permit issuance. Until such time, the permittee shall continue to monitor and report in accordance with previously effective permit requirements, if any. During the period of operation authorized by this permit, the permittee shall complete and submit to the Department Discharge Monitoring Reports (DMRs) in accordance with the frequencies specified by the REPORT type (i.e., monthly, toxicity, quarterly, semiannual, annual, etc.) indicated on the DMR forms attached to this permit. Monitoring results for each monitoring period shall be submitted in accordance with the associated DMR due dates below.

FACILITY: PERMITTEE: Sandalhaven WWTP

Utilities Incorporated of Sandalhaven

PERMIT NUMBER: PA FILE NUMBER:

FLA014053

FLA014053-004-DW2P and

FLA014053-005-DW2MR

REPORT Type	Monitoring Period	Due Date
Monthly or	first day of month - last day of	28 th day of following month
Toxicity	month	
Quarterly	January 1 - March 30	April 28
	April 1 – June 30	July 28
	July 1 – September 30	October 28
	October 1 – December 31	January 28
Seminannual	January 1 – June 30	July 28
	July 1 – December 31	January 28
Annual	January 1 – December 31	January 28

DMRs shall be submitted for each required monitoring period including months of no discharge. The permittee shall make copies of the attached DMR form(s) and shall submit the completed DMR form(s) to the Department at the address specified in Permit Condition I.B. 13 by the twenty-eighth (28th) of the month following the month of operation.

[62-620.610(18), 3-2-00][62-601.300(1), (2), and (3), 12-24-96]

- 10. The permittee shall submit an Annual Reuse Report using DEP Form 62-610.300(4)(a)2. on or before January 1 of each year. [62-610.870(3), 8-8-99]
- 11. The permittee shall maintain an inventory of storage systems. The inventory shall be submitted to the Department at least 30 days before reclaimed water will be introduced into any new storage system. The inventory of storage systems shall be attached to the annual submittal of the Annual Reuse Report. [62-610.464(5), 8-8-99]
- 12. Unless specified otherwise in this permit, all reports and other information required by this permit, including 24hour notifications, shall be submitted to or reported to, as appropriate, the Department's South District Office at the address specified below:

South District Office P.O. Box 2549 Fort Myers, Florida 33902-2549

Phone Number - (941) 332-6975 FAX Number - (941) 332-6969

All FAX copies shall be followed by original copies. All reports and other information shall be signed in accordance with the requirements of Rule 62-620.305, F.A.C. [62-620.305, 10-23-00]

II. RESIDUALS MANAGEMENT REQUIREMENTS

- 1. The method of residuals use or disposal by this facility is land application and/or transport to AMS Residuals Management Facility, Facility I.D. No. FLA190284 or disposal in a Class I or II solid waste landfill.
- 2. The permittee shall be responsible for proper treatment, management, use, and land application or disposal of its residuals. [62-640.300(5), 3-30-98]
- 3. The permittee will not be held responsible for violations resulting from land application of residuals if the permittee can demonstrate that it has delivered residuals that meet the parameter concentrations and appropriate treatment requirements of this rule and the applier (e.g. hauler, contractor, site manager, or site owner) has legally agreed in writing to accept responsibility for proper land application of the residuals. Such an agreement shall state that the applier agrees, upon delivery of residuals that have been treated as required by Chapter 62-640, F.A.C.., that he will accept responsibility for proper land application of the residuals as required by Chapter

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER: PA FILE NUMBER:

FLA014053

FLA014053-004-DW2P and

FLA014053-005-DW2MR

62-640, F.A.C., and that the applier agrees that he is aware of and will comply with requirements for proper land application as described in the facility's permit. [62-640.300(5), 3-30-98]

- 4. The permittee shall not be held responsible for treatment, management, use, or land application violations that occur after its residuals have been accepted by a permitted residuals management facility with which the source facility has an agreement in accordance with Rule 62-640.880(1)(c), F.A.C., for further treatment, management, use or land application. [62-640.300(5), 3-30-98]
- 5. Disposal of residuals, septage, and other solids in a solid waste landfill, or disposal by placement on land for purposes other than soil conditioning or fertilization, such as at a monofill, surface impoundment, waste pile, or dedicated site, shall be in accordance with Chapter 62-701, F.A.C. [62-640.100(6)(k)] & 4, 3-30-98]
- 6. Land application of residuals shall be in accordance with the conditions of this permit, the approved Agricultural Use Plan(s), and the requirements of Chapter 62-640, F.A.C. [62-640, 3-30-98]
- 7. The domestic wastewater residuals for this facility are classified as Class B.
- 8. The permittee shall achieve Class B pathogen reduction by meeting the pathogen reduction requirements in section 503.32(b)(4) (Use of Processes Equivalent to PSRP) of Title 40 CFR Part 503, revised as of October 25, 1995. [62-640.600(1)(b), 3-30-98]
- 9. The permittee shall achieve vector attraction reduction by meeting the vector attraction reduction requirements in section 503.33(b)(1) (Reduce the mass of volatile solids by a minimum of 38%) and 503.33(b)(3) (Demonstrate vector attraction reduction with additional aerobic digestion in a benchscale unit) of Title 40 CFR Part 503, revised as of October 25, 1995. [62-640.600(2)(a), 3-30-98]
- 10. Treatment of liquid residuals or septage for the purpose of meeting the pathogen reduction or vector attraction reduction requirements set forth in Rule 62-640.600, F.A.C., shall not be conducted in the tank of a hauling vehicle. Treatment of residuals or septage for the purpose of meeting pathogen reduction or vector attraction reduction requirements shall take place at the permitted facility. [62-640.400(8), 3-30-98]
- 11. The permittee shall sample and analyze the Class A or Class B residuals to monitor for pathogen and vector attraction reduction requirements of Rule 62-640.600, F.A.C., and the parameters listed in the table below at least once every twelve (12) months.

Parameter	Ceiling Concentrations (Single Sample)	Cumulative Application Limits				
Total Nitrogen	(Report only) % dry weight	Not applicable				
Total Phosphorus	(Report only) % dry weight	Not applicable				
Total Potassium	(Report only) % dry weight	Not applicable				
Arsenic	75 mg/kg dry weight	36.6 pounds/acre				
Cadmium	85 mg/kg dry weight	34.8 pounds /acre				
Copper	4300 mg/kg dry weight	1340 pounds/acre				
Lead	840 mg/kg dry weight	268 pounds/acre				

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER: PA FILE NUMBER:

FLA014053

FLA014053-004-DW2P and FLA014053-005-DW2MR

Parameter	Ceiling Concentrations (Single Sample)	Cumulative Application Limits
Mercury	57 mg/kg dry weight	15.2 pounds/acre
Molybdenum	75 mg/kg dry weight	Not applicable
Nickel	420 mg/kg dry weight	375 pounds/acre
Selenium	100 mg/kg dry weight	89.3 pounds/acre
Zinc	7500 mg/kg dry weight	2500 pounds/acre
pН	(Report only) standard units	Not applicable
Total Solids	(Report only) %	Not applicable

(62-640.650(1), 62-640.700(1), 62-640.700(3)(b), and 62-640.850(3), 3-30-98)

- 12. Sampling and analysis shall be conducted in accordance with Title 40 CFR Part 503, section 503.8 and the U.S. Environmental Protection Agency publication <u>POTW Sludge Sampling and Analysis Guidance Document</u>, 1989. In cases where disagreements exist between Title 40 CFR Part 503, section 503.8 and the <u>POTW Sludge Sampling and Analysis Guidance Document</u>, the requirements in Title 40 CFR Part 503, section 503.8 will apply. (62-640.650(1), 62-640.700(1), 62-640.700(3)(b), and 62-640.850(3), 3-30-98)
- 13. Grab samples shall be used for pathogens and determinations of percent volatile solids. Composite samples shall be used for metals. [62-640.650(1)(e), 3-30-98]
- 14. Residuals shall not be land applied if a single sample result for any parameter exceeds the ceiling concentrations given in this permit. Residuals shall not be distributed and marketed if the monthly average of sample results for any parameter exceeds the Class AA parameter concentrations given in this permit. Monthly averages of parameter concentrations shall be determined by taking the arithmetic mean of all sample results for the month. [62-640.650(1)(f), 3-30-98]
- 15. The permittee shall submit the results of all residuals monitoring with the permittee's Discharge Monitoring Report under Chapter 62-601, F.A.C. The analytical results from each sampling event shall be submitted with the report for the month in which the sampling event occurs. [62-640.650(3)(a)&(e), 3-30-98]
- 16. Class B residuals shall not be used on unrestricted public access areas. Use of Class B residuals is limited to restricted public access areas such as agricultural sites, forests, and roadway shoulders and medians. [62-640.600(3)(b), 3-30-98]
- 17. Plant nursery use of Class B residuals is limited to plants which will not be sold to the public for 12 months after the last application of residuals. [62-640.600(3)(b)1., 3-30-98]
- 18. Use of Class B residuals on roadway shoulders and medians is limited to restricted public access roads. [62-640.600(3)(b)2., 3-30-98]
- 19. Food crops, feed crops, and fiber crops shall not be harvested for 30 days following the last application of Class B residuals. [62-640.600(3)(b)6.,3-30-98]
- 20. Food crops with harvested parts that touch the residuals/soil mixture and are totally above the land surface shall not be harvested for 14 months after the last application of Class B residuals. [62-640.600(3)(b)3., 3-30-98]

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER: PA FILE NUMBER:

FLA014053

FLA014053-004-DW2P and

FLA014053-005-DW2MR

21. Food crops with harvested parts below the surface of the land shall not be harvested for 20 months after application of Class B residuals when the residuals remain on the land surface for four months or longer before incorporation into the soil. [62-640.600(3)(b)4., 3-30-98]

- 22. Food crops with harvested parts below the surface of the land shall not be harvested for 38 months after application of Class B residuals when the residuals remain on the land surface for less than four months before incorporation into the soil. [62-640.600(3)(b)5., 3-30-98]
- 23. Animals shall not be grazed on the land for 30 days after the last application of Class B residuals. [62-640.600(3)(b)7., 3-30-98]
- 24. Sod which will be distributed or sold to the public or used on unrestricted public access areas shall not be harvested for 12 months after the last application of Class B residuals. [62-640.600(3)(b)8., 3-30-98]
- 25. The public shall be restricted from application zones for 12 months after the last application of Class B residuals. [62-640.600(3)(b), 3-30-98]
- 26. Residuals that do not meet the requirements of Chapter 62-640, F.A.C., for Class AA designation shall not be used for the cultivation of tobacco or leafy vegetables. [62-640.400(7), 3-30-98]
- 27. Current Agricultural Use Plan(s) identify residuals landspreading on the following sites:

	Site	App.	Site Location						
Site Name	Туре	Area	County	Latitude Longitud			le		
	(AG or LR)	(acres)		DD	MM	SS	DD	MM	SS
A. Taylor	AG	331.4	Marion	27	38	00	82	14	00
M.J. Ranch	AG	1783	Manatee	27	19	05	82	10	45

The wastewater treatment facility permittee shall apply for a minor permit revision on DEP Form 62-620.910(9) for new, modified, or expanded residuals land application sites. The facility's permit shall be revised to include the new or revised Agricultural Use Plan(s) prior to application of residuals to the new, modified, or expanded sites, unless all of the following conditions are met:

- a) The permittee notifies the Department within 24 hours that the site is being used;
- b) The site meets the site use restrictions of Rule 62-640.600(3), F.A.C, and the criteria for land application of residuals in Rule 62-640.700, F.A.C.;
- c) The permittee submits a new or revised Agricultural Use Plan for the site with a permit application in accordance with Rule 62-640.300(2), F.A.C., within 30 days of beginning use of the site;
- d) The permittee does not have another approved land application site, another approved disposal method (e.g. landfilling or incineration), or approved storage facilities available for use; and,
- e) The permittee demonstrates during permit application that application of additional residuals to an existing approved application site would have resulted in violation of Department rules, or was not possible due to circumstances beyond the permittee's control.

[62-640.300(2)&(3), 3-30-98]

- 28. Residuals application rates are limited to agronomic rates based on the site vegetation as identified in the Agricultural Use Plan. [62-640.750(2), 3-30-98]
- 29. Residuals shall be applied with appropriate techniques and equipment to assure uniform application over the application zone. [62-640.700(2)(c), 3-30-98]

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER:

FLA014053

FLA014053-005-DW2MR

PA FILE NUMBER: FLA014053-004-DW2P and

30. The spraying of liquid domestic wastewater residuals shall be conducted so that the formation of aerosols is minimized. [62-640.700(2)(d), 3-30-98]

- 31. Residuals storage facilities at land application sites shall be subject to applicable setback requirements for residuals application sites. Residuals stored at land application sites shall be stored in a manner that will not cause runoff or seepage from the residuals, objectionable odors, or vector attraction. Storage areas must be fenced or otherwise provided with appropriate features to discourage the entry of animals and unauthorized persons. At the time of application, the stored residuals must meet the parameter concentrations, pathogen and vector attraction reduction requirements, and cumulative application limits of this permit. Residuals storage facilities at land application sites may be used only for temporary storage of stabilized residuals for no more than 30 days during periods of inclement weather or to accommodate agricultural operations, or up to the period (not to exceed two years) specified in the Agricultural Use Plan. [62-640.700(2)(e), 3-30-98]
- 32. Residuals application sites shall be posted with appropriate advisory signs identifying the nature of the project area. [62-640.700(2)(f), 3-30-98]
- 33. The pH of the residuals soil mixture shall be 5.0 or greater at the time residuals are applied. At a minimum, soil pH testing shall be done annually. [62-640.700(5)(d), 3-30-98]
- 34. The permittee shall maintain records of application zones and application rates and shall make these records available for inspection within seven days of request by the Department, or delegated Local Program. The permittee shall maintain record items a. through e. below in perpetuity, and maintain record items f. through k. for five years:
 - a. Date of application of the residuals;
 - b. Location of the residuals application site as specified in the Agricultural Use Plan;
 - Identification of each application zone used by the permittee at the application site and the acreage of each zone:
 - d. Amount of residuals applied or delivered to each application zone;
 - e. Cumulative loading of each application zone;
 - f. The names of all other wastewater facilities using each of the application zones identified in item c.;
 - g. Method of incorporation (if any);
 - h. Measured pH of the residuals soil mixture at the time the residuals are applied (tested at least annually);
 - i. Unsaturated depth of soil above the water table level at the time of application;
 - j. Concentration of parameters in the residuals as required by this permit, and the date of last analysis; and
 - k. The results of any soil testing that is done under Rule 62-640.500(4)(a), F.A.C.

[62-640.650(2), 3-30-98]

- 35. The permittee shall submit an annual summary of residuals application activity to the South District Office on Department Form 62-640.210(2)(b) for all residuals applied during the period of January 1 through December 31. The summary for each year shall be submitted by February 19 of the following year. If more than one facility applies residuals to the same application zones, the summary must include a subtotal of each facility's contribution of residuals to the application zones. [62-640.650(3)(b), 3-30-98]
- 36. If residuals that are subject to the cumulative loading limitations of Rule 62-640.700(3), F.A.C., have been applied to an application zone, and the cumulative loading amount of one or more of the pollutants is not known, no further applications of residuals may be made to that application zone. [62-640.700(3)(f), 3-30-98]
- 37. A minimum unsaturated soil depth of two feet above the water table level is required at the time the residuals are applied to the soil. [62-640.700(6)(a), 3-30-98]
- 38. Residuals shall not be applied during rains that cause runoff from the site or when surface soils are saturated. [62-640.700(7)(a), 3-30-98]

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER: PA FILE NUMBER:

FLA014053

FLA014053-004-DW2P and

FLA014053-005-DW2MR

39. Land application of "other solids" as defined in Chapter 62-640, F.A.C., is only allowed if specifically addressed in the Agricultural Use Plan(s) approved for this facility. Land application of "other solids" is subject to Chapter 62-640, F.A.C., and the permit conditions that apply to land applied residuals. [62-640.860, 3-30-98]

- 40. If the permittee intends to accept residuals from other facilities, a permit revision is required pursuant to Rule 62-640.880(2)(d), F.A.C. [62-640.880(2)(d), 3-30-98]
- 41. The permittee shall keep hauling records to track the transport of residuals between facilities. The hauling records shall contain the following information:

Sandalhaven WWTP

- 1. Date and Time Shipped
- 2. Amount of Residuals Shipped
- 3. Degree of Treatment (if applicable)
- 4. Name and ID Number of Residuals
 Management Facility or Treatment
 Facility
- 5. Signature of Responsible Party at Source Facility
- Signature of Hauler and Name of Hauling Firm

AMS Residuals Management Facility /Treatment Facility

- 1. Date and Time Received
- 2. Amount of Residuals Received
- 3. Name and ID Number of Source Facility
- 4. Signature of Hauler
- Signature of Responsible Party at Residuals Management Facility or Treatment Facility

These records shall be kept for five years and shall be made available for inspection upon request by the Department. A copy of the hauling records information maintained by the source facility shall be provided upon delivery of the residuals to the residuals management facility or treatment facility. The permittee shall report to the Department within 24 hours of discovery any discrepancy in the quantity of residuals leaving the source facility and arriving at the residuals management facility or treatment facility. 162-640.880(4), 3-30-981

42. Storage of residuals or other solids at the permitted facility shall require prior written notification to the Department. [62-640.300(4), 3-30-98]

III. GROUND WATER REQUIREMENTS

The ground water monitoring program for this facility is subject to the provisions of Chapters 62-4, 62-160, 62-520, 62-522, 62-601, 62-620, and 62-610, Florida Administrative Code (F.A.C.), and the following conditions:

- 1. During the period of operation authorized by this permit, the permittee shall sample ground water in accordance with this permit and with Rule 62-522.600, F.A.C.
- 2. The ground water monitoring wells shall be located as depicted on the attached site map.
- 3. Any new monitor well construction shall employ those methods and details as noted in the Department's "Guidelines for Monitor Well Design and Installation" and shall be constructed and installed such that adequate recharge is obtainable within the aquifer being monitored. Prior to construction of any new ground water monitoring wells, a soil boring shall be made at each new monitoring well location in order to properly size the well depth and screen interval. Upon completion of construction, a MONITOR WELL COMPLETION REPORT (DEP Form 62-522.900(3)) shall be completed and submitted to the District Office for each new well.
- 4. The monitoring wells for the Sandalhaven Utilities WWTP are hereby designated as follows:

FACILITY: PERMITTEE: Sandalhaven WWTP

Utilities Incorporated of Sandalhaven

PERMIT NUMBER:

FLA014053

PA FILE NUMBER: FLA014053-004-DW2P and

FLA014053-005-DW2MR

	Monitoring Well Name	Monitoring Location Site Number	Aquifer Monitored	Monitoring Well Type	New or Existing
Ī	SU-1	19947	Surficial	Background	Existing
ı	SU-2	19943	" "	Site Boundry	Existing
	SU-3	19945	"	Intermediate	Existing
I	SU-4	19944	** **	Compliance	Existing

5. All monitoring wells listed below shall be sampled and analyzed according to the following schedule:

Sampling Period	Monitoring Well	Report Due Date
January-March	SU-1, SU-2, SU-3 and SU-4	April 28
April-June	SU-1, SU-2, SU-3 and SU-4	July 28
July-September	SU-1, SU-2, SU-3 and SU-4	October 28
October-December	SU-1, SU-2, SU-3 and SU-4	January 28

- 6. The following parameters shall be analyzed for each of the wells scheduled above in Item III.5.:
 - a. Water level (NGVD)
 - b. Nitrate (as N)
 - c. Total dissolved solids
 - d. Chloride
 - e. pH
 - f. Sulfate
 - g. Sodium
 - h. Arsenic
 - i. Cadmium
 - j. Chromium
 - k. Lead
 - 1. Specific Conductance (field measurement)
- 7. The sampling and analyses of the monitoring wells and reclaimed water shall be in accordance with Chapter 62-601, 62-160, and 62-610, F.A.C.
- 8. Ground water sampling results shall be reported on the Ground Water Monitoring Report Part D of Form 62-620.910(10) and submitted with the April, July, October and January DMR.
- 9. During the January-March sampling period, the reclaimed water shall be sampled and the analyses reported on the Reclaimed Water or Effluent Analysis Report, Form 62-620.910(15). During subsequent years when an operation permit is not submitted or renewed, a certification stating that no new non-domestic wastewater dischargers have been added to the collection system may be submitted in lieu of the report.
- 10. A Zone of Discharge is hereby established and shall not extend further than one hundred (100) feet beyond the perimeters of the areas of wetted surface of reclaimed water spray irrigation and the wastewater holding ponds, nor shall it extend beyond the limits of the property boundaries should such distance be less than one hundred (100) feet. The vertical zone of discharge shall not extend below the semi-confining zone at the base of the water table aquifer. All ground water quality criteria specified in Chapter 62-520, F.A.C., shall be met at the edge of the zone of discharge and the minimum criteria for ground water as defined in Chapter 62-520, F.A.C. shall be met within the zone of discharge.

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER: PA FILE NUMBER:

FLA014053

FLA014053-004-DW2P and

FLA014053-005-DW2MR

11. All existing monitoring wells, which are not an active part of the monitoring program, are to be maintained for possible future use. Should any of the inactive wells become damaged or inoperable, the well(s) must be plugged and abandoned in accordance with the provisions of Chapter 62-532.500(4), F.A.C., with the details of such plugging submitted to the Department within seven (7) days thereafter.

- 12. If an active monitoring well becomes damaged or inoperable, the permittee shall notify the Department immediately, and a detailed written report shall be submitted within seven (7) days thereafter. The report shall describe the nature of the problem and the remedial measures that have been taken to prevent a recurrence.
- 13. All monitoring wells shall be properly maintained, easily accessible, prominently marked, secured and kept free of vegetation at all times.

Part IV Rapid Infiltration Basins (R-001)

- 1. Advisory signs shall be posted around the site boundaries to designate the nature of the project area. [62-610.518, 8-8-99]
- 2. The annual average hydraulic loading rate to the three evaporation/percolation ponds shall be limited to a maximum of 7.2 inches per day (as applied to the entire bottom area). [62-610.523(3), 8-8-99]
- 3. The three evaporation/percolation ponds normally shall be loaded for 7 days and shall be rested for 7 days. Infiltration ponds, basins, or trenches shall be allowed to dry during the resting portion of the cycle. [62-610.523(4), 8-8-99]
- 4. Rapid infiltration basins shall be routinely maintained to control vegetation growth and to maintain percolation capability by scarification or removal of deposited solids. Basin bottoms shall be maintained to be level. [62-610.523(6) and (7), 8-8-99]
- 5. Routine aquatic weed control and regular maintenance of storage pond embankments and access areas are required. [62-610.514 and 62-610.414, 8-8-99]
- 6. Overflows from emergency discharge facilities on storage ponds or on infiltration ponds, basins, or trenches shall be reported as an abnormal event to the Department's South District Office within 24 hours of an occurrence. The provisions of Rule 62-610.800(9), F.A.C., shall be met. [62-610.800(9), 8-8-99]

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER: PA FILE NUMBER:

FLA014053

FLA014053-004-DW2P and

FLA014053-005-DW2MR

Part III Public Access System(s) (R-002)

7. This reuse system includes the following user:

User Name	User Type	Capacity (MGD)	Acreage	
Wildflower Country Club Golf Course	Golf Courses	0.10	60	
To	0.10	60		

[62-610.800(5), 8-8-99][62-620.630(10)(b), 3-2-00]

- 8. Cross-connections to the potable water system are prohibited. [62-610.469(7), 8-8-99]
- 9. A cross-connection control program shall be implemented and/or remain in effect within the areas where reclaimed water will be provided for use. [62-610.469(7), 8-8-99]
- 10. If a cross-connection between the potable and reclaimed water systems is discovered, the permittee shall:
 - a. Immediately discontinue potable water and/or reclaimed water service to theaffected area.
 - b. If the potable water system is contaminated, clear the potable water lines.
 - c. Eliminate the cross-connection.
 - d. Test the affected area for other possible cross-connections.
 - Within 24 hours, notify the South District Office's domestic wastewater and drinking water programs.
 - f. Within 5 days of discovery of a cross-connection, submit a written report to the Department detailing: a description of the cross-connection, how the cross-connection was discovered, the exact date and time of discovery, approximate time that the cross-connection existed, the location, the cause, steps taken to eliminate the cross-connection, whether reclaimed water was consumed, and reports of possible illness, whether the drinking water system was contaminated and the steps taken to clear the drinking water system, when the cross-connection was eliminated, plan of action for testing for other possible cross-connections in the area, and an evaluation of the cross-connection control and inspection program to ensure that future cross-connections do not occur. [62-555.350(3) and 62-555.360, 9-22-99][62-620.610(20), 10-23-00]
- 11. Maximum obtainable separation of reclaimed water lines and potable water lines shall be provided and the minimum separation distances specified in Rule 62-610.469(7), F.A.C., shall be provided. Reuse facilities shall be color coded or marked. Underground piping which is not manufactured of metal or concrete shall be color coded using Pantone Purple 522C using light stable colorants. Underground metal and concrete pipe shall be color coded or marked using purple as the predominant color. [62-610.469(7), 8-8-99]
- 12. In constructing reclaimed water distribution piping, the permittee shall maintain a 75-foot setback distance from a reclaimed water transmission facility to public water supply wells. No setback distances are required to other potable water supply wells or to any nonpotable water supply wells. [62-610.471(3), 8-8-99]
- 13. A setback distance of 75 feet shall be maintained between the edge of the wetted area and potable water supply wells, unless the utility adopts and enforces an ordinance prohibiting potable water supply wells within the reuse service area. No setback distances are required to any nonpotable water supply well, to any surface water, to

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER:

FLA014053

PA FILE NUMBER: FLA014053-004-DW2P and

FLA014053-005-DW2MR

any developed areas, or to any private swimming pools, hot tubs, spas, saunas, picnic tables, barbecue pits, or barbecue grills. [62-610.471(1), (2), (5), and (7), 8-8-99]

- 14. Reclaimed water shall not be used to fill swimming pools, hot tubs, or wading pools. [62-610.469(4), 8-8-99]
- 15. Low trajectory nozzles, or other means to minimize aerosol formation shall be used within 100 feet from outdoor public eating, drinking, or bathing facilities. [62-610.471(6), 8-8-99]
- 16. A setback distance of 100 feet shall be maintained from indoor aesthetic features using reclaimed water to adjacent indoor public eating and drinking facilities. [62-610.471(8), 8-8-99]
- 17. The public shall be notified of the use of reclaimed water. This shall be accomplished by posting of advisory signs in areas where reuse is practiced, notes on scorecards, or other methods. [62-610.468(2), 8-8-99]
- 18. All new advisory signs and labels on vaults, service boxes, or compartments that house hose bibbs along with all labels on hose bibbs, valves, and outlets shall bear the words "do not drink" and "no beber" along with the equivalent standard international symbol. In addition to the words "do not drink" and "no beber," advisory signs posted at storage ponds and decorative water features shall also bear the words "do not swim" and "no nadar" along with the equivalent standard international symbols. Existing advisory signs and labels shall be retrofitted, modified, or replaced in order to comply with the revised wording requirements. For existing advisory signs and labels this retrofit, modification, or replacement shall occur within 365 days after the date of this permit. For labels on existing vaults, service boxes, or compartments housing hose bibbs this retrofit, modification, or replacement shall occur within 730 days after the date of this permit. [62-610.468, 62-610.469, 8-8-99]
- 19. The permittee shall ensure that users of reclaimed water are informed about the origin, nature, and characteristics of reclaimed water; the manner in which reclaimed water can be safely used; and limitations on the use of reclaimed water. Notification is required at the time of initial connection to the reclaimed water distribution system and annually after the reuse system is placed into operation. A description of on-going public notification activities shall be included in the Annual Reuse Report. [62-610.468(6), 8-8-99]
- 20. Routine aquatic weed control and regular maintenance of storage pond embankments and access areas are required. [62-610.414 and 62-610.464, 8-8-99]
- 21. Overflows from emergency discharge facilities on storage ponds shall be reported as an abnormal event to the Department's South District Office within 24 hours of an occurrence. The provisions of Rule 62-610.800(9), F.A.C., shall be met. [62-610.800(9), 8-8-99]

V. OPERATION AND MAINTENANCE REQUIREMENTS

 During the period of operation authorized by this permit, the wastewater facilities shall be operated under the supervision of a(n) operator(s) certified in accordance with Chapter 62-602, F.A.C. In accordance with Chapter 62-699, F.A.C., this facility is a Category III, Class C facility and, at a minimum, operators with appropriate certification must be on the site as follows:

A Class C or higher operator 6 hours/day for 7 days/week. The lead operator must be a C, or higher.

[62-620.630(3), 10-23-00] [62-699.310, 5-20-92] [62-610.462, 8-8-99]

- 2. The lead operator shall be on duty for one full shift each duty day. A certified operator shall be on-site and in charge of each required shift and for periods of required staffing time when the lead operator is not on-site. [62-699.311(10) and (5), 5-20-92]
- 3. A certified operator shall be on call during periods the plant is unattended. [62-699.311(1), 5-20-92]

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER: PA FILE NUMBER:

FLA014053

FLA014053-004-DW2P and

FLA014053-005-DW2MR

4. The application to renew this permit shall include an updated capacity analysis report prepared in accordance with Rule 62-600.405, F.A.C. [62-600.405(5), 12-24-96]

- 5. The application to renew this permit shall include a detailed operation and maintenance performance report prepared in accordance with Rule 62-600.735, F.A.C. [62-600.735(1), 12-24-96]
- 6. The permittee shall maintain the following records and make them available for inspection on the site of the permitted facility:
 - a. Records of all compliance monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation and a copy of the laboratory certification showing the certification number of the laboratory, for at least three years from the date the sample or measurement was taken;
 - b. Copies of all reports required by the permit for at least three years from the date the report was prepared;
 - Records of all data, including reports and documents, used to complete the application for the permit for at least three years from the date the application was filed;
 - Monitoring information, including a copy of the laboratory certification showing the laboratory certification number, related to the residuals use and disposal activities for the time period set forth in Chapter 62-640, F.A.C., for at least three years from the date of sampling or measurement;
 - A copy of the current permit;
 - A copy of the current operation and maintenance manual as required by Chapter 62-600,. F.A.C.;
 - A copy of the facility record drawings;
 - Copies of the licenses of the current certified operators; and
 - Copies of the logs and schedules showing plant operations and equipment maintenance for three years from the date of the logs or schedules. The logs shall, at a minimum, include identification of the plant; the signature and certification number of the operator(s) and the signature of the person(s) making any entries; date and time in and out; specific operation and maintenance activities; tests performed and samples taken; and major repairs made. The logs shall be maintained on-site in a location accessible to 24-hour inspection, protected from weather damage, and current to the last operation and maintenance performed.

[62-620.350, 10-23-00]

VI. SCHEDULES

1. As indicated in the application, the following corrective actions shall be completed according to the following schedule:

	Corrective Action	Completion Date
1	Operational protocol is not approved and revision of same is required. This needs to be submitted to the department for review by compliance/enforcement.	30 dayas after issuance date of permit.
2	Replace chlorine scales	6 months after issuance date of permit.
3	Replace chlorine ventilation fan.	6 months after issuance date of permit.

Sandalhaven WWTP

PERMITTEE: Utilities Incorporated of Sandalhaven

PERMIT NUMBER: PA FILE NUMBER:

FLA014053

FLA014053-004-DW2P and FLA014053-005-DW2MR

	Corrective Action	Completion Date
4	Pipe percolation pond #2 to diversion structure discharge pipe (downstream of automatic isolation valve) and add isolation valve so that each percolation pond may be loaded and rested. Submit a certification of completion and record drawings to the Department.	6 months after issuance date of permit.
5	Install baffles in chlorine contact chamber. Dye test chamber after installation of baffles and report effective detention time achieve and report to the Department. Submit a certification of completion and record drawings to the Department.	6 months after issuance date of permit.
7	Update reuse agreement with Wildflower Golf Course and submit copy to the Department.	6 months after issuance date of permit.
8	Upgrade lift station number two, (maintenance improvements)	24 months after issuance date of permit.
9	Perform maintenance on all three (3)on site percolation ponds	24 months after issuance date of permit.

[62-600.735(1), 12-24-96]

VII. INDUSTRIAL PRETREATMENT PROGRAM REQUIREMENTS

This facility is not required to have a pretreatment program at this time. [62-625.500, 1-8-97]

VIII. OTHER SPECIFIC CONDITIONS

- 1. An updated capacity analysis report is to be submitted to the Department annually. The day of submittal is to coincide with the issuance date noted on the permit. (BPJ)
- 2. If the permittee wishes to continue operation of this wastewater facility after the expiration date of this permit, the permittee shall submit an application for renewal, using Department Forms 62-620.910(1) and (2), no later than one-hundred and eighty days (180) prior to the expiration date of this permit. [62-620.410(5), 10-23-001]
- 3. Florida water quality criteria and standards shall not be violated as a result of any discharge or land application of reclaimed water or residuals from this facility. [62-610.850(1)(a) and (2)(a), 8-8-99][62-640.700(3)(c), 3-30-98]
- 4. In the event that the treatment facilities or equipment no longer function as intended, are no longer safe in terms of public health and safety, or odor, noise, aerosol drift, or lighting adversely affects neighboring developed areas at the levels prohibited by Rule 62-600.400(2)(a), F.A.C., corrective action (which may include additional maintenance or modifications of the permitted facilities) shall be taken by the permittee. Other corrective action may be required to ensure compliance with rules of the Department. Additionally, the treatment, management, use or land application of residuals shall not cause a violation of the odor prohibition in Rule 62-296.320(2), F.A.C. [62-600.410(8), 12-24-96 and 62-640.400(6), 3-30-98]
- 5. The deliberate introduction of stormwater in any amount into collection/transmission systems designed solely for the introduction (and conveyance) of domestic/industrial wastewater; or the deliberate introduction of stormwater into collection/transmission systems designed for the introduction or conveyance of combinations of storm and domestic/industrial wastewater in amounts which may reduce the efficiency of pollutant removal by the treatment plant is prohibited, except as provided by Rule 62-610.472, F.A.C. [62-604.130(3), 12-26-96]

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER:

PA FILE NUMBER:

FLA014053 FLA014053-004-DW2P and

FLA014053-005-DW2MR

6. Collection/transmission system overflows shall be reported to the Department in accordance with Permit Condition IX. 20. [62-604.550, 12-26-96] [62-620.610(20), 10-23-00]

- 7. The operating authority of a collection/transmission system and the permittee of a treatment plant are prohibited from accepting connections of wastewater discharges which have not received necessary pretreatment or which contain materials or pollutants (other than normal domestic wastewater constituents):
 - a. Which may cause fire or explosion hazards; or
 - b. Which may cause excessive corrosion or other deterioration of wastewater facilities due to chemical action or pH levels; or
 - Which are solid or viscous and obstruct flow or otherwise interfere with wastewater facility operations or treatment; or
 - d. Which result in treatment plant discharges having temperatures above 40°C.

[62-604.130(4), 12-26-96]

- 8. The treatment facility, storage ponds, rapid infiltration basins, and/or infiltration trenches shall be enclosed with a fence or otherwise provided with features to discourage the entry of animals and unauthorized persons. [62-610.518(1), 1-9-96] [and 62-600.400(2)(b), 12-24-96]
- 9. Screenings and grit removed from the wastewater facilities shall be collected in suitable containers and hauled to a Department approved Class I landfill or to a landfill approved by the Department for receipt/disposal of screenings and grit. [62-701.300(1)(a), 4-23-97]
- 10. The permittee shall provide adequate notice to the Department of the following:
 - a. Any new introduction of pollutants into the facility from an industrial discharger which would be subject to Chapter 403, F.S., and the requirements of Chapter 62-620, F.A.C. if it were directly discharging those pollutants; and
 - b. Any substantial change in the volume or character of pollutants being introduced into that facility by a source which was identified in the permit application and known to be discharging at the time the permit was issued.

Adequate notice shall include information on the quality and quantity of effluent introduced into the facility and any anticipated impact of the change on the quantity or quality of effluent or reclaimed water to be discharged from the facility.

[62-620.625(2), 10-23-00]

IX. GENERAL CONDITIONS

- 1. The terms, conditions, requirements, limitations and restrictions set forth in this permit are binding and enforceable pursuant to Chapter 403, Florida Statutes. Any permit noncompliance constitutes a violation of Chapter 403, Florida Statutes, and is grounds for enforcement action, permit termination, permit revocation and reissuance, or permit revision. [62-620.610(1), 10-23-00]
- This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviations from the approved drawings, exhibits, specifications or conditions of this permit constitutes grounds for revocation and enforcement action by the Department South. [62-620.610(2), 10-23-00]

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER: PA FILE NUMBER:

FLA014053

FLA014053-004-DW2P and FLA014053-005-DW2MR

3. As provided in Subsection 403.087(6), F.S., the issuance of this permit does not convey any vested rights or any exclusive privileges. Neither does it authorize any injury to public or private property or any invasion of personal rights, nor authorize any infringement of federal, state, or local laws or regulations. This permit is not a waiver of or approval of any other Department permit or authorization that may be required for other aspects of the total project which are not addressed in this permit. [62-620.610(3), 10-23-00]

- 4. This permit conveys no title to land or water, does not constitute state recognition or acknowledgment of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the State. Only the Trustees of the Internal Improvement Trust Fund may express State opinion as to title. [62-620.610(4), 10-23-00]
- 5. This permit does not relieve the permittee from liability and penalties for harm or injury to human health or welfare, animal or plant life, or property caused by the construction or operation of this permitted source; nor does it allow the permittee to cause pollution in contravention of Florida Statutes and Department rules, unless specifically authorized by an order from the Department. The permittee shall take all reasonable steps to minimize or prevent any discharge, reuse of reclaimed water, or residuals use or disposal in violation of this permit which has a reasonable likelihood of adversely affecting human health or the environment. It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit. [62-620.610(5), 10-23-00]
- 6. If the permittee wishes to continue an activity regulated by this permit after its expiration date, the permittee shall apply for and obtain a new permit. [62-620.610(6), 10-23-00]
- 7. The permittee shall at all times properly operate and maintain the facility and systems of treatment and control, and related appurtenances, that are installed and used by the permittee to achieve compliance with the conditions of this permit. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to maintain or achieve compliance with the conditions of the permit. [62-620.610(7), 10-23-00]
- 8. This permit may be modified, revoked and reissued, or terminated for cause. The filing of a request by the permittee for a permit revision, revocation and reissuance, or termination, or a notification of planned changes or anticipated noncompliance does not stay any permit condition. [62-620.610(8), 10-23-00]
- 9. The permittee, by accepting this permit, specifically agrees to allow authorized Department South personnel, including an authorized representative of the Department and authorized EPA personnel, when applicable, upon presentation of credentials or other documents as may be required by law, and at reasonable times, depending upon the nature of the concern being investigated, to:
 - a. Enter upon the permittee's premises where a regulated facility, system, or activity is located or conducted, or where records shall be kept under the conditions of this permit;
 - b. Have access to and copy any records that shall be kept under the conditions of this permit;
 - c. Inspect the facilities, equipment, practices, or operations regulated or required under this permit; and
 - d. Sample or monitor any substances or parameters at any location necessary to assure compliance with this permit or Department rules.

[62-620.610(9), 10-23-00]

10. In accepting this permit, the permittee understands and agrees that all records, notes, monitoring data, and other information relating to the construction or operation of this permitted source which are submitted to the Department South may be used by the Department South as evidence in any enforcement case involving the permitted source arising under the Florida Statutes or Department rules, except as such use is proscribed by

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER:

FLA014053

PA FILE NUMBER: FLA014053-004-DW2P and

FLA014053-005-DW2MR

Section 403.111, Florida Statutes, or Rule 62-620.302, Florida Administrative Code. Such evidence shall only be used to the extent that it is consistent with the Florida Rules of Civil Procedure and applicable evidentiary rules. [62-620.610(10), 10-23-00]

- 11. When requested by the Department South, the permittee shall within a reasonable time provide any information required by law which is needed to determine whether there is cause for revising, revoking and reissuing, or terminating this permit, or to determine compliance with the permit. The permittee shall also provide to the Department South upon request copies of records required by this permit to be kept. If the permittee becomes aware of relevant facts that were not submitted or were incorrect in the permit application or in any report to the Department South, such facts or information shall be promptly submitted or corrections promptly reported to the Department. [62-620.610(11), 10-23-00]
- 12. Unless specifically stated otherwise in Department rules, the permittee, in accepting this permit, agrees to comply with changes in Department rules and Florida Statutes after a reasonable time for compliance; provided, however, the permittee does not waive any other rights granted by Florida Statutes or Department rules. A reasonable time for compliance with a new or amended surface water quality standard, other than those standards addressed in Rule 62-302.500, F.A.C., shall include a reasonable time to obtain or be denied a mixing zone for the new or amended standard. [62-620.610(12), 10-23-00]
- 13. The permittee, in accepting this permit, agrees to pay the applicable regulatory program and surveillance fee in accordance with Rule 62-4.052, F.A.C. [62-620.610(13), 10-23-00]
- 14. This permit is transferable only upon Department approval in accordance with Rule 62-620.340, F.A.C. The permittee shall be liable for any noncompliance of the permitted activity until the transfer is approved by the Department. [62-620.610(14), 10-23-00]
- 15. The permittee shall give the Department written notice at least 60 days before inactivation or abandonment of a wastewater facility and shall specify what steps will be taken to safeguard public health and safety during and following inactivation or abandonment. [62-620.610(15), 10-23-00]
- 16. The permittee shall apply for a revision to the Department permit in accordance with Rules 62-620.300, 62-620.420 or 62-620.450, F.A.C., as applicable, at least 90 days before construction of any planned substantial modifications to the permitted facility is to commence or with Rule 62-620.300 for minor modifications to the permitted facility. A revised permit shall be obtained before construction begins except as provided in Rule 62-620.300, F.A.C. [62-620.610(16), 10-23-00]
- 17. The permittee shall give advance notice to the Department of any planned changes in the permitted facility or activity which may result in noncompliance with permit requirements. The permittee shall be responsible for any and all damages which may result from the changes and may be subject to enforcement action by the Department South for penalties or revocation of this permit. The notice shall include the following information:
 - a. A description of the anticipated noncompliance;
 - b. The period of the anticipated noncompliance, including dates and times; and
 - c. Steps being taken to prevent future occurrence of the noncompliance.

[62-620.610(17), 10-23-00]

- 18. Sampling and monitoring data shall be collected and analyzed in accordance with Rule 62-4.246, Chapters 62-160 and 62-601, F.A.C., and 40 CFR 136, as appropriate.
 - a. Monitoring results shall be reported at the intervals specified elsewhere in this permit and shall be reported on a Discharge Monitoring Report (DMR), DEP Form 62-620.910(10).

FACILITY: PERMITTEE:

Sandalhaven WWTP

Utilities Incorporated of Sandalhaven

PERMIT NUMBER: PA FILE NUMBER:

FLA014053

FLA014053-004-DW2P and FLA014053-005-DW2MR

FLA014053-005-DW2MR

b. If the permittee monitors any contaminant more frequently than required by the permit, using Department approved test procedures, the results of this monitoring shall be included in the calculation and reporting of the data submitted in the DMR.

- c. Calculations for all limitations which require averaging of measurements shall use an arithmetic mean unless otherwise specified in this permit.
- d. Any laboratory test required by this permit for domestic wastewater facilities shall be performed by a laboratory that has been certified by the Department of Health (DOH) under Chapter 64E1, 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 those parameters or under the direction of an operator certified under Chapter 62-602, F.A.C.
- e. Under Chapter 62-160, F.A.C., sample collection shall be performed by following the protocols outlined in "DER Standard Operating Procedures for Laboratory Operations and Sample Collection Activities" (DER-QA-001/92). Alternatively, sample collection may be performed by an organization who has an approved Comprehensive Quality Assurance Plan (CompQAP) on file with the Department. The CompQAP shall be approved for collection of samples from the required matrices and for the required tests.

[62-620.610(18), 10-23-00]

- 19. Reports of compliance or noncompliance with, or any progress reports on, interim and final requirements contained in any compliance schedule detailed elsewhere in this permit shall be submitted no later than 14 days following each schedule date. [62-620.610(19), 10-23-00]
- 20. The permittee shall report to the Department any noncompliance which may endanger health or the environment. Any information shall be provided orally within 24 hours from the time the permittee becomes aware of the circumstances. A written submission shall also be provided within five days of the time the permittee becomes aware of the circumstances. The written submission shall contain: a description of the noncompliance and its cause; the period of noncompliance including exact dates and time, and if the noncompliance has not been corrected, the anticipated time it is expected to continue; and steps taken or planned to reduce, eliminate, and prevent recurrence of the noncompliance.
 - a. The following shall be included as information which must be reported within 24 hours under this condition:
 - 1. Any unanticipated bypass which causes any reclaimed water or effluent to exceed any permit limitation or results in an unpermitted discharge,
 - 2. Any upset which causes any reclaimed water or the effluent to exceed any limitation in the permit,
 - 3. Violation of a maximum daily discharge limitation for any of the pollutants specifically listed in the permit for such notice, and
 - 4. Any unauthorized discharge to surface or ground waters.
 - b. For releases or spills of treated or untreated wastewater, unless authorized elsewhere in this permit, oral notifications as required above shall be provided using the following procedures:
 - For unauthorized releases or spills in excess of 1,000 gallons per incident, or where public health or the
 environment may be endangered, to the STATE WARNING POINT TOLL FREE NUMBER (800)
 320-0519, as soon as practical, but no later than 24 hours from the time the permittee becomes aware of
 the discharge. The permittee, to the extent known, shall provide the following information to the State
 Warning Point:

Sandalhaven WWTP

PERMITTEE: Utilities Incorporated of Sandalhaven

PERMIT NUMBER: PA FILE NUMBER:

FLA014053

FLA014053-004-DW2P and FLA014053-005-DW2MR

- a) Name, address, and telephone number of person reporting.
- b) Name, address, and telephone number of permittee or responsible person for the discharge.
- c) Date and time of the discharge and status of discharge (ongoing or ceased).
- d) Characteristics of the wastewater spilled or released (untreated or treated, industrial or domestic wastewater).
- e) Estimated amount of the discharge.
- f) Location or address of the discharge.
- g) Source and cause of the discharge.
- h) Whether the discharge was contained on-site, and cleanup actions taken to date.
- i) Description of area affected by the discharge, including name of water body affected, if any.
- j) Other persons or agencies contacted.
- 2. For unauthorized releases or spills of 1,000 gallons or less, per incident, oral reports shall be provided to the Departmentwithin 24 hours from the time the permittee becomes aware of the discharge.
- c. If the oral report has been received within 24 hours, the noncompliance has been corrected, and the noncompliance did not endanger health or the environment, the Department shall waive the written report.

[62-620.610(20), 10-23-00]

- 21. The permittee shall report all instances of noncompliance not reported under Permit Conditions IX. 18. and 19. of this permit at the time monitoring reports are submitted. This report shall contain the same information required by Permit Condition IX. 20 of this permit. [62-620.610(21), 10-23-00]
- 22. Bypass Provisions.
 - a. Bypass is prohibited, and the Department South may take enforcement action against a permittee for bypass, unless the permittee affirmatively demonstrates that:
 - 1. Bypass was unavoidable to prevent loss of life, personal injury, or severe property damage; and
 - 2. There were no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime. This condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance; and
 - 3. The permittee submitted notices as required under Permit Condition IX. 22. b. of this permit.
 - b. If the permittee knows in advance of the need for a bypass, it shall submit prior notice to the Department, if possible at least 10 days before the date of the bypass. The permittee shall submit notice of an unanticipated bypass within 24 hours of learning about the bypass as required in Permit Condition IX. 20. of this permit. A notice shall include a description of the bypass and its cause; the period of the bypass, including exact dates and times; if the bypass has not been corrected, the anticipated time it is expected to continue; and the steps taken or planned to reduce, eliminate, and prevent recurrence of the bypass.

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER:

FLA014053

PA FILE NUMBER:

FLA014053-004-DW2P and

FLA014053-005-DW2MR

c. The Department shall approve an anticipated bypass, after considering its adverse effect, if the permittee demonstrates that it will meet the three conditions listed in Permit Condition IX. 22. a. 1. through 3. of this permit.

d. A permittee may allow any bypass to occur which does not cause reclaimed water or effluent limitations to be exceeded if it is for essential maintenance to assure efficient operation. These bypasses are not subject to the provisions of Permit Condition IX. 22. a. through c. of this permit.

[62-620.610(22), 10-23-00]

23. Upset Provisions

- a. A permittee who wishes to establish the affirmative defense of upset shall demonstrate, through properly signed contemporaneous operating logs, or other relevant evidence that:
 - 1. An upset occurred and that the permittee can identify the cause(s) of the upset;
 - 2. The permitted facility was at the time being properly operated;
 - 3. The permittee submitted notice of the upset as required in Permit Condition IX. 20. of this permit; and
 - 4. The permittee complied with any remedial measures required under Permit Condition IX. 5. of this permit.
- b. In any enforcement proceeding, the burden of proof for establishing the occurrence of an upset rests with the permittee.

Sandalhaven WWTP

PERMITTEE:

Utilities Incorporated of Sandalhaven

PERMIT NUMBER:

FLA014053

PA FILE NUMBER:

FLA014053-004-DW2P and

FLA014053-005-DW2MR

c. Before an enforcement proceeding is instituted, no representation made during the Department South review of a claim that noncompliance was caused by an upset is final agency action subject to judicial review.

[62-620.610(23), 10-23-00]

Note: In the event of an emergency the permittee shall contact the Department by calling (850) 413-9911. During normal business hours, the permittee shall call (941) 332-6975.

Executed in Fort Myers, Florida.

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

Richard W. Cantrell

Director of

District Management

DATE: ALGUST 14, 2001

RWC/MHR/jli

7

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UTILITIES, INC. OF SANDALHAVEN

DOCKET NO.: 060285-SU

CHARLOTTE COUNTY

25.30-440 (7) Notices





Department of Environmental Protection

CC: RR

South District P.O. Box-2549 Fort Myers, Florida 33902-2549 Ph. (239) 332-6975 Fax (239) 332-6969 Colleen M. Castille Secretary

May 25, 2005

Patrick Flynn, Vice President 200 Weathersfield Avenue Altamonte Springs, FL 32714

RE:

Charlotte County-DW Sandlhaven WWTP FLA014053

Dear Mr. Flynn:

A file review and a field inspection of the above referenced WWTP on April 14, 2005 indicate that you may be in violation of Chapter 403, Florida Statutes and the rules promulgated thereunder. Department personnel observed the following:

- The Department found that the required permitted information was not being properly recorded on the discharge monitoring report (DMR). The Department is issuing a corrected DMR form that allows the operator to report flows for the two discharge sites, OTH-1A and OTH-1B. Please see enclosures.
- 2. Please submit to the Department an updated copy of the reuse protocol indicting the correct turbidity alarm set points. The June 18, 2001 reuse protocol indicated a 5.0 NTU alarm set point for turbidity.

You are advised that any activity that may contribute to violations of the above described statutes and rules should cease immediately. Continued operation of a facility in violation of state statutes or rules may result in liability for damages and restoration, and the judicial imposition of civil penalties pursuant to Sections 403.141 and 403.161, Florida Statutes.

Please notify the Department in writing within 15 days as to what actions you intend to take in order to address these deficiencies.

Continued . . .

"More Protection, Less Process"

Mr. Flynn May 24, 2005 Page 2 of 2

If you have any questions, please do not hesitate to contact <u>Doug Wells</u> at (239) 332-6975, ext. 108. Your cooperation is appreciated.

Sincerely,

Keith Kleinmann

Environmental Manager

KK/EJ/mv

CC:

Lenny Godwin, Operator Allen Slater, FRWA (allen.slater@frwa.net)

enclosures

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, Florida Department of Environmental Protection, P O Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utilities Incorporated of Sandalhaven MAILING ADDRESS: 200 Weathersfield Avenue						PERMIT NUMBER FLA014053						
	Altamont	e Springs, FL 32	714		LIMIT: CLASS SIZ	ZE:	Final N/A		REPORT: GROUP:		Mont Dom	
FACILITY: LOCATION:	6811 Plac	ven WWTP cida Road od, FL 34224				ING GROUP NUMI		fluent				
COUNTY:	Charlotte					IARGE FROM SITE RING PERIOD F	::	То				
Parameter			Quantity	or Loading	Units	Qual	lity or Concentr	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow		Sample Measurement										
Mon.Site No. OTH-1B	Y	Permit Requirement	0.15 (An.Avg.)		MGD						5 Days/Weel	Flow meters and totalizers
Flow		Sample Measurement										
Mon.Site No. OTH-1B	P	Permit Requirement	Report (Mo.Avg.)		MGD						5 Days/Weel	Flow meters and totalizers
BOD, Carbonaceous 5 o	•	Sample Measurement					•					
Mon.Site No. EFA-1	Y	Permit Requirement				20.0 (An.Avg.)			MG/L		Every Two Weeks	.8-hour FPC
BOD, Carbonaceous 5 o	lay, 20C	Sample Measurement										
Mon.Site No. EFA-1	A	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)		MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended		Sample Measurement										
Mon.Site No. EFA-1	Y	Permit Requirement				20.0 (An.Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended		Sample Measurement										
PARM Code 00530 Mon.Site No. EFA-1	Α	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)		MG/L		Every Two Weeks	8-hour FPC
I certify under penalty of the information submitte knowledge and belief, tr	.u. Dascu (m my mquiry oi	the person or person	ns who manage:	the system or th	ose nersons directly i	responsible for auth	ering the informatic	n the inform	intion o	hmittad is to	he heat of my
NAME/TITLE OF PRINCI	PAL EXECU	TIVE OFFICER (OR AUTHORIZED AC	GENT		PRINCIPAL EXECU						ATE (YY/MM/DD)

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Parameter

Sandalhaven WWTP

PERMIT NUMBER: FLA014053 MONITORING GROUP NUMBER: R-001 From: ______ To MONITORING PERIOD Sample Type Frequency of Quality or Concentration Units No. Quantity or Loading Units Analysis Ex. Sample Measurement

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, Florida Department of Environmental Protection, P O Box 2549, Ft. Myers, FL, 33902-2549 FLA014053 PERMIT NUMBER PERMITTEE NAME: Utilities Incorporated of Sandalhaven MAILING ADDRESS: 200 Weathersfield Avenue Monthly REPORT: Final LIMIT: Altamonte Springs, FL 32714 GROUP: Domestic CLASS SIZE: N/A Sandalhaven WWTP FACILITY: MONITORING GROUP NUMBER: R-002 6811 Placida Road LOCATION: MONITORING GROUP DESC: Englewood, FL 34224 NO DISCHARGE FROM SITE: COUNTY: Charlotte To MONITORING PERIOD From: Frequency of Sample Type Units No. **Ouality or Concentration** Quantity or Loading Units Parameter Analysis Ex Flow Sample Measurement Flow meters and 5 Days/Week MGD 0.10 PARM Code 50050 Permit totalizers Mon.Site No. OTH-1A Requirement (An.Avg.) Flow Sample Measurement 5 Days/Week Flow meters and PARM Code 50050 Permit Report MGD totalizers Mon.Site No. OTH-1A (Mo.Avg.) Requirement BOD, Carbonaceous 5 day, 20C Sample Measurement 8-hour FPC MG/L **Every Two** PARM Code 80082 Permit 20.0 Weeks Mon, Site No. EFA-1 (An.Avg.) Requirement BOD, Carbonaceous 5 day, 20C Sample Measurement PARM Code 80082 MG/L Every Two 8-hour FPC Permit 30.0 60.0 Mon.Site No. EFA-1 Weeks Requirement (Mo.Avg.) (Max.) Solids, Total Suspended Sample Measurement PARM Code 00530 Permit MG/L 4 Days/Week 5.0 Grab Mon.Site No. EFB-1 Requirement (Max.) рH Sample Measurement PARM Code 00400 Permit 8.5 SU 5 Days/Week 6.0 Grab Mon.Site No. EFA-1 Requirement (Min.) (Max.) I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT TELEPHONE NO DATE (YY/MM/DD)

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Sandalhaven WWTP

Parameter		Quantity or	Loading	Units Quality or Concentration			tion	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement										
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement				25 (Max.)		·	#/100ML		4 Days/Week	Grab
Total Residual Chlorine (For	Sample										[
Disinfection) PARM Code 50060 A	Measurement Permit				1.0			MG/L	 	Continuous	Grab
PARM Code 50060 A Mon.Site No., EFA-1	Requirement				(Min.)						
Turbidíty	Sample Measurement										
PARM Code 00070 B Mon.Site No. EFB-1	Permit Requirement			 				NŢU		Continuous	Meter
**************************************	Sample Measurement										
	Permit Requirement										
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	Sample Measurement										
	Permit Requirement							1			

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA014053 Facility: Sandalhaven WWTP Monitoring Period To: _ From: _ CBOD5 pH (SU) TSS (MG/L) TRC (For TSS (MG/L) Turbidity CBOD5 TSS (MG/L) Flow (MGD) Nitrogen, Fecal (MG/L) Coliform Nitrate, Total Disinfect.) (NTU) (MG/L) (as N) (MG/L) Bacteria (#/100ML) (MG/L) 00400 EFA-1 00530 EFB-1 74055 00620 00530 50060 00530 INF-1 50050 OTH-1A Code 80082 00070 80082 Mon. Site EFA-1 EFA-1 EFA-1 EFA-1 EFA-1 EFB-1 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Total Mo. Avg. PLANT STAFFING: Day Shift Operator Class: Certificate No: Name: **Evening Shift Operator** Class: Certificate No: Name: Night Shift Operator Class: Certificate No: Name: Name: r ead Operator Class: Certificate No:

DAILY SAMPLE RESULTS - PART B

FLA014053 Facility: Sandalhaven WWTP Permit Number: To: ___ Monitoring Period From: _ Flow (MGD) Code Mon. Site 50050 OTH-1B 1 2 3 4 5 6 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Total Mo. Avg. PLANT STAFFING: Day Shift Operator Class: Certificate No: Name: **Evening Shift Operator** Class: Certificate No: Name: Night Shift Operator Class: Certificate No: Name:

__ Name:

Class:

ad Operator

Certificate No:

INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT

Read these instructions as well as the SUPPLEMENTAL INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT before completing the DMR. Hard copies and/or electronic copies of the required parts of the DMR were provided with the permit. All required information shall be completed in full and typed or printed in ink. A signed, original DMR shall be mailed to the address printed on the DMR by the 28th of the month following the monitoring period.

The DMR consists of three parts--A, B, and D--all of which may or may not be applicable to every facilities may have one or more Part A's for reporting effluent or reclaimed water data. All domestic wastewater facilities will have a Part B for reporting daily sample results. Part D is used for reporting ground water monitoring well data.

When results are not available, the following codes should be used on parts A and D of the DMR and an explanation provided where appropriate. Note: Codes used on Part B for raw data are different.

CODE	DESCRIPTION/INSTRUCTIONS		
ANC	Analysis not conducted.		
DRY	Dry Well		
FLD	Flood disaster.		
IFS	Insufficient flow for sampling.		
LS	Lost sample.		
MNR	Monitoring not required this period.		

CODE	DESCRIPTION/INSTRUCTIONS
NOD OPS OTH	No discharge from/to site. Operations were shutdown so no sample could be taken. Other. Please enter an explanation of why monitoring data were not available.
SEF	Sampling equipment failure.

When reporting analytical results that fall below a laboratory's reported method detection limits or practical quantification limits, the following instructions should be used:

- 1. Results greater than or equal to the PQL shall be reported as the measured quantity.
- 2. Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter and when determining compliance with permit limits.
- 3. Results less than the MDL shall be reported by entering a less than sign ("<") followed by the laboratory's MDL value, e.g. < 0.001. A value of one-half the MDL or one-half the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limitation.

PART A -DISCHARGE MONITORING REPORT (DMR)

Part A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring requirements are interim or final, and the required submittal frequency (e.g. monthly, annually, quarterly, etc.). Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The following should be completed by the permittee or authorized representative:

No Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number; however, if the monitoring group includes other monitoring locations (e.g., influent sampling), the "NOD" code should be used to individually denote those parameters for which there was no discharge.

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Sample Measurement: Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row in the non-shaded area above the limit. Be sure the result being entered corresponds to the appropriate statistical base code (e.g. annual average, monthly average, single sample maximum, etc.) and units.

No. Ex.: Enter the number of sample measurements during the monitoring period that exceeded the permit limit for each parameter in the non-shaded area. If none, enter zero.

Frequency of Analysis: The shaded areas in this column contain the minimum number of times the measurement is required to be made according to the permit. Enter the actual number of times the measurement was made in the space above the shaded area.

Sample Type: The shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.

Signature: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comment and Explanation of Any Violations: Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area.

PART B - DALL SAMPLE RESULTS

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Daily Monitoring Results: Transfer all analytical data from your facility's laboratory or a contract laboratory's data sheets for all day(s) that samples were collected. Record the data in the units indicated. Table 1 in Chapter 62-160, F.A.C., contains a complete list of all the data qualifier codes that your laboratory may use when reporting analytical results. However, when transferring numerical results onto Part B of the DMR, only the following data qualifier codes should be used and an explanation provided where appropriate.

CODE	DESCRIPTION/INSTRUCTIONS
<	The compound was analyzed for but not detected.
A	Value reported is the mean (average) of two or more determinations.
J	Estimated value, value not accurate.
Q	Sample held beyond the actual holding time.
Y	Laboratory analysis was from an unpreserved or improperly preserved sample.

Add the results to get the Total and divide by the number of days in the month to get the Monthly Average.

Plant Staffing: List the name, certificate number, and class of all state certified operators operating the facility during the monitoring period. Use additional sheets as necessary.

PART D - GROUND WATER MONITORING REPORT

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Date Sample Obtained: Enter the date the sample was taken. Also, check whether or not the well was purged before sampling.

Time Sample Obtained: Enter the time the sample was taken.

Sample Measurement: Record the results of the analysis. If the result was below the minimum detection limit, indicate that.

Detection Limits: Record the detection limits of the analytical methods used.

Analysis Method: Indicate the analytical method used. Record the method number from Chapter 62-160 or Chapter 62-601, F.A.C., or from other sources.

Sampling Equipment Used: Indicate the procedure used to collect the sample (e.g. airlift, bucket/bailer, centrifugal pump, etc.)

Samples Filtered: Indicate whether the sample obtained was filtered by laboratory (L), filtered in field (F), or unfiltered (N).

Signature: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comments and Explanation: Use this space to make any comments on or explanations of results that are unexpected. If more space is needed, reference all attachments in this area.

SPECIAL INSTRUCTIONS FOR LIMITED WET WEATHER DISCHARGES

Flow (Limited Wet Weather Discharge): Enter the measured average flow rate during the period of discharge or divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day (MGD).

Flow (Upstream): Enter the average flow rate in the receiving stream upstream from the point of discharge for the period of discharge. The average flow rate can be calculated based on two measurements; one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit.

Actual Stream Dilution Ratio: To calculate the Actual Stream Dilution Ratio divide the average upstream flow rate by the average discharge flow rate. Enter the Actual Stream Dilution Ratio accurate to the nearest 0.1.

No. of Days the SDF > Stream Dilution Ratio: For each day of discharge, compare the minimum Stream Dilution Factor (SDF) from the permit to the calculated Stream Dilution Ratio. On Part B of the DMR, enter an asterisk (*) if the SDF is greater than the Stream Dilution Ratio on any day of discharge. On Part A of the DMR, add up the days with an "*" and record the total number of days the Stream Dilution Factor was greater than the Stream Dilution Ratio.

CBOD₃: Enter the average CBOD₃ of the reclaimed water discharged during the period shown in duration of discharge.

TKN: Enter the average TKN of the reclaimed water discharged during the period shown in duration of discharge.

Actual Rainfall: Enter the actual rainfall for each day on Part B. Enter the actual cumulative rainfall to date for this calendar year and the actual total monthly rainfall on Part A. The cumulative rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the month for which this DMR contains data.

Rainfall During Average Rainfall Year: On Part A, enter the total monthly rainfall during the average rainfall year and the cumulative rainfall for the average rainfall year. The cumulative rainfall year is the amount of rain, in inches, which fell during the average rainfall year from January through the month for which this DMR contains data.

No. of Days LWWD Activated During Calendar Year: Enter the cumulative number of days that the limited wet weather discharge was activated since January 1 of the current year.

Reason for Discharge: Attach to the DMR a brief explanation of the factors contributing to the need to activate the limited wet weather discharge.

Operator Signature					
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SANDALHAVEN UTL 690. 3.15 PAGE 02

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

SPILL ARNORMAL EVENT REPORT

DATE/INST REPORTED: 3	13-02	process of the second second of the second s	والمنافقة والمنافعة وساوستان والمنافعة والمنافعة والمنافعة والمنافعة والمنافعة والمنافعة	The second secon
FIRST NOTIFICATION BY:	THONE	FAX	VOICE MAIL	OTHER
DEP PERSON RECEIVING REI	PCRT:	Jom J	ackoo	
DATE/TIME OF ABBORMAL!	en ent: .3-	13-02	and the hypothesis was a second bid and second and seco	- AND AND AND AND AND AND AND AND AND AND
discharge reported by:	· · ·	- hardway with mile than staying	PHONE:	
NAME OF FACILITY/COLLEC	T ON SYSTE	w: Sando	1 haven	KOKTO (III para na mandalari (III) pa
TYPE OF ABNORMAL EVENT Manuale KT Value Monutore will	Pypan Sicking	SF Fill	lter Cauld, feet 1500-1712	NTU 4.57
LOCATION OF EVENTIDISCH	IARGE: 3a	notal has		
APPROXIMATE GALLONAGE	EINSCHARGE	D: neite		AND THE PROPERTY OF THE PARTY O
DISCHARGE TO: Ground	Surface W	ater Oth	8 7	
15 DISCIIARGE TO SURFACE downsizerm of point of discharge	TATER, sam L'Aisch sampl	ples needed at p e results and sar	oint of discharge, bac aple location map.	kground and
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TIME FACILITY WILL BE OP	ELATING AG Liscla	ATT Don't	Know, mad	Linguis
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UTILITIES, INC. OF FIGHTDA VIOLATION REPORTING FORM

COM	pany no. <u>62</u>	2 COMPANY NAM	E Sandal haven	DATE OF OCCURRENCE 3-/30.
	TEWATER SYS	TEMS Date Notified	Description of Violation	TIME
	NPDES			
	FDEP	,		
	County/Local	Programme Control of the Control of		
	Overflow/Spill	Transmission of the said		
本	Compliance	3-13-02	Aab Value stikus M Faild. By Bass. 1200 Will Collected Samels	Sanul A.J. Fillfors 5.5 (AT For Values)
	Other		WII COURT STATES	3-12 02 1500 NT4 22 90 Ch20.
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	e of Violation	Date Not fied	Description of Violation	
	FDEP , `			
	County/Local			
	Compliance			
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Use	additional s	heets as nece	essary. Operator Sig	nature

UTILITIES, INC. OF FIGHTDA VIOLATION REPORTING FORM

COM	PANY 110. 62	COMPANY NAME	Sandal haven	DATE OF OCCURRENCE	3-130
WAS Typ	TEWATER SYS	Date Notified	Description of Violation	TIME	
	NPDES	-			
	FDEP				
	County/Local				
	Overflow/Spill	***************************************			
\$	Compliance	3-13-02	Make Value otikus 19 Faid. By Bay. 1200 4711 Callected Samuels	5.57.	i//tes
	Other	Militaria regulation de la companya del companya de la companya del companya de la companya de l	MII CALLELLY SAFES	(3-/202/ 274 22	350 30 Ch201
	TER SYSTEMS	Date Notified	Description of Violation		
	FDEP ,				
	County/Local				
	Compliance	-			
	Bacti's	-			
	Dither				
Use	e additional :	sheets as neces	ssary. Operator Si	gnature	

Utilities, eno of Florde Vionatio Recort.

Compry No 696 Comp. mame Sandalhaum alt (DC) Sec. Tom Jackson

Compliance Sand fetters off line 0900 to 12 woon for cleaning back on line.

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Phon# 18986 (941) 697-4797

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DEPARTMENT OF ENVIRONMENTAL PROTECTION ACLMANA TO HTATE

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UTILITIES, INC. OF FLORIDA VIOLATION REPORTING FORM

COM	pany no. <u>690</u>	_ COMPANY NAMI	E Sandal haven	DATE OF OCCURRENCE 12:3
	TEWAITER SYS	TEMS Date Notified	Description of Violation	TIME 09%
	NPDES;	-		
	FDEP			
	County/Local	elagraphysiochteithe elektropysioch		
V	Overflow/Spill	12.201	to low spot	afrass fringed
	Compliance	The second secon	Call Madeis Mother B. HTH. Bushed out.	-
	Other	Alego-congression de la constanta de la consta		
13	301 FAUX didn't	Go They Moda	a San fined do le	ash on line 1215.
	rea systems e of Violation	Date Notified	Description of Violation	
	FXEP	-		
	County/Local	- Andrewski - Andrewski - Andrewski - Andrewski - Andrewski - Andrewski - Andrewski - Andrewski - Andrewski -		
	Compliance	- Allendaria		
	Bacti's	vveryagelike William Valley ye		
	Other			
Us	e additional s	sheets as nece	essary. Operator Sig	mature

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STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

SPILI ABNORMAL EVENT REPORT

DATE/TIME REPORTED: ///d	201	153	0				
FIRST NOTIFICATION BY.	PH	ONE	FAX		VOICE MAI	L	OTHER
DEP PERSON RECEIVING REP	RT:	Kuth					
DATE/TIME OF ABNORMAL E	VENT	: 103	0-01				Mary Art 18 Miles Strategy or communication of the Control of the
discharge reported by:	:6	<u>) </u>			PHONE:		
NAME OF FACILITY/COLLEC							
Type of abnormal event	: 4/5	3.Ph	ase t	Bab.	99.		Procedulation and the second
LOCATION OF EVENT/DISCH	ARGE	. <u>G</u> à	largo	ula	Duck -	154	
APPROXIMATE GALLONAGE	DISC	HARGEI): <u> </u>)			
DISCHARGE TO: Ground	Su	rface Wa	ter	Other			
IF DISCHARGE TO SURFACE downstream of point of discharge NATURE AND CAUSE OF THE	. Musc	h sampic	results ar				ound and
Angeles Control of the Control of th							
STEPS TAKEN TO CORRECT	TIEP	KÛ THOS	1/PREVE	NT ITS	RECURREN	CE: S	en_
				-			
TIME FACILITY WILL BE OPI	ELIATE	NG AGA	IN: E	le s	eway.	10-23	01
REFERRID TO: Keth							
FOLLOW UP:	-						
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STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

SPILL/ABNORMAL EVENT REPORT

DATE/TIME REPORTED: 9-200	2/	/73/		
FIRST NOTIFICATION BY: PHO	ONE (FAX	VOICE MAIL	OTHER
DEP PERSON RECEIVING REPORT:	Tom	Jackso	<u> </u>	
DATE/TIME OF ABNORMAL EVENT:	:			
DISCHARGE REPORTED BY:			PHONE:	
NAME OF FACILITY/COLLECTION S				
TYPE OF ABNORMAL EVENT: Pul	l in G	Rayect (C	lz Cont. Ballo	not
LOCATION OF EVENT/DISCHARGE:				
APPROXIMATE GALLONAGE DISCH	ARGED	in Re	ject	
DISCHARGE TO: Ground Sur	face Wate	er Otho	7	
IF DISCHARGE TO SURFACE WATER downstream of point of discharge. Attach	R, sample sample r	s needed at po esults and san	int of discharge, hack uple location map.	kground and
MATURE AND CAUSE OF THE EVEN	T: Cl2	balles of	not July in	odold
STEPS TAKEN TO CORRECT THE PR	OBLEM/	PREVENT III	S RECURRENCE:	Balloo
		427 Cla		
TIME FACILITY WILL BE OPERATIN	IG AGAII	N: <u>921.0</u>	/	
REFERRED TO:				
FOLLOW UP:				

VIOLATION REPORTING FORM

			DATE OF
сом	PANY NO.69	O COMPAN	Y NAME Sandelhaven OCCURRENCE 9-2001
WAS	TEWATER SYS	TEMS	
Type	of Violation	Date Notified	Description/Location of Violation
	NPDES		
a .	FDEP		
-	County/Local		
	Overflow/Spill		
	Compliance		
×	Other	9-20-01	Cle halles motimished NTU. 427 C/2 20 manuly that in report No one to manitor our Po.
WAT	ER SYSTEMS		
	FDEP		
	County/Local		
0	Compliance		
	Bact Tee's		
	Other		
Use ac	dditional sheets as	necessary.	Operator Signature

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

SPILL/ABNORMAL EVENT REPORT

DATEITME REPORTED: 5-7-01 1015 Am
FIRST NOTIFICATION BY: PHONE FAX: VOICE MAIL OTHER
DEP PERSON RECEIVING REPORT: Bent to Tom Jackson
DATE/TIME OF ABNORMAL EVENT: 5-7-0/ 0845
DISCHARGE REPORTED BY: PHONE:
NAME OF FACILITY/COLLECTION SYSTEM:
TYPE OF ABNORMAL EVENT: Plant turns, sand felters off
LOCATION OF EVENT/DISCHARGE: Sandhales Sandhaus
APPROXIMATE GALLONAGE DISCHARGED:
DISCHARGE TO: Ground Surface Water Cther
IF DISCHARGE TO SURFACE WATER, samples needed at point of discharge, background and downstream of point of discharge. Attach sample results and sample location map.
NATURE AND CAUSE OF THE EVENT: Plant turnl
STEPS TAKEN TO CORRECT THE PROBLEM/PREVENT ITS RECURRENCE: 10016000000000000000000000000000000000
TIME FACILITY WILL BE OPERATING AGAIN: Puill matily
REFERRED TO: Tom Dackson Del FOLLOW UP: ?

UTILITIES, INC. OF FLORIDA VIOLATION REPORTING FORM

CON	19ANY NO. <u>69</u> 0	O COMPANY NA	ME Sandalhau	va cela	DATE OF OCCURRENCE	E70
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		•				
	FDEP	-				
	County/Local					
	Overflow/Spill					
×	Compliance ,	57-00°	Blow Buche	to pul	Plant tur	med Filter
	Other		eff.		notify when	· sifiahil
WAT Typ	ER SYSTEMS e of Violation	Date <u>Notified</u>	Description of Vio	lation		M +
	FDEP ²					
	County/Local					
	Compliance					
	Bacti's					
∏Ot	her					
Use	additional s	heets as nece		f Pav	ature	

AH Keith

UTILITIES, INC. OF FLORIDA VIOLATION REPORTING FORM

COME	any no. 690	COMPANY NAME	Sandalhauenuthidler OCCURRENCE 1-80/
NAS' Type	TEWATER SYS	TEMS OUT W. O	Description of Violation
	NPDES		
	FDEP		
	County/Local		
	Overflow/Spill	- Terming of the same and the s	
لت	Compliance	1-8-01	mud mud
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		Jan site)	Cell# 941 3203862 appear 9416974797
WAT Typ	ER SYSTEMS e of Violation	Date Notified	Description of Violation
	RBP	And the second s	
	County/Local		
	Compliance		
	Bacti's		
<u> </u>	ther		
Use	additional s	heets as nece	essary. Rut fau. Operator Signature

Att Keith

UTILITIES, INC. OF FLORIDA VIOLATION REPORTING FORM

COME	PANY NO. 690	_ COMPANY NAME	E Sandalhavenetholics Occurrence 4/5 Roto Mase Sec Green TIME 0700
WAS'	TEWATER SYS	TEMS Off W.	Description of Violation
	NPDES		
	FDEP		
	County/Local		
	Overflow/Spill		
د چو لين	Compliance	i and the second	
X	Other	5.01 seathan	one lage on pato PHase aut. Pump miling, 100 Amt + 10 Am. Pumper truck Keeping up. Will Pumpared Hour all week ord Pungarous octube to Pung to Be Pulled 1-8:0; Cell # 941 3203862 office 941 6474797
	TER SYSTEMS be of Violation	Date Notified	Description of Violation
	FDEP?	/	Keith, 1-8-0
	County/Local		I had the nongtex #.) Robert
	Cornpliance	- Alexandra (Control of Control o	
	Bacti's		
	Other		
Us	e additional .	sheet: as nec	essary. Plat law.

UTILITIES, INC. OF FLORIDA VIOLATION REPORTING FORM

	~0 É) VIOLATION	
COM	pany no. 690	_ COMPANY NAM	E Sandelhaven offidir OCCURRENCE &
	TEWATER SYS	TEMS Of the W. Date Notified	Description of Violation By Pass.
	NPDES		
	FDEP	-	
	County/Local		
	Overflow/Spill		
X	Compilance	12-1.00	Blown Brakes triped. Reset Brakes collected. Dung Clark Cic. Bal on Lorso CAF Claude
	Other	COMMISSION OF THE PARTY OF THE	Still in Perect & FF Cloude 4351 tich INTU. EFF totally clear defor going Back on line Reson Sangl + other from rejected PiPe. Cell # 941 3203862 after 9416974797
WAT Typ	PER SYSTEMS e of Violation	Date Notified	Description of Violation
	FDEP		
	County/Local		
	Compliance		
	Bacti s	And the second s	
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Use	additional s	heets as nece	ssary. Reht Pau-

UTILITIES, INC. OF FLORIDA VIOLATION REPORTING FORM

COM	PANY NO.	COMPAN (NA	DATE OF OCCURRENCE TIME
	TEWATER SYS	TEMS Date Notified	Description of Violation
	NPDES	And the second second	
	FDEP	· ·	
	County/Local	-	
	Overflow/Spill	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN 1	
	Compliance	12-1.00	Blown Brahastepad
	Other		
	TER SYSTEMS	Date Notified	Description of Violation
	FDEP		
	County/Local		
	Compliance	and the second s	
	Bacti's		
	Other		
Use	e additional	sheets as nec	Dessary. Operator Signature

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SANDLEHAVEN WASTEWAT

PAGE 02

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

SPILL/ABNORMAL EVENT REPORT

DATE/TIME REPORTED:	4-11-00	1530	
FIRST NOTIFICATION BY	PHONE	FAX VOICE MAIL	OTHER
DEP PERSON RECEIVING	REPORT: Kie	th Klineman	
DATE/TIME OF ABNORM	al event: 4-11	0-00 //30pm	
DISCHARGE REPORTED	Y: Bab OF	See PHONE: 9	41-474-5191
NAME OF FACILITY/COLI	LECTION SYSTEM:	Sandal haven of	Utilities Inc.
TYPE OF ABNORMAL EVI	ENT: Sludge	Spill	
LOCATION OF EVENT/DIS	SCHARGE: Sand	la Chaven Useste	Water Plant
APPROXIMATE GALLONA	AGE DISCHARGED:	30,000,000	
DISCHARGE TO: Ground	-		
IF DISCHARGE TO SURFA downstream of point of disch		•	-
NATURE AND CAUSE OF	THE EVENT:	yt peet, Blyd	us Blanket
midwell.		C Tagging T Settle	
STEPS TAKEN TO CORRE	CT THE PROBLEMA	PREVENT ITS RECURRENCE	E: Unsteel
Skindrees oft.	I ISOKKUUS	nen production in	
TIME FACILITY WILL BE	OPERATING AGAIN	: Should have t	refereson
REFERRED TO:			
FOLLOW UP:			

04/12/2000 15:26 9416978959 SANDLEHAVEN WASTEWAT

PAGE 03

VIOLATION REPORTING FORM

СОМ	PANY NO. <u>6</u> 9	O COMPAN	Y NAME Saude Chaven OCCURRENCE 4-10-00
	TEWATER SYS		
Туре	of Violation	Date Notified	Description/Location of Violation
	NPDES	:	
D /	FDEP	4-11-00	Plant Uset muchwell over Floured
	County/Local		
8	Overflow/Spill	4-11-00	Plant Unset mudwell our Flowed
0	Compliance	Colonia de la co	
	Other	:	
WAT	ER SYSTEMS		
	FDEP	<u> </u>	
-	County/Local	:	
	Compliance	:	
	Bact Tee's		
a	Other	:	
Use ac	dditional sheets a	s necessary.	Operator Signature

<u> </u>				
V.				



Department of **Environmental Protection**

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South District P.O. Box 2549 Fort Myers, Florida 33902-2549 Colleen M. Castille Secretary

Ph. (239) 332-6975 Fax (239) 332-6969

May 25, 2005

FILE 19.2 SH 4/14/0=

Patrick Flynn, Vice President 200 Weathersfield Avenue Altamonte Springs, FL 32714

RE:

Charlotte County-DW Sandlhaven WWTP FLA014053

Dear Mr. Flynn:

A file review and a field inspection of the above referenced WWTP on April 14, 2005 indicate that you may be in violation of Chapter 403, Florida Statutes and the rules promulgated thereunder. Department personnel observed the following:

- 1. The Department found that the required permitted information was not being properly recorded on the discharge monitoring report (DMR). The Department is issuing a corrected DMR form that allows the operator to report flows for the two discharge sites, OTH-1A and OTH-1B. Please see enclosures.
- 2. Please submit to the Department an updated copy of the reuse protocol indicting the correct turbidity alarm set points. The June 18, 2001 reuse protocol indicated a 5.0 NTU alarm set point for turbidity.

You are advised that any activity that may contribute to violations of the above described statutes and rules should cease immediately. Continued operation of a facility in violation of state statutes or rules may result in liability for damages and restoration, and the judicial imposition of civil penalties pursuant to Sections 403.141 and 403.161, Florida Statutes.

Please notify the Department in writing within 15 days as to what actions you intend to take in order to address these deficiencies.

Continued . . .

Mr. Flynn May 24, 2005 Page 2 of 2

If you have any questions, please do not hesitate to contact <u>Doug Wells</u> at (239) 332-6975, ext. 108. Your cooperation is appreciated.

Sincerely,

Keith Kleinmann

Environmental Manager

KK/EJ/mv

cc: Lenny Godwin, Operator

Allen Slater, FRWA (allen.slater@frwa.net)

enclosures

DEPARTMENT OF ENVIRONMENTAL PROTF-710N DISCHARGE MONITORING REPORT - PART A

MONITORING GROUP DESC:

MONITORING GROUP NUMBER: R-001

including Influent

ANN

скопь:

Domestic

Monthly

When Compared to: Department of Environmental Protection, South District, Florida D. Acat of Environmental Protection, Pouth District, Florida D. Acat of Environmental Protection, Pouth District, Florida D. Acat of Environmental Protection, Pouth District, Florida D. Acat of Environmental Protection, Pouth Englishment of Environmental Protection, Pouth Englishment of Environmental Protection, Pouth Englishment of Environmental Protection, Pouth Englishment of Environmental Protection, Pouth Englishment of Environmental Protection, Pouth Englishment of Environmental Protection, Pouth Englishment of Environmental Protection, Florida D. Acat of Environmental Protection, Pouth Englishment of Environmental Protection, Pouth Englishment of Environmental Protection, Pouth Englishment of Environmental Protection, Pouth Englishment of Environmental Protection, Pouth Englishment of Environmental Protection, Pouth Englishment of Environmental Protection, Pouth Englishment of Environmental Protection, Pouth Environment

CLASS SIZE:

				oT	:wi	AGE FROM SITE: [Charlone	COUNTY:
Sample Type	Prequency of Analysis	No.	stinU	noit	y or Concentra	tilsuQ	stinU	gnibsod re	Quantity o		1:	Paramete
										Sample Measurement		wol
Flow meters and totalizers	5 Days/Week						MCD		21.0 (.avA.nA)	Permit Requirement	,	ARM Code 50050 Ion.Site No. OTH-11
										Sample Measurement		wol
Flow meters and totalizers	5 Days/Weck						MGD	· .	Report (Mo.Avg.)	Permit Requirement	đ	ARM Code 50050 Ion.Site No. OTH-1B
			·							Sample Measurement	Ooz '600	OD, Carbonaccous
8-hour FPC	Every Two		T/OW			0.02 (.avA.nA)				Permit InsmeriupsM	X	ARM Code 80082 Non.Site No. EFA-1
						(9,1,2,1,1)			·····	Sample	5 day, 20C	OD, Carbonaceous
8-роиг РРС	Every Two		MG/L		0.0a (.xaM)	0.0E (.3vA.oM)				Permit Requirement	٧	ARM Code 80082 Non.Site No. EFA-1
										Sample Measurement	pə	olids, Total Suspend
8-рош БРС	Every Two Weeks		MG/L			0.02 (.gvA.nA)				Permit Requirement	Å	ARM Code 00530 Non.Site No. EFA-1
						<u> </u>			····	Sample Measurement	pə	olids, Total Suspend
S-hour FPC	Every Two Weeks		MG/L		0.0a (.xsM)	0.0E (.gvA.oM)				Permit Requirement	¥	ARM Code 00530 Non.Site No. EFA-1

1 certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified persons who manage the system, or those persons directly responsible for gathering the information, the information upprised is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

| Application of the presentation of the person of th

DV.LE (XXWW.DD)	LETEPHONE NO	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Englewood, FL 34224

beoA abisal¶ 1180

Sandalhaven WWTP

LOCATION:

FACILITY:

DISCHARGE MONITORY REPORT - PART A (Continued)

FACILITY:

Sandalhaven WWTP

MONITORING OUP NUMBER: R-001 MONITORING PERIOD From: ______ To

PERMIT NUMBER: FLA014053

Parameter		Quantity o	r Loading	Units	Qual	Units	No. Ex.	Frequency of Analysis	Sample Type		
pH	Sample Measurement						,				
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement						<u> </u>				
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Requirement			"	200 (An.Avg.)			#/100ML		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement										
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement			1	Report (Mo.Geo.Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement										
PARM Code 50060 A Mon.Site No. EFA-I	Permit Requirement				0.5 (Min.)			MG/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement										
PARM Code 00620 A Mon.Site No. EFA-1	Permit Requirement		· · · · · · · · · · · · · · · · · · ·		12.0 (Max.)			MG/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C PARM Code 80082 G	Sample Measurement										
PARM Code 80082 G Mon.Site No. INF-1 Solids, Total Suspended	Permit Requirement				Report (Mo.Avg.)			MG/L		Every Two Weeks	8-hour FPC
PARM Code 00530 G	Sample Measurement Permit			<u> </u>							
Mon.Site No. INF-1	Requirement Sample				Report (Mo.Avg.)	4		MG/L		Every Two Weeks	8-hour FPC
	Measurement Permit	·									
	Requirement Sample						2.7				
	Measurement Permit					<u> </u>					
	Requirement Sample			1.							
	Measurement Permit										
	Requirement										

DEPARTMENT OF ENVIRONMENTAL PROTFCTION DISCHARGE MONITORING REPORT - PART A

When Comp nail t	his report	to: Department	of Environmental P	rotection, South D	istrict, Florida	L nent of Envir	ronmental Protection	n, P O Box 2549, Ft	. Myers, FL	, 33902-	-2549	
PERMITTEL NAME: MAILING ADDRESS:	200 Weatl		2		PERMIT N	UMBER	FLA014053 Final		REPORT		Mont	hiv
	Anamonio	Springs, FL 32	/14		CLASS SIZ	ZE:	N/A		GROUP:	•	Dome	•
FACILITY: LOCATION:	6811 Plac	ven WWTP ida Road d, FL 34224		•		ING GROUP NUMI		•				
COUNTY:	Charlotte					IARGE FROM SITE LING PERIOD F	:: From:	То				_
Parameter			Quantity	or Loading	Units	Qual	lity or Concentra	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow		Sample Measurement										
PARM Code 50050 Mon.Site No. OTH-1A	Υ	Permit Requirement	0.10 (An.Avg.)		MGD	: ,					5 Days/Week	Flow meters and totalizers
Flow		Sample Measurement										
PARM Code 50050 Mon.Site No. OTH-1A	P	Permit Requirement	Report (Mo.Avg.)		MGD						5 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 d	lay, 20C	Sample Measurement					**-					
PARM Code 80082 Mon.Site No. EFA-1	Y	Permit Requirement			1	20.0 (An.Avg.)			MG/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 d	lay, 20C	Sample Measurement										
PARM Code 80082 Mon.Site No. EFA-1	A	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)		MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended		Sample Measurement					· · · · · · · · · · · · · · · · · · ·					
Mon.Site No. EFB-1	В	Permit Requirement				5.0 (Max.)			MG/L		4 Days/Week	Grab
pН		Sample Measurement										
PARM Code 00400 Mon.Site No. EFA-1	A 	Permit Requirement				6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
I certify under penalty of the information submitte knowledge and belief, tru	d. Based o le, accurate	n my inquiry of , and complete.	the person or perso I am aware that the	ns who manage the ere are significant _l	e system, or the	ose persons directly r	responsible for eath	ering the information	n the inform	nation s	ubmitted is to th	ne best of my
NAME/TITLE OF PRINCIP	AL EXECU	TIVE OFFICER C	R AUTHORIZED AC	ENT S	IGNATURE OF	PRINCIPAL EXECUT	TIVE OFFICER OR A	UTHORIZED AGENT	;	TELEPI	HONE NO DA	ATE (YY/MM/DĐ)
COMMENT AND EXPL	ANATION	OF ANY VIO	LATIONS (Reference	ce all attachments	here):		 			·	11	

DISCHARGE MONITORI - REPORT - PART A (Continued)

FACILITY

Sandalhaven WWTP

MONITORIN .OUP NUMBER: R-002 MONITORING PERIOD From: ______ To

PERMIT NUMBER: FLA014053

Parameter		Quantity or Loading	Units	Qua	lity or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement								
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement			25 (Max.)		#/100ML		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement								
PARM Code 50060 A Mon.Site No., EFA-1	Permit Requirement			1.0 (Min.)		MG/L		Continuous	Grab
Turbidity	Sample Measurement								
PARM Code 00070 B Mon.Site No. EFB-1	Permit Requirement					NTU		Continuous	Meter
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
<u> </u>	Permit Requirement							i	
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement		1 4 4						
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								

DAILY SAMPLE RESULTS - PART B Facility: Sandalhaven WWTP

Permit Num Monitoring	ber:	FLA014053 From:			AMPLE RES			ndalhaven W\	VТР		
(CBOD5 MG/L)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TSS (MG/L)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	CBOD5 (MG/L)	TSS (MG/L)	Flow (MGD
	80082	74055	00620	00400	00530	50060	00530	00070	80082	00530	50050
	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFB-1	EFB-1	INF-1	INF-1	OTH-1A
2		ļ			 		ļ		 	 	
3					 				ļ	-	
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27											
28											
29	-										
30											
31					 						
Total											
Mo. Avg.											
PLANT STAFF. Day Shift Opera	ING: tor	Class:	(Certificate No:		Nar	ne:				
Evening Shift O	perator	Class:		Certificate No:		Nan	ne:				
Night Shift Oper	rator	Class:		Certificate No:		Nan	ne:				
ea rator		Class:		Certificate No:		Nan	ne:				

DAILY SAMPLE RESULTS - PART B

FLA014053 Permit Number: Sandalhaven WWTP To: ___ Monitoring Period From: ____ Flow (MGD) Code 50050 Mon. Site OTH-1B 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 20 21 22 23 24 25 26 27 28 29 30 31 Total Mo. Avg. PLANT STAFFING: Class: _____ Certificate No: Day Shift Operator Name: **Evening Shift Operator** Class: _____ Certificate No: Name: _____ Certificate No: Night Shift Operator Class: Class: Certificate No: Name: Lea/

INSTRUCTIONS FOR COMPLETING THE WATER DISCHARGE MONITORING REPORT

The DMR consists of three parts--A, B, and D--all of which may or may not be applicable to every facility. Facilities may have one or more Part A's for reporting effluent or reclaimed water data. All domestic wastewater facilities will have a Part B for reporting daily sample results. Part D is used for reporting ground water monitoring well data.

When results are not available, the following codes should be used on parts A and D of the DMR and an explanation provided where appropriate. Note: Codes used on Part B for raw data are different.

CODE	DESCRIPTION/INSTRUCTIONS	
ANC	Analysis not conducted.	
DRY	Dry Well	
FLD	Flood disaster.	
IFS	Insufficient flow for sampling.	
LS	Lost sample.	
MNR	Monitoring not required this period.	

CODE	DESCRIPTION/INSTRUCTIONS
NOD OPS OTH SEF	No discharge from/to site. Operations were shutdown so no sample could be taken. Other. Please enter an explanation of why monitoring data were not available. Sampling equipment failure.

When reporting analytical results that fall below a laboratory's reported method detection limits or practical quantification limits, the following instructions should be used:

- 1. Results greater than or equal to the PQL shall be reported as the measured quantity.
- 2. Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter and when determining compliance with permit limits.
- 3. Results less than the MDL shall be reported by entering a less than sign ("<") followed by the laboratory's MDL value, e.g. < 0.001. A value of one-half the MDL or one-half the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limitation.

PART A -DISCHARGE MONITORING REPORT (DMR)

Part A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring requirements are interim or final, and the required submittal frequency (e.g. monthly, annually, quarterly, etc.). Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The following should be completed by the permittee or authorized representative:

No Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number; however, if the monitoring group includes other monitoring locations (e.g., influent sampling), the "NOD" code should be used to individually denote those parameters for which there was no discharge.

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Sample Measurement: Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row in the non-shaded area above the limit. Be sure the result being entered corresponds to the appropriate statistical base code (e.g. annual average, monthly average, single sample maximum, etc.) and units.

No. Ex.: Enter the number of sample measurements during the monitoring period that exceeded the permit limit for each parameter in the non-shaded area. If none, enter zero.

Frequency of Analysis: The shaded areas in this column contain the minimum number of times the measurement is required to be made according to the permit. Enter the actual number of times the measurement was made in the space above the shaded area.

Sample Type: The shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.

Signature: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comment and Explanation of Any Violations: Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area.

PART B - DAILY SAMPLE RESULTS

Monitoring F Enter the month, day, and year for the first and last day of the monitoring period (i.e. the __onth, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Daily Monitoring Results: Transfer all analytical data from your facility's laboratory or a contract laboratory's data sheets for all day(s) that samples were collected. Record the data in the units indicated. Table 1 in Chapter 62160, F.A.C., contains a complete list of all the data qualifier codes that your laboratory may use when reporting analytical results. However, when transferring numerical results onto Part B of the DMR, only the following data qualifier codes should be used and an explanation provided where appropriate.

CODE	DESCRIPTION/INSTRUCTIONS
<	The compound was analyzed for but not detected.
Α	Value reported is the mean (average) of two or more determinations.
J	Estimated value, value not accurate.
Q	Sample held beyond the actual holding time.
Y	Laboratory analysis was from an unpreserved or improperly preserved sample.

Add the results to get the Total and divide by the number of days in the month to get the Monthly Average.

Plant Staffing: List the name, certificate number, and class of all state certified operators operating the facility during the monitoring period. Use additional sheets as necessary.

PART D - GROUND WATER MONITORING REPORT

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Date Sample Obtained: Enter the date the sample was taken. Also, check whether or not the well was purged before sampling.

Time Sample Obtained: Enter the time the sample was taken.

Sample Measurement: Record the results of the analysis. If the result was below the minimum detection limit, indicate that.

Detection Limits: Record the detection limits of the analytical methods used.

Analysis Method: Indicate the analytical method used. Record the method number from Chapter 62-160 or Chapter 62-601, F.A.C., or from other sources.

Sampling Equipment Used: Indicate the procedure used to collect the sample (e.g. airlift, bucket/bailer, centrifugal pump, etc.)

Samples Filtered: Indicate whether the sample obtained was filtered by laboratory (L), filtered in field (F), or unfiltered (N).

Signature: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comments and Explanation: Use this space to make any comments on or explanations of results that are unexpected. If more space is needed, reference all attachments in this area.

SPECIAL INSTRUCTIONS FOR LIMITED WET WEATHER DISCHARGES

Flow (Limited Wet Weather Discharge): Enter the measured average flow rate during the period of discharge or divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day (MGD).

Flow (Upstream): Enter the average flow rate in the receiving stream upstream from the point of discharge for the period of discharge. The average flow rate can be calculated based on two measurements; one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit.

Actual Stream Dilution Ratio: To calculate the Actual Stream Dilution Ratio accurate to the nearest 0.1.

No. of Days the SDF > Stream Dilution Ratio: For each day of discharge, compare the minimum Stream Dilution Factor (SDF) from the permit to the calculated Stream Dilution Ratio. On Part B of the DMR, enter an asterisk (*) if the SDF is greater than the Stream Dilution Ratio on any day of discharge. On Part A of the DMR, add up the days with an "*" and record the total number of days the Stream Dilution Factor was greater than the Stream Dilution Ratio.

CBOD; Enter the average CBOD, of the reclaimed water discharged during the period shown in duration of discharge.

TKN: Enter the average TKN of the reclaimed water discharged during the period shown in duration of discharge.

Actual Rainfall: Enter the actual rainfall for each day on Part B. Enter the actual cumulative rainfall to date for this calendar year and the actual total monthly rainfall on Part A. The cumulative rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the month for which this DMR contains data.

Rainfall During Average Rainfall Year: On Part A, enter the total monthly rainfall during the average rainfall year and the cumulative rainfall for the average rainfall year. The cumulative rainfall year is the amount of rain, in inches, which fell during the average rainfall year from January through the month for which this DMR contains data.

No. of Days LWWD Activated During Calendar Year: Enter the cumulative number of days that the limited wet weather discharge was activated since January 1 of the current year.

Reason for Discharge: Attach to the DMR a brief explanation of the factors contributing to the need to activate the limited wet weather discharge.

.

UTILITIES, INC. OF SANDALHAVEN

AN AFFILIATE OF UTILITIES, INC.
200 WEATHERSFIELD AVENUE
ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

June 3, 2005

Mr. Keith Kleinmann Environmental Manager Department of Environmental Protection South District P.O. Box 2549 Fort Meyers, Florida 33902-2549

Re

Sandalhaven WWTP

FLA014053

Dear Mr. Kleinmann:

Please find listed below the responses concerning the file review and field inspection of the Sandalhaven WWTP conducted by your Department personnel on April 14, 2005.

1. STATEMENT: The Department found that the required permitted information was not properly recorded on the discharge monitoring report (DMR). The department is issuing a corrected DMR form that allows the operator to report flows for the two discharge sites, OTH-1A and OTH-1B. Please see enclosures.

RESPONSE: Department personnel provided the Sandalhaven WWTP operator a revised DMR by mail on approximately May 30, 2005. A revised DMR for April 2005 was mailed to your Department on June 2, 2005. Utilities, Inc. requests an electronic copy in a word document of the revised DMR.

2. STATEMENT: Please submit to the Department an updated copy of the reuse protocol indicating the correct turbidity alarm set points. The June 18, 2001 reuse protocol indicated a 5.0 NTU alarm set point for turbidity.

RESPONSE: Attached with this correspondence is the Revised Operating Protocol dated October 10, 2001. Please note under ACCEPTABILITY CRITERIA –TURBIDITY that "the proposed set-point for alarm will be 3.0 NTUs and diversion of the effluent will also be when the turbidity exceeds 3.0 NTUs." Utilities, Inc. of Sandalhaven will verify that the set point is set at this value.

If you have any questions, please contact Richard Retz at the telephone number or address listed on the letterhead or by e-mail at <u>r.retz@utilities-usa.com</u>.

Very Truly Yours, UTILITIES, INC. OF SANDALHAVEN

Michael T. Dunn Regional Manager

ec: Richard Retz., Assistant Operations Manager

Patrick Flynn, Regional Director

cc: Scott Stewart, Area Manager

Page 1 of 1 \\100.0.4.10\Operations\19\2\690\resp 1tr to 041405 inspect.doc

UTILITIES, INC. OF SANDALHAVEN

DOCKET NO.: 060285-SU

CHARLOTTE COUNTY

25.30-440 (8) Field Employees

Test Year Ended December 31, 2005

Employees Involved in Utilities, Inc. of Sandalhaven. Operations During Test Year 2005:

Patrick Flynn, Regional Director: Oversees all operations and employees in Florida.

Rick Retz, Regional Manager: Manages operations and employees for all West Coast operations. West Coast operations include all systems located in South Florida and West Florida.

Tony Wierzbicki, Project Manager: Manages capital projects and developer activity within the West Coast and South Florida Operations areas

Scott Stewart, Area Manager: Supervises the day-to-day operations for the systems within the West Coast Operations area.

Field Employees:

Patrick (Lenny) Godwin, Lead Operator ("B" Water License, "B" Wastewater License): Mr Godwin is responsible for overseeing the day-to-day operations of the Sandalhaven wastewater facility.

Mike Monet, Operator ("C" Wastewater License):

Facilities:

The minimum staffing requirement at the Sandalhaven wastewater plant is 6 hours per day, 7 days per week by a minimum Class "C" wastewater operator.

Duties and Responsibilities:

- a) Responsible for performing treatment plant, collection system and transmission system operation and maintenance. Duties are to be completed in a reasonable and professional manner consistent with standard operating practices in order to comply with state and local regulatory rules and requirements. Must perform duties consistent with the protection of the public health and the environment.
- b) Perform responsible, efficient, and effective on-site management and supervision of all system functions.
- c) Submit complete, accurate and timely periodic plant operating reports.
- d) Report to the Permittee and the Department of Environmental Protection any serious plant or system breakdown or condition causing or likely to cause serious, inefficient or unsafe treatment or discharge of wastewater in a manner not authorized by the current permit.
- e) Submit accurate reports relative to treatment plant, collection system, and transmission system operation, including sampling and laboratory analysis.
- f) Maintain an operation and maintenance log for the plant, current to the last operation and maintenance task performed.
- g) Perform required preventative maintenance in conformance with equipment manufacturer recommendations. Repair or replace plant equipment and collection system components as needed to keep the facilities operating as permitted.
- h) Perform various service order functions including but not limited to the following: customer complaints; reading and checking meters; cross-connection inspections; installing or repairing the collection and disposal systems.
- i) Maintain the visual aesthetics of the facilities in compliance with company standards, including grounds maintenance, fence repairs, site security, lighting fixtures, and general building upkeep.

UTILITIES, INC. OF SANDALHAVEN

DOCKET NO.: 060285-SU

CHARLOTTE COUNTY

25.30-440 (9) Vehicles

FL Vehicles as of 5-5-06

	Yr/Make/Model	VIN	Driver Assigned	Cost	Company Name
9934	99 DODGE DAKOTA	1B7FL26X6X\$261957	CORY SUDOL	\$15,678.58	Alafaya Utilities, Inc.
9932	99 DODGE DAKOTA	1B7FL26XXX\$277898	NO DRIVER YET	\$15,467,19	Alafaya Utilities, Inc.
636	06 CHEV COLORADO	1GCCS146568234592	JEROME HAMPTON		Alafaya Utilities, Inc.
	02 CHEVY S-10	1GCCS14W428209130	ROGER GRAY		Alafaya Utilities, Inc.
	00 CHEV CS10803	1GCCS14W9YK196208	CARL ZUBEK		
					Alafaya Utilities, Inc.
	06 CHEV C15 V-8	1GCEC14V86Z103857	MICHAEL OVERTON		Alafaya Utilities, Inc.
311	03 CHEV C15 FULL	1GCEC14X23Z114639	EDWARD ROBERTS	\$19,053.10	Alafaya Utilities, Inc.
308	03 CHEV C15 FULL	1GCEC14X83Z115665	SCOTT LEARNED	\$19,053.10	Alafaya Utilities, Inc.
431	04 CHEV C25	1GCHK24U04E296751	DON TAYLOR	\$25,036.88	Alafaya Utilities, Inc.
24	00 CHEV S-10	1GCCS14W9YK229577	ALVIN BISHOP		Bayside Utility Services, Inc.
	06 CHEV C15	1GCEC14V86E197990	ALVIN BISHOP		Bayside Utility Services, Inc.
	86 INTERNATIONAL	1HTLDTVN2GHA45725	VACUUM TRUCK		Bayside Utility Services, Inc.
		1GCCS14W628209453			
	02 CHEVY S-10		WILLIAM NEAL		Cypress Lakes, Utilities, Inc.
	06 CHEV C15 V-8	1GCEC14V26Z102011	DAVID SHOFFSTALL		Cypress Lakes, Utilities, Inc.
	00 CHEV CS10803	1GCCS14W2YK195806		\$15,363.17	Eastlake Water Service, Inc.
9808	98 DODGE DAKOTA	1B7FL26X6WS604943	JAMES ESKEW	\$15,312.81	Labrador Utilities, Inc.
427	04 CHEV C15 FULL	1GCEC14X94Z275720	SHANTAVIOUS RAINEY	\$17,763.05	Labrador Utilities, Inc.
508	05 CHEV C25 4X4	1GBHK24UX5E233792	VARIOUS		Mid-County
	01 CHEV S10	1GCCS14W01K129325	MATTHEW GUNTHER		Mid-County
	98 CHEV S-10	1GCCS14X2WK245013	STEVEN SZCZEPKOWSKI		Mid-County
		1GCEC14W81Z185977	SPARE		
	01 CHEV 1500				Mid-County
	04 CHEV C15	1GCEC14X24Z336714	ROBERT BUONO		Mid-County
	99 DODGE DAKOTA	1B7FL26X4XS261955	LENNY GODWIN	\$15,493.25	Sandalhaven
426	04 CHEV C15 FULL	1GCEC14X44Z274751	MIKE MONAT	\$17,763.05	Sandalhaven
9935	99 DODGE DAKOTA	1B7FL26X1XS277899	HAROLD EBERT	\$16,056.16	Sanlando Utilities, Inc.
9933	99 DODGE DAKOTA	1B7FL26X4XS277900	NO DRIVER YET	\$15,659,79	Sanlando Utilities, Inc.
	99 DODGE DAKOTA	1B7FL26X6XS261956	RAY HOGUE		Sanlando Utilities, Inc.
	99 DODGE DAKOTA	1B7FL26XXXS261958	JIM SWEGHEIMER	•	Sanlando Utilities, Inc.
	96 FORD RANGER REGULAR	1FTCR10X1TUB67972	SPARE		Sanlando Utilities, Inc.
			DOUG GOODWIN		· ·
	05 CHEV COLORADO	1GCCS146358238591			Sanlando Utilities, Inc.
	01 CHEV S10	1GCCS14W01K129261	ROBERTO REMIGIO		Sanlando Utilities, Inc.
	02 CHEVY S-10	1GCCS14W128209201	ROY MERICLE		Sanlando Utilities, Inc.
14	00 CHEV CS10803	1GCCS14W1YK195845	ALEXANDER LORENZO	\$15,363.17	Sanlando Utilities, Inc.
102	01 CHEV S10	1GCCS14W71K129239	ELISA STEGER	\$15,516.86	Sanlando Utilities, Inc.
9835	98 CHEV S-10	1GCCS14X0WK247116	SPARE	\$16,290.61	Sanlando Utilities, Inc.
	98 CHEV S-10	1GCCS14X6WK246309	THOMAS KEYS		Sanlando Utilities, Inc.
	01 CHEV 1500	1GCEC14V11E249162	KEVIN COOPER		Sanlando Utilities, Inc.
	01 CHEV 1500	1GCEC14V31E249471	JEFF PINDER		Sanlando Utilities, Inc.
		1GCEC14V32Z313941			
	02 CHEVY C15 FULL		DALE WHITE		Sanlando Utilities, Inc.
	00 CHEV 1500	1GCEC14V6YE249071	THOMAS ABENDROTH		Sanlando Utilities, Inc.
	01 CHEV 1500	1GCEC14V91E265755	MATTHEW MORRELL		Sanlando Utilities, Inc.
113	01 CHEV 1500	1GCEC14W21Z187837	JIMMIE HOLLISTER		Sanlando Utilities, Inc.
107	01 CHEV 1500	1GCEC14W71Z185310	JAMES PENDARVIS	\$17,227.78	Sanlando Utilities, Inc.
112	01 CHV 1500	1GCEC14W81Z183727	SHAWN EBERT	\$16,965.92	Sanlando Utilities, Inc.
312	03 CHEV C15 FULL	1GCEC14X03Z114378	MICK SHUE		Sanlando Utilities, Inc.
	03 CHEV C15 FULL	1GCEC14X63Z115177	FRED QUINLAN		Sanlando Utilities, Inc.
	04 FORD F-750	3FRXF75424V600407	SANLANDO DUMP TRUCK		Sanlando Utilities, Inc.
		1GCEC14X23Z115810	JERRY HAHN		
	03 CHEV C15 FULL				Tierre Verde
	89 FORD F-350	1FDKF37G5KNA56982	DUMP TRUCK		Utilities, Inc. of Florida
	97 PONTIAC GRAND AM	1G2WP5216WF270000	NO DRIVER YET		Utilities, Inc. of Florida
	00 CHEV C25 BOOM	1GBGK24R5YF484662	CENTRAL FL BOOM TRUCK	\$35,922.85	Utilities, Inc, of Florida
503	05 CHEV COLORADO	1GCCS146658179178	CHRIS PHILLIPS	\$16,750.47	Utilities, Inc, of Florida
612	06 CHEV COLORADO	1GCCS146768129150	CHRIS ALDAY	\$16,471.74	Utilities, Inc. of Florida
	06 CHEV C15	1GCEC14V96E197609	JEFF FINEHIRSH		Utilities, Inc. of Florida
	02 CHEVY C15 FULL	1GCEC14W12Z314210	CHARLES SCHWADES		Utilities, Inc. of Florida
	03 CHEV C15 FULL	1GCEC14X04Z274231	ALLEN FINCH		Utilities, Inc. of Florida
	04 CHEV C15 FULL	1GCEC14X24Z201474	JACK ADKINS		Utilities, Inc. of Florida
	03 CHEV C15 FULL	1GCEC14X63Z115146	STEVE HABERY		Utilities, Inc. of Florida
	04 CHEV C15 EXT CAB	1GCEC19VX4Z270758	RICHARD RETZ		Utilities, Inc, of Florida
509	05 CHEV C15 4X4 EXT	1GCEK19T35E230984	JOHN MARINELLI		Utilities, Inc, of Florida
639	06 CHEV C15 4X4 EXT	1GCEK19Z26Z225726	BILL COATES	\$24,891.62	Utilities, Inc, of Florida
428	04 CHEV \$10 TRAILBLAZER	1GNDT13S442340667	BRYAN GONGRE	\$27,109.73	Utilities, Inc, of Florida
	05 CHEV TAHOE	1GNEC13T85R199267	PATRICK FLYNN		Utilities, Inc. of Florida
	06 CHEV TAHOE 4X4	1GNEK13TX6R148941	JOHN HOY		Utilities, Inc. of Florida
	92 DODGE	2B7GB11X5NK163811	SEWER VIDEO EQUIP VAN		Utilities, Inc. of Florida
	02 CHEVY IMPALA	2G1WF55E329381533	SCOTTY HAWS		Utilities, Inc. of Florida
	99 CHEV LUMINA	2G1WL52M1X9177423	KATHY SILLITOE		Utilities, Inc, of Florida
	04 CHEV C15 EXT CAB	2GCEC19T341374628	TONY MERZBICKI		Utilities, Inc, of Florida
	06 CHEV C25	2GCEC19VX61115736	SCOTT STEWART		Utilities, Inc, of Florida
129	01 CHEV FULL 1500 4WD	2GCEK19T111381348	WILLIAM NEAL	\$24,967.07	Utilities, Inc, of Florida
	00 DODGE DAKOTA	1B7GG22X7YS753556	SPARE		Utilities, Inc. of Pennbrooke
	01 CHEV S10	1GCCS14WX18159350	JAMES YINGLING		Utilities, Inc. of Pennbrooke
	03 CHEV C15 FULL	1GCEC14X43Z114271	STEVEN PFOUTS		Utilities, Inc. of Pennbrooke
	05 CHEV C15 REG CAB	1GCEC14X75Z230180	DAN ANDERSON		Utilities, Inc. of Pennbrooke
5,1	00 07/27 070 7/20 07/0		2, 2, 7, 1, 52, 1, 50, 11	₩ 10,00 4 .10	Sames, me. of termbrooke

UTILITIES, INC. OF SANDALHAVEN

DOCKET NO.: 060285-SU

CHARLOTTE COUNTY

25.30-440 (10) Customer Complaints

Test Year Ended December 31, 2005

FOPER

: .

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 4 DETAIL SERVICE ORDER COMPLAINTS FOR 103 CUSTOMER REQUESTED (A) FOR PERIOD 01/01/05 TO 06/30/05 CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 922227 ACCOUNT# :. 006901014884 CUSTOMER NAME :. JOHNSTON, AMY SERVICE ADDRESS:. 6800 PLACIDA RD C2 PHONE :. 941/698-8865 EDATE :. 05/03/05 TYPE :. 20 FOPER : . COMMENT :. NSF CHK#972 4/20/5 \$37.67 [PAYMNT STPPD] . BANK SERV FEE 25.00 . TOTAL AMNT DUE \$62.67 PAYABLE BY CASHIER CHK OR M\O ONLY . TO AVOID INTERRUPTION OF SERV AND A \$450 RECONNECT FEE . 5 DAY LTTR MAILED 5/4 :. PAID ON 6/6/05 RESOLUTION . JS :. 06/06/05 RDATE CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 923227 ACCOUNT# :. 006901007611 CUSTOMER NAME :. LEPPELMEIER, ANTOINETTE SERVICE ADDRESS:. 3306 CATBIRD LN PHONE :. 216/398-4564 :. 05/05/05 EDATE :. 20 TYPE FOPER :. NSF AUOT DRAFT 4/26/5 \$16.25 [ACCNT CLOSED] COMMENT BANK SERV FEE 25.00 . TOTAL AMNT DUE \$41.25 PAYABLE BY CASHIER CHK OR M\O ONLY . TO QAVOID INTERRUPTION OF SERV AND A \$450 RECONNECT FEE . 5 DAY LTTR MAILED 5/6 :. PAID 5/16/05 JS RESOLUTION :. 05/16/05 RDATE CORPÝÝ----. 103 ROUTE :. SERVICE ORDER# :. 926045 ACCOUNT# :. 006900055311 CUSTOMER NAME :. , SERVICE ADDRESS:. PHONE : . :. 05/16/05 EDATE :. 20 TYPE

COMMENT

:. I NEED THE WATER METER #, ASAP PLEASE. SERVICE IS CONNECTED

AND THERE

. IS A HOME ON LOT PER CUSTOMER. THANK YOU

RESOLUTION

:. METER # 04113318

. BADGER METER

. READ 43.860

. MM/JS

. I INSTALLED METER INFO & BILL CODE- GAVE BACK TO JACKIE FOR

BACK BILL.AR

. THIS ACCT HAS ANEW ACCT # S/B6901010371

RB

RDATE

:. 05/17/05

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 5 DETAIL SERVICE ORDER COMPLAINTS FOR 103 CUSTOMER REQUESTED (A) FOR PERIOD 01/01/05 TO 06/30/05 CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 932398 ACCOUNT# :. 006901007312 CUSTOMER NAME : GARLAND, RAYMOND SERVICE ADDRESS:. 3401 PEPPERWOOD LNPHONE :. 941/697-2299 EDATE :. 06/03/05 :. 20 TYPE FOPER : . COMMENT :. OBTAIN A READ PER NEW :. READ 321 RESOLUTION . MM/JS RDATE :. 06/06/05 CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 932762 ACCOUNT# :. 006901008433 CUSTOMER NAME :. BERARD, HAROLD SERVICE ADDRESS:. 9111 KESTRAL CIR PHONE :. 508/771-4943 :. 06/06/05 EDATE :. 20 TYPE FOPER : . COMMENT :. TAG TO CALL OFFC: . CALL OFFC AND PROVIDE INFO FOR SWR ACCOUNT . TO AVOID ANY DISRUPTION IN SERVICE!! . THANK YOU :. READ 43 RESOLUTION . TAGGED . MM/JS :. 06/07/05 RDATE CORPýý----. 103 :. 690 ROUTE SERVICE ORDER# :. 932770 ACCOUNT# :. 006901010003 CUSTOMER NAME : . KLEIN, RICHARD C SERVICE ADDRESS:. 9081 BANTRY BAY BLVD PHONE :. 941/964-4448

:. CALL OFFC AND APPLY TO AVOID ANY DISRUPTION IN SERVICE FOR

SEWER

EDATE

TYPE FOPER COMMENT :. 06/06/05 :. 20

. :TAG ON DOOR :. READ 74

RESOLUTION

. MM/JS
. THIS IS 9081 BAUTRY BAY BLVD
:. 06/07/05

RDATE

CORPýý----. 103 ROUTE :. 690

SERVICE ORDER# :. 932774

ACCOUNT# :. 006901010351

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 6 DETAIL SERVICE ORDER COMPLAINTS FOR 103 CUSTOMER REQUESTED (A) FOR PERIOD 01/01/05 TO 06/30/05 CUSTOMER NAME : GILBERT, ALBERT E SERVICE ADDRESS:. 9790 EAGLE PRESERVE DR :. / -EDATE :. 06/06/05 :. 20 TYPE :. FOPER :. TAG ON DOOR: COMMENT . CALL AND APPLY FOR SEWER SERVICE TO AVOID ANY DISRUTION IN SERVICE. . THANKS RESOLUTION :. READ 111 . TAGGED . MM/JS RDATE :. 06/07/05 CORPýý----. 103 :. 690 ROUTE SERVICE ORDER# :. 932790 ACCOUNT# :. 006901011582 CUSTOMER NAME :. PAGE, LARRY SERVICE ADDRESS:. 6800 PLACIDA RD 222 PHONE :. 813/876-3091 EDATE :. 06/06/05 TYPE :. 20 FOPER : . COMMENT :. TAG ON DOOR: . APPLY FOR SEWER SERVICE TO AVOID ANY DISRUPTION . THANK YOU :. READ 654 RESOLUTION . TAGGED . MM/JS RDATE :. 06/07/05 CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 933756 ACCOUNT# :. 006901014052 CUSTOMER NAME :. COOPER, ROBERT B SERVICE ADDRESS:. 6610 GASPARILLA PINES BLVD 204 PHONE :. 941/697-6790 EDATE :. 06/08/05 TYPE :. 20 FOPER COMMENT :. TAG TO CALL OFFC AND APPLY . TO AVOID ITTERUPTION :. TAGGED TO CALL OFFC RESOLUTION

> . LG/JS :. 06/09/05

RDATE

CORPÝÝ----. 103 ROUTE :. 690

SERVICE ORDER# :. 933859
ACCOUNT# :. 006901008933
CUSTOMER NAME :. RIECK, BRUCE

SERVICE ADDRESS:. 6796 GASPARILLA PINES BLVD 46

PHONE :. 586/725-0252 EDATE :. 06/08/05

TYPE :. 20

FOPER :.

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM DETAIL SERVICE ORDER COMPLAINTS FOR 103 CUSTOMER REQUESTED (A) FOR PERIOD 01/01/05 TO 06/30/05 COMMENT :. APPLY FOR SERVICE . TAG! RESOLUTION :. TAGGED TO APPLY . READ 27 . MM/JS RDATE :. 06/09/05 CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 935554 ACCOUNT# :. 006900055260 CUSTOMER NAME :. SEIFERT, JAMES F SERVICE ADDRESS:. 9820 EAGLE PRESERVE DR PHONE :. / -EDATE :. 06/13/05 TYPE :. 20 FOPER :. :. ANY HOUSE SET HERE? HOOKED UP TO SEWER? COMMENT RESOLUTION :. NO HOUSE , NOTHING HOOKED UP . LG/JS :. 06/14/05 RDATE CORPÝÝ---. 103 ROUTE :. 690 SERVICE ORDER# :. 935555 ACCOUNT# :. 006900055280 CUSTOMER NAME :. SEIFERT, JAMES F SERVICE ADDRESS:. 9800 EAGLE PRESERVE DR PHONE :. / -EDATE :. 06/13/05 TYPE :. 20 FOPER COMMENT :. ANY HOUSE HERE? SEWER HOOKED UP YET? RESOLUTION :. NO HOUSE AND NO HOOK UP . LG/JS RDATE :. 06/14/05 CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 938990 ACCOUNT# :. 006901008933 CUSTOMER NAME : RIECK, BRUCE SERVICE ADDRESS:. 6796 GASPARILLA PINES BLVD 46 PHONE :. 586/725-0252 EDATE :. 06/22/05 :. 20 TYPE FOPER :. TAG TO APPLY COMMENT

. AGAIN

PAGE 7

. THANK YOU :. DOOR TAGGED AGAIN! RESOLUTION

. LG/JS :. 06/23/05 RDATE

CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 940817

ACCOUNT# :. 006901008321

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 8 DETAIL SERVICE ORDER COMPLAINTS FOR 103

CUSTOMER REQUESTED (A) FOR PERIOD 01/01/05 TO 06/30/05

CUSTOMER NAME :. WILSON, JOHN

SERVICE ADDRESS:. 9038 KESTRAL CIR

PHONE :. / -EDATE :. 06/27/05 TYPE :. 20

FOPER

:. NSF CHK#3296 6/13/5 \$26.96 COMMENT

. BANK SERV FEE 25.00 . TOTAL AMNT DUE \$51.96 PAYABLE BY CASHIER CHK OR M\O ONLY

. TO AVOID INTERRUPTION OF SERV AND A \$15 RECONNECT FEE

. 5 DAY LTTR MAILED 6/28

RESOLUTION :. NSF CHARGE WAS WAIVED PER LETTER FROM BANK

. NO ACTION TAKEN

. JS

RDATE :. 07/11/05

CORPýý----. 103

ROUTE :. 690 SERVICE ORDER# :. 898571

ACCOUNT# :. 006901015380

CUSTOMER NAME :. EGRET REAL ESTATE GROUP,

SERVICE ADDRESS:. 7050 PLACIDA RD PHONE :. 941/697-1445 :. 02/16/05 EDATE

:. 24 TYPE

FOPER

COMMENT :. ADJ ACCOUNT DUE TO NOT HOOKED UP TO SEWER YET. SPOKE TO EC SHE

SAID TO

. LEAVE DEPOSIT AND REC. AND ADJ BILL FOR SWR OFF UNTIL THE

ACCOUNT WAS

. TO BECOME ACTIVE AGAIN. JS

RESOLUTION :. ADJ -56.66 FOR SWR 420 GALLONS

. JS

RDATE :. 02/16/05

CORPýý----. 103

:. 690 ROUTE SERVICE ORDER# :. 898792

ACCOUNT# :. 006901015370

CUSTOMER NAME : . ERGET REAL ESTATE GROUP,

SERVICE ADDRESS:. 7035 PLACIDA RD PHONE :. 941/628-1378 EDATE :. 02/17/05

:. 24

FOPER : .

 $(x_1, \dots, x_n) \in \mathbb{R}^n \times \mathbb{R}^n$

COMMENT :. ADJ ACCOUNT PER FIELD. NO SWR INSTALLED AS OF YET.
RESOLUTION :. PER EC ADJ ONLY SWR OFF OF ACCT NOT DEPST OR RECNT.

. -57.43 1168 GALS

. JS

RDATE :. 02/17/05

CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 902555

ACCOUNT# :. 006901092980
CUSTOMER NAME :. RUSSELL, CHARLES SERVICE ADDRESS:. 8222 HARBORSIDE CIR

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 9 DETAIL SERVICE ORDER COMPLAINTS FOR 103

CUSTOMER REQUESTED (A)

FOR PERIOD 01/01/05 TO 06/30/05

COMMENT : ADJ ACCOUNT PER CCU READS RESOLUTION : ADJ FOR - 2000 TO

. AJD FOR -7.14 (069022)

. JS

:. 03/02/05 RDATE

CORPýý----. 103

ROUTE :. 690 SERVICE ORDER# :. 902863

ACCOUNT# :. 006901014051 CUSTOMER NAME : MACK, CHESTER M

SERVICE ADDRESS:. 6610 GASPARILLA PINES BLVD 204

PHONE :. 941/698-0117 EDATE :. 03/03/05

TYPE :. 24 FOPER

COMMENT :. CUSTOMER'S BANK SENT LETTER IN REGARDS TO NSF BEING THAT IT

WAS THEIR

. FAULT MR MACK'S CHECK DID NOT CLEAR

RESOLUTION :. WAIVED -25.00 NSF FEE

. JS

RDATE :. 03/03/05

CORPýý---. 103

:. 690 ROUTE SERVICE ORDER# :. 907239

ACCOUNT# :. 006901013101 CUSTOMER NAME : GORDON, ALBERT

SERVICE ADDRESS: . 6800 PLACIDA RD 188

PHONE :. / -EDATE :. 03/17/05

TYPE :. 24 FOPER

COMMENT :. ADJ ACCOUNT FOR PRIOR CONSUMPTION NOT BELONGING TO THIS

CUSTOMER BUT

. TO THE NEW CUSTOMER ON DASH TWO (MOVE IN DATE PER CUSTOMER WAS

12/30)

RESOLUTION :. ADJ ACCOUNT FOR -9000 GALS

. ADJ ACCOUT -60.91 SWR

. JS

RDATE :. 03/17/05

CORPýý---. 103

ROUTE :. 690 SERVICE ORDER# :. 907244

ACCOUNT# :. 006901013102 CUSTOMER NAME :. WHIPPO, CHARLES

SERVICE ADDRESS:. 6800 PLACIDA RD 188

EDATE PHONE :. 941/697-3105 :. 03/17/05

TYPE :. 24

FOPER

COMMENT :. ADJ ACCOUNT FOR TIME CUSOTMER SPENT IN HOME BEFORE SIGNING UP

RESOLUTION :. ADJ SWR (BACK BILL) +60.91 (9000 GALS)

. JS :. 03/17/05 RDATE

CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 910182 (545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 10 DETAIL SERVICE ORDER COMPLAINTS FOR 103 CUSTOMER REQUESTED (A) FOR PERIOD 01/01/05 TO 06/30/05 ACCOUNT# :. 006901007791 CUSTOMER NAME :. SABINE, LAURIE SERVICE ADDRESS:. 3304 DOVE LN PHONE :. / :. 03/28/05 EDATE :. 24 TYPE FOPER : . COMMENT :. PER CCU READ USED FOR FINAL ON THIS ACCOUNT WAS 11 . ADJ DONE :. ADJ +14.28 +4000 GALS RESOLUTION . JS RDATE :. 03/28/05 CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 910183 ACCOUNT# :. 006901007792 CUSTOMER NAME :. STEINER, EDWIN J SERVICE ADDRESS:. 3304 DOVE LN PHONE :. 941/697-5994 :. 03/28/05 EDATE TYPE :. 24 FOPER : . COMMENT :. CUSTOMER OVERBILLED DUE TO INCORRECT FINAL READ ON PRIOR FOR 1/31/05 . ADJ DONE RESOLUTION :. ADJ -12.63 AND -4000 GALS . JS RDATE :. 03/28/05 CORPýý---. 103 ROUTE :. 690 SERVICE ORDER# :. 915898 ACCOUNT# :. 006901014501 CUSTOMER NAME :. PARE, ROBERT SERVICE ADDRESS:. 6610 GASPARILLA PINES BLVD 224 PHONE :. 941/697-3699 :. 04/14/05 EDATE TYPE :. 24 FOPER : . COMMENT :. ADJ ACCOUNT DUE TO INCORRECT KEYED READ. RESOLUTION :. ADJ ACCOUNT -291000 GALS FOR SEWER . ADJ ACCOUNT -17.85 SWR CHARGES . 3/29/05 MISREAD 323 CORRECT READ 32 (USED) . JS

CORPýý----. 103

RDATE

ROUTE :. 690

:. 04/14/05

SERVICE ORDER# :. 933342

ACCOUNT# :. 006901012822 CUSTOMER NAME :. SCHULZE,WILLAIM

SERVICE ADDRESS:. 6800 PLACIDA RD TH2-A

PHONE :. 508/771-8811 EDATE :. 06/07/05

TYPE :. 24 FOPER :.

COMMENT :. ADJ ACCOUNT DUE TO MISREAD ON 3/29/05

. READ 3/29/05 118

ACCOUNT# :. 006901007051
CUSTOMER NAME :. WILLAFORD, ROY J

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 11 DETAIL SERVICE ORDER COMPLAINTS FOR 103 CUSTOMER REQUESTED (A) FOR PERIOD 01/01/05 TO 06/30/05 . SHOULDVE BEEN READ 25 RESOLUTION :. ADJ SWR -14.28 -4000 GALS . JS RDATE :. 06/07/05 CORPýý---. 103 ROUTE :. 690 SERVICE ORDER# :. 934012 ACCOUNT# :. 006900056541 CUSTOMER NAME : R. M. COATES CONSTUCTION INC, SERVICE ADDRESS:. 9310 TALON CT PHONE :. 941/460-9494 :. 06/08/05 EDATE :. 24 TYPE FOPER : . COMMENT :. ACCOUNT WAS NEVER FINAL BILLED IN JULY OF 2004 AS IT SHOULD OF BEEN . DUE TO A CUSTOMER CALLING IN. . AGAIN NEW HADNT SIGNED UP FOR HIS RCAP SEWER SERVICES. RESOLUTION :. ADJ ACCOUNT FOR -113.51 (BASE CHARGES) . BEGINING W/ AUGUST OF 2004 . JULY BILLS STILL BELONGED TO CUSTOMER. . TRANS BALANCE OF 113.51 TO ACCOUNT 005654-2 . HIS SIGN UP DATE PER CHARLOTTE COUNTY UTILITIES WAS 6/7/04 . JS RDATE :. 06/08/05 CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 936242 ACCOUNT# :. 006901011431 CUSTOMER NAME : RISÓ, EUNICE SERVICE ADDRESS:. 6800 PLACIDA RD 214 PHONE :. / :. 06/15/05 EDATE TYPE :. 24 FOPER : . COMMENT :. ADJ ACCOUNT DUE TO H/C MISREAD . PRIOR CONS. 30000 GALS :. ADJ 69022 -28.56 RESOLUTION . MISREAD 5/28/05 . JS RDATE :. 06/15/05 CORPýý----. 103 :. 690 ROUTE SERVICE ORDER# :. 937150

SERVICE ADDRESS:. 6725 GASPARILLA PINES BLVD

PHONE :. / EDATE :. 06/16/05

TYPE :. 24 FOPER :.

COMMENT :. ADJ ACCOUNT DUE TO MISREAD

. PRIOR READ 801 USAGE 722,000

. CORRECTED READ 81 USAGE 2,000

RESOLUTION :. ADJ 69022 -21.42 -8000GALS

. JS

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 12
DETAIL SERVICE ORDER COMPLAINTS FOR 103

PERMIT PRIVIOR OWNER COMPANIES FOR 103

CUSTOMER REQUESTED (A) FOR PERIOD 01/01/05 TO 06/30/05

RDATE :. 06/16/05

CORPýý---. 103

ROUTE :. 690 SERVICE ORDER# :. 937509

ACCOUNT# :. 006901008821 CUSTOMER NAME :. POST, WALTER

SERVICE ADDRESS:. 6796 GASPARILLA PINES BLVD 35

PHONE :. 727/302-2226 EDATE :. 06/17/05 TYPE :. 24

FOPER :.

FOFER :.

COMMENT :. CUSTOMER REQUESTED FINAL SERVICE ON 5/24/05. IT WAS READ BUT

TOM

. FINALED AT THAT TIME FOR A FINAL BILL TO BE ISSUED. ON 5/28/05 . THE REGULAR READ WAS TAKEN AND THE CUSTOMER WAS BILLED WITH

THAT READ

. AND UP TO THAT PERIOD. THE ACCOUNT IS ADJUSTED FOR THE 4 DAYS

OF

. SERVICE ON THE BASE CHARGES.

RESOLUTION :. 5/24/05 FINAL READ 23. CUSTOMER WAS BILLED THROUGH 5/28/05 AND

READ

. OF 23. ADJUSTED BASE CHARGE FOR 4 DAYS @ \$1.65 AND A FINAL

BILL

. IS ISSUED WITH THIS CREDIT FROM 5/28/05 READ AND 6/05 BILL.

. EC

RDATE :. 06/17/05

CORPýý---. 103

ROUTE :. 690 SERVICE ORDER# :. 937829

ACCOUNT# :. 006901009241
CUSTOMER NAME :. KANSMAN, HARRY

SERVICE ADDRESS:. 6796 GASPARILLA PINES BLVD N-77

PHONE :. / - EDATE :. 06/20/05

TYPE :. 24 FOPER :.

COMMENT :. ADJ ACCOUNT DUE TO MISREAD ON 5/31/05

RESOLUTION :. ADJ -1000 GAL . ADJ -3.57 SWR

. JS

RDATE :. 06/20/05

CORPýý----. 103

ROUTE :. 690 SERVICE ORDER# :. 938471

ACCOUNT# :. 006901011822

CUSTOMER NAME :. PIETRUCKI, JOSEPH SERVICE ADDRESS:. 6800 PLACIDA RD 242

PHONE :. 941/697-3342 EDATE :. 06/21/05

TYPE :. 24

FOPER :.

COMMENT :. DUE TO CCU RECORDS MR. PIETRUCKI FINALED HIS ACCOUNT W/ THEM

AS OF

. 11/30/04 W/ A FINAL READ OF 751

RESOLUTION :. ADJ DONE TO BOTH -2 AND -3 ACCOUNTS

. 006901011822 (51) \$-51.73 -14,000 GALS . 006901011823 (51) \$+51.73 +14,000 GALS

. TRANS BALANCE FROM THIS DASH TO 6901011823

. JS

EDATE

TYPE

:. 01/13/05

:. 40

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 13 DETAIL SERVICE ORDER COMPLAINTS FOR 103 CUSTOMER REQUESTED (A) FOR PERIOD 01/01/05 TO 06/30/05 RDATE :. 06/21/05 CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 938480 ACCOUNT# :. 006901011823 CUSTOMER NAME : BARRET, JOSEPH SERVICE ADDRESS: . 6800 PLACIDA RD 242 :. / EDATE :. 06/21/05 TYPE :. 24 FOPER : . COMMENT :. ADJ ACCOUNT DUE TO INFO PROVIDED BY CCU AND FIDDLERS GREEN REALTY. RESOLUTION :. ADJ . 006901011822 (51) \$-51.73 -14000 GALS TRANS TO 6901011823 . 006901011823 (51) \$+51.73 +14000 GALS TRANS FROM 6901011822 . HIS ACCOUNT BEGAN AS OF 11/30/05 W/ CCU . CLOSED PER REALTOR AS OF 6/14/05 . JS RDATE :. 06/21/05 CORPýý----. 103 :. 690 SERVICE ORDER# :. 906207 ACCOUNT# :. 006901009591 CUSTOMER NAME : . KRUPA, FRANK SERVICE ADDRESS:. 6796 GASPARILLA PINES BLVD L-21 PHONE :. / -:. 03/15/05 EDATE TYPE :. 39 FOPER COMMENT :. LIFT STATION ALARM SOUNDING . PROVIDE RESOLUTION RESOLUTION :. READ 21 . PLEASE NOTE THE CORRECT ADDRESS IS 6796 GASP'PINES BLVD LOT 21 . METER NUMBER CORRECT . MM/JS RDATE :. 03/16/05 CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 888361 ACCOUNT# :. 006901007393
CUSTOMER NAME :. KELLEHER, PAUL H SERVICE ADDRESS:. 3312 BLUE JAY LN PHONE :. 603/569-3310

FOPER

COMMENT

:. :. Customer says part of her back yard was dug up because work

WAS BEING

. MADE TO SEWER LINE. SHE SAYS TO HOLE WAS FILLED IN, BUT THE

AREA NEED

. TO BE RESODDED. PLEASE CHECK AND ADVISE CUSTOMER

RESOLUTION

:. PENDING TO BE RESOLVED TODAY OR ON TUESDAY THE 22ND

. LG/JS

. 2/22/05 SOD INSTALLED, JOB COMPLETED, CUSTOMER HAPPY

. MM/JS

RDATE

:. 02/18/05

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 14 DETAIL SERVICE ORDER COMPLAINTS FOR 103

CUSTOMER REQUESTED (A) FOR PERIOD 01/01/05 TO 06/30/05

43 records listed.

CUSTOMER NAME :. VENNING, JOHN

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(545) REPORT UBRSORDREPORT.2
                                 UTILITY BILLING SYSTEM
                                                              PAGE 1
DETAIL SERVICE ORDER COMPLAINTS FOR 103
CUSTOMER REQUESTED ( Y )
FOR PERIOD 07/01/05 TO 12/31/05
CORPýý---. 103
ROUTE :.
SERVICE ORDER# :. 952323
ACCOUNT# :. 006909000500
CUSTOMER NAME :. ,
SERVICE ADDRESS:.
                 /
PHONE :.
            :. 07/27/05
EDATE
TYPE
            :. 20
FOPER
             : .
COMMENT
             :. PLEASE SEND BACK W/ METER INFO
              . THANKS ;-)
RESOLUTION
             :. NO METER AT THIS TIME
              . THEY ARE HOOKED UP TO SWR.
              . LG/JS
              . 10/12/05
              . NOT ON R/SHEETS CK CC
              . 10/25/05 CHARLOTTE COUNTY HAS NOT INSTALLED METER YET.
EXTENDED DUE DATE
              . FROM 07/27/05 TO 11/30/05
              . KS
RDATE :. 10/25/05
CORPýý----. 103
ROUTE :.
SERVICE ORDER# :. 952516
ACCOUNT# :. 006909000530
CUSTOMER NAME :. ,
SERVICE ADDRESS:.
PHONE :.
                  /
            :. 07/28/05
EDATE
             :. 20
TYPE
FOPER
COMMENT :. MIKE OR LENNY COULD YOU PLEASE CHECK THIS RESIDENCE TO SEE IF
TAP HAS
             . BEEN HOOKED UP YET. CUSTOMER ASKING WHERE IT IS LOCATED.
              . THANK YOU
RESOLUTION
             :. CUSTOMER NEEDS TO GO IN DEEPER TO CONNECT
              . BUT THEY HAVE THE CORRECT LOCATION
              . LG/JS
             :. 07/29/05
RDATE
CORPýý----. 103
ROUTE :. 690
SERVICE ORDER# :. 952874
ACCOUNT# :. 006901010171
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SERVICE ADDRESS:. 9791 EAGLE PRESERVE DR

PHONE :. 941/830-2028 EDATE :. 07/28/05

:. 20

TYPE FOPER

:. JUST WANTED AN UPDATE. COMMENT

. IS THIS HOOKED UP TO OUR SWR YET? . I SHOW THEY ARE USING WATER HERE.

RESOLUTION :. YES HOOKED UP

. LG/JS

RDATE :. 07/29/05

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(545) REPORT UBRSORDREPORT.2
                                 UTILITY BILLING SYSTEM
                                                               PAGE 2
DETAIL SERVICE ORDER COMPLAINTS FOR 103
CUSTOMER REQUESTED ( Y )
FOR PERIOD 07/01/05 TO 12/31/05
CORPÝÝ---. 103
ROUTE :.
SERVICE ORDER# :. 952881
ACCOUNT# :. 006909000290
CUSTOMER NAME :. ,
SERVICE ADDRESS:.
PHONE :. / -
EDATE
            :. 07/28/05
TYPE
            :. 20
FOPER
             : .
             :. IS THIS HOOKED UP TO SWR YET???
COMMENT
              . METER INFO???
              . HAS USAGE W/ WATER CO.
RESOLUTION
             :. READ 0000
              . YES HOOKED UP
              . MTR# 4116459
              . LG/JS
              . READ 0
              . METER # 04116459
RDATE
             :. 10/14/05
CORPýý---. 103
ROUTE :.
SERVICE ORDER# :. 967563
ACCOUNT# :. 00690000000
CUSTOMER NAME :. ,
SERVICE ADDRESS:.
PHONE :. / -
EDATE
            :. 09/12/05
             :. 20
TYPE
FOPER
             :. UIS
COMMENT
             :. CAN WE SUPPLY SEWER TO LOT 23 BANTRY BAY BLVD?
             . LYN @ROBERTSON HOMES 941-474-2031.
              . THANK YOU.
RESOLUTION
             :. NO-WE HAVE NO SEWER IN THAT AREA.
              . 9/21/05- I ADVISED CUSTOMER THAT OUR LINES DO NOT EXTEND THAT
FAR & THAT
              . THE CUSTOMER CAN PD FOR THE LINE TO GET EXTENDED, WE WOULD
HAVE TO SEE
              . PLAN & APPROVED THEM. (PER TONY) ANN
            :. 09/12/05
RDATE
CORPÝÝ---. 103
ROUTE :. 690
SERVICE ORDER# :. 972494
ACCOUNT# :. 006901012852
CUSTOMER NAME :. WATT, TULA
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SERVICE ADDRESS:. 6800 PLACIDA RD TH2-D

PHONE :. / - EDATE :. 09/26/05

TYPE :. 20

FOPER :.

COMMENT :. PLEASE TAG CUST DOOR TO PLEASE CALL THE OFFICE ASAP IN

REFERENCE TO

. A PAYMENT DISCREPENCY ASK CUST TO CALL AND ASK FOR ROBERT IN

. CUSTOMER SERVICE, THANKS

RESOLUTION :. 09/30/05 HOME TAGGED ALSO I HAD LEFT VM FOR CUST AND SHE

CALLED THE NEXT

. DAY ALL IS OK

. MIKE/RB

RDATE :. 09/30/05

CUSTOMER NAME :. BRUCE, ELKINS L

(545) REPORT UBRSORDREPORT.2 PAGE 3 UTILITY BILLING SYSTEM DETAIL SERVICE ORDER COMPLAINTS FOR 103 CUSTOMER REQUESTED (Y) FOR PERIOD 07/01/05 TO 12/31/05 CORPÝÝ---. 103 ROUTE :. SERVICE ORDER# :. 002843 ACCOUNT# :. 006900000000 CUSTOMER NAME :. , SERVICE ADDRESS:. PHONE :. / :. 12/28/05 EDATE :. 20 TYPE FOPER :. UIS :. CAN WE PROVIDE SERVICE TO 8904 BANTRY BAY BLVD. (LOT 23)? COMMENT . TERRY SMITH 941-964-0809 CELL- 704-252-0106. . CUSTOMER SAID IT'S NEXT DOOR TO HIS COMMERICAL LOTS(LOT 19,20,21,22) . THANK YOU! :. THAT WOULD BE A "NO" OUR NEAREST SEWER LINE IS APPROX NINE RESOLUTION HOUSE LOTS . DOWN THE ROAD. MIGHT WANT TO CHECK WITH TONY OR MIKE. I DOUBT THEY . WOULD WANT TO RUN A LINE FOR A LOT OR TWO. MIKE M/ANN RDATE :. 01/03/06 CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 974523 ACCOUNT# :. 006901007361 CUSTOMER NAME : . STIMAN, MR SERVICE ADDRESS:. 6633 GASPARILLA PINES BLVD PHONE :. / -:. 09/30/05 :. 24 EDATE TYPE FOPER : . COMMENT :. THIS CUSTOMER REQUESTED THAT THE SERVICE BE FINALED ON 5/23/05. . THE CUSTOMER WAS BILLED THROUGH 6/23/05. ADJUST THE ACCOUNT FOR . OVER BILL. :. ACCOUNT IS ADJUSTED FOR \$15.16 DUE TO INCORRECT BILL PERIOD. A RESOLUTION . CORRECTED BILL WILL BE SENT TO THE CUSTOMER. . EC RDATE :. 09/30/05 CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 992570 ACCOUNT# :. 006901014202

SERVICE ADDRESS:. 6610 GASPARILLA PINES BLVD 209

PHONE :. 941/697-0344

EDATE :. 11/22/05

TYPE :. 24

FOPER :.

COMMENT :. CHARLOTTE COUNTY MIS READ FOR 8/31/05 WAS 47. CUSTOMER WAS

OVER BILLED

. 6000 GALS. ADJUST ACCOUNT

RESOLUTION :. CHARLOTTE COUNTY CORRECT READ 41. ADJUSTED SEWER 6000 GALS

\$22.20. A

. CORRECTED BILL WILL BE SENT TO THE CUSTOMER

. CC/EC

RDATE :. 11/22/05

CORPýý----. 103

CUSTOMER NAME :. GONDA, WALTER
SERVICE ADDRESS:. 3324 BLUE JAY LN

:. 941/697-0694

PHONE

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 4 DETAIL SERVICE ORDER COMPLAINTS FOR 103 CUSTOMER REQUESTED (Y) FOR PERIOD 07/01/05 TO 12/31/05 ROUTE :. 690 SERVICE ORDER# :. 999561 ACCOUNT# :. 006901190870 CUSTOMER NAME : BAILEY, LURLEEN SERVICE ADDRESS:. 9173 PINEHAVEN WY PHONE :. 941/697-6712 EDATE :. 12/15/05 TYPE :. 35 FOPER COMMENT :. CUSTOMER BELIEVES HER SWR LINE IS BROKEN . PAGED TO LG :. LINE IS ON CUSTOMER SIDE. SPOKE W/ CUSTOMER AND OFFICE AND RESOLUTION INFORMED THEM . BOTH. . P.S. NOT A BIG PROBLEM BY THE WAY NO LEAK . MM/JS RDATE :. 12/15/05 CORPÝÝ---. 103 ROUTE :. 690 SERVICE ORDER# :. 999836 ACCOUNT# :. 006901007081
CUSTOMER NAME :. YESKA, DONALD SERVICE ADDRESS:. 6712 LONG MOSS LN PHONE :. 941/697-0162 EDATE :. 12/16/05 TYPE :. 35 FOPER : . :. PLEASE CHECK SEWER LINE BY DRIVEWAY WHERE HOLE IS LOCATED COMMENT INFORM . CUSTOMER OF FINDINGS AND AVISE. . PAGED TO LENNY RESOLUTION :. REPLACED 6" CAP AT "Y" WHEN THERE SEWER IS TIED IN FOR THIS ADDRESS AND . THE ONE NEXT DOOR. FILLED HOLE BACK IN AND WILL SEED UNLESS SCOTT S. GIV . -ES OVK TO SOD WHICH WOULD BE A WEEK OR SO BEFORE WE COULD COMPLETE. . LL/JS RDATE :. 01/11/06 CORPýý----. 103 :. 690 SERVICE ORDER# :. 001039 ACCOUNT# :. 006901007531

EDATE :. 12/21/05

TYPE :. 39

FOPER : .

COMMENT :. RED LIGHT ON AT GASPARILLA PINES BLVD LOCATION

. PAGED TO LEENY; 11:01AM-HE SAID THEY ARE WORKING ON IT NOW

RESOLUTION :. FLOAT STUCK AT L/S 5

. LG/JS

:. 12/21/05 RDATE

CORPýý---. 103 ROUTE

SERVICE ORDER# :. 947748

ACCOUNT# :. 006900000000 CUSTOMER NAME :. ,

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 5
DETAIL SERVICE ORDER COMPLAINTS FOR 103

CUSTOMER REQUESTED (Y)

FOR PERIOD 07/01/05 TO 12/31/05

SERVICE ADDRESS:.

PHONE :. / - EDATE :. 07/15/05

TYPE :. 47

FOPER :

COMMENT :. PAGED LENNY G REGARDING A CUSTOMER CALL DUE TO L/STATION ON

GASPERILLA

. PINES BLVD THAT WAS SOUNDING ALARM.

RESOLUTION :. WATER LEAK WAS NOT OURS. NO ALARM SOUNDING FOR L/S

. CALLED CCU ABOUT LEAK

. LG/JS

RDATE :. 07/15/05

CORPýý----. 103

ROUTE :. 690 SERVICE ORDER# :. 995042

ACCOUNT# :. 006901007062
CUSTOMER NAME :. HEFFLER, JENNIFER

SERVICE ADDRESS:. 6713 GASPARILLA PINES BLVD

PHONE :. 941/697-9856 EDATE :. 12/02/05

TYPE :. 48

FOPER :.

COMMENT :. SEWER LINE BUSTED IN FRONT OF HER HOUSE

. PAGED TO LENNY; 9:49AM

RESOLUTION :. 12/05/05 PER FIELD TURNED OUT TO BE MAIN BREAK.....

CALLED

. CHARLOTTE COUNTY AND THEY REPAIRED THE LINE.....

. LENNY/RB

RDATE : 12/05/05

14 records listed.

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 1 DETAIL SERVICE ORDER COMPLAINTS FOR 103 CUSTOMER REQUESTED (A) FOR PERIOD 01/01/05 TO 06/30/05 CORPýý---. 103 ROUTE :. 690 SERVICE ORDER# :. 906177 ACCOUNT# :. 006901007792 CUSTOMER NAME :. STEINER, EDWIN J SERVICE ADDRESS:. 3304 DOVE LN PHONE :. 941/697-5994 :. 03/14/05 EDATE TYPE :. 01 FOPER • . :. CUSTOMER SAYS HIS START READING WITH THE COUNTY WAS 11 ON COMMENT 1/31/05, AND . THE METER READ 13 ON 2/26/05. PLEASE VERIFY 1/31/05 METER READING AND . ADJUST ACCOUYNT IF NECESSARY. RESOLUTION :. READF 15 . THE LAST TIME WE READ THIS TO MY KNOWLEDGE WAS ON 1/19/05. READ AT TIME . WAS 10 ORDER *889582. THERE IS NO SIGN OF LEAK. CHARLOTTE CO. READS THES . FOR BILLING PRUPOSES MAYBE THEY HAVE RECORD OF 1/31/05 :. 03/16/05 RDATE CORPÝÝ----. 103 ROUTE :. 690 SERVICE ORDER# :. 932772 ACCOUNT# :. 006901010092 CUSTOMER NAME : . STANWIX, JOHN A SERVICE ADDRESS:. 9711 EAGLE PRESERVE DR PHONE :. 716/442-2000 :. 06/06/05 EDATE :. 10 TYPE FOPER COMMENT :. PLEASE READ THIS METER . SOMETHING IS OUT OF SORTS WITH THE READING I HAVE. :. READ 50 RESOLUTION . NEW METER . 10400159 . MM/JS RDATE :. 06/07/05 CORPýý----. 103 ROUTE :. 690 SERVICE ORDER# :. 885695 ACCOUNT# :. 006901007102 CUSTOMER NAME :. BOCA BEACH CAPITOL,

SERVICE ADDRESS:. 6736 LONG MOSS LN

:. 01/05/05

PHONE :. /

EDATE

TYPE :. 20

FOPER

:. :. TAG TO APPLY FOR SERVICE. COMMENT

RESOLUTION :. READ 4.810

. TAGGED MM/JS

RDATE :. 01/06/05

CORPýý----. 103

:. 690 SERVICE ORDER# :. 885696

ACCOUNT# :. 006901007213 CUSTOMER NAME :. TORESCO, DOMINICK J SERVICE ADDRESS:. 6745 LONG MOSS LN

ROUTE

:. 690

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 2 DETAIL SERVICE ORDER COMPLAINTS FOR 103 CUSTOMER REQUESTED (A) FOR PERIOD 01/01/05 TO 06/30/05 PHONE :. 941/698-0561 EDATE :. 01/05/05 :. 20 FOPER : . COMMENT :. PLEASE TAG TO APPLY :. READ 32.290 RESOLUTION . TAGGED MM/JS RDATE :. 01/06/05 CORPýý----. 103 :. 690 ROUTE SERVICE ORDER# :. 894989 ACCOUNT# :. 006901013812 CUSTOMER NAME : . CARLO, JOHN SERVICE ADDRESS:. 6600 GASPARILLA PINES BLVD 106 PHONE :. / -:. 02/03/05 :. 20 EDATE TYPE FOPER : . COMMENT :. NSF CHK#9437 1/21/5 \$34.10 . BANK SERV FEE 25.00 . TOTAL AMNT DUE \$59.10 PAYABLE BY CASHIER CHK OR M\O ONLY . TO AVOID INTERRUPTIONO F SERV AND A \$15 RECONNECT FEE . 5 DAY LTTR MAILED 2/4 RESOLUTION :. PAID IN FULL . 2/14/05 . JS :. 02/14/05 RDATE CORPýý---. 103 ROUTE :. 690 SERVICE ORDER# :. 896033 ACCOUNT# :. 006901014051
CUSTOMER NAME :. MACK, CHESTER M SERVICE ADDRESS:. 6610 GASPARILLA PINES BLVD 204 PHONE :. 941/698-0117 EDATE :. 02/08/05 TYPE :. 20 FOPER :. NSF AUTO DRAFT 1/31 \$26.96 COMMENT . BANK SERV FEE 25.00 [ACCNT FROZEN]
. TOTAL AMNT DUE \$51.96 PAYABLE BY CASHIER CHK OR M\O ONLY . TO AVOID INTERRUPTION OF SERV AND A \$450 RECONNECT FEE . 5 DAY LTTR MAILED 2/9 :. PAID 2/16/05 JS RESOLUTION RDATE :. 02/16/05 CORPýý----. 103

SERVICE ORDER# :. 898159

ACCOUNT# :. 006901015380
CUSTOMER NAME :. EGRET REAL ESTATE GROUP,

SERVICE ADDRESS:. 7050 PLACIDA RD

:. 941/697-1445 EDATE :. 02/15/05

TYPE :. 20

FOPER : .

:. PLEASE VERIFY METER THERE AND CUSTOMER IS ON SEWER SERVICE. COMMENT

(545) REPORT UBRSORDREPORT.2 UTILITY BILLING SYSTEM PAGE 3
DETAIL SERVICE ORDER COMPLAINTS FOR 103

CUSTOMER REQUESTED (A)

FOR PERIOD 01/01/05 TO 06/30/05

RESOLUTION :. METER NO 504509

. THIS BLDG IS NOT YET HOOKED UP TO SEWER

. JS . LG

RDATE :. 02/16/05

CORPýý----. 103

ROUTE :. 690 SERVICE ORDER# :. 898452

ACCOUNT# :. 006901015370

CUSTOMER NAME : . ERGET REAL ESTATE GROUP,

SERVICE ADDRESS:. 7035 PLACIDA RD PHONE :. 941/628-1378 EDATE :. 02/16/05

TYPE :. 20 FOPER :.

COMMENT :. VERIFY IF HOOKED UP TO OUR SEWER LINES

. TIMOTHY FITZFIMMONS-PH THIS IN**

RESOLUTION :. NO SEWER AS OF YET

. MR FITZSIMMONS WILL CONTACT WHEN DONE

. JS . MM

RDATE :. 02/17/05

CORPýý---. 103

ROUTE :. 690 SERVICE ORDER# :. 899473

ACCOUNT# :. 006901013101 CUSTOMER NAME :. GORDON, ALBERT

SERVICE ADDRESS:. 6800 PLACIDA RD 188

PHONE :. / EDATE :. 02/18/05

TYPE :. 20 FOPER :.

COMMENT :. TAG CUSTOMER TO CALL OFFC

. EXT. 224 AND SPEAK TO JACQUEE IN REGARDS TO ACCT.

. THANKYOU

RESOLUTION :. TAGGED MM/JS RDATE :. 02/22/05

CORPýý----. 103

ROUTE :. 690 SERVICE ORDER# :. 908315

ACCOUNT# :. 006901013332 CUSTOMER NAME :. LUSARDO,MICHAEL

SERVICE ADDRESS:. 6800 PLACIDA RD 1004

PHONE :. 609/978-0463 EDATE :. 03/21/05

TYPE :. 20

FOPER :.
COMMENT :. TAKE FINAL READING, TURN OFF & LOCK
RESOLUTION :. READ 327

. MM/JS

. AACCOUNT WAS REACTIVATED... :. 03/29/05

RDATE