CLASS A and B WATER AND/OR WASTEWATER UTILITIES

FINANCIAL, RATE AND ENGINEERING MINIMUM FILING REQUIREMENTS

OF

Utilities, Inc. of Florida - Seminole County

Exact Legal Name of Unlary

VOLUME III



FOR THE

Test Year Ended: 12/31/05

FORM PSC/WAW 20 (/)

BINDER 7 of 11

System(s):

Jansen Lake Wekiva DOCUMENT NUMBER-DATE

09073 OCT-28

EDEC-COMMISSION CLERK

Jansen

Docket No. 060253-WS

Seminole County

Test Year Ended December 31, 2005

Jansen

Docket No. 060253-WS

25.30-440(1) Detailed Map

Test Year Ended December 31, 2005

MAPS

SUBMITTED TO COMMISSION SEPARATELY

Jansen

Docket No. 060253-WS

25.30-440(2) Chemicals Used

Test Year Ended December 31, 2005

UTILITIES, INC. OF FLORIDA CHEMICAL USE DATA TEST YEAR: 2006

			Water	Unit
		Chemical		Price
County	System Name	Used	Treatment	Price
Seminole	Weathersfield	Chlorine	40-45 gpd	\$ 1.15/gal
A STATE OF THE PERSON NAMED OF		Chemical	Water	Unit
County	System Name	Used	Treatment	Price
Seminole	Oakland Shores	Chlorine	20-25 gpd	\$ 1.15/gal
		Chemical	Water	Unit
County	System Name	Used	Treatment	Price
Seminole	Little Wekiva	Chlorine	3-4 gpd	\$ 1.15/gal
A CONTRACTOR OF THE PROPERTY O		Chemical	Water	Unit
County	System Name	Used	Treatment	Price
	<u> </u>		1	A 45/
Seminole	Park Ridge	Chlorine	3-4 gpd	\$ 1.15/gal
		Polyphosphate	1-2 gpd	\$14.00/ gal
			Water	Unit
		Chemical	Water	
County	System Name	Used	Treatment	Price
Seminole	Phillips	Chlorine	2-3 gpd	\$ 1.15/gal
		Polyphosphate	1-2 gpd	\$14.00/ gal
Burren Land Committee Committee Committee		Chemical	Water	Unit
County	System Name	Used	Treatment	Price
Seminole	Crystal Lake	Chlorine	3-4 gpd	\$ 1.15/gal
<u> </u>	Orystal Lake	Polyphosphate	1-2 gpd	\$14.00/ gal
NO NEW TOWN THE PROPERTY OF STREET OF STREET, STREET, STREET, STREET, STREET, STREET, STREET, STREET, STREET,	Section and the section of the secti	Chemical	Water	Unit
County	System Name	Used	Treatment	Price
Seminole	Ravenna	Chlorine	8-12 gpd	\$ 1,15/gal
			CANADA STATE	
American de la constitución de la compansa de la constitución de la co		Chemical	Water	Unit
County	System Name	Used	Treatment	Price
Seminole	Bear Lake	Chlorine	7-10 gpd	\$ 1.15/gal
The second secon		7		10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -
1000 · 1	n control a little my de mont 17 met 19 meter com rec'hlit e gri Li benne i Nashangel (1904)	Chemical	Water	Unit
County	System Name	Used	Treatment	Price
	<u> </u>		10.15	D 4 4511
Seminole	Jansen	Chlorine	12-15gpd	\$ 1.15/gal
1		Polyphosphate	2-3 gpd	\$14.00/ gal

13:52

4078695951

UTILITIES, INC. OF FLORIDA 2006 CHEMICAL USE DATA

County	System Name	Chemical Used	Water Treatment	Wastewater Treatment	Annual Amount	Quantity	Unit Price	Feed Rate
							-	
PINNELLAS COUNT	Y				<u> </u>		 	
	Lake Tarpon	Liquid Chlorine	Yes	No	420	Gals	\$ 0.87	1.1 gal/day
		Ammonia	Yes	No	294	Gals	\$ 0.45	0.8 gal/day
PASCO COUNTY								
	Buena Vista Manor	None	Yes	No				
	Buena Vista Trailer Pa	Liquid Chlorine	Yes	No	1566	Gals	\$ 0.87	4.2 gal/day
	Summertree	Gas Chlorine	Yes	No	7.8	lbs	\$ 0.90	21.3lbs/day
	Orangewood	Liquid Chlorine	Yes	No	1774	Gals	\$ 0.87	4.8 gal/day
					<u> </u>		 	
	<u> </u>				ļ			
								
						<u> </u>		

09/26/2006

13:52

4078696961

89/26/2006

14:31

3526227090

UTILITIES INC OF FL

97%

4878595951

89/26/2886 89:28

UTILITIES, INC. OF FLORIDA 2006 CHEMICAL USE DATA

County	System Name	Chemical Used	Water Treatment	Wastewater Treatment	Annual Amount	Quantity	Unit Price	Feed Nate
MARION COUNTY		_						
MINGON COOM I	GOLDEN HILLS	Liquid Chlorine	(Yes) No	Yes / No	1,325 GA	GALS 1	0,95/GAL	4.9 gals/de
		Ammonia	Yes/No	You/No				•
	CROWNWOOD	Stick Chloria	Yes/No	(CE)/No	50 485	LBS 8	2.16/18	0.2 185/10
		Liquid Chlorine		Yes No	1,945 6.4	GALS :	0.95 /GAL	7-2 gals /clo
		-Gua Chlorina	Yes/No	Yes/No				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
1		Liquid Chlorine	Yes I No	Yes/No-				
		Granular Chlory		(Yes)/No	100 485	Les :	1.48/18	0.4 LB>/da
					(so far)			

(269 days sofar)

P.04

Jansen

Docket No. 060253-WS

25.30-440(3) Chemical Analyses

Test Year Ended December 31, 2005

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 E-Mail: uif@iag.net

September 1, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Dept. of Environmental Protection 3319 Maguire Blvd. Orlando, Fl. 32803

Re:

Annual TTHM and HAA5s, 2005

Jansen Utilities, Inc. PWS ID# 3590615

Dear Mr. Morrison:

Enclosed please find the results of samples taken July 12, 2005 and July 28, 2005 for the above referenced analysis and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 229.

Sincerely,

UTILITIES, INC. OF FLORIDA

Kathy Sillitoe Area Manager

EC: Patrick Flynn, Regional Director, UIOF

Scotty L. Haws, Assistant Operations Manager

DISINFECTION BYPRODUCTS (TOTAL TRIHALOMETHANES [TTHMs] AND HALOACETIC ACIDS FIVE [HAA5s]) EXAMPLE REPORTING FORMAT

	MONITORING FREQUENCY: QUARTERLY XQANNUALLY	YEAR: 2005
·	QUARTERLY REPORTING PERIOD: July 2005 thur June 2006	TEAR. 2005
SYSTEM INFORMATION		
PWS NAME: Jansen		
PWS ID NUMBER: 3590615	COUNTY: Seminole	
CONTACT PERSON: Scotty Haws	PHONE NUMBER: 407-869-1919 EXT.234	
E-MAIL ADDRESS (optional):S.L.Haws@Utilitiesinc-usa.com	FAX NUMBER (optional): 407-869-6961	

TTHM/HAA5 COMPLIANCE SU	JMMARY FO	OR PWSs MC	ONITORING (ON A QUA	RTERLY OR MORE FREQUENT	BASIS			
TTHM COMPLIANCE SUMMARY					HAA5 COMPLIANCE SUMMARY				
Last Four Quarters	QTR 1	QTR 2	QTR 3	QTR 4	Last Four Quarters QTR 1 QT	QTR 1 QTR 2 QTR 3	QTR 4		
Actual Quarter/Year					Actual Quarter/Year				
Provide the number of TTHM samples taken during the last quarter*					Provide the number of HAA5 samples taken during the last quarter*				
Provide the arithmetic average of all TTHM samples taken in each quarter for the last four quarters					Provide the arithmetic average of all HAA5 samples taken in each quarter for the last four quarters				
Calculate the Running Annual Average (RAA) for TTHMs (i.e., calculate the arithmetic average of the quarterly arithmetic averages for the last four quarters)					Calculate the Running Annual Average (RAA) for HAA5s (i.e., calculate the arithmetic average of the quarterly arithmetic averages for the last four quarters)				
Does the RAA for TTHMs violate the Maximum Contaminant Level of 0.080 mg/L for TTHMs? (YES/NO)					Does the RAA for HAA5s violate the Maximum Contaminant Level of 0.060 mg/L for HAA5s? (YES/NO)				

^{*}Also, for each sample taken during the last quarter, provide the information requested in the tables on pages 3 and 4 of this format.

TTHM/HAA5 REPORTING COMPLIANCE SUMMARY FOR PWSs MONITORING ANNUALLY						
TTHM COMPLIANCE SUMMARY	HAA5 COMPLIANCE SUMMARY					
Provide the number of TTHM samples taken during the last year*	1	Provide the number of HAA5 samples taken during the last year*	1			
Calculate the arithmetic average of all TTHM samples taken over the last year	53.1	Calculate the arithmetic average all HAA5s samples taken over the last year	32.81			
Does the arithmetic average of the TTHM samples exceed the Maximum Contaminant Level of 0.080 mg/L for TTHMs? (YES/NO)**	NO	Does the arithmetic average of the HAA5 samples exceed the Maximum Contaminant Level of 0.060 mg/L for HAA5s? (YES/NO)**	NO			

^{*}Also, for each sample taken during the last year, provide the information requested in the tables on pages 3 and 4 of this format.

^{**}If the TTHM or HAA5 sample (or average of the samples, if more than one sample is taken) exceeds the Maximum Contaminant Level, the system must increase monitoring to one TTHM and one HAA5 sample per treatment plant per quarter, taken at a point in the distribution system reflecting the maximum residence time, until the system meets the criteria in 40 CFR 131.132(b)(1)(iv). Please see 40 CFR 141.132 (b)(1) for complete details.

TTHM Analysis Result (ug/L)	Laboratory Name & Certification Number	Analytical	Date of Calesian (19/18)	Name of Person Person Person Collecting Sample	tnstonetiant (Ligm) laubiseA (Mg/L) to emiT ta	Date of Date of Collection (moldection (moldection)	Sample Location in the Distribution System (Average or Maximum	DAL TRIHALOMETHANE noitsool elqms2
1.53	Advanced Enviromental Laboratories # E82574	E202.2	20/ 1 1/10	Alexander Lorenzo	Collection 8.0	7/12/05	Residence Time)	6245 Linneal Beach
						•		

Sample Location	Sample Location in the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (mo/da/yr)	Disinfectant Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Sample	Date of Analysis (mo/da/yr)	Analytical Method	Laboratory Name & Certification Number	HAA5 Analysis Result (ug/L)
6245 Linneal Beach	MRT	7/28/05	1.4	Alexander Lorenzo	32.81	EPA552.2	Advanced Environmental Laboratories E 82574	32.81
1								

INSTRUCTIONS: This format should be completed and submitted, WITHIN 10 DAYS AFTER THE END OF EACH QUARTER IN WHICH SAMPLES WERE COLLECTED, by all community or non-transient non-community water systems that add a chemical disinfectant and that serve at least 10,000 persons. For example, for disinfection byproduct samples collected for the first quarter (January – March) of 2004, this format is due no later than April 10, 2004. Submit the completed format to the appropriate Department of Environmental Protection District Office or Approved County Health Department.

For systems monitoring on a quarterly basis, complete the "TTHM/HAA5 Compliance Summary" table on page one. For systems monitoring annually, complete the "TTHM/HAA5 Compliance Summary" table on page two.

The following specific instructions are for the "TTHM and HAA5 Analysis Results for Reporting Period" tables on pages three and four.

Attach additional sheets if necessary.

Analytical Method: In accordance with 40 CFR 141.31(c)(1), the approved methods for TTHMs and HAA5s are as follows:

TTHMs: EPA Methods 502.2, 524.2, and 551.1

HAA5s: EPA Methods 552.1 and 552.2 and Standard Method 6251 B

Enter in the space provided the analytical method that the laboratory is using to measure TTHMs/HAA5s.

<u>Disinfectant Residual at Time of Sample Collection:</u> In accordance with Florida Administrative Code subsection 62-550.821(4), systems must demonstrate that TTHM and HAA5 samples were collected during normal operating conditions by measuring the residual chlorine or chloramine level at the same time and location as TTHM and HAA5 samples are taken. These residual chlorine or chloramine measurements should <u>not</u> be used for determining compliance with the Maximum Residual Disinfectant Level (MRDL).

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATION	DN (to be completed by sampler – Please	type or print legibly)		
System Name: JANSEN	PWS	I.D. #. 3590615		
System Type (check one): Address: SOMB	-	nity Transient Noncommunity		
0008110		11		
		ZA. ZIP Code:		
		107-869-6961		
E-Mail Address: S, L, HAU	13 W VIICITIES INC.			
SAMPLE INFORMATION (to be completed				
Sample Number: <u>A052399-01</u>		f known):		
Sample Date: 7/12/05		11:45 AM PM (Circle One)		
Sample Location (be specific): 6245 LINN Disinfectant Residual (Required when reporting		ds): mg/L		
Sample Type (Check Only One)	Reason(s) for	Sample (Check all that apply)		
Distribution	⊠Routine Compliance (with 62-550)	Quarterly (Which Quarter?		
Entry Point (to Distribution)	☐Confirmation of MCL Exceedance	e* Special (not for compliance with 62-550)		
☐Plant Tap (not for compliance with 62-550)	☐Composite of Multiple Sites**	☐Violation Resolution		
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)		
☑Max Residence Time	Other:			
☐Ave Residence Time	Sampling Procedure Used or Other	Comments:		
☐Near First Customer				
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for a for nitrate or nitrite MCL	dditional requirements att	e 62-550.550(4) for requirements and a results page for each site.		
Sampler's Name: ALEXAL	DER CORENZO			
Sampler's Phone #: 407-948-	- <u>47.02</u> Sampler's Fax #	407-869-6961		
Sampler's E-Mail Address:	1A			
CERTIFICATION (to be completed by				
I, ALEXANDER	LORENZO,	OPERATOR ,		
· · · ·				
do HEREBY CERTIFY that the abo complete and correct.	ve public water system and sar	mple collection information is		
Signature: Wixary	la Lorenzo	Date: 8/15/05		

Reporting Format 62-550.730 Effective January 1995, Revised January 2004 Page 1 of &

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

LABORATORY CERTIFICATION INFORMATION (to be com ATTACH CURRENT DOH ANALYTE SHEET*	pleted by lab - Please type or print legibly)				
LabName: Advanced Environmental Labs - Orlando	Florida Certification #: E53076				
Address: 528 S. North Lake Blvd., Suite 1016	Certification Expiration Date: 6/30/2006				
Altamonte Springs, FL 32701	Telephone #: (407) 937-1594				
ANALYSIS INFORMATION (to be completed by lab PWS ID (from page 1): Lab Assigned Report Number or Job ID A052399 Group(s) Analyzed Results attached for compliance with chall Inorganics Synthetic Organics All 17 All 30 Partial Nitrate Nitrate Nitrite Dioxin Only Asbestos Only Were any analyses subcontracted? Yes No	Date Sample(s) Received: 7/12/2005 4:50:00 Sample Number (From page 1) A052399-01 pter 62-550, F.A.C. (check all that apply): Volatile Organics All 21 Partial Radionuclides Single Sample Qtrly Composite** Disinfection Byproducts Trihalomethanes Bromate Chlorite Secondaries All 14 Partial				
If yes, please provide DOH certification number E82574	OTED LAD				
ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRAC	TED LAB				
CERT	IFICATION				
I, Myrna Santiago , Laboratory Manager (Print Name) do HEREBY CERTIFY that all attached analytical data are cor National Environmental Laboratory Accreditation Conference (rect and unless noted meet all requirements of the NELAC).				
Signature: WMW Lachago	Date: 7-26-05				
 Failure to provide a valid and current Florida DOH lab certific analysis results will result in rejection of the report, possible en and may result in notification of the DOH Bureau of Laboratory 	forcement against the public water system for failure to sample,				
** Please provide radiological sample dates and locations for	each quarter.				
COMPLIANCE DETERMINATION (to be completed by DEF	or DOH)				
Sample Collection Info Satisfactory 👜 Yes 🧕 No	Sample Analysis Info Satisfactory: 👼 Yes 💹 No				
Replacement Sample(s) Requested (circle or highlight group(s) abov	e) 🕱 Revised Report Requested (circle or highlight group(s) above)				
Additional Monitoring Required (circle or highlight group(s)	above)				
Reason(s): MCL(s) Exceeded Missing Analyte Sheet(s) Other:	tion(s) Incomplete Report Analysis Unsatisfactory				
Person Notified:	Date Notified:				
Comments					
	H Reviewing Official:				

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 E-Mail: uif@iag.net

June 15, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. Orlando, Fl. 32803

Re:

Annual Nitrate and Nitrite Analysis, 2005

Chapter 62-550 FAC

Jansen

PWS ID# 3590615

Dear Mr. Morrison:

Enclosed please find the results of samples taken June 2, 2005, for the above referenced analysis and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 234.

Sincerely,

UTILITIES, INC. OF FLORIDA

Kathy Sillitoe

Area Manager Manager

Enclosure

EC:

Patrick C. Flynn, Regional Manager, UIOF Scotty L. Haws, Assistant Operations Manager, UIOF

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by sampler – Please type or print legibly)
System Name: <u>Jansen</u>	PWS I.D. #: 3 5 9 0 6 1 5
System Type (check one):	□ Nontransient Noncommunity □ Transient Noncommunity
Address: Sombrero AUE	
City: Apopka	State: 41 ZIP Code:
•	Fax#: 407-869-6961
E-Mail Address:	
SAMPLE INFORMATION (to be completed	by sampler)
Sample Number: A05/885	Location Code (if known):
Sample Date: <u>6/2/05</u>	
	@ JANSEN WATER PLANT
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids): mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
□Distribution	Routine Compliance (with 62-550) Quarterly (Which Quarter?)
Entry Point (to Distribution)	☐Confirmation of MCL Exceedance* ☐Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	☐Composite of Multiple Sites** ☐Violation Resolution
Raw (at well or intake)	Clearance (permitting) Replacement (of Invalidated Sample)
Max Residence Time	Other:
☐Ave Residence Time	Sampling Procedure Used or Other Comments:
☐Near First Customer	
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for ac for nitrate or nitrite MCL e	iditional requirements attach a results page for each site.
Sampler's Name: Tenny Sil	1:10E
Sampler's Phone #: 407-869-19	
Sampler's E-Mail Address:	
CERTIFICATION (to be completed by	sampler)
I, Jan W Soll Took	Posta int
(Print Name)	(Print Title)
do HEREBY CERTIFY that the above complete and correct.	ve public water system and sample collection information is
Signature: walle	Date: [//4/05
Jan were	the state of the s

Reporting Format 62-550.730 Effective January 1995, Revised January 2004 Page 1 of &

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

	ORY CERTIFICATION CURRENT DOH ANALY	INFORMATION (to be comple (TE SHEET*	eted by lab - Please type or p	rint legibly)			
LabName: Advanced Environmental Labs - Orlando			Florida Certification #: E53076				
Address:	528 S. North Lake Blv	d., Suite 1016	Certification Expiration Date: 6/30/2005				
	Altamonte Springs, FL	. 32701		Telephone #: (407) 937-1594			
ANALYSIS	S INFORMATION (to be	completed by lab					
PWS ID (fi	rom page 1):		Date Sample((s) Received: 6/2/2005 11:25:00			
Lab Assign	ned Report Number or J	lob ID A051885	Sample Number (F	rom page 1) A051885-01			
Group(s) A	analyzed Results attach	ned for compliance with chapte	er 62-550, F.A.C. (check all t	hat apply):			
[[[[norganics All 17 Partial Nitrate Nitrite Asbestos Only	Synthetic Organics All 30 All Except Dioxin Partial Dioxin Only	Volatile Organics All 21 Partial Radionuclides Single Sample Qtrly Composite**	Disinfection Byproducts Trihalomethanes Haloacetic Acids Bromate Chlorite Secondaries All 14 Partial			
•	analyses subcontracted	—					
• . •	se provide DOH certific	Bullion - spinop spin - spanner s spinop s spinop s					
ATTACH D	OH ANALY IE SHEET	FOR EACH SUBCONTRACT	ED LAB				
		CERTIF	ICATION				
i, Myrna S (antiago , Print Name)	Laboratory Manager	,				
do HEREB National Er	nvironmental Laboratory	ched analytical data are corre Accreditation Conference (NE	ELAC).				
Signature:	Mynasa	ntap	Date: 2	06/09/05			
analysis res	sults will result in rejecti	rrent Florida DOH lab certificat on of the report, possible enfo DOH Bureau of Laboratory S	rcement against the public w	nalyte Sheet for the attached vater system for failure to sample,			
** Please p	rovide radiological sam	ple dates and locations for ea	ch quarter.				
COMPLIAN	ICE DETERMINATION	(to be completed by DEP o	or DOH)				
Sample Co	llection Info Satisfactory	Yes No	Sample Analysis Info Sa	tisfactory: Yes No			
Replacen	nent Sample(s) Requested	(circle or highlight group(s) above)	Revised Report Reque	sted (circle or highlight group(s) above)			
Addition	al Monitoring Required	(circle or highlight group(s) ab	ove)				
Reason(s):	MCL(s) Exceeded Missing Analyte Sh Other:	eet(s) Detectio	n(s) Unsatisfactory	☐ Incomplete Report ☐ Analysis Unsatisfactory			
Person Noti	fied:		Date N	Notified:			
Comments		***					
Date Reviev	ved:	DEP/DOH	Reviewing Official:				

A051885

6/2/2005

6/2/05 11:25

6/9/2005

Report No.:

Date Sampled:

Date Received:

Date Reported:



Client:

Utilities, Inc.

Project Name:

Jansen

Project Number:

PWS ID#:

Attention:

Kathy Sillitoe

Phone Number: 8002721919

Address:

200 Weathersfield Ave.

Altamonte Springs, FL 32714

Project Description

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

> Project Name: Jansen

Approved By:

Myrna Santiago, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages =

Ì			
]			
	1 1		
] ·		
ı	■ 8'		

Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.

Report No.: A051885

Project Name: Jansen

Date/Time Sampled: 06/02/05

Matrix: Drinking Water

Site: Point of Entry

Date/Time Received: 6/2/05 11:25

PWS ID#:

Client Sample ID: 1

Sampled By: Terry Silhitoe

10:00

Sample Number: A051885-01

Shipping Method: Client drop off

Inorganic Contaminants

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
1040	Nitrate (as N)	10	mg/L	0.014	U	SM4500NO3-F	0.014	6/3/2005	13:57	E82574
1041	Nitrite (as N)	1.0	mg/L	0.013	U	SM4500NO3-F	0.013	6/3/2005	13:57	E82574

U The compound was analyzed for but not detected.

MDL Method Reporting Limit
For all Results qualified with an I, the PQL is defined to be 4 times the MDL

Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Client: UTI	LITIES, INC. (UTL-	A)	Project name: JANSEN								
Date/Time Rcvd: 6/2/	/2005 11.25	Lo	Log-in request number: A051885								
Received by: BDI	M		Completed by: BDM								
Cooler/Shipping											
Courier: ⊠ AEL □ C	lient □ UPS □ Por	ny Express Fed	Ex □ Other (describe	e):							
Type: ⊠ Cooler □ Bo	x Other (describe)									
Cooler temperature:	Identify the cooler ar	nd document the te	emperature blank or ic	e water measu	ıremer	nt					
Cooler ID	1				I						
Temp (°C)	3										
Temp taken from	☐ Temp blank	☐ Temp blank	☐ Temp blank	☐ Temp blank		☐ Temp b	lank				
	⊠ Cooler ⊠ IR gun	☐ Cooler☐ IR gun	☐ Cooler ☐ IR gun	☐ Cooler☐ IR gun		☐ Cooler☐ IR gun					
Temp measured with	☐ Thermometer (enter ID):	☐ Thermometer (enter ID):		☐ Thermometer (do ID):	enter	C	meter (enter				
Other Information Any discrepancies sho		he "Comments" se	ection below.								
,											
1. Were custody se	eals on shipping contai	CHECKLIST			YES	NO	NA /				
	apers properly include				1						
	apers properly filled or		h labels)?		1	1					
	rrive in good condition				1						
			alysis, preservatives)?		/						
	abels agree with the cl				1						
	nple preservation tech		the lahel?		1						
	ceived within holding		ine label:		1	1					
	ials checked for the pr		s?			1	1				
11. Were there air bu	ubbles present in the V	OA vials?					1				
			ck one: 🗆 NO ICE 🗆 BI	LUE ICE	1						
	emperature less than 6				1						
	s checked and recorde		1?				1				
	<i>mples are checked by l</i> containers provided b										
	cepted into the laborar	<u> </u>			1	 					
	to split samples into o					1					
Kit ID	Comments:										





Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando 528 South North Lake Blvd, S Allamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A051885 CustomerName: Utilities, Inc. Collector: Terry Silhitoe

AEL Jax 6601 Southpoint Parkway Jacksonville, FI 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)
A051885-01	1	Nitrate (J)-DW	Drinking Water	6/2/2005	10:00	6/2/05 11:25	6/3/2005		250mL Poly
A051885-01	1	Nitrite (J)-DW	Drinking Water	6/2/2005	10:00	6/2/05 11:25	6/3/2005		250mt. Poly

Orlando Gainesville-Relinquisher:

Shipping Relinquisher: AEL Courier

Shipping Receiver: AEL Couper

Jacksonville Receiver:

Date/Time: 6/2

LAB

Advanced Environmental Laboratories, Inc.

6601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904,363,9350 • Fax 904,363,9354 • E82574

A051885

	9610 Princess Palm Ave. • 2106 NW 67th Place, Ste.	acksonville, FL 32216 • 904.36 Tampa, FL 33619 • 813.630.9 7 • Gainesville, FL 32606 • 352 te. 1016 • Altamonte Springs, F	616 • Fax :.367.1500	813.630.43 • Fax 352.3	27 • E84589 367.0050 • E	9 E82620	7• E53076					Page	AU5	18	55	
LIENT NAME:	Utilities Inc.	PROJECT NAME:			Janser			BOTTLE SIZE	۲							1 1
DRESS: 2	200 Weathersfield Ave	P.O. NUMBER/PROJECT NUMB	BER:					& TYPE	250 mL			1				
Altamor	nte Springs, FL 32714	PROJECT LOCATION:	Jan:	58.NJ	alth	>										
ONE:	407-448-1715	FAX:	VC	7. 77.17				ا ۾ ا								
NTACT:	Kathy Silitoe	SAMPLED BY: VILL Sold	11/20	727	274	7		필							į	
STANDARD RUSH	TURN AROUND TIME:	RE	MARKS/SPI	ECIAL INSTR	UCTIONS:			ANALYSIS REQUIRED	NO3/NO2							LAB NUMBER
WW=waste wat	ter SW=surface water GW=groun	nd water DW=drinking water		OIL	A=air	SO=soil	St.=sludge	A A	ž			:				뛰
SAMPLE	SAMPLE DES	CRIPTION	Grab	SAM	IPLING	MATRIX	NO.	Preserv	ı							
ID	O/ (MIT EE DEO		Comp	DATE	TIME	WATNA	COUNT	7.3		5,000	al park in the				4 24	
1	NO2/103 POE .	JONSEW	G	92/05	1000	DW	1		X							- 31
									 ,							
															!	
						ļ			·							
																_
I-lce	H=(HCI) S=(H2SO4 N=(HNO	3) T=(Sodium Thiosulfate)	L	<u> </u>		ļ <u>.</u>	Do!-	quish by:		Data	T:	 				
pment		ample Kit Cooler #			1	 	rein	Ot los		Date	Time	<u> 1 </u>	eceived by:	Date (2/2		Time Z 5
		RBD/T			2	17	W 466	mon)	7900		3000		- E C / C	-0 11	
	1 1	.BD/T			3											
eived on Ice		C sent	[] re	ceived	<u> </u>			- Contraction of the Contraction		<u> </u>	<u> </u>	I		revised	8/01	







John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Laboratory Scope of Accreditation

Page 3

of 27

THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code:

FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc.

6601 Southpoint Parkway

Jacksonville, FL 32216

Endothall	Matrix: Drinking Water			Certification	
Endothall	Analyte	Method/Tech	Category		Effective Date
Ethylbenzene	Endothall	EPA 548.1	Synthetic Organic Contaminants		1/21/2005
Ehylbenzene EPA 524.2 Other Regulated Contaminants NELAP 1/21/2005 gamma-BHC (Lindane, gamma-BHC (Lindane, gamma-BHC (Lindane, gamma-BHC (Lindane, gamma-Hexachlorocyclohexane) EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Hepachlor EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Hepachlor epoxide EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Hexachlorobenzene EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Hexachlorocyclopentudiene EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Hexachlorocyclopentudiene EPA 200.7 Secondary Inorganic Contaminants NELAP 3/24/2005 Lead EPA 200.7 Secondary Inorganic Contaminants NELAP 4/4/2002 Lead SM 3113 B Primary Inorganic Contaminants NELAP 4/4/2002 Magnesium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Mercury EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Mercury	Endrin	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
gamma-BHC (Lindane, gamma-Hexachlorocyclohexane) EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Heptachlor (Heptachlor (Paparic Contaminants) EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Heptachlor epoxide EPA 508 Synthetic Organic Contaminants NELAP 1/21/2005 Heterotrophic plate count SM 9215 B Microbiology NELAP 1/21/2005 Hexachlorocyclopentadiene EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Hexachlorocyclopentadiene EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Iron EPA 200.7 Secondary Inorganic Contaminants NELAP 4/4/2002 Lead EPA 200.9 Primary Inorganic Contaminants NELAP 4/4/2002 Magnesium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Mercury EPA 245.1 Primary Inorganic Contaminants NELAP 4/4/2002 Mercury EPA 508 Synthetic Organic Contaminants NELAP 4/4/2002 Methoxychlor EPA 508 Sy	Ethylbenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Bamma-Hexachlorocyclohexane) Heppachlor EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Heppachlor epoxide EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Heterotrophic plate count SM 9215 B Microbiology NELAP 1/21/2005 Hexachlorocherzene EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Hexachlorocherzene EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Iron EPA 200.7 Secondary Inorganic Contaminants NELAP 3/24/2005 Iron EPA 200.7 Secondary Inorganic Contaminants NELAP 4/4/2002 Lead EPA 200.9 Primary Inorganic Contaminants NELAP 4/4/2002 Lead SM 3113 B Primary Inorganic Contaminants NELAP 4/4/2002 Magnesium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Magnesium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Mercury EPA 245.1 Primary Inorganic Contaminants NELAP 4/4/2002 Mercury SM 3112 B Primary Inorganic Contaminants NELAP 4/4/2002 Methoxychlor EPA 508 Synthetic Organic Contaminants NELAP 4/4/2002 Methoxychlor EPA 508 Synthetic Organic Contaminants NELAP 4/4/2002 Methoxychlor EPA 508 Synthetic Organic Contaminants NELAP 4/4/2002 Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 4/4/2002 Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate-nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate-nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P EPA 365.1 Primary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P EPA 515.3 Synthetic Organic Cont	Ethylbenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Heptachlor epoxide	gamma-BHC (Lindane, gamma-Hexachlorocyclohexane)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heterotrophic plate count	Heptachlor		Synthetic Organic Contaminants		3/24/2005
Hexachlorobenzene	Heptachlor epoxide	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Hexachlorocyclopentadiene	Heterotrophic plate count	SM 9215 B	Microbiology	NELAP	1/21/2005
Iron EPA 200.7 Secondary Inorganic Contaminants NELAP 4/4/2002 Lead EPA 200.9 Primary Inorganic Contaminants NELAP 4/4/2002 Lead SM 3113 B Primary Inorganic Contaminants NELAP 4/4/2002 Magnesium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Manganese EPA 200.7 Secondary Inorganic Contaminants NELAP 4/4/2002 Mercury EPA 245.1 Primary Inorganic Contaminants NELAP 4/4/2002 Mercury SM 3112 B Primary Inorganic Contaminants NELAP 4/4/2002 Methoxychlor EPA 508 Synthetic Organic Contaminants NELAP 4/4/2002 Methoxychlor EPA 508 Synthetic Organic Contaminants NELAP 4/4/2002 Mitrate EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Nitrate-alitric SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate-alitric SM 4500-NO3 F Primary Inorganic Contaminants NELAP 1/21/2005 <td>Hexachlorobenzene</td> <td>EPA 508</td> <td>Synthetic Organic Contaminants</td> <td>NELAP</td> <td>3/24/2005</td>	Hexachlorobenzene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Lead EPA 200.9 Primary Inorganic Contaminants NELAP 4/4/2002 Lead SM 3113 B Primary Inorganic Contaminants NELAP 4/4/2002 Magnesium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Manganese EPA 200.7 Secondary Inorganic Contaminants NELAP 4/4/2002 Mercury EPA 245.1 Primary Inorganic Contaminants NELAP 4/4/2002 Metroury SM 3112 B Primary Inorganic Contaminants NELAP 4/4/2002 Methoxychlor EPA 508 Synthetic Organic Contaminants NELAP 4/4/2002 Methoxychlor EPA 508 Synthetic Organic Contaminants NELAP 4/4/2002 Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate-nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate anitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate anitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP	Hexachlorocyclopentadiene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Lead	Iron	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Magnesium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Manganese EPA 200.7 Secondary Inorganic Contaminants NELAP 4/4/2002 Mercury EPA 245.1 Primary Inorganic Contaminants NELAP 4/4/2002 Mertoury SM 3112 B Primary Inorganic Contaminants NELAP 4/4/2002 Methoxychlor EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Nickel EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite as N SM 4500-NO2 B Primary Inorganic Contaminants NELAP 2/13/2003 Odor SM 2150 B Secondary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P EPA 365.1 Primary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P SM 4500-PE Primary Inorganic Contaminants NELAP	Lead	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
Manganese EPA 200.7 Secondary Inorganic Contaminants NELAP 4/4/2002 Mercury EPA 245.1 Primary Inorganic Contaminants NELAP 4/4/2002 Mercury SM 3112 B Primary Inorganic Contaminants NELAP 4/4/2002 Methoxychlor EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Nickel EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate-nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite as N SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite as N SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite as N SM 4500-NO3 B Primary Inorganic Contaminants NELAP 1/21/2005 Odor SM 2150 B Secondary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P EPA 365.1 Primary Inorganic Contaminants NELAP <td>Lead</td> <td>SM 3113 B</td> <td>Primary Inorganic Contaminants</td> <td>NELAP</td> <td>4/4/2002</td>	Lead	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Mercury EPA 245.1 Primary Inorganic Contaminants NELAP 4/4/2002 Mercury SM 3112 B Primary Inorganic Contaminants NELAP 4/4/2002 Methoxychlor EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Nickel EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite as N SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Odor SM 4500-NO2 B Primary Inorganic Contaminants NELAP 1/21/2005 Odor SM 2150 B Secondary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P EPA 365.1 Primary Inorganic Contaminants NELAP 1/21/2005 Oxamyl EPA 508 Synthetic Organic Contaminants NELAP 1/21/2005 PCBs EPA 508 Synthetic Organic Contaminants NELAP 1/21/2005 </td <td>Magnesium</td> <td>EPA 200.7</td> <td>Primary Inorganic Contaminants</td> <td>NELAP</td> <td>4/4/2002</td>	Magnesium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Mercury SM 3112 B Primary Inorganic Contaminants NELAP 4/4/2002 Methoxychlor EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Nickel EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Odor SM 4500-NO2 B Primary Inorganic Contaminants NELAP 1/21/2005 Odor SM 2150 B Secondary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P EPA 365.1 Primary Inorganic Contaminants NELAP 1/21/	Manganese	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Methoxychlor EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Nickel EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate-nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite as N SM 4500-NO2 B Primary Inorganic Contaminants NELAP 1/21/2005 Odor SM 2150 B Secondary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P EPA 365.1 Primary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P SM 4500-P E Primary Inorganic Contaminants NELAP 1/21/2005 Oxamyl EPA 531.1 Synthetic Organic Contaminants NELAP 4/19/2005 PCBs EPA 508 Synthetic Organic Contaminants NELAP 1/21/2005 pH EPA 150.1 Primary Inorganic Contaminants NELAP <	Mercury	EPA 245.1	Primary Inorganic Contaminants	NELAP	4/4/2002
Nickel EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate-nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite as N SM 4500-NO2 B Primary Inorganic Contaminants NELAP 1/21/2005 Odor SM 2150 B Secondary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P EPA 365.1 Primary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P SM 4500-PE Primary Inorganic Contaminants NELAP 1/21/2005 Oxamyl EPA 531.1 Synthetic Organic Contaminants NELAP 4/19/2005 PCBs EPA 508 Synthetic Organic Contaminants NELAP 1/21/2005 Pentachlorophenol EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 PH EPA 150.1 Primary Inorganic Contaminants NELAP	Mercury	SM 3112 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Nitrate SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrate-nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite as N SM 4500-NO2 B Primary Inorganic Contaminants NELAP 1/21/2005 Odor SM 2150 B Secondary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P EPA 365.1 Primary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P SM 4500-P E Primary Inorganic Contaminants NELAP 1/21/2005 Oxamyl EPA 531.1 Synthetic Organic Contaminants NELAP 4/19/2005 PCBs EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Pentachlorophenol EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 PH EPA 150.1 Primary Inorganic Contaminants NELAP 4/4/2002 Primary Inorganic Contaminants NELAP 1/21/2005 Potassium EPA 200.7 Secondary Inorganic Contaminants NELAP 1/21/2005 Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/4/2002 Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/17/2002	Methoxychlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Nitrate-nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite as N SM 4500-NO2 B Primary Inorganic Contaminants NELAP 1/21/2005 Odor SM 2150 B Secondary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P EPA 365.1 Primary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P SM 4500-P E Primary Inorganic Contaminants NELAP 1/21/2005 Oxamyl EPA 531.1 Synthetic Organic Contaminants NELAP 4/19/2005 PCBs EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Pentachlorophenol EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 PH EPA 150.1 Primary Inorganic Contaminants NELAP 4/4/2002 Contaminants Peloram EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 Picloram EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 Potassium EPA 200.7 Secondary Inorganic Contaminants NELAP 1/21/2005	Nickel	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Nitrite SM 4500-NO3 F Primary Inorganic Contaminants NELAP 2/13/2003 Nitrite as N SM 4500-NO2 B Primary Inorganic Contaminants NELAP 1/21/2005 Odor SM 2150 B Secondary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P EPA 365.1 Primary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P SM 4500-P E Primary Inorganic Contaminants NELAP 1/21/2005 Oxamyl EPA 531.1 Synthetic Organic Contaminants NELAP 4/19/2005 PCBs EPA 508 Synthetic Organic Contaminants NELAP 4/19/2005 Pentachlorophenol EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 PH EPA 150.1 Primary Inorganic Contaminants NELAP 1/21/2005 Primary Inorganic Contaminants NELAP 1/21/2005 Potassium EPA 200.7 Secondary Inorganic Contaminants NELAP 1/21/2005 Residue-filterable (TDS) EPA 160.1 Secondary Inorganic Contaminants NELAP 4/4/2002 Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/17/2002	Nitrate	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Nitrite as N SM 4500-NO2 B Primary Inorganic Contaminants NELAP 1/21/2005 Odor SM 2150 B Secondary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P EPA 365.1 Primary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P SM 4500-P E Primary Inorganic Contaminants NELAP 1/21/2005 Oxamyl EPA 531.1 Synthetic Organic Contaminants NELAP 4/19/2005 PCBs EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Pentachlorophenol EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 pH EPA 150.1 Primary Inorganic Contaminants NELAP 1/21/2005 Potassium EPA 200.7 Secondary Inorganic Contaminants NELAP 1/21/2005 Residue-filterable (TDS) EPA 160.1 Secondary Inorganic Contaminants NELAP 4/4/2002 Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/17/2002	Nitrate-nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Odor SM 2150 B Secondary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P EPA 365.1 Primary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P SM 4500-P E Primary Inorganic Contaminants NELAP 1/21/2005 Oxamyl EPA 531.1 Synthetic Organic Contaminants NELAP 4/19/2005 PCBs EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Pentachlorophenol EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 PH EPA 150.1 Primary Inorganic Contaminants NELAP 4/4/2002 Primary Inorganic Contaminants NELAP 1/21/2005 Potassium EPA 200.7 Secondary Inorganic Contaminants NELAP 1/21/2005 Residue-filterable (TDS) EPA 160.1 Secondary Inorganic Contaminants NELAP 4/4/2002 Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/17/2002	Nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Orthophosphate as P EPA 365.1 Primary Inorganic Contaminants NELAP 2/13/2003 Orthophosphate as P SM 4500-P E Primary Inorganic Contaminants NELAP 1/21/2005 Oxamyl EPA 531.1 Synthetic Organic Contaminants NELAP 4/19/2005 PCBs EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Pentachlorophenol EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 pH EPA 150.1 Primary Inorganic Contaminants NELAP 4/4/2002 Contaminants, Secondary Inorganic Contaminants Picloram EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 Potassium EPA 200.7 Secondary Inorganic Contaminants NELAP 1/21/2005 Residue-filterable (TDS) EPA 160.1 Secondary Inorganic Contaminants NELAP 4/4/2002 Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/17/2002	Nitrite as N	SM 4500-NO2 B	Primary Inorganic Contaminants	NELAP	1/21/2005
Orthophosphate as P SM 4500-P E Primary Inorganic Contaminants NELAP 1/21/2005 Oxamyl EPA 531.1 Synthetic Organic Contaminants NELAP 4/19/2005 PCBs EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Pentachlorophenol EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 pH EPA 150.1 Primary Inorganic Contaminants NELAP 4/4/2002 Contaminants Secondary Inorganic Contaminants Picloram EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 Potassium EPA 200.7 Secondary Inorganic Contaminants NELAP 1/21/2005 Residue-filterable (TDS) EPA 160.1 Secondary Inorganic Contaminants NELAP 4/4/2002 Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/17/2002	Odor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	2/13/2003
Oxamyl EPA 531.1 Synthetic Organic Contaminants NELAP 4/19/2005 PCBs EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Pentachlorophenol EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 pH EPA 150.1 Primary Inorganic Contaminants NELAP 4/4/2002 Contaminants, Secondary Inorganic Contaminants Picloram EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 Potassium EPA 200.7 Secondary Inorganic Contaminants NELAP 1/21/2005 Residue-filterable (TDS) EPA 160.1 Secondary Inorganic Contaminants NELAP 4/4/2002 Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/17/2002	Orthophosphate as P	EPA 365.1	Primary Inorganic Contaminants	NELAP	2/13/2003
PCBs EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Pentachlorophenol EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 pH EPA 150.1 Primary Inorganic Contaminants NELAP 4/4/2002 Contaminants, Secondary Inorganic Contaminants Picloram EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 Potassium EPA 200.7 Secondary Inorganic Contaminants NELAP 1/21/2005 Residue-filterable (TDS) EPA 160.1 Secondary Inorganic Contaminants NELAP 4/4/2002 Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/17/2002	Orthophosphate as P	SM 4500-P E	Primary Inorganic Contaminants	NELAP	1/21/2005
Pentachlorophenol EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 pH EPA 150.1 Primary Inorganic Contaminants NELAP 4/4/2002 Contaminants, Secondary Inorganic Contaminants Picloram EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 Potassium EPA 200.7 Secondary Inorganic Contaminants NELAP 1/21/2005 Residue-filterable (TDS) EPA 160.1 Secondary Inorganic Contaminants NELAP 4/4/2002 Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/17/2002	Oxamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	4/19/2005
PH EPA 150.1 Primary Inorganic Contaminants, Secondary Inorganic Contaminants Picloram EPA 515.3 Synthetic Organic Contaminants Potassium EPA 200.7 Secondary Inorganic Contaminants Residue-filterable (TDS) EPA 160.1 Secondary Inorganic Contaminants Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/4/2002 Potassium NELAP 4/17/2002	PCBs	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Contaminants, Secondary Inorganic Contaminants Picloram EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 Potassium EPA 200.7 Secondary Inorganic Contaminants NELAP 1/21/2005 Residue-filterable (TDS) EPA 160.1 Secondary Inorganic Contaminants NELAP 4/4/2002 Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/17/2002	Pentachlorophenol	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Potassium EPA 200.7 Secondary Inorganic Contaminants NELAP 1/21/2005 Residue-filterable (TDS) EPA 160.1 Secondary Inorganic Contaminants NELAP 4/4/2002 Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/17/2002	pH	EPA 150.1	Contaminants, Secondary Inorganic	NELAP	4/4/2002
Residue-filterable (TDS) EPA 160.1 Secondary Inorganic Contaminants NELAP 4/4/2002 Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/17/2002	Picloram	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Selenium EPA 200.9 Primary Inorganic Contaminants NELAP 4/17/2002	Potassium	EPA 200.7	Secondary Inorganic Contaminants	NELAP	1/21/2005
, , , , , , , , , , , , , , , , , , , ,	Residue-filterable (TDS)	EPA 160.1	Secondary Inorganic Contaminants	NELAP	4/4/2002
Selenium SM 3113 B Primary Inorganic Contaminants NELAP 4/4/2002	Selenium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/17/2002
	Selenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002

[&]quot;STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 04/24/2005-E82574

6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

A052399

7/12/2005

7/12/05 16:50

7/24/2005

Report No.: Date Sampled:

Date Received:

Date Reported:

Client:

Utilities, Inc.

Project Name:

Jansen

Project Number:

PWS ID#:

Attention:

Kathy Sillitoe

Phone Number: 8002721919

Address:

200 Weathersfield Ave.

Altamonte Springs, FL 32714

Project Description

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

> Project Name: Jansen

Approved By:

Myrna Santiago, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages = 3

Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.

Report No.: A052399

Project Name: Jansen

Date/Time Sampled: 07/12/05

Matrix: Drinking Water

Date/Time Received: 7/12/05 16:50

PWS ID#:

11:45

Client Sample ID: 1

Sampled By: Alexander Lorenz

Site: 6245 Linneal Bea

Shipping Method: Client drop off

Sample Number: A052399-01

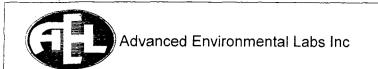
Disinfection Byproducts

Contam	ID Contam Name	MCL Ur	nits	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
2941	Chloroform	uç	g/L	37		E502.2	1.6	7/14/2005	16:12	E82574
2942	Bromoform	ug	g/L	0.36	U	E502.2	0.36	7/14/2005	16:12	E82574
2943	Bromodichloromethane	ug	g/L	13		E502.2	0.38	7/14/2005	16:12	E82574
2944	Dibromochloromethane	ug	g/L	3.1	3.1	E502.2	0.28	7/14/2005	16:12	E82574

U The compound was analyzed for but not detected.

MDL Method Reporting Limit

For all Results qualified with an I, the PQL is defined to be 4 times the MDL



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Client: UT	ILITIES, INC. (UTL-	-A)	Project name:	JANSEN					
Date/Time Rcvd: 7/1	2/05	16.50 Log	-In request number:	A052399					
Received by: BD	M		Completed by:	RPG					
Cooler/Shipping	Information:								
Courier: □ AEL ⊠ C	lient □ UPS □ Po	ny Express □ FedE	x 🗆 Other (describe);					
Type: ⊠ Cooler □ Bo			•	/					
	·								
Cooler temperature:	ruentily the cooler a	nd document the ter	nperature blank or ice	water measu	iremer	II.			
Cooler ID	1								
Temp (°C)	2			· · · · · · · · · · · · · · · · · · ·					
Temp taken from	☐ Temp blank ☑ Cooler	☐ Temp blank	☐ Temp blank	☐ Temp blank		☐ Temp b	lank		
	☑ Cooler ☑ IR gun	☐ Cooler ☐ IR gun	☐ Cooler ☐ IR gun	☐ Cooler ☐ IR gun		☐ Cooler☐ IR gun			
Temp measured with	☐ Thermometer (enter ID):	☐ Thermometer (enter ID):	☐ Thermometer (enter ID):	☐ Thermometer (ID):	enter		meter (enter		
Other Information Any discrepancies sho		the "Comments" sec	ction below.		YES	NO	NA		
1. Were custody se	als on shipping contai	iner(s) intact?				7	1		
	apers properly include				./				
		ut (ink, signed, match	labels)?		/				
	rive in good condition				/				
		le #, date, signed, anal	ysis, preservatives)?		/				
	abels agree with the c			·	/				
	ttles used for the tests		- 1-h -10		/				
	ceived within holding	niques indicated on the	e label?		1				
		resence of air bubbles?)		-	+	1		
	ubbles present in the		·			+	1		
			one: □ NO ICE □ BL	UE ICE	1	+	 -		
	emperature less than 6				1				
		ed by Sample control?	<u> </u>			1			
	nples are checked by								
	containers provided b				1				
	cepted into the labora				√				
17. was it necessary	to split samples into	other bottles?							
Kit ID	Comments:								
1									

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A052399 CustomerName: Utilities, Inc.

Collector: Alexander Lorenzo

AEL Jax 6601 Southpoint Parkway Jacksonville, Fl 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

	Check	if	Rush
--	-------	----	------

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)
A052399-01	1	THMs (DW)	Drinking Water	7/12/2005	11:45	7/12/05 16:50	7/26/2005		40mL VOC viai

Orlando Relinquisher:

Shipping Relinquisher: AEL Courier

Shipping Receiver: AEL

Jacksonville Receiver:

|--|

Advanced

Environmental Laboratories, Inc.

6601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589

[] received

	528 S. North Lake Blvd., Ste	· Gainesville, FL 32606 • 352 e. 1016 • Altamonte Springs, F	L 32701 •	407.937.15	94 • Fax 40	7.937.1597	• E53076					. A1	J523	SYY)	
CLIENT NAME:	Utilities Inc.	PROJECT NAME:		,	Janser	1		BOTTLE SIZE				,		,,,		
ADDRESS:	200 Weathersfield Ave	P.O. NUMBER/PROJECT NUME	BER:					& TYPE	40mL Vials]			`
Altamo	onte Springs, FL 32714	PROJECT LOCATION:						1								
PHONE:	407-869-1919	FAX:						ا ۾ ا			<u> </u>					
CONTACT:		SAMPLED BY: A(E)	CANDA	ER W	RENT	2.0		ANALYSIS REQUIRED			[
	TURN AROUND TIME:			ECIAL INSTRU				7							1	1
K STANDARD								7E(LAB
RUSH								S								Z
, KUSH		1						YSI	S							NUMBER
								AL,	THM'S							
WW=waste v	vater SW=surface water GW=ground	d water DW≃drinking water		OIL	A=air	SO=soil	SL=sludge	A A	亡							끯
SAMPLE	SAMPLE DESC	PIDTION	Grab	SAM	PLING	MATRIX	NO.	Preserv	I,T							
ID	OAWIT EL DESC		Comp	DATE	TIME	INIATRIA	COUNT									
1	6245 LINNEAL	BEACH DR.	G	7/12/05	1145	MAN	3		Х							1
						1						1				
·												 				
										<u> </u>						
				 -				-		 		 			ļ <u> </u>	
				 		ļ	<u> </u>					 				
					Į		Į					}				
		· - · · · · · · · · · · · · · · · · · ·		 			<u> </u>					 	h			
				<u> </u>							<u> </u>	<u>L</u>				
				·							Í	i				
I-lce	H=(HCI) S=(H2SO4 N=(HNO3) T=(Sodium Thiosulfate)	L	1			Relir	nguish by:		Date	Time	- R	eceived by:	Dat	<u> </u>	Time
Shipment		imple Kit Cooler#			1	aller		Tous	nst	7/12/05		1	D mutin	7/12		50
Out	Via:RE	D/T			2		-017~			1110100	<u> </u>	12-07				
h	AE				3											
Ret		ip Bl.	. □ re	·	4	<u> </u>				<u></u>	<u> </u>	<u></u>		revised		



Jeb Bush Governor





John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Laboratory Scope of Accreditation

Page 4 of 27

THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code:

FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc.

6601 Southpoint Parkway Jacksonville, FL 32216

Matrix: Drinking Water			Certification	
Analyte	Method/Tech	Category	Туре	Effective Date
Silica as SiO2	EPA 200.7	Primary Inorganic Contaminants	NELAP	1/21/2005
Silver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Silvex (2,4,5-TP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Simazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
Sodium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Styrene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Styrene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Sulfate	EPA 375.4	Secondary Inorganic Contaminants	NELAP	2/13/2003
Surfactants - MBAS	EPA 425.1	Secondary Inorganic Contaminants	NELAP	1/21/2005
Tetrachloroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Tetrachloroethylene (Perchloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Thallium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
Toluene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Toluene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Total coliforms	SM 9222 B	Microbiology	NELAP	4/4/2002
Total coliforms & E. coli	SM 9223 B	Microbiology	NELAP	9/5/2002
Total haloacetic acids	EPA 552.2	Synthetic Organic Contaminants	NELAP	1/21/2005
Total trihalomethanes	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Total trihalomethanes	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Toxaphene (Chlorinated camphene)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
trans-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
trans-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Trichloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
Trichloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Trichloroethene (Trichloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Turbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	7/17/2002
Vinyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Vinyl chloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Xylene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Xylene (total)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Zinc	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by sampler – Please ty	pe or print legibly)
System Name: <u>Jansen</u>	PWS I.[3590615
System Type (check one): Community	Nontransient Noncommunity	y ☐Transient Noncommunity
Address: 6235 BEAR LAKE	TERRACE	
	N. I.	
City: Apopka	State: <u>'+1</u>	ZIP Code: <u>32703</u>
Phone #: 407-869-1919		
E-Mail Address: S.L. Haws @ U	7.1.4.163 INC-USA.COM	
SAMPLE INFORMATION (to be completed	by sampler)	
Sample Number: A052634	Location Code (if kr	nown): MRT
Sample Date: <u>7-28-05</u>	Sample Time:	0855 AM PM (Circle One)
Sample Location (be specific): (245	LINNEAL BEACH	
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids)	: <u>1.4</u> mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sa	mple (Check all that apply)
☑Distribution	⊠Routine Compliance (with 62-550)	Quarterly (Which Quarter?)
☐Entry Point (to Distribution)	☐Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	☐Composite of Multiple Sites**	☐Violation Resolution
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)
☐Max Residence Time	Other:	
☐Ave Residence Time	Sampling Procedure Used or Other Co	mments:
☐Near First Customer		
*See 62-550.500(6) for requirement NOTE: See 62-550.512(3) for add for nitrate or nitrite MCL e	ditional requirements attach	2-550.550(4) for requirements and a results page for each site.
Sampler's Name:ALEXAND	ER CORENZO	
Sampler's Phone #: 407-948-42	07 Sampler's Fax #:	407-869-6961
Sampler's E-Mail Address:		
CERTIFICATION (to be completed by s	sampler)	
I, ALEXANDER LOREN	zo,	PERATOR (Print Title)
(Print Name) do HEREBY CERTIFY that the abov complete and correct.		, ,
Signature: <u>allxander</u>	Townso	Date:8/30/05

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

	ORY CERTIFICATION	,	completed by lab - Please type	or print legibly)					
			Flori	da Certification #: F53076					
LabName: Advanced Environmental Labs - Orlando Address: 528 S. North Lake Blvd., Suite 1016				Florida Certification #: E53076 Certification Expiration Date: 6/30/2006					
Addiess.	Altamonte Springs, Fl			Telephone #: (407) 937-1594					
		CONTRACTOR OF THE CONTRACTOR O							
ANALYSIS	S INFORMATION (to be	completed by lab							
PWS ID (fi	rom page 1):		Date Samp	ble(s) Received: 7/28/2005 2:35:00					
Lab Assigr	ned Report Number or .	Job ID A052634	Sample Number (From page 1) A052634						
Group(s) A	analyzed Results attacl	ned for compliance with	chapter 62-550, F.A.C. (check a	all that apply):					
1	norganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts					
-	All 17	All 30	All 21	Trihalomethanes					
	Partial	All Except Dioxin	Partial	Haloacetic Acids					
	Nitrate	Partial	Radionuclides	Bromate					
Ţ	Nitrite	Dioxin Only	Single Sample	Chlorite					
[Asbestos Only		Qtrly Composite**	Secondaries					
				All 14					
				Partial					
Nere any a	analyses subcontracted	l? ✓ Yes 🗌 No							
f yes, plea	se provide DOH certific	ation number E82574							
ATTACH C	OH ANALYTE SHEET	FOR EACH SUBCONT	RACTED LAB						
			RTIFICATION						
		OL.	ACTION TO A TO A						
, Myrna S		Laboratory Manager	1						
(Print Name)	^							
o HEREB	Y CERTIFY that all atta	ched analytical data are	correct and unless noted meet	all requirements of the					
National Er	nvironmental Laboratory	Accreditation Conferen		1 /					
Signature:	- Yllismal	XUNTRABO	Date:	8/25/07					
_		word Florida Ball lab as							
Failure to	provide a valid and cu	rrent Florida DOH lab ce	entification number and a current e enforcement against the publi	t Analyte Sheet for the attached ic water system for failure to sample,					
and may re	sult in notification of the	e DOH Bureau of Labora	atory Services.						
* Please p	rovide radiological sam	ple dates and locations	for each quarter.						
OMPLIAN	NCE DETERMINATION	(to be completed by	DEP or DOH)						
Sample Co	llection Info Satisfactor	v ⊠ Yes অ≣ No	Sample Analysis Info	Satisfactory: 🏿 Yes 🖫 No					
		(circle or highlight group(s)		quested (circle or highlight group(s) above)					
		(circle or highlight group		, ,					
		and the							
Reason(s):	MCL(s) Exceeded		etection(s)	Incomplete Report					
	Missing Analyte Sh	neet(s)	ocation Unsatisfactory	Analysis Unsatisfactory					
erson Not	Other:		Da						
Person Noti Comments	Other:			te Notified:					



Report No.:

Date Sampled:

Date Received:

Date Reported:

A052634

7/28/2005

7/28/05 14:35

8/23/2005



Client:

Utilities, Inc.

Project Name:

Jansen

Project Number:

PWS ID#:

Attention:

Kathy Siliitoe

Phone Number:

8002721919

Address:

200 Weathersfield Ave.

Altamonte Springs, FL 32714

Project Description

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Jansen

Approved By:

Mytria Santiago, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages =

Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.

Report No.: A052634

Project Name: Jansen

Date/Time Sampled: 07/28/05 8:55

Matrix: Drinking Water

Date/Time Received: 7/28/05 14:35

PWS ID#: Client Sample ID: 1

Sampled By: Alexander Lorenz

Site: 6245 Linneal Bea

Shipping Method: Client drop off

Sample Number: A052634-01

Disinfection Byproducts

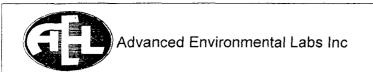
Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
2450	Chloroacetic Acid		ug/L	0.81	U	E552.2	0.81	8/5/2005	14:21	E82574
2451	Dichloroacetic Acid		ug/L	11		E552.2	0.56	8/5/2005	14:21	E82574
2452	Trichloroacetic Acid		ug/L	19		E552.2	0.60	8/5/2005	14:21	E82574
2453	Bromoacetic Acid		ug/L	0.51	i	E552.2	0.34	8/5/2005	14:21	E82574
2454	Dibromoacetic Acid		ug/L	2.3	/32.8	E552.2	0.45	8/5/2005	14:21	E82574

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.

MDL Method Reporting Limit

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

U The compound was analyzed for but not detected.



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Client: UTI	LITIES, INC. (UTL-	A)	Project name: JANSEN								
Date/Time Rcvd: 7/28	3/05	14.35	Log-	-In request number	A052634						
Received by: RPC	3			Completed by	RPG						
Cooler/Shipping	<u>Information:</u>										
Courier: ☐ AEL 🖾 C	lient □ UPS □ Por	ny Express 🗆 F	edE:	x Other (describe) :						
Type: ☑ Cooler ☐ Bo				•	,			-			
Cooler temperature:			e ten	nperature blank or ice	e water meası	uremei	nt				
Cooler ID	1					521 III II					
	2										
Temp (°C)	☐ Temp blank	☐ Temp blank		☐ Temp blank	☐ Temp blank		☐ Temp b	lank			
Temp taken from	☑ Cooler	Cooler		□ Cooler	☐ Cooler		☐ Cooler				
Temp measured with	☑ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (er ID):	nter	☐ IR gun☐ Thermometer (enter☐ID):	☐ IR gun☐ Thermometer (ID):	(enter	☐ IR gun ☐ Thermometer (enter ID):				
 Were custody pa Were custody pa Did all bottles a Were all bottle I Did the sample I Were correct bo Were proper sar 											
	eceived within holding rials checked for the pr		hles?)		/					
11. Were there air b	ubbles present in the	/OA vials?	-					1			
			check	one: NO ICE BI	UE ICE	/					
	emperature less than 6		. 10			/		 _			
	Is checked and recorde mples are checked by							1			
	containers provided		515.			1	 				
16. Were samples as		1									
17. Was it necessary		1									
Kit ID	Comments:										

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A052634 CustomerName: Utilities, Inc.

Collector: Alexander Lorenzo

AEL Jax 6601 Southpoint Parkway Jacksonville, FI 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

1	Check	if	Rush

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)
A052634-01	1	550 Haloacetic Acids (J)-55	Drinking Water	7/28/2005	8:55	7/28/05 14:35	8/11/2005		40mL Vial Amber

Orlando Relinquisher:

Shipping Relinquisher: AEL Courier

Shipping Receiver: AEL Courier

Jacksonville Receiver:

	لقا	O
--	-----	---

Advanced

Environmental Laboratories, Inc.

6601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574

9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589

2106 NW 67th Place, Ste. 7 • Gainesville, FL 32606 • 352.367.1500 • Fax 352.367.0050 • E82620 528 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • E53076

CLIENT NAME:	Utilities Inc.	PROJECT NAME:			Jansen	<u> </u>		BOTTLE SiZE								
ADDRESS:	200 Weathersfield Ave	P.O. NUMBER/PROJECT NUMB	ER:		· · · · · · · · · · · · · · · · · · ·			& TYPE	40mใ Vials			384		1 1		
Altamo	nte Springs, FL 32714	PROJECT LOCATION:											1			7
PHONE:	407-448-1715	FAX:						ا بي			ļ Ī					
CONTACT:	Kathy Sillitoe	SAMPLED BY: ALEX	ANDE	ER LC	ORE N	2.D]		
	TURN AROUND TIME:	1		ECIAL INSTRU			·····	1 8] 	1				
X STANDARD								RE								₽
F RUSH								Sis]]		15
								ANALYSIS REQUIRED	≰							AB NUMBER
WW=waste wa	ater SW=surface water GW=groun	d water DW≍drinking water		OIL.	A≂air	SO=soil	SL=sludge	A A	HAA							띴
SAMPLE	SAMPLE DESC	CRIPTION	Grab	SAM	PLING	MATRIX	NO.	Preserv	NH4CI							
ID	J LE DE J.		Comp	DATE	TIME		COUNT		202			ing a first	A deliver			
1	6245 LINNEA	L BEACH	G	7/28/05	0855	WW	3	H-00)	Х							
						PVV										
			 	 		<u> </u>	<u> </u>					 		 		+
	•															
																1
			<u> </u>	ļ		ļ	<u></u>									—
Ī											1					
			<u> </u>	 						<u> </u>						+
							Ĺ									<u> </u>
			<u> </u>	├ -	ļ				<u> </u>	 		ļ	 			┼
						<u> </u>										
l-lce	H=(HCI) S=(H2SO4 N=(HNO3	3) T=(Sodium Thiosulfate)					Relin	quish by:	L	Date	Time	1	eceived by:	Date	, , ,	Time
Shipment		ample Kit Cooler#			1	alexa	nder	Town	M	2/28/05	1435	121		1/2/0	5 /4	35_
Out	Via:				2					ļ		1				
Ret	Via: Tr	BD/T ip Bl.			3	 						 				
Received on Ice		C sent		ceived				<u> </u>		-				revised	8/01	







John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Laboratory Scope of Accreditation

Page 1 of 27

THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code:

FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc.

6601 Southpoint Parkway Jacksonville, FL 32216

Matrix: Drinking Water				
Analyte	Method/Tech	Category	Certification Type	Effective Date
1,1,1-Trichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
I, I, I-Trichloroethane	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
1,1,2-Trichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
1,1,2-Trichloroethane	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
l, i-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
l, l-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
1,2,4-Trichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
1,2,4-Trichlorobenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
1,2-Dibromo-3-chloropropane (DBCP)	EPA 504.1	Synthetic Organic Contaminants	NELAP	4/4/2002
1,2-Dibromoethane (EDB, Ethylene dibromide)	EPA 504.1	Synthetic Organic Contaminants	NELAP	4/4/2002
1,2-Dichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
1,2-Dichlorobenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
1,2-Dichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
,2-Dichloroethane	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
,2-Dichloropropane	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
,2-Dichloropropane	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
,4-Dichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
.4-Dichlorobenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
,4-D	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Machior	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
Alkalinity as CaCO3	SM 2320 B	Primary Inorganic Contaminants	NELAP	1/21/2005
luminum	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
ntimony	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
antimony	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
arsenic	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
trazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
arium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
enzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
enzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
enzo(a)pyrene	EPA 525.2	Synthetic Organic Contaminants	NELAP .	1/21/2005
eryllium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
is(2-Ethylhexyi) phthalate (DEHP)	EPA 525.2	Synthetic Organic Contaminants	NELAP	1/21/2005
romoacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
romochioroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
romodichloromethane	EPA 502.2	Other Regulated Contaminants, Group II Unregulated	NELAP	4/4/2002

Contaminants

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 06/29/2005-E82574







John O. Agwunobi, M.D., M.B.A., M.P.H.

Laboratory Scope of Accreditation

Page 2 of 27

THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code:

FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc.

6601 Southpoint Parkway Jacksonville, FL 32216

Matrix: Drinking Water			Certification	
Analyte	Method/Tech	Category	Туре	Effective Date
Bromodichloromethane	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
Bromoform	EPA 502.2	Other Regulated Contaminants, Group II Unregulated Contaminants	NELAP	4/4/2002
Bromoform	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
Cadmium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Calcium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Carbofuran (Furaden)	EPA 531.1	Synthetic Organic Contaminants	NELAP	4/19/2005
Carbon tetrachloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Carbon tetrachloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Chlordane (tech.)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Chloride	EPA 325.3	Secondary Inorganic Contaminants	NELAP	1/21/2005
Chloride	SM 4500 CI- E	Secondary Inorganic Contaminants	NELAP	2/13/2003
Chloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
Chlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Chlorobenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Chloroform	EPA 502.2	Other Regulated Contaminants, Group II Unregulated Contaminants	NELAP	4/4/2002
Chloroform	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
Chromium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
cis-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
cis-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Color	EPA 110.2	Secondary Inorganic Contaminants	NELAP	2/13/2003
Copper	EPA 200.7	Primary Inorganic Contaminants, Secondary Inorganic Contaminants	NELAP	4/4/2002
Dalapon	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Di(2-ethylhexyl)adipate	EPA 525.2	Synthetic Organic Contaminants	NELAP	1/21/2005
Dibromoacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
Dibromochloromethane ,	EPA 502.2	Other Regulated Contaminants, Group II Unregulated Contaminants	NELAP	4/4/2002
Dibromochloromethane	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
Dicamba	EPA 515.3	Group I Unregulated Contaminants	NELAP	1/21/2005
Dichloroacetic acid	EPA 552.2	Group 1 Unregulated Contaminants	NELAP	3/24/2005
Dichloromethane (DCM, Methylene chloride)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Dichloromethane (DCM, Methylene chloride)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Dinoseb (2-sec-butyl-4,6-dinitrophenol, DNBP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Diquat	EPA 549.2	Synthetic Organic Contaminants	NELAP	4/19/2005

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 06/29/2005-E82574







John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Laboratory Scope of Accreditation

Page 3 of 27

THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code:

FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc.

6601 Southpoint Parkway

Jacksonville, FL 32216

Matrix: Drinking Water			Certification	
Analyte	Method/Tech	Category	Туре	Effective Date
Endothall	EPA 548.1	Synthetic Organic Contaminants	NELAP	1/21/2005
Endrin	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Ethylbenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Ethylbenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
gamma-BHC (Lindane, gamma-Hexachlorocyclohexane)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heptachlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heptachlor epoxide	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heterotrophic plate count	SM 9215 B	Microbiology	NELAP	1/21/2005
Hexachlorobenzene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Hexachlorocyclopentadiene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
ron	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Lead	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
Lead	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Magnesium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Manganese	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Mercury	EPA 245.1	Primary Inorganic Contaminants	NELAP	4/4/2002
Mercury	SM 3112 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Methoxychlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Nickel	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Vitrate	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Vitrate-nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Vitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	· NELAP	2/13/2003
Vitrite as N	SM 4500-NO2 B	Primary Inorganic Contaminants	NELAP	1/21/2005
Odor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	2/13/2003
Orthophosphate as P	EPA 365.1	Primary Inorganic Contaminants	NELAP	2/13/2003
Orthophosphate as P	SM 4500-P E	Primary Inorganic Contaminants	NELAP	1/21/2005
Dxamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	4/19/2005
PCBs	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
entachlorophenol	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Н	EPA 150.1	Primary Inorganic Contaminants, Secondary Inorganic Contaminants	NELAP	4/4/2002
rictoram	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
otassium	EPA 200.7	Secondary Inorganic Contaminants	NELAP	1/21/2005
lesidue-filterable (TDS)	EPA 160.1	Secondary Inorganic Contaminants	NELAP	4/4/2002
elenium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/17/2002
elenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 06/29/2005-E82574







John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Laboratory Scope of Accreditation

Page 4 of 27

THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code:

FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc.

6601 Southpoint Parkway Jacksonville, FL 32216

Matrix: Drinking Water			Certification	
Analyte	Method/Tech	Category	Type	Effective Date
Silica as SiO2	EPA 200.7	Primary Inorganic Contaminants	NELAP	1/21/2005
Silver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Silvex (2,4,5-TP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Simazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
Sodium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Styrene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Styrene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Sulfate	EPA 375.4	Secondary Inorganic Contaminants	NELAP	2/13/2003
Surfactants - MBAS	EPA 425.1	Secondary Inorganic Contaminants	NELAP	1/21/2005
Tetrachloroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Tetrachloroethylene (Perchloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Thallium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
Toluene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Toluene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Total coliforms	SM 9222 B	Microbiology	NELAP	4/4/2002
Total coliforms & E. coli	SM 9223 B	Microbiology	NELAP	9/5/2002
Total haloacetic acids	EPA 552.2	Synthetic Organic Contaminants	NELAP	1/21/2005
Total trihalomethanes	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Total trihalomethanes	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Toxaphene (Chlorinated camphene)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
trans-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
trans-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Trichloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
Trichloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Trichloroethene (Trichloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Turbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	7/17/2002
Vinyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Vinyl chloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Xylene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Xylene (total)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Zinc	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002

Jansen

Docket No. 060253-WS

25.30-440(4) Operations Reports

Test Year Ended December 31, 2005





			<u> </u>										
		for the Month/Year of: January 2004											
A.	Public Water System (P	WS) Information											
ļ	PWS Name: Jansen					PWS Identification Nu	ımber: 3590615						
- 1	PWS Type:	Community Non-Transient Non-Community	Transier	nt Non-Community	Co	nsecutive							
ı	Number of Service Co	nnections at End of Month: 252			erved at E	nd of Month: 832							
ŀ	PWS Owner: Utilities,	Inc. of Florida											
	Contact Person: Patricl	k Flynn		Contact Person's T	itle: Regio	nal Director							
1	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Si		State: Fl	Zip Code: 32714						
	Contact Person's Telep	hone Number: 407-869-1919		Contact Person's F		r: 407-869-6961	***************************************						
		il Address: p.c.flynn@utilitiesinc-usa.com											
B. Water Treatment Plant Information													
Plant Name: Utilites, Inc. of Florida Plant Telephone Number: 407-869-1919													
Plant Address: 200 Weathersfield Ave. City: Altamonte Springs State: Fl Zip Code: 32714													
	Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water												
	Permitted Maximum D	Day Operating Capacity of Plant, gallons per day: 30	09,000			***							
		Plant Class (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): C											
	Licensed Operators												
	Lead/Chief Operator:												
	Other Operators:	Terry Sillitoe	С	12749		Sat. 8 A.M							
													
													
													
						· · · · · · · · · · · · · · · · · · ·							
			1			· · · · · · · · · · · · · · · · · · ·							
	Continue	1/01: 50											
	. Certification by Lea		1/.1.1.6	C41	4 1	'1-4'C-1'-D-4X C-1							
ı, t	ne undersigned water tre	eatment plant operator licensed in Florida, am the lost report is true and accurate to the best of my know	ead/cnief operato	or of the water treati	ment plant	identified in Part I of th	us report. I certify that the						
NS	SF International Standar	d 60 or other applicable standards referenced in sub	ricuge and belle	i. iceitiiy that all d	i iiikiiig Wa o certifu th	act the following addition	used at this plant conform to						
pla	ant were prepared each of	lay that a licensed operator staffed or visited this pla	ant during the m	onth indicated abov	e: (1) reco	rds of amounts of chemi	icals used and chemical feed						
rat	es; and (2) if applicable	, appropriate treatment process performance records	s. Furthermore.	I agree to retain the	se addition	al operations records at	the plant site for at least ten						
ye	ars and to make them av	vailable for review upon request.		6.00 to retain the		oporations records at	The plant one for at least tyli						
-	1 1 1												
^	mulail }	Garalek 2/3/04 Michael J	. Gavaletz			C5642							
Sig	gnature and Date //		Typed Name		.,	License Nu	ımber						
	U	()											
Sig	gnature and Date		Typed Name			License Nu	mber						

PWS I	dentifica	tion Number	r: 3590615		P	lant Name	: Utilit	es, Inc. of	Florida	- Jan	SEN			
	HI. Daily Data for the Month/Year of: January 2004 Means of Achieving Four-Log Virus Inactivation/Removal: *													
Ult	raviolet l	Radiation	Other	(Describe):										_]
Type o	f Disinfe	ectant Residu	ual Maintair	ed in Distribut	ion System:	⊠F	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide	囗
			C	Calculations or l	V Dose, to De	monstrate Po	m-Tog	Virus Inactiv	ation, if Ap	plicable*	Dose			
					海里上 《沙海河》	Lowest CT Provided	3 - 1 - 1					Lowest	and the second s	
10 Jun 49 10 Jun 5 40				Lowest Regidue) Disinfectant	Disinfectant Contact Time	Provided Before or			***		71.94	Rosidual Disinfectant		
				Concentration	(T) at C	nt First			Minimum	Lowest	Minimum	Concentration		
Day of	Hours	Net Quantity of Finished		(C) Before or at. First Customer	Point During	During	of	pHof	Required	UV Dose.	UV Dose Required,	at Remote Point in	Emergency or Abnormal Operating Conditions; Repo	air
Month	Plant in	Water Produced, gal	Peak Flow Rate, gpd	During Peak Flow, mg/L	Peak Flow, minutes	Peak Flow, mg-min/L	Water,	Water, if Applicable	mg-	mW- sec/em	mW-	Distribution	or Maintenance Work that Involves Taking Water	1
1	24	97,000	A COUNTY BLOW	OSPRINATION / ESS.	динисэ	EUL/SHIUZES		Applicante	Senare:	secretii	secient	System, mg/L	System Components Out of Operation	-
3	3	75.00D										1.1		\Box
4	34	52, 000 97,000										0,9		
5"	24	97,000										[.]		
7	24	114,000										1.3		_
8	34	68,000			<u> </u>		<u> </u>					1.2		_
9	24	77,000										40		
10	24 24	79,000		 							 	0,9		
12	24	79:000										1.0		
13	2 Ý 2 Ý	54,000										0.7		
15	ay	87(000	<u> </u>	4			 			 		017		
16	24	60,000										0.8		_
17	₹4	60,000	ļ	 			<u> </u>					1.0		
19	24 24	36,000										1.3		
20	24	55,000										1.0		
21 22	2 4	60,000									ļ	1.3		
23	29	1621000										1.6		
24	24 24	93,000	<u> </u>		 	ļ		ļ			ļ	61		
26	24	94:000	 		 	 	_	 	 	 	 	7.9		
27	24 24	\$6,000 46,000										1.7		
28 29	24	68,000	 			-			<u> </u>		-	1.0		
30	24	60:000				 					 	1.0		_
31	<u> جم</u>	44:000										0,9		
Total		2,65000	-1											

^{*} Refer to the instructions for this report to determine which plants must provide this information.

FLUSHING & WATER LOSS RECORD

Include service lines, mains, hydrants, tanks, etc.

Plant JANSEN
Nonth/Year JAN 2004

	PLUSHING					LOCATION OF
DATE	TIME (HIH)	ESTIMATED	SIZE	TIME FLUSHED	TOTAL GALLONS	FLUSHING POINT OR LINE BREAK
11104	180	150	3"	2PM	27,000	\$ GALS Total-Hydrast un Courts on
						Cove
	ļ	<u> </u>	ļ	ļ	ļ	
	ļ		<u> </u>			
		ļ				
		!				
		<u> </u>				
						
						
		<u> </u>				
·					·	·
	·					



	page 4 for instructions.										
		for the Month/Year of: February 200)4								
Α.	Public Water System (P	WS) Information									
	PWS Name: Jansen					PWS Identification	Number: 3590615				
1	PWS Type: 🛛 C	Community Non-Transient Non-C		t Non-Community		nsecutive					
	Number of Service Cor	nnections at End of Month: 252		Total Population S	erved at E	nd of Month: 영경고					
	PWS Owner: Utilities,	Inc. of Florida									
	Contact Person: Patricl	k Flynn		Contact Person's T	itle: Regio	onal Director					
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Sp	prings	State: Fl	Zip Code: 32714				
Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961											
	Contact Person's E-Mail Address: p.c. flynn@utilitiesinc-usa.com										
В.	Water Treatment Plant										
	Plant Name: Utilites, I	nc. of Florida		····		Plant Telephone Nu	ımber: 407-869-1919				
	Plant Address: 200 We	eathersfield Ave.		City: Altamonte S	prings	State: Fl	Zip Code: 32714				
	Type of Water Treated	by Plant: Raw Ground Water	Purchased Finished V								
	Permitted Maximum D	Day Operating Capacity of Plant, gallons	per day: 309,000								
		bsection 62-699.310(4), F.A.C.): V		Plant Class (per su	bsection 6	2-699.310(4), F.A.C.	.): C				
	Licensed Operators	Name	License Class	License Number			ift(s) Worked				
	Lead/Chief Operator:	Mike Gavaletz	5642			a.m 4:30 p.m.					
	Other Operators:	Terry Sillitoe	С	12749		Sat. 8 A.N	M 4:30 P.M.				
	. Certification by Lea	AlChiof Oppositor									
		eatment plant operator licensed in Florid	le am the lead/chief energie	r of the water trant	mont plant	identified in Part Lo	f this report. I certify that the				
		is report is true and accurate to the best									
		d 60 or other applicable standards refere									
		day that a licensed operator staffed or vis									
rat	es; and (2) if applicable	, appropriate treatment process performa									
ye	ars and to make them av	ailable for review upon request.	·	•		•	•				
	nn 1 1 1	1 An applan									
-	Mulau	Gavalo 314/04	Michael J. Gavaletz	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		C5642					
Si	gnature and Date	1	Printed or Typed Name			License	Number				
		V									

PWS	ldentifica	ation Numbe	r: 3590615		P	lant Name	: Utilit	es, Inc. of	Florida				
III. D	aily Dat	a for the Mo	onth/Year o	f: February 2	2004						,· <u>.</u>		
Ul	raviolet	Radiation	Other (activation/Rem (Describe):		Free Cl	nlorine		hlorine I	Dioxide	Oz	cone	Combined Chlorine (Chloramines)
Type	of Disinf	ectant Residi	ual Maintair	ned in Distribut	ion System:	⊠F	ree Ch	lorine	Com	bined Ch	olorine (C	hloramines)	Chlorine Dioxide
			C	T Calculations, or	IV Dose, to De	monstrate Po	ur-Log	Virus Inactiv	ration, if Ap				
							A 15-15			UV	Dose		
Day of the Month	Plant in	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp, of Water,	pH of Water, if Applicable	CT Required, mg-	Lowest Operating UV Dose, mW- sec/cm ²	mW•	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	2 Y	70,000											
2	٧٤	72:000										1.)	
3	24	50,000	<u> </u>	ļ	 							1.0	
5	24 24	50,000 66,000	 	}	<u> </u>		<u> </u>		 	 	ļ	1.3	
6	34	55,000	<u> </u>	 	 		!	 	 	 	 	1.7	
7	24	40,000		 	 			 	 	 	 	0.7	
8	24	87,000		†	t	<u> </u>	 	 	†	 	 		
9	24	69,000				<u> </u>				 		1.3	
10	24	56,000										0.1	
11	24	56,000										1.1	
12	24	71,000			ļ		ļ					1.3	
13	24	67,000		<u> </u>	 		<u> </u>	ļ	ļ			5.5	
14	24	44,000	<u> </u>	 		ļ	 			<u> </u>	↓	0.9	
15	34	77,000		 	 		 	ļ	 		 	 	
17	24	53,000		 	 	 	 	 	 			1.1	
18	ŹΫ	56,000	 	 	 	 	 	 		 	 	0.7	
19	36	63,000	 	 		 	 	 	1	 	 	0.8	
20	24	54,000	1	<u> </u>	 	 	 	<u> </u>		 	 	1.0	
21	24	55,000			1					<u> </u>	1	0.9	
22	24	131,000										1	
23	24	102,000										1.2	
24	24	67,000		<u> </u>									
25	2V	56,000	 	↓	 		 	<u> </u>	<u> </u>	<u> </u>		10	
26 27	24 24	65,000	 	ļ	ļ	<u> </u>	↓	 	ļ			0.7	
28	2 ¥	60,000	 -	 	 	ļ	 		 		 	LU	
29	24	118,000	 		 	 	₩	 	 	 	 	0,9	
30	 ^ ' 	11101.20	 	-	 	 	┼	 	 	 	 		
31	 	† 	†	 	 		 	 	 	 	 	 	
Total		1.915 000	†	1 -	<u> </u>		Ь			<u> </u>	<u></u>	<u> </u>	
Averag	e	66 000	1										

....

^{*} Refer to the instructions for this report to determine which plants must provide this information.

FLUSHING & WATER LOSS RECORD

Include service lines, mains, hydrants, tanks, etc.

Plant JANSEN

Month/Year FFB 2004

	PLUSHING	ESTIMATED		TIME	TOTAL	LOCATION OF FLUSHING POINT
DATE	(HIH)	G2H	SIZE	FLUSHED	GALLONS	OR LINE BREAK
2128	150	100	3 "		35 000	HID roardowy Cove,
2128	ISO	100	3"		15,000	HYD Shortleat (West)
2128	150	100	3"		15,000	HYD S'hortleat (East)
2128	150	100	3"		15,000	HYD Shillbark
2128	150	150	12"		7,500	BOV GAYS L Beach
- 	1.3				67,500	Total Gais flushed
						The court of the Ro
						
·		 				
						
		 				
						
					•	
•						
			£.			
						
						
	·	<u> </u>	Ļ <u> </u>	L	L	<u></u>



See	page 4 for instructions.										
I.	General Information	for the Month/Year of: March 2004									
A.	Public Water System (P	WS) Information									
	PWS Name: Jansen				PWS Identification N	umber: 3590615					
		Community Non-Transient Non-Community	Community Transien	t Non-Community	Consecutive						
		nnections at End of Month: 252		Total Population Served	at End of Month: 882						
	PWS Owner: Utilities,	Inc. of Florida									
	Contact Person: Patricl	k Flynn		Contact Person's Title: R	egional Director						
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Springs	State: Fl	Zip Code: 32714					
	Contact Person's Telep	phone Number: 407-869-1919		Contact Person's Fax Nu	mber: 407-869-6961						
	Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com										
В.	Water Treatment Plant		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
	Plant Name: Utilites, I	nc. of Florida			Plant Telephone Nun	nber: 407-869-1919					
	Plant Address: 200 We	eathersfield Ave.		City: Altamonte Springs	State: Fl	Zip Code: 32714					
	Type of Water Treated	by Plant: Raw Ground Water	Purchased Finished W	/ater							
	Permitted Maximum D	Day Operating Capacity of Plant, gallons	per day: 309,000								
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): V		Plant Class (per subsecti	on 62-699.310(4), F.A.C.):	С					
	Licensed Operators	Name	License Class	License Number	Day(s)/Shif	t(s) Worked					
Lead/Chief Operator: Mike Gavaletz C 5642 Mon - Fri 8 a.m 4:30 p.m.											
	Other Operators:	Terry Sillitoe	С	12749	Sat. 8 A.M.	- 4:30 P.M.					
Т	Certification by Lead	d/Chief Operator									
		eatment plant operator licensed in Florid	am the lead/chief operato	r of the water treatment n	lant identified in Part Loft	his report. I certify that the					
		is report is true and accurate to the best of									
NS	F International Standard	d 60 or other applicable standards refere	nced in subsection 62-555.3	20(3), F.A.C. I also certi	fy that the following additi	onal operations records for this					
pla	nt were prepared each d	lay that a licensed operator staffed or vis	sited this plant during the mo	onth indicated above: (1)	records of amounts of chen	nicals used and chemical feed					
rate	es; and (2) if applicable,	, appropriate treatment process performa	ince records. Furthermore, l	agree to retain these add	itional operations records a	t the plant site for at least ten					
		ailable for review upon request.									
	midne 11	mate wising	MC-bLLC 1:		05640						
C!	10100000X/ ()	my Till	Michael J. Gavaletz		<u>C5642</u>						
215	nature and Date	wat 4/5/08	Printed or Typed Name		License N	umber					

											C00 375 C		Total
	8.0										QCO,L&	りき	- 18
	<i>a</i> 1										CCO : 99	ht?	30
	Q^1										000 301	bt	67
											000,60!	h€.	87
	r.0										000 845	አሮ	· LT
	9'0										000/99	hC	97
	01										COQ 68	λC	57
	Ľο										000,65	እፖ	54
	5.0										200 16	hτ	.73
	1.0										600,66	۸T	77
											000 %	۸ť	17
	9' 4										000,08	77	50
	7.0										CCO'LL!	λC	61
	9.0										0901:09	<u>አ</u> ሮ	81
	L: 4)										900'95	7C	LI
	0.)										000,89	hΰ	91
	4.1										000,301	かぐ	SI
											000 301	ht	bi
	8.0										000129	ስ°	εı
	0.1					i					Q00 CL	りた	12
	9.0									·····	GCC HL	ht	II
	12										000'0 L	ht	01
	8.0										000 08	አ ሮ	6
	07					1					000'001	hť	8
											000'001	h ^C	L
	8,0										000 15	እ ^ተ	9
	1-1					i – –	1				200135	1,0	Ś
	0.1					<u> </u>	}	<u> </u>			000,89	ht	<u> </u>
	8-0						1			· · · · · · · · · · · · · · · · · · ·	000'EL	he	ε
	2.0		<u> </u>				f				000119	人で	7
	0 7							i			0 00 811	75	l i
System Components Out of Operation	System, mg/L	,uio/oas	zec/cm.	J/aim	Applicable) 。	7/uiui-Bui	sənnuiui	Flow, mg/L	Rute, gpd		Operation	
or Maintenance Work that Involves Taking Water	Distribution	-Wm	-wm	-8 u	Water, if	Water,	Peak Flow,		During Peak	Peak Flow	Water	ni mel9	эų
Emergency or Abnormal Operating Conditions; Repair	ni mio4	Rednired,	UV Dose,	Rednired,	lo Hq	10	Buring	Point During	First Customer	B 71.7	badsini To	Rours	Day of
	at Remote	UV Dose	gnitaraqO	TO		Temp.	Customer	Measurement	ts to stoted (2)		Net Quantity		
[Сопсепиацоп	amminiM	Lowest	muminiM			terial te	○ th (T)	Concentration		1	ļ, ties ir	
]	Disinfectant				40.000		no stoled	Sontact Time					1
	Residual						Provided	Instantial	Lowest Residual				
[]	Lowest	2002		3000	<u> </u>		Lowest CT	100000					
		asoc	1 A N	di i ii inome	Anamili en it	. Soa m		CT Calcula	2 40 101011110				
	//								Calculations, or U				
Chlorine Dioxide	hloramines)	D) anino	d') banic	س کی آ	anino	ee Chl	17 X	on System.	ed in Distributi				
								•	Descripe):		Radiation		
Chloramines)	оие 🔲 С	zo 🗌	əbixoi	nlorine D		lorine	Tree Ch		activation/Rem				
								t	March 2002	пти/Хеаг о	oM shr the Mo	aily Dat	ur b
				Florida	es, Inc. of	: Utilite	ant Name:	d		\$1906\$£:	tion Number	dentifics	SMd
L											- 10 1 - 11		

Average A3000 Maximum | 177.000 Mis report to determine which plants must provide this information.



ee page 4 for instructions	i.							
	for the Month/Year of: April 2004							
A. Public Water System (PWS) Information							
PWS Name: Jansen					PWS Identification Nu	mber: 3590615		
PWS Type:	Community Non-Transient Non-Community	Transien	t Non-Community		nsecutive			
Number of Service Co	onnections at End of Month: 251		Total Population S	erved at E	and of Month: 332			
PWS Owner: Utilities								
Contact Person: Patrio	ck Flynn		Contact Person's T	itle: Regio	onal Director			
Contact Person's Mail	ing Address: 200 Weathersfield Ave.		City: Altamonte Sp	orings	State: Fl	Zip Code: 32714		
	phone Number: 407-869-1919		Contact Person's F	ax Numbe	er: 407-869-6961			
	ail Address; p.c.flynn@utilitiesinc-usa.com							
B. Water Treatment Plan								
Plant Name: Utilites,	Inc. of Florida		· · · · · · · · · · · · · · · · · · ·		Plant Telephone Num	ber: 407-869-1919		
Plant Address: 200 W			City: Altamonte S	prings	State: Fl	Zip Code: 32714		
Type of Water Treate	d by Plant: X Raw Ground Water Purc	hased Finished V	Vater					
	Day Operating Capacity of Plant, gallons per day: 3	09,000						
	ubsection 62-699.310(4), F.A.C.): V		Plant Class (per su	bsection (62-699.310(4), F.A.C.):	C		
Licensed Operators	Name	License Class	License Number		Day(s)/Shift(s) Worked		
Lead/Chief Operator: Mike Gavaletz C 5642 Mon - Fri 8 a.m 4:30 p.m.								
Other Operators:	Terry Sillitoe	С	12749		Sat. 8 A.M	4:30 P.M.		
	A .							
	1/01: 6/2							
II. Certification by Le		1/-1:-6			tidentified in Dort Lofth	is remort. I contifu that the		
i, the undersigned water i	reatment plant operator licensed in Florida, am the l his report is true and accurate to the best of my know	ead/cnier operati	or or the water treat	ment piani Irinking w	t identified in Part i of the	used at this plant conform to		
MSE International Standa	rd 60 or other applicable standards referenced in sul	rection 62-555	320(3) FAC Lais	o certify t	hat the following addition	anal operations records for this		
nlant were prepared each	day that a licensed operator staffed or visited this pl	ant during the m	onth indicated above	e: (1) reco	ords of amounts of chem	icals used and chemical feed		
rates: and (2) if applicable	e, appropriate treatment process performance record	ls. Furthermore.	I agree to retain the	se additio	nal operations records at	the plant site for at least ten		
	vailable for review upon request.	· · · · · · · · · · · · · · · · · · ·			• • •	•		
· .								
mulal 16	avate 5/5/04 Michael.	J. Gavaletz			C5642			
Mulaul 6 Signature and Date	Printed o	r Typed Name			License Nu	ımber		
-								

PWS	dentifica	ation Numbe	r: 3590615		P	lant Name	: Utilit	es, Inc. of	Florida				
III. D	HI. Daily Data for the Month/Year of: April 2004												
Means	of Achi	eving Four-L	og Virus In	activation/Rem	oval: *	Free Ch	lorine	□ C	hlorine D	Dioxide	Oz	one 🔲 (Combined Chlorine (Chloramines)
		Radiation		(Describe):									
Type	of Disinf	ectant Residu	ual Maintain	ed in Distribut	ion System:	<u>⊠</u> F	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
			C	l'Calculations, or I		monstrate Fo		Virus Inactiv		plicable*	Dose		
			No.		Creacu	Lowest CT				UV	LXUSC	Lowest	
222				Lowest Residual	Disinfectant	Provided		250	100			Residual	
				Disinfectant Concentration	Contact Time. (T) at C	Before or at First			Minimum			Disinfectant Concentration	
		Net Quantity		(C) Before or at	Measurement	Customer	Temp.		CT	Operating	UV Dose	at Remote	
Day of the	Hours Plant in	of Finished Water	n m	First Customer	Point During	During	of	pH of	Required,	UV Dose,	Required.	Point in	Emergency or Abnormal Operating Conditions; Repair
	Operation	Produced, gal	Peak Flow Rate, gpd	During Peak Flow, mg/L	Peak Flow, minutes	Peak Flow, mg-min/L	Water,	Water, if Applicable	mg- min/L	mW- sec/cm²	mW- sec/cm²	Distribution System, mg/L	or Maintenance Work that Involves Taking Water System Components Out of Operation
1.1	24	29,000				1100 11000 12	3. J. W. J.	Azppirounic	Section 1	scorciii	acc/citi		System Components Out of Operation
2	γد	75,000										1.8	
3	29 29	51,000 149,00										1.3	
5	24	140,000		 				ļ	 				
6	24	96,000				 	 -	<u></u>	 			6.8	
7	24	105.000				i			f	 		1.0	
8	24	117,000										0.8	
9	24 24	67,000					<u> </u>					1./	
10	<u> </u>	120,000		 	}	}			 	<u> </u>	<u> </u>	40	
12	24	12(1000		 		 	 	 	 		 	0.7	
13	24	60,000										8.9	
14	24	70,000										1.0	
15	<u> </u>	74.000	ļ <u>.</u>		ļ	ļ		<u> </u>	ļ	ļ		1.2	
17	27	54,000	ļ	 				 	 		 	0.3	
18	24	1/(2,000				 	 	 	 		 	-0.0 -	
19	24	113,000										1-1	
20	<u> 34</u>	88.000		ļ							ļ	0.9	
21	24	133,000		}		<u> </u>		 	 		 	0.7	
23	र्वेप	102,000	 	 		 	-	 	 	 	ļ	0.8	
24	77 77 77 77 77 77 77 77 77 77 77 77 77	47.000					1		 			6.1	
25	24	133,000											
26	24 29	133,000	ļ				 		ļ			0.6	
28	24	73,000	 	 		 		}	 	 	 	7.4	
29	24	97,000		 	 	 	 	 	 	 -	 	1.0	
30	24	74,000		<u> </u>				<u> </u>	†	1	†	1.5	
31													
Total		2830,000	1										
Averag	e	94,000	_										

D--- 2

^{*} Refer to the instructions for this report to determine which plants must provide this information.





MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER WATER COPY LEGE LEGE

see page 4 for instructions	5,											
	for the Month/Year of: May 2004						***					
A. Public Water System (PWS) Information				-							
PWS Name: Jansen						PWS Identification N	Jumber: 3590615					
PWS Type:	Community Non-Transient Non-	-Community	Transier	nt Non-Community	Пс	onsecutive						
Number of Service Co	onnections at End of Month: 252					End of Month: 882						
PWS Owner: Utilities	s, Inc. of Florida											
Contact Person: Patri	ck Flynn	_		Contact Person's Title: Regional Director								
Contact Person's Mai	ling Address: 200 Weathersfield Ave.			City: Altamonte S		State: Fl	Zip Code: 32714					
Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961												
Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com												
B. Water Treatment Plan												
Plant Name: Utilites,	Inc. of Florida					Plant Telephone Nun	nber: 407-869-1919					
Plant Address: 200 W				City: Altamonte S	Springs	State: Fl	Zip Code: 32714					
Type of Water Treate	d by Plant: Raw Ground Water	Purch	ased Finished V	Vater								
Permitted Maximum	Day Operating Capacity of Plant, gallon	s per day: 30	9,000									
	ubsection 62-699.310(4), F.A.C.): V					62-699.310(4), F.A.C.):	: C					
Licensed Operators		Na.	License Class	License Number		Day(s)/Shif	t(s) Worked					
Lead/Chief Operator:	Mike Gavaletz		С	5642		Mon-Fri 8 a	.m 4:30 p.m.					
Other Operators:	Terry Sillitoe		C	12749		Sat. 8 A.M.	- 4:30 P.M.					
	×											
	\$? 4.											
	1/61: 60											
II. Certification by Le			1/ 1.1.C	-C41		4'1 4'C 1'. D 4T C	li I d'C d ad.					
	reatment plant operator licensed in Flori his report is true and accurate to the best											
	rd 60 or other applicable standards refer											
	day that a licensed operator staffed or vi											
rates: and (2) if applicable	e, appropriate treatment process perform	ance records	. Furthermore.	I agree to retain the	ese additio	onal operations records a	at the plant site for at least ten					
years and to make them a	vailable for review upon request.		,			p						
	ن شهب بر ۱۸											
mukail	Jourals 6/4/04	Michael J.	Gavaletz			C5642						
Signature and Date		Printed or	Typed Name			License N	lumber					
~	\cup //		2 L									

PWS Ident	ification Numbe	er: 3590615		F	lant Name	: Utili	tes, Inc. of	Florida				
III. Daily	Data for the M	onth/Year o	of: May 2004									
Means of A	chieving Four-	Log Virus In	activation/Rem	noval: *	Free Cl	hlorine		hlorine E	Dioxide	Oz	zone []	Combined Chlorine (Chloramines)
Ultravio	olet Radiation	Other	(Describe):									
Type of Di	sinfectant Resid	ual Maintair	ned in Distribut	ion System:	⊠F	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
		C	T Calculations, or I	JV Dose, to De	monstrate Fo	our-Log	Virus Inactiv	ation, if Ap	plicable*	5		
		1	T- Page 1	CT Calcu	Lowest CT				UV	Dosc	Lowest	
			Lowest Residual		Provided	* *		4.0			Residual	
			Disinfectant Concentration	Contact Time	Before or		45		100		Disinfectant	
	Net Quantity		(C) Before or at	(T) at C Measurement	at First Customer	Temp.	14.00	CT		Minimum UV Dose	Concentration at Remote	
Day of Hou	urs of Finished	need Me	First Customer	Point During	During	of	pH of	Required,	UV Dose,	Required,	Point in	Emergency or Abnormal Operating Conditions; Repair
the Plan Month Opera	t in Water ation Produced, gal	Peak Flow Rate, gpd	During Peak Flow, mg/L	Peak Flow,	Peak Flow, mg-min/L	Water,	Water, if Applicable	mg- min/L	mW- sec/cm ²	mW- sec/cm	Distribution System, mg/L	or Maintenance Work that Involves Taking Water System Components Out of Operation
1 24	52,000					•	**bhirdapio	1311111127	, presenti	3000011	1.1	Dysam Components Out of Operation
2 24	92,000											
3 29 4 24	92,000	 	-								7.6	
5 20	69,000	 			 	-	 			ļ	0.8	
6 24	83,000	 	†		 	 	 	 		<u> </u>	1.9	
7 24	73,000						<u> </u>	1			1.1	
8 24	75,000										1.7	
9 24	124,000	ļ										
10 2Y	87,000	 	 	 		 	 	 	 		1.0	
12 24	103,000	 	 	 	 	┼	 	 			1.3	
13 24	101,000	1			 	 	 	 	<u> </u>		 	
14 24	87,000										1.0	
15 24	75,000										1,7	
16 2Y	114,000	 		 	 	 	 	ļ	 	ļ	 	
17 2.V 18 2.Y	76,000	 	 	 	 	-	 			 	1.0	
19 24	93,000			<u> </u>		†	1	 		 	0.9	
20 29	109,000										1.2	
21 2y	84,000		<u> </u>		<u> </u>						1.4	
22 20	1 75,000	 	 		 		 	 			1.3	
24 24	141,000	 			 	 	 		 	 	0.7	
25		 		-	<u> </u>	 	1.6					
26 24	121,000		<u> </u>								0.2	
27 27											1.1	
28 15 29 15	137,000	<u> </u>	 		<u> </u>	 		 			1.3	
30 14	1 61,000	 	 	 	 	-	 	 	 	 	1.3	
31 2	1 162000	 	 	 	 	+	-	 	 	 	1.4	
Total	3,138,000							L	L	<u> </u>	<u> </u>	A
Average	1401 000	7										

Maximum

Da -- 2

^{*} Refer to the instructions for this report to determine which plants must provide this information.



see	page 4 for instructions.								
١.	General Information	for the Month/Year of:	(LOSE 04						
	Public Water System (P		7 (M. 11)						
1	PWS Name: Jansen						PWS Identification	Number: 3590615	
i		Community Non-Transie	ent Non-Community	Transien	t Non-Community	ПС	onsecutive		
		nnections at End of Month:			Total Population Se				
	PWS Owner: Utilities,								
	Contact Person: Patricl				Contact Person's Ti	itle: Regi	onal Director		
	Contact Person's Maili	ng Address: 200 Weathersfield	Ave.		City: Altamonte Sp		State: Fl	Zip Code: 32714	
	Contact Person's Telep	phone Number: 407-869-1919			Contact Person's Fa	ax Numb	er: 407-869-6961		
		il Address: p.c.flynn@utilitiesi	nc-usa.com						
B.	Water Treatment Plant	Information							
	Plant Name: Utilites, I						Plant Telephone Nu	mber: 407-869-1919	
	Plant Address: 200 We	eathersfield Ave.			City: Altamonte Sp	orings	State: Fl	Zip Code: 32714	
	Type of Water Treated	by Plant: Raw Ground	Water Purch	nased Finished V	Vater				
	Permitted Maximum D	Day Operating Capacity of Plant	t, gallons per day: 30	9,000					
		bsection 62-699.310(4), F.A.C.): V		Plant Class (per su	bsection	62-699.310(4), F.A.C.): C	
	Licensed Operators	Name		License Class	License Number		Day(s)/Sh	ift(s) Worked	
	Lead/Chief Operator:	Mike Gavaletz	Mon - Fri 8	Mon - Fri 8 a.m 4:30 p.m.					
	Other Operators:	Terry Sillitoe		С	12749		Sat. 8 A.N	Л 4:30 P.M.	
		<u> </u>	-/	L					
Н	. Certification by Lea	d/Chief Operator							
		eatment plant operator licensed	in Florida, am the le	ad/chief operato	r of the water treatn	nent nlan	t identified in Part I of	this report. I certify that the	
inf	ormation provided in th	is report is true and accurate to	the best of my know	ledge and belief	Legitify that all dr	inking w	ater treatment chemic	als used at this plant conform	i to
N2	F International Standar	d 60 or other applicable standar	ds referenced in sub-	section 62-555.3	20(3), F.A.C. I also	certify t	hat the following addi	tional operations records for	this
pla	nt were prepared each of	lay that a licensed operator staff	fed or visited this pla	ant during the mo	onth indicated above	e: (1) reco	ords of amounts of che	emicals used and chemical fe	ed
rat	es; and (2) if applicable	, appropriate treatment process	performance records	. Furthermore,	I agree to retain thes	e additio	nal operations records	at the plant site for at least to	en
yea	ars and to make them av	ailable for review upon request	i.						
	mulas	1 (aval) 7(1/	04 Michael J.	Gavaletz			C5642		
Sig	gnature and Date	0 /1		Typed Name			License	Number	
	•	~ / /							

PWS	PWS Identification Number: 3590615 Plant Name: Utilites, Inc. of Florida												
	III. Daily Data for the Month/Year of:												
Mean	s of Achi		og Virus In	activation/Rem (Describe):	oval: *	Free Cl	lorine	□ C	hlorine D	oioxide	Oz	zone [] (Combined Chlorine (Chloramines)
Type	of Disinf	ectant Residu	ual Maintain	ed in Distribut	ion System:	⊠F	ree Ch	lorine				hloramines)	Chlorine Dioxide
7			C	Γ Calculations, or I	JV Dose, to De	monstrate Fo	ur-Log	Virus Inactiv		plicable*	****		
					CT Calcu	ations				UV	Dosc		
Day of the Month	Plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Quetomer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of	pH of Water, if Applicable	Minimum CT Required, mg- min/L	Lowest Operating UV Dose, mw- sec/cm²	Minimum UV Dose Required	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
2	24	135,000										1.2	
3	34	136,000		 				 			<u> </u>	1.4	
4	24	120,000										1.6	
5	24	S2 1000										1,3	
6	24	93,000											
7 8	24	93,000				 						1.6	
9	24	62,000			 						 	0.7	
10	24	63,000		 	 	 			 			0.8	
- 11	2U 2U	しちひょりひし									 	1.0	
12	74	\$6.000 \$7.000										1.2	
13	フリ 24	67,000	ļ		ļ <u>.</u>								
15	2 u	30,000	 	<u> </u>		 	 				 	5.8	
_16	74 24	1 20 (100)				 			 		 	0.6	
17	24	72.000 \$8.000							† 		†	0.4	
18	24 24	\$8,000										0.1	
19 20	25	104,000	}	<u> </u>	ļ		<u> </u>					1,2	
21	24	170,000	<u> </u>	 	 			 	 	ļ	 	1.5	
22	24	45,000	 	· 		 -	├──	 	 	 		0.7	
23	24	81,000	<u> </u>	 		 						0.8	
24	24	95,000				<u> </u>					1	17.7	
25	24	27.000										1,5	
26 27	24	\$6,000										1.4	
28	24	110.800	 	 	 	 		 	 				
29	29	000 00		 	 	 	 	 	 	<u> </u>	 	1.4	
30	24	78.000		†	 	 	 	 	1	 	 	1.4	
31								1	 	t	 	 ''= 	
Total		2453,00	P										A

Maximum

^{*} Refer to the instructions for this report to determine which plants must provide this information.



F			C	Ñ	þ	V	
•	•	-	v	u	ĸ	B	

ee	page 4 for instructions.						
1.	General Information	for the Month/Year of: July 2004					
١.	Public Water System (P	WS) Information					
	PWS Name: Jansen					PWS Identification Nu	mber: 3590615
	PWS Type:	Community Non-Transient Non-Community	Transien	t Non-Community	ПСо	nsecutive	
ļ	Number of Service Con	nnections at End of Month: 252		Total Population S	erved at E	nd of Month: 882	
	PWS Owner: Utilities,	Inc. of Florida					
	Contact Person: Patrick	k Flynn		Contact Person's T	itle: Regio	onal Director	
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte S	prings	State: Fl	Zip Code: 32714
	Contact Person's Telep	ohone Number: 407-869-1919		Contact Person's P	ax Numbe	r: 407-869-6961	
ļ	Contact Person's E-Ma	nil Address; p.c.flynn@utilitiesinc-usa.com					
3.	Water Treatment Plant	Information					
	Plant Name: Utilities,					Plant Telephone Numl	per: 407-869-1919
	Plant Address: 200 We	eathersfield Ave.		City: Altamonte S	prings	State: Fl	Zip Code: 32714
	Type of Water Treated	l by Plant: 🛛 Raw Ground Water 🔲 Purch	nased Finished V	Vater			
		Day Operating Capacity of Plant, gallons per day: 30	09,000				
		bsection 62-699.310(4), F.A.C.): V			ubsection 6	62-699.310(4), F.A.C.):	
	Licensed Operators	Name	License Class	License Number		Day(s)/Shift(s) Worked
	Lead/Chief Operator:	Mike Gavaletz	С	5642		Mon Fri. 8 A.N	4 4:30 P.M.
	Other Operators:	Terry Sillitoe	С	12749		San. 8 A.M	4:30 P.M.
		RAYMOND HARRISH	C	12740			
		1					
					<u> </u>		
						W	
			<u> </u>				
							······································
			<u> </u>				
П	. Certification by Lea	d/Chief Operator					
		eatment plant operator licensed in Florida, am the le	ead/chief onerate	or of the water treat	ment nlant	identified in Part I of th	is report. I certify that the
inf	ormation provided in th	is report is true and accurate to the best of my know	vledge and belief	f. I certify that all d	rinking wa	ater treatment chemicals	used at this plant conform to
NS	F International Standar	d 60 or other applicable standards referenced in sub	section 62-555.3	320(3), F.A.C. I als	so certify the	hat the following addition	nal operations records for this
pla	ant were prepared each o	day that a licensed operator staffed or visited this pla	ant during the m	onth indicated abov	/e: (1) reco	ords of amounts of chem	icals used and chemical feed
rat	es; and (2) if applicable	, appropriate treatment process performance records	s. Furthermore,	I agree to retain the	se addition	nal operations records at	the plant site for at least ten
ye	ars and)to make them ay	vailable for review upon request.					
1		12 1 22-2014		-		05642	
4	support III /	Varies & 2-200 4 Michael J Printed or	. Gavaletz	/		<u>C5642</u>	
81	grature and Date	Printed or	Typed Name	, /		License Nu	mber
/	•	/		\checkmark			

PWS	dentifica	tion Number	r: 3590615		P	lant Name	: Utilit	ies, Inc. o	f Florida	- J.	VSIN		
Means	of Achi raviolet	eving Four-L Radiation	og Virus In	of: July 2004 nactivation/Rem (Describe):		Free Cl	lorine		hlorine I	Dioxide	Oz	zone 🔲 C	Combined Chlorine (Chloramines)
Type o	of Disinf	ectant Residu	ıal Maintair	ned in Distribut	ion System:		ree Ch					hloramines)	Chlorine Dioxide
2 8 8 7			C	l' Calculations, or l	JV Dose, to De		ur-Log	Virus Inactiv	ation, if Ap			1984 PN 386	
					CT Calcu				4 14 1	UV	Dose		
Day of the Month	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer, During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp, of Water, °C	pH of Water, if Applicable	mg-		Minimum UV Dose Required, mW- sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	24	101.000										0.5	
2	\rightarrow	63,000										(1)	
3		39,000		<u> </u>		ļ						1,2	
5		79,000		 	<u> </u>			 	 	ļ	 	0.7	
6		79,000		 			<u> </u>	 	 		ļ	0.7	
7		37,000		 					 		 	115	
8		94,000				†			 	 		11.5	
9		83,000										110	
10		68,000										1,3	
11	——	110,000											
12		110,000	ļ				<u> </u>		ļ	ļ		1.4	
13	 	74,000	<u> </u>	ļ	ļ			<u> </u>	ļ			1,2	The second secon
14	24	75,000	ļ <u>.</u>			 		 	 	 	 	110	
16	47	69,000	ļ	 	 	 		 	 	 		0.7	
17		54.000	 	 	 	 		 	 	 	 	1,2	
18		105,000				 	 	 	 	 		112	
19		105,000			1				1	1	 	1.0	
20		57,000							I				
21		74,000										1.9	
22		92,000	ļ			ļ		ļ	<u> </u>			1,2	
23	 	87,000	ļ		 	 	 	 	ļ	 		113	
25		133,000	ļ		 	 		 		 	 	1,3	
26	 	1/33,000		 	 	 	 	 	+	 	 	1,2	
27		52,000		 	 	 	 	 	 	 	 	115	
28		65,000			 	 	†	 	 	 	 	1.2	
29	1/	73,000		1	<u> </u>			 	1		1	11.5	
30	V	68,000	<u> </u>									1,3	
31	24	60,000										1,4	
Total		2470000	1										

Maximum

D--- 7

^{*} Refer to the instructions for this report to determine which plants must provide this information.



GCC	page 4 for mistructions.					
		or the Month/Year of: August	2004			
Α.	Public Water System (P	WS) Information				
	PWS Name: Jansen				PWS Identification	Number: 3590615
	PWS Type: 🛛 C	ommunity Non-Transient Nor	1-Community Trans	ient Non-Community	Consecutive	
	Number of Service Con	nnections at End of Month: 252		Total Population S	erved at End of Month: 88.	7
	PWS Owner: Utilities,	Inc. of Florida				
	Contact Person: Patricl	c Flynn		Contact Person's T	itle: Regional Director	
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Sp	orings State: Fl	Zip Code: 32714
	Contact Person's Telep	hone Number: 407-869-1919		Contact Person's F	ax Number: 407-869-6961	
		il Address: p.c.flynn@utilitiesinc-usa	.com			
В.	Water Treatment Plant	Information				
	Plant Name: Utilities,				Plant Telephone N	umber: 407-869-1919
					prings State: Fl	Zip Code: 32714
				l Water		
			ns per day: 309,000			
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): V		Plant Class (per su	bsection 62-699.310(4), F.A.C	C.): C
			License Cia	38 Ficense Number	Day(s)/S	iift(s) Worked
	Lead/Chief Operator:	Mike Gavaletz	C	5642	Mon Fri. 8	B A.M 4:30 P.M.
	Other Operators:	Terry Sillitoe	C	12749	San. 8 A	.M 4:30 P.M.
	The state of the s					
	And the second second					
	Certification by Lea	dd hief Operator				
			rida, am the lead/chief oner	ator of the water treat	ment plant identified in Part L	of this report. I certify that the
rat	tes; and (2) if applicable	, appropriate treatment process perfor				
ye	ars and to make them av	vailable for review upon request.		-	·	·
	mulail of	Grante 8/3/04	Michael J. Gavaletz		C5642	
Si	gnature and Date	Address: 200 Weathersfield Ave. Of Water Treated by Plant: Raw Ground Water Purchased Finished Water Purchased Finished Water Purchased Finished Water Raw Ground Water Purchased Finished Water Purchased Finished Water Raw Ground Water Purchased Finished Water Plant Class (per subsection 62-699.310(4), F.A.C.): C Plant Class (per subsection 62-699.310(4), F.A.C.): C Pand Glass Number Raw Ground Water Raw Gound Water Raw Gound Water Raw				
Ų,	billiano una Duto	()	Times of Types (tame	•	Dicense	

PWS	dentifica	tion Number	r: 3590615		P	lant Name	: Utilit	ies, Inc. o	f Florida				
Ult	raviolet l	Radiation	U Other (f: August activation/Rem Describe):		Free Ch			hlorine D		☐ Oz		Combined Chlorine (Chloramines)
Type	of Disinfe	ectant Residu	ıal Maintain	ed in Distribut	ion System:	⊠ Fı	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
				Calculations or Lowest Residual Distributions	Control of the state of the sta	aliene.	10/3	Charles In the Street County	dional A	olicable* UV	Dose	Lowest Residual Disinfectant	
Day of the	Hours Plant in	Net Quantity of Finished Water Produced, gal	Pakifico	Concentration (C) Before of at Pirst Concentra- Daring Peak	Chilintheaunt Continct Time (Continct Time (Contine Time) Point Disting Point Price (Time)	Lowest CT Provided Before or et Fins Customer During Peak Plose, mg-min/L	Central Services	SHOT Variation	Constant and Constant of Cons	Lowest Operating UV Dave, mW- sec/cm²		Concentration at Remote Point in	Emergency of Abnormal Operating Conditions, Repair
Nona	24	Produced, par	Rate, gpd	Flow, mg/L		mE-mark		Vabilizand	S MINATA	Secrem	303011	System, mg/L	System Components Out of Operation
2	24	81,000		 						 		1,5	
3	24	611000			i							7.4	
4	٧٤	79,000										1.9	
5 ,	24	83,000									ļ	1.5	
6	29	60,000	ļ <u> </u>	1					<u> </u>	ļ	 	43	
7 8	24	55,000 500,92		 	 		<u> </u>	 	 	 		1.4	
9	24 24	69,000				 			 		 	1.2	
10	34	80,000	 	 	 	-	├──	 	 	 	 	1.0	
113	2¥	52000	 	· · · · · · · · · · · · · · · · · · ·	 	1				1		1. Y	
12 🕏	aЧ	66,000	1							1		1.5	
13	24	65,000										1.2	
14.	Ϋ́	93,000				ļ	<u> </u>	ļ		ļ		0.7	
15	24	55,000		<u></u>		ļ	}			 		 	
16	2Y 2Y	55,006 76'00	ļ	 	 	 		 	 	 	 	1-1:5	
18	1	73,000	 	 	 	 	 	 	 	 	1	1.3	
19	24	63,000	 			 	1		 	1		0.8	
20	24	79,000				L					<u> </u>	1.3	
21	24	43,000										1.3	
22.	24	911000											
23	34	92,000				 	 		1		_	1.4	
24	1 24	55,000					 		-	_	 	1-5	
25	24	60,000			1		 	┼──	-		-}	1.3	
26 27	2.Y	71,000	 			+	+		- 		+	1.5	
28	1 30-	42,000	1	+	 	 	+-	+	+	+	1	1 /2	
29	27	110,000	 		 		+	 	1	1	1	1	†
30	24	1111000	 			 	1	+	1	 		1-3	
31	129	64,000	1	1	T			·				1.3	
Total		217 000	1										
سفيدين المساور	89	76000	3										
Maxi	num	1/1/ 000	7										

D--- 1

^{*} Refer to the instructions for this report to determine which plants must provide this information.





300	page 4 for instructions,						
1.	General Information	for the Month/Year of:	Sept 2004				
A.	Public Water System (F	WS) Information					
	PWS Name: Jansen				·	PWS Identification N	Jumber: 3590615
		Community Non-Trans	sient Non-Community Trans	ient Non-Community	Сo	nsecutive	
	Number of Service Co	nnections at End of Month:	252			nd of Month: 882	
	PWS Owner: Utilities,						
	Contact Person: Patric			Contact Person's	Title: Regio	onal Director	
		ng Address: 200 Weathersfie		City: Altamonte S		State: FI	Zip Code: 32714
		hone Number: 407-869-1919		Contact Person's I	Fax Numbe	r: 407-869-6961	
	Contact Person's E-Ma	nil Address: p.c.flynn@utilitie	sinc-usa.com				
В.	Water Treatment Plant						
	Plant Name: Utilities,	Inc. of Florida				Plant Telephone Nur	nber: 407-869-1919
	Plant Address: 200 We			City: Altamonte S	Springs	State: Fl	Zip Code: 32714
	Type of Water Treated			l Water			
	Permitted Maximum I	Day Operating Capacity of Pla	ant, gallons per day: 309,000			*	
	Plant Category (per su	bsection 62-699.310(4), F.A.	C.): V	Plant Class (per si	ubsection 6	2-699.310(4), F.A.C.)	: C
	Licensed Operators	Name	ALLON SERVICE SERVICE PARTITION COMP	Liesnie Miniber		DavayShi	i(s) Worked
	Lead/Chief Operator	Mike Gavaletz	C	5642			.M 4:30 P.M.
	Other Operators:	Terry Sillitoe	C	12749			- 4:30 P.M.
					1		
	I A SAME AND A SAME AN						
					†		
	FREE STORY THE SEC						
					}		
	24.00 mm				 		
					<u></u>		
'n	. Certification by Lea	d/Chief Operator					
inf	ne undersigned water tr	eatment plant operator license	ed in Florida, am the lead/chief operation	ator of the water treat	ment plant	identified in Part I of	this report. I certify that the
NIC	offiation provided in in	is report is true and accurate t	to the best of my knowledge and bel	ief. I certify that all c	drinking wa	iter treatment chemica	ls used at this plant conform to
nla	int were prepared each o	o or other applicable stand	ards referenced in subsection 62-55	5.320(3), F.A.C. I als	so certify th	at the following addit	ional operations records for this
rat	es, and (3) it applicable	appropriate treatment process	affed or visited this plant during the	month indicated above	ve: (1) reco	rds of amounts of cher	nicals used and chemical feed
ve	ars and to make them av	ailable for review upon reque	ss performance records. Furthermore	e, I agree to retain the	ese addition	al operations records	at the plant site for at least ten
,		anable for review upon reque	531.				
	muchael !	Garato 10/5/0	Michael J. Gavaletz			C5642	
Si	gnature and Date U		Printed or Typed Name				(t
1	J	\mathcal{O}	rimed of Typed Name			License N	umber

PWS Identifica	WS Identification Number: 3590615 Plant Name: Utilities, Inc. of Florida - Jansen													
III. Daily Data	a for the Me	onth/Year o	l: Sept 20	70 ¹										
Means of Achie	eving Four-L	og Virus In	activation/Rem	oval: *	Free Ch	lorine	Chlor	ine Dioxide	□ O2	zone 🔲 (Combined Chlorine (Chloramines)			
Ultraviolet I			(Describe):											
Type of Disinfe	ectant Residi	ial Maintain	ed in Distribut	ion System:	⊠ Fr	ee Chlorii	ne 📗	Combined C	hlorine (C	hloramines)	Chlorine Dioxide			
Day-of Hours the Month Operation		31,1,000 mg	Distribut	Add		LESU ALLE Marketine			/100m2		Designation of Abstratal Operating Conditions; Repa			
									132.00	Lowest				
	- 1. The		1		Tower.	4.0	745 1	4 X	100	Residual Disinfestant				
	4.20.20			THE SE	Taplat		140	form Lovest	Minimum					
Devoft Hours		12 (2) (12)	The same	September 1985	No.				-	M Remote Point in				
the Plant in	Water	Peak Flow	During (Sale)			7.62	**************************************			Partitution	Blackstone Co. Amormal Charating Conditions; Repa			
Month Operation	64, JUD	Rate and	Port me L	- tribues	. Avient L	AL AN		Marie Marie	ex/en/	Observation System mark	System Components Out of Operation			
	78,000								 					
3 14	75,000								+	1.3				
4 2Y	78,000									1.1				
5 24 6 24	237,000													
	333.000		 						 					
8 24	70',000								 	0,3				
9 24	43,000								 	1.0				
10 1y	50,000 58,000									1.3				
12 24	68,000	ļ	 							i.2_				
13" 24	57,000		 						 	1.9				
14 24	33,000								 	1.2				
15 24 16 24	65.000 50.000									1.3				
17 14	56,000		 							1.4				
18 14	38:000	··								1.3				
19 74	73 000									1.5				
20" JY 21 JY	74,000									1.2				
21 34	78,000				<u> </u>					1.1				
	15,000		 	 	 				 	1.2				
24 34	90,000									1.0				
25 24	44,000									1.3				
26 23/ 27 3.4	250,000	ļ												
28 24	246000		 	 	 					1.4				
29 14	159,000	 	 	 	 					0.8				
30 24	121,000								 	2,5				
Total	3,00 40 3													
Average	5185,000	1												

D--- 1

^{*} Refer to the instructions for this report to determine which plants must provide this information.





See page 4 for instruct	ions.							
1. General Informat	tion for the Moi	th/Year of:Q(大:	2004					
A. Public Water Syste	em (PWS) Inform	nation						
PWS Name: Janse	en						PWS Identification N	umber: 3590615
PWS Type:	⊠ Community	Non-Transient No	n-Community	Transier	nt Non-Community		nsecutive	
Number of Service	e Connections at	End of Month: 252			Total Population S	erved at E	End of Month: 832	
PWS Owner: Util								
Contact Person: P	atrick Flynn				Contact Person's T			
Contact Person's l	Mailing Address	: 200 Weathersfield Ave.			City: Altamonte S	prings	State: Fl	Zip Code: 32714
Contact Person's	Telephone Numl	per: 407-869-1919			Contact Person's F	ax Numb	er: 407-869-6961	
Contact Person's	E-Mail Address:	p.c.flynn@utilitiesinc-usa	a.com					
B. Water Treatment I	Plant Information	1						
Plant Name: Utili	ties, Inc. of Flor	ida					Plant Telephone Num	
Plant Address: 20					City: Altamonte S	prings	State: Fl	Zip Code: 32714
Type of Water Tr		Raw Ground Wate		nased Finished	Water			
		ng Capacity of Plant, gallo	ons per day: 30	9,000				
		-699.310(4), F.A.C.): V					62-699.310(4), F.A.C.):	
		Name	4.5	License Class	License Number	Air I	Dayle VShift	
Lead/Chief Open	ator: Mike Gavale	etz		С	5642		Mon Fri. 8 A	
Other Operators:	Terry Sillito	e		С	12749	ļ	San. 8 A.M.	- 4:30 P.M.
					<u> </u>			
								
N. V. S. W. S. S.								
								
				ļ	 			
				ļ			····	
				ļ				
					<u> </u>	<u> </u>		
11. Certification by	Lead/Chief Or	perator						
I, the undersigned wa	ter treatment pla	ant operator licensed in Flo	orida, am the le	ead/chief operat	or of the water treat	ment plan	t identified in Part I of t	his report. I certify that the
information provided	I in this report is	true and accurate to the be	est of my know	ledge and belie	f. I certify that all o	lrinking w	ater treatment chemical	s used at this plant conform to
NSF International Sta	andard 60 or oth	er applicable standards ref	erenced in sub	section 62-555.	320(3), F.A.C. I als	so certify	that the following additi	onal operations records for this
plant were prepared	each day that a li	censed operator staffed or	visited this plant	ant during the m	onth indicated above	ve: (1) rec	ords of amounts of cher	nicals used and chemical feed
rates; and (2) if appli	cable, appropria	te treatment process perfor	rmance records	s. Furthermore,	I agree to retain the	ese additio	onal operations records a	at the plant site for at least ten
years and to make the	em available for	review upon request.						
mulail	1 Gaval	11/4/04	Michael J	. Gavaletz			C5642	
Signature and Date	() (Printed or	Typed Name			License N	umber

PWS I	dentifica	tion Numbe				lant Name	: Utiliti	es, Inc. of	f Florida				
Means Ult	of Achie	Radiation	og Virus In	activation/Rem	oval: * [Free Cl			hlorine D		□ Oz	· 	Combined Chlorine (Chloramines)
Type o	f Disinfe	ectant Resid	ual Maintain	ed in Distributi	on System:	⊠ F	ree Chl	orine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
Day of the	Plant in	Net Quantity of Pinished Water	C C	Describe): ed in Distributi Calculations, or L Lorent Residual Distributant Cancentration (C) Before ay at Riest Cantenner Buring Peak Blow-me/L	V Dose, so De CP Calqui Distributes Goston Time (T) as C Vesses During Sons Bons	ACCUMANTAL OF THE PARTY OF THE		ing pactiv		plicable IV Love in Constant Cons		Lovert Residual Distributorati Consecutivities Marchantes Pagesthance	Elistration of Abnormal Operating Conditions; Repair of Maintenance Work that Involves Taking Water
		Produced, gal	Rate, and	How med	's minutes	mg-min/le	*C	Apolicable	min/L	acc/out	and the same	System mult.	System Components Out of Operation
2	24 24	53/100 104/100	 									٠٠٠	
3		76,000											
4		78,000										ე. ს	
5	24	68.00	1									0.8	
6	24	45,000										040	
7	3,4	63,000										0.7	
8	24	45,000		 								0.9	
9	エエ	77,000	ļ	<u> </u>								1.1	
11	24	78,000	ļ			<u> </u>							
12	24	48.000	ļ	 								0.6	
13	24	55,000	<u> </u>									0.0	
14	24	56,000									 	0.6	
15	24	60,000			·				 		 	1,1	
16	2٧	34,000										1.3	
17	રૂપ	73,000											
18	24	74 000	<u> </u>	<u> </u>								1.2	
19	24	71/000		 			 		<u> </u>			1.4	
21	2Y 2Y	58,000 54,000	 	ļ				}	ļ	 		0.7	
22	24	53,000	 	 		 	 	 	 	-	 	0.7	
23	24	43,000	 	<u> </u>		 			 	 		0.7	
24	24	מטעיבר	T				 	<u> </u>	1		·	 	
25	24	78,000						1				(ज	
26	24	55, 000						Ì				1.3	
27	24	60,000	1									1.0	
28 29	2Y 2Y	65,000	1	ļ	ļ	ļ	-		<u> </u>	<u> </u>		14	
30	24	71,000		 	ļ	 	 			 	 	1.3	
31	24	76,000	+			 	 	 	 	 	 	1.2	
Total		1,713,010	 	1	L	1		<u> </u>	 	<u> </u>	L	<u>L_</u>	<u> </u>
Averag	0 1 1 1 1 1	62,000]										

^{*} Refer to the instructions for this report to determine which plants must provide this information.



	STATE OF THE PERSON NAMED IN	ST.	2	(C)	1		V
Ĭ	Ė	E COMM	Gerran	6.5		13	

	1-8-							
١.	General Information 1	for the Month/Year of:	104					
٩.	Public Water System (P	WS) Information						
	PWS Name: Jansen						PWS Identification N	lumber: 3590615
i		Community Non-Transient Non-C	Community	Transie	nt Non-Community		nsecutive	
	Number of Service Cor	nnections at End of Month: 351			Total Population S	erved at E	nd of Month: 332	
	PWS Owner: Utilities,							
	Contact Person: Patricl				Contact Person's 7	itle: Regio	onal Director	
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.			City: Altamonte S	prings	State: Fl	Zip Code: 32714
		phone Number: 407-869-1919			Contact Person's F	ax Numbe	r: 407-869-6961	
	Contact Person's E-Ma	ail Address: p.c.flynn@utilitiesinc-usa.co	om					
В.	Water Treatment Plant		-					
	Plant Name: Utilities,	Inc. of Florida					Plant Telephone Nun	nber: 407-869-1919
	Plant Address: 200 We	eathersfield Ave.	_		City: Altamonte S	prings	State: Fl	Zip Code: 32714
	Type of Water Treated	by Plant: X Raw Ground Water	Purchased F	inished	Water			
	Permitted Maximum D	Day Operating Capacity of Plant, gallons	per day: 309,000					
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): V			Plant Class (per su	ubsection 6	2-699.310(4), F.A.C.)	: C
	Licensed Operators	Name -	Tilea	TE GITTE	Libense Number		Dayovshif	t(s) Worked
	Lead/Chief Operator:			С	5642			.M 4:30 P.M.
	Other Operators:	Terry Sillitoe		С	12749		San, 8 A.M	4:30 P.M.
	Outor Operations							
	- Align							
					1	<u> </u>		
		il			<u> </u>			
	 Certification by Lea 	d/Chief Operator						
I,	the undersigned water tr	reatment plant operator licensed in Floric	da, am the lead/chi	ef operat	tor of the water treat	ment plant	identified in Part I of	this report. I certify that the
in	formation provided in th	nis report is true and accurate to the best	of my knowledge	and belie	ef. I certify that all of	irinking wa	ater treatment chemica	is used at this plant conform to
N	SF International Standar	rd 60 or other applicable standards refere	enced in subsection	1 62-333	.320(3), F.A.C. 1 all	so certily u	nat the following addit	micals used and chemical feed
pl	ant were prepared each	day that a licensed operator staffed or vis	sited this plant dur	ing the n	nonin indicated abov	ve: (1) reco	nal operations records	at the plant site for at least ten
ra	tes; and (2) if applicable	e, appropriate treatment process performa	ance records. Furt	nermore	, i agree to retain the	ese audition	nai operations records	at the plant site for at least ten
уŧ	ears and to make them av	vailable for review upon request.						
	million	Grusala 12/2/04	Michael J. Gava	letz			C5642	
		t Olyman (Selet	Printed or Type				License N	Number
S	ignature and Date	/	rimed or Type	a Ivallie			Electise I	
		()						

									1	1			18
											000,15	かて	30
	1.0					}					000,52		57
	5,0										COOLET	77	82
											31,000	7.5	17.
	01			1							000 169		36
	0.1										COO TEL		52
	<u> 0,0</u>										000128		77
	80							1			00000		
	- 2 -1						1				600,612		23
	10										000,42		π
											000'FL	XT.	, 12
											000)'\$5	he	70
	50										000 gg	77	× 61
	5'0										∞ 0.8∂	74	81
	5'0										000 1-9	77	L
	[,0]										53,000	77	. 91
	0					<u> </u>					21,000	71	SI
	N.O.										000	\hat{t}	71
											C00 27	7.0	εı
	0.1										200.55	he	71
	9'0										000152	िर्दे	11
	L'O				~						000 25	रिटें	
	9'0										000,82	<u> ₽</u> -	01
	6-1										000/29) PC	6
	- 4.1										000'001	ज	8
		 				1					0000	57	L
	Oil										0.00 94) ત	9
	- 11	 				_					0,00,09	5°	S
	1.0		 			+					C00,44	hc	7
		 	 								COO CL	ኢፒ	
	<u>C.</u>	 				+	 				C00725	74	7
	7.		 			+		-			000 CL	አፕ	1
	7.1		00-00-00-00-00-00-00-00-00-00-00-00-00-	MOST	Bedrinsminkels h. p.S.	100000000000000000000000000000000000000	E SCHOOL STATE	S SSOUTHUL	Flow myl	Pents, stars	Produoed, gal	Operation	unuo
System Components Out of Operation	Physicination - System, mylt.	Miniminal Say 1 No. Miniminal Minimi	H10/004			2.	in the solution	A 70 C	MARKET STATES	word about	Water Produbord, gal	ni melq	ape
Wanish Tarvioval suit strow someonish 10: 🔅	-सामाग्रामध्य	200	- Mu	A STANFALL T	e automation to	1	1000		MINIORIO MAL	Maria San	bodium 10	Hours	TO Y
TRANSMISS TO A AUTOMA O Defeator Conditions	al miof.	A STORY	All Samuel par	45514000		100	table.		(C) Belose DE M	The state of	Nat Quantity	MAKE 5	
	Section 3		11000				1001.0		Condent almando.				
	Distributed The Control of The Contr					and the	Bergie of	BULL PROPERTY.	annochital	14.4	The state of		
	Residuel	1 3 37	aw v		1	10 1	Provided		Indiana A Marko.				
	TOMOSE					1.7	13 man	No.	100	AND THE			
		NAME OF THE PARTY OF	TO THE STATE OF	2000000	and the second	1000	100		The second secon	· · · · · · · · · · · · · · · · · · ·			
		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	THE PARTY OF THE P	The second second	A STATE OF THE PARTY OF THE PAR	100 1000		1 E. St. 1 - 1 - 1 - 1	A SECTION OF THE PARTY OF THE P			30	
A STATE OF THE STA		100	ESSELLA MALE	CALLO O	2011	с Сијо	ari 🔯	ou 2ystem:	d in Distributio	il Maintaine	ctant Residua	Disinfe	to ady
Chlorine Dioxide	(sənims rol	منتهو ((کار	Id > bani	Jacon L	- ui	0143	3 62	, ,		Other (I		AVIOICE F	JIO [
							-		jectipe).	T) redio	AIIIR LORI-TO	บบาน เก	Sura
combined Chlorine (Chloramines)	on an	IOZO 🗀	oxide	lorine Di	СР	orine	Free Chl	* :lsv	ctivation/Remo	snl smiV o	o I-mod paiv	aida A 30	3000
(perignos/Objectional)), O:	DON JO	do are Δ/dh	tor the Mon	mm(1 Ali	R(I - I)
												*********	OT 6 **
							CATTERNA T SETT	7	_	CIONACE	ion Number:	entificat	71 SM
HASED FINISHED WATER				r iorida	S. Inc. of	entitite:	int Name:	ध्रव ।					

Average (6,000) | Average (6,000) | Average (700) | Average (7

..........

l IE



	page 4 for misductions										
		for the Month/Year of: DeC =	2004								
Α.	Public Water System (F	PWS) Information									
	PWS Name: Jansen	WS Name: Jansen PWS Identification Number: 3590615									
	PWS Type: 🔀 🤇	S Type: Community Non-Transient Non-Community Transient Non-Community Consecutive S Type: Connections at End of Month: 252 Total Population Served at End of Month: 882									
	PWS Owner: Utilities,	Inc. of Florida									
	Contact Person: Patrick Flynn Contact Person's Title: Regional Director										
	Contact Person's Maili	's Mailing Address: 200 Weathersfield Ave. City: Altamonte Springs State: Fl Zip Code: 32714 Contact Person's Fax Number: 407-869-6961									
	Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961										
	Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com										
В.											
	Plant Name: Utilities,	Inc. of Florida					Plant Telephone Num	nber: 407-869-1919			
	Plant Address: 200 We	0 Weathersfield Ave. City: Altamonte Springs State: Fl Zip Code: 32714 eated by Plant: ⊠ Raw Ground Water □ Purchased Finished Water									
	ype of Water Treated by Plant: 🛛 Raw Ground Water 🔲 Purchased Finished Water										
	Permitted Maximum D	Day Operating Capacity of Plant, gallons	per day: 30	9,000							
	Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): C										
	Licensed Operators Name License Class License Number Day(s)/Shift(s) Work							t(s) Worked			
	Lead/Chief Operator:	/Chief Operator: Mike Gavaletz C					Mon Fri. 8 A.M 4:30 P.M.				
	Other Operators:	Terry Silliton		С	12749		San. 8 A.M.	.M 4:30 P.M.			
	ALSO LABORATED IN										
One toperators, as Terry sinted											
	A Company of the Company										
	Certification by Lead	d/Chief Organiter									
			a amatha la	ad/abiaf anausta	f the water treet	ant plant	identified in Dom Lafel	his remove I contify that the			
	the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part 1 of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to										
	ISF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this										
	lant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed										
	ates; and (2) if applicable, appropriate treatment process performance records. Furthermore, Lagree to retain these additional operations records at the plant site for at least ten										
	caps and to make them available for review upon request. RAYMOND ALAN PARRISH C-12740										
1					MKK15H		6-12	, 10			
(k	ummel The	Tarrist, 1/2/2005	Michael J.	Gavaletz			C5642				
S/S	nature and Date		Printed or	Typed Name			License Nu	ımber			

PWS Identification Number: 3590615 Plant Name: Utilities, Inc. of Florida - Jausen													
III. Daily Data for the Month/Year of: Dec. 64													
Means	of Achi	eving Four-L	og Virus In	activation/Rem	ioval: *	Free Cl	nlorine	Пс	hlorine D	ioxide	Oz	zone 🔲 (Combined Chlorine (Chloramines)
Means of Achieving Four-Log Virus Inactivation/Removal: *													
			ıal Maintain	ed in Distribut	ion System:	⊠F	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
1				Calculations, or l	JV Dose, to De	monstrate Fo				plicable*			
					CT Calcul					UV	Dose		
					2112	Lowest CT						Lowest	
				Lowest Residual Disinfectant	Disinfectant Contact Time	Provided Before or						Residual Disinfectant	
				Concentration	(T) at C	at First			Minimum	Lowest	Minimum		
		Net Quantity		(C) Before or at		Customer	Temp.		CT	Operating	UV Dose	at Remote	
Day of	Hours	of Finished		First Customer	Point During	During	of	pH of		UV Dose,	Required,	Point in	Emergency or Abnormal Operating Conditions, Repair
Month	Plant in Operation	Water Produced, gal	Peak Flow	During Peak Flow, mg/L	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW- sec/cm ²	mW- sec/cm ²	Distribution	or Maintenance Work that Involves Taking Water
World Al 27	24	66.000	Rate, gpd	Flow, mgL., *	minutes.	mg-min/L	2.76 April	Applicable	min/L	sec/em-	, sec/cm	System, mg/L	System Components Out of Operation
7.2	-0-1	70,000	·····	 				 	 		 	0.7	
200	1	56,000									 	<u> </u>	
344		41,000										0.5	
数2档		69.000											
652	_	71,000						ļ				0.3	
120K€		56,000										0.5	
100 PE		57,000		 			 	<u> </u>		ļ	 	0.5	
第0 至	-	59,000 56,000									 	0,9	
WITH THE	_	35,000	··············	 							 	0.5	
差166 第12章 第13章	1.	71,000			***************************************								
13 13 15	V	73.000										0.6	
建 化基	24	63,000										0.9	
1716		53,000											
\$168 \$178		67,000		ļ. <u></u>							ļ	1.3	
※18集		72,000									<u> </u>	4.0	
198		39,000									 	1.2	
A 203		86,00									 	1,3	
21/		52,000									l ———	1,7	
225		66,000										1.2	
an23.∞		64,000										2.0	
4244		48,000									ļ	2.2	Mark Art Control of the Control of t
253 526#		60,000										1.5	
27%		70,500	<u>.</u>									2.4	
÷28-3		44,000									 	1.5	
16295	1,	61,000									 	1,2	
2000年	V	61,000									 	2.5	
2331%	24	65,000										2.2	
Total T	300	1,908000											

n--- 1

^{*} Refer to the instructions for this report to determine which plants must provide this information.





MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See	page 4 for instructions.											
		for the Month/Year of: January/2005	5									
	Public Water System (P											
	PWS Name: Jansen PWS Identification Number: 3590615 PWS Type: Community Non-Transient Non-Community Transient Non-Community Consecutive											
Number of Service Connections at End of Month: 253 Total Population Served at End of Month: 886												
	PWS Owner: Utilities,	Inc. of Florida										
Contact Person: Patrick Flynn Contact Person's Title: Regional Director												
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Springs State: Fl Zip Code: 32714								
	Contact Person's Telep	hone Number: 407-869-1919		Contact Person's Fax Number: 407-869-6961								
		il Address: p.c.flynn@utilitiesinc-usa.c	om									
В.	Water Treatment Plant	Information										
	Plant Name: Utilites, I	nc. of Florida		Plant Telephone Number: 407-869-1919								
	Plant Address: 200 We	eathersfield Ave.		City: Altamonte S	prings	State: Fl	Zip Code: 32714					
	Type of Water Treated		Purchased Finished V	Vater								
		Day Operating Capacity of Plant, gallons	per day: 309,000									
		bsection 62-699.310(4), F.A.C.): V		Plant Class (per su	bsection 6	62-699.310(4), F.A.C	.): C					
	Licensed Operators	Name	License Class	License Number		Day(s)/Shift(s) Worked						
	Lead/Chief Operator:	Roy Mericle	C	13808		Tue - Fri 8 a.m 4:30 p.m.						
	Other Operators:	Terry Sillitoe	С	12749	12749 Sat. 8 A.M 4:30 P.M.							
		Ray Parrish	С	12740		Mon 8 a.	8 a.m 4:30 p.m.					
	. Certification by Lea	d/Chief Operator										
			da am the lead/chief operate	or of the water treats	ment niant	t identified in Part I o	f this report. I certify that the					
I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to												
NS	SF International Standar	d 60 or other applicable standards refere	enced in subsection 62-555.	320(3), F.A.C. I als	o certify t	hat the following add	itional operations records for this					
pla	int were prepared each o	lay that a licensed operator staffed or vi-	sited this plant during the m	onth indicated abov	e: (1) reco	ords of amounts of ch	emicals used and chemical feed					
rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten												
ye	ars and to make them av	vailable for review upon request.		-		-						
	1/	721 201										
	181200	Me 2-2-5	Roy J. Mericle			<u>C13808</u>						
Si	gnature and Date	-	Printed or Typed Name			License	Number					

PWS	PWS Identification Number: 3590615 Plant Name: Utilites, Inc. of Florida														
III. Daily Data for the Month/Year of: January/2005															
				activation/Rem		Free Cl	lorine	Пс	hlorine D	Dioxide	Oz	one (Combined Chlorine (Chloramines)		
Uli	Ultraviolet Radiation Other (Describe):														
				ned in Distribut	ion System:	ХF	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide		
- Jpc	, , , , , , , , , , , , , , , , , , , ,		C	T Calculations, or I	JV Dose, to De	monstrate Fo	sur-Log	Virus Inactiv	ation, if Ar	plicable*					
				a de la compa	CT Calcu	ations				UV	Dose '				
						Lowest CT				- #X - "No"		Lowest			
				Lowest Residual	Disinfectant	Provided						Residual	[14명의 전략 1880년 1881년 1981년 11 - 14 전략의 전문 전환 12 18 등 1 등 1 등 1 등 1 등 1 등 1 등 1 등 1 등 1		
				Disinfectant Concentration	Contact Time (T) at C	Before or at First			100 May 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Lowest	Minimum	Disinfectant Concentration			
		Net Quantity		(C) Before or at	Measurement	Customer	Temp.	4	CT	Operating	UV Dose	at Remote			
Day of	Hours	of Finished	P. B. Sen	First Customer	Point During	During	of	pH of	Required,	UV Dose,	Required,	Point in	Emergency or Abnormal Operating Conditions; Repair		
the	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-,		or Maintenance Work that Involves Taking Water		
Month	Operation 24	Produced, gal 50,000	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/em²	sec/cm*	System, mg/L	System Components Out of Operation		
2	24	78.000		 	 	 	 	 	 	 	 	1.8			
3	24	79,000		<u> </u>		 	 		 	1		2.5			
4	24	51,000	<u> </u>	 	<u> </u>		 	 	 	-		2.5			
5	24	57,000			1	t	 	 		 	 	2.2			
6	24	72,000					1		 			2.3			
7	24	73,000										3.0			
8	24	44,000										2.0			
9	24	94,000		<u> </u>											
10	24	94,000		<u> </u>				1	<u> </u>			1.9			
11	24 24	72,000 54,000		 	<u> </u>	ļ	ļ		<u> </u>		ļ	2.0			
13	24	62,000	<u> </u>			ļ	ļ	 	<u> </u>		 	2.0			
14	24	43,000				}	 	<u> </u>	 	 	 	2.3			
15	24	45,000	<u> </u>		 			 	 	 	┼	2.0			
16	24	63,000		† · · · · · · · · · · · · · · · · · · ·	<u> </u>			<u> </u>		 	 	2.0	<u> </u>		
17	24	63,000				1	1	<u> </u>				2.0			
18	24	50,000									1	2.0			
19	24	53,000										1.8			
20	24	50,000	ļ		<u> </u>							1.7			
21	24 24	51,000 47,000	 -	ļ	}	ļ	↓	<u> </u>	<u> </u>	<u> </u>		0.8			
23	24	68,000	 		 			 		 	 	1.7			
24	24	69,000	 	+	 	 	┼	 	 	 	 	1 20			
25	24	56,000			 	 	+	 	 	-	 	1.6			
26	24	59,000	 	 	 	 	+	 	 	 	 	1.6			
27	24	51,000	t	+	 	 	1	\vdash	 	 	<u> </u>	2.0			
28	24	58,000			<u> </u>	1	1	 	 	†		1.5			
29	24	39,000					1		1	1	1	1.7			
30	24	78,000						<u> </u>							
31	24	79,000	 									1.80			
Total		1,902,000	4						<u> </u>						
Averag	,C	61,354	1												

94,000

^{*} Refer to the instructions for this report to determine which plants must provide this information.





See	page 4 for instructions.	•							
1.	General Information	for the Month Ye	ir of: February/200:	5	<u> </u>				
	Public Water System (P		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	PWS Name: Jansen	· · · · · · · · · · · · · · · · · · ·						PWS Identification No	umber: 3590615
		Community	Non-Transient Non-C	ommunity	Transien	t Non-Community	Con	secutive	
	Number of Service Co					Total Population Se	erved at Er	nd of Month: 882	
	PWS Owner: Utilities,								
	Contact Person: Patric					Contact Person's T	itle: Regio		
	Contact Person's Maili		Veathersfield Ave.			City: Altamonte Sp	rings	State: Fl	Zip Code: 32714
	Contact Person's Teler					Contact Person's F	ax Numbei	r; 407-869-6961	
	Contact Person's E-Ma			m					
B.	Water Treatment Plant	Information							
	Plant Name: Utilites, I	nc. of Florida						Plant Telephone Num	ber: 407-869-1919
	Plant Address: 200 Wo	eathersfield Ave.				City: Altamonte Sp	orings	State: Fl	Zip Code: 32714
	Type of Water Treated		Raw Ground Water		sed Finished V	Vater			
	Permitted Maximum I			per day: 309	,000				
	Plant Category (per su	bsection 62-699.3	10(4), F.A.C.): V				bsection 6	2-699.310(4), F.A.C.):	C
	Licensed Operators		Name		License Class	License Number		Day(s)/Shift	
	Lead/Chief Operator:	Roy Mericle			С	13808		Tue - Fri 8 a.	
	Other Operators:	Terry Sillitoe			С	12749		Sat. 8 A.M.	
		Ray Parrish			С	12740	.,	Mon 8 a.m.	- 4:30 p.m.
			-:						
			· · · · · · · · · · · · · · · · · · ·						
	1								· · · · · · · · · · · · · · · · · · ·
					4 · · · · · · · · · · · · · · · · · · ·	<u> </u>			
								···	
	L	l							
	l. Certification by Lea	d Chief Operator							
I, t	the undersigned water tr	eatment plant oper	rator licensed in Florid	a, am the lea	d/chief operate	or of the water treat	ment plant	identified in Part I of t	this report. I certify that the
inf	formation provided in th	is report is true an	d accurate to the best of	of my knowle	edge and belie	f. I certify that all d	rinking wa	iter treatment chemical	ls used at this plant conform to
NS	SF International Standar	d 60 or other appli	icable standards referen	nced in subs	ection 62-555.3	320(3), F.A.C. I als	o certify the	nat the following additi	ional operations records for this
pia	ant were prepared each (lay that a licensed	operator staffed or vis	ited this plar	it during the m	onth indicated abov	e: (1) reco	rds of amounts of cher	nicals used and chemical feed
rau	ars and (2) if applicable ars and to make them av	, appropriate treati	ment process performa	nce records.	Furthermore,	I agree to retain the	se addition	al operations records a	at the plant site for at least ten
y C	and to make them at	anable for review	upon request.						
	1600	Men	2-28-05	Roy J. Mer	icle			C13808	
Si	gnature and Date			Printed or	Typed Name			License N	umber

PWS	PWS Identification Number: 3590615 Plant Name: Utilites, Inc. of Florida													
	III. Daily Data for the Month Year of: February/2005													
Mean	s of Achi		og Virus In	activation/Rem (Describe):		Free Cl	nlorine	☐ C	hlorine D	Dioxide	☐ Oz	one 🔲 (Com	bined Chlorine (Chloramines)
				ned in Distribut	ion System:	ΧF	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)		Chlorine Dioxide
- 7		1	C	T Calculations, or	UV Dose, to De	monstrate Fe	our-Log	Virus Inactiv	ation, if A	pplicable*	ioimo (e	,		
					CT Calcu						Dose	,		
1						Lowest CT						Lowest		
1		1		Lowest Residual		Provided	}					Residual Disinfectant	l	
		1		Disinfectant Concentration	Contact Time (T) at C	Before or at First	1	1	Minimu	Lowest	Minimu m UV	Concentration	1	
j i		Net Quantity	1	(C) Before or at	Measurement	Customer	Temp.	l	m CT	Operating		at Remote	1	
Day of	,	of Finished	Į į	First Customer	Point During	During	of	pH of	Required,	UV Dose,	Required,		Em	ergency or Abnormal Operating Conditions; Repair
the	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-	Distribution		or Maintenance Work that Involves Taking Water
Month		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm ²	sec/cm ²	System, mg/L	<u> </u>	System Components Out of Operation
1	24	57,000							<u> </u>			1.3	<u> </u>	
3	24	60,000 59,000		ļ	<u> </u>				ļ <u>.</u>			1.1	!	
4	24	55,000					1	ļ	 			1.0	├	
5	24	39,000	 	 			 		ļ	 		0.9	⊢	
6	24	65,000	 	 	}	 	 	 	 	 	 	0.9	├	
7	24	66,000		 			 	 	 	 	├	1.7	╁	
8	24	69,000		 			1	 	 	 		1.2	 	
9	24	58,000				 	 		†	 	 	1.2	 	······································
10	24	67,000		<u> </u>	†	<u> </u>	 	 	†***********	 		3,0		
11	24	57,000										1.7	1	
12	24	42,000			1							1.5	1	
13	24	76,000												
14	24	77,000										2.2		
15	24	80,000										2.0		
16	24 24	66,000		<u>-</u>	ļ	<u> </u>	ļ	ļ	ļ	<u> </u>		1.8	1	· · · · · · · · · · · · · · · · · · ·
18	24	76,000 88,000	-		ļ	 		<u> </u>	 			0.6	1_	
19	24	50,000	-	 		 			 	 		1.7	↓	
20	24	92,000			 	 	 		 	 	 	1.3	┿	
21	24	92,000	 	 		 	 	 	 	 	 	1.6	┼	
22	24	79,000		 	 	 	 	 	+	+	 	1.5	+	
23	24	86,000	† · · · · · · · · · · · · · · · · · · ·		1	 	 		 	 	 	3.0	+-	
24	24	71,000			1		1		1	†	†	1.4	1	
25	24	88,000							1			0.6	T	
26	24	38,000										2.1		
27	24	69,000												
28	24	69,000	ļ									1.8	L	
30	24 24	 			ļ									
31	24	 	ļ	 		ļ	1	<u> </u>	1					
Total	1 44	1,891,000		1	<u> </u>	<u> </u>	<u> </u>		<u> </u>	<u> </u>		<u> </u>	1	
Averag	oe.	67,535	1											
1:10:4	2~	07,333	4											

^{*} Refer to the instructions for this report to determine which plants must provide this information.



License Number



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED **WATER** FILE COPY

Signature and Date

ee	page 4 for instructions.							1 1 1 1 1	
1.	General Information f	for the Month/Year	of: March/2005						
١.	Public Water System (P	WS) Information							
	PWS Name: Jansen							PWS Identification N	umber: 3590615
	PWS Type: 🔀 C	Community N	Non-Transient Non-	Community	Transien	t Non-Community	Co	nsecutive	
	Number of Service Cor					Total Population S	erved at E	nd of Month: 886	
	PWS Owner: Utilities,	Inc. of Florida							
	Contact Person: Patrick	k Flynn				Contact Person's T	itle: Regio		
	Contact Person's Mailin	ng Address: 200 We	athersfield Ave.			City: Altamonte Sp	orings	State: Fl	Zip Code: 32714
	Contact Person's Telep	hone Number: 407-	869-1919			Contact Person's F	ax Numbe	er: 407-869-6961	
	Contact Person's E-Ma		n@utilitiesinc-usa.c	om					
В.	Water Treatment Plant								
	Plant Name: Utilites, In							Plant Telephone Num	
	Plant Address: 200 We					City: Altamonte S	prings	State: Fl	Zip Code: 32714
	Type of Water Treated		aw Ground Water	7-1-	ased Finished W	Vater			
	Permitted Maximum D			s per day: 309	9,000				
	Plant Category (per sul	bsection 62-699.310		**************************************			bsection 6	62-699.310(4), F.A.C.):	
	Licensed Operators		Name		License Class	License Number		Day(s)/Shift	
	Lead/Chief Operator:	Roy Mericle			С	13808		Tue - Fri 8 a.	
	Other Operators:	Terry Sillitoe			С	12749		Sat. 8 A.M.	
		Ray Parrish			С	12740		Mon 8 a.m.	- 4:30 p.m.
								· · · · · · · · · · · · · · · · · · ·	
	L								
	. Certification by Lead								
I, t	he undersigned water tre	eatment plant operat	or licensed in Flori	da, am the le	ad/chief operato	or of the water treat	ment plant	identified in Part I of t	his report. I certify that the
ИЦ	SE International Standor	is report is true and a	accurate to the best	of my knowl	ledge and belief	. I certify that all d	rinking wa	ater treatment chemical	s used at this plant conform to
nla	int were prepared each d	d ou or other applica	nore standards refer	enced in subs	ection 62-333.3	20(3), F.A.C. Tals	o certify the	nat the following additi	onal operations records for this nicals used and chemical feed
rat	es: and (2) if applicable	appropriate treatme	perator starred or vi ent process perform	isiicu iiis pia iance records	Furthermore	unun muicateu abov Lagree to retain the	e. (1) reco se addition	nal operations records a	it the plant site for at least ten
ye	ars and to make them av	ailable for review u	non request.	imico records.	. I didiciliote,	i agree to retain the	se accitio	nai operations records a	a the plant site for at least tell
-									
	WEST	M/h 3-5	31-5	Roy J. Mer	ricle			C13808	

Printed or Typed Name

PWS	PWS Identification Number: 3590615 Plant Name: Utilites, Inc. of Florida												
III. Daily Data for the Month/Year of: March/2005													
Moore	of Achi	a for the Mo	onth/Year o	activation/Rem	5	Free Ch	Jamina		hlorine D	iovido	Oz	one D	Combined Chlorine (Chloramines)
ivieans	raviolet	eving Four-L Radiation	og virus in	activation/Rem (Describe):	ovai: • [Free Cr	norme		morine L	noxide	∐ O2	one LIC	Combined Chlorine (Chloranines)
				ned in Distribut	on System	M E	ree Ch	lorine	Com	hined Ch	lorine (C	hloramines)	Chlorine Dioxide
Type	וווופועו ה	cciain Residi		Calculations, or l							norme (C		
					CT Calcul	ations				UV	Dose		
				Lowest Residual	Disinfectant	Lowest CT Provided						Lowest Residual	
			4 1 12	Disinfectant Concentration	Contact Time (T) at C	Before or at First			Minimum	Lowest	Minimum	Disinfectant Concentration	Section (Section 1) and the se
		Net Quantity		(C) Before or at	Measurement	Customer	Temp.		CT	Operating	UV Dose	at Remote	
Day of the	Hours Plant in	of Finished Water	Peak Flow	First Customer During Peak	Point During Peak Flow,	During Peak Flow,	of Water,	pH of Water, if	Required,	UV Dose, mW-	Required, mW-	Point in Distribution	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water
Month		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	mg- min/L	sec/cm ²	sec/cm ²	System, mg/L	System Components Out of Operation
1	24	51,000										1.5	
2	24	52,000										1.7	
3	24	52,000										1.4	
5	24	58,000 45,000										1.5	
6	24	75,000		 								1.2	
7	24	76,000						 			 	1.4	
8	24	59,000					 					1.5	
9	24	60,000									 	3.0	
10	24	51,000										1.6	
11	24	46,000										1.3	
12	24	62,000 91,000					 	 			ļ	1.6	
14	24	91,000		 	 			 	<u> </u>	 	<u> </u>	3.0	
15	24	66,000		 	 		├	 	 	 	 	1.9	
16	24	50,000		<u> </u>			1	 			 	2.1	
17	24	41,000					1	1				1.8	
18	24	64,000										1.9	
19	24	48,000	ļ				ļ				L	1.6	
21	24	76,000 76,000	<u> </u>	 	<u> </u>			 	 		 	1	
22	24	60,000	 	<u> </u>		 	-	 			 	1.5	
23	24	49,000					 	 	 	 	 	1.6	
24	24	56,000			 	 	 	 	 		1	1.8	
25	24	59,000										1.6	
26	24	54,000										1.3	
27	24	68,000	<u> </u>		ļ								
29	24	68,000 56,000					<u> </u>			ļ		2.4	
30	24	57,000		 	 			 	├	 		1.0	
31	24	66,000	 	+			-	 	 		 	1.7	
Total		1,883,000		·			-	<u> </u>			<u> </u>	1.60	1
Averag		60.741	1										

^{*} Refer to the instructions for this report to determine which plants must provide this information.



See	page 4 for instructions.					6/8					
1.	General Information t	for the Month/Year of: April/2005									
A. <u>I</u>	Public Water System (P	WS) Information									
	PWS Name: Jansen				PWS Identific	ation Number: 3590615					
Ĺ	PWS Type: 🔀 C	Community Non-Transient Non-	Community Transie	nt Non-Community	Consecutive						
		nnections at End of Month: 253		Total Population Se	rved at End of Month: 88	86					
Į.	PWS Owner: Utilities.	Inc. of Florida									
Į.	Contact Person: Patricl	k Flynn		Contact Person's Ti	tle: Regional Director						
ļ	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Sp	rings State:	: Fl Zip Code: 32714					
ı	Contact Person's Telen	phone Number: 407-869-1919		Contact Person's Fa	x Number: 407-869-696	1					
l	Contact Person's E-Ma	nil Address: p.c.flynn@utilitiesinc-usa.c	om								
	Water Treatment Plant										
- }	Plant Name: Utilites, I					ne Number: 407-869-1919					
,	Plant Address: 200 We			City: Altamonte Sp	rings State: Fl	Zip Code: 32714					
ļ	Type of Water Treated		Purchased Finished	Water							
ļ		Day Operating Capacity of Plant, gallons	s per day: 309,000								
١		bsection 62-699.310(4), F.A.C.): V			section 62-699.310(4), F						
	Licensed Operators	Name	License Class	License Number		(s)/Shift(s) Worked					
ļ	Lead/Chief Operator:		c	13808		- Fri 8 a.m 4:30 p.m.					
ı	Other Operators:	Terry Sillitoe	С	12749		t. 8 A.M 4:30 P.M.					
- 1		Ray Parrish	С	12740	Mo	on 8 a.m 4:30 p.m.					
- {											
					.,						
- }				ļ							
}	,			 	· · · · · · · · · · · · · · · · · · ·						
		L									
11,	Certification by Lea	d/Chief Operator									
I, th	ne undersigned water tr	eatment plant operator licensed in Florid	da, am the lead/chief operat	or of the water treatn	ent plant identified in Pa	art I of this report. I certify that the					
into	ormation provided in th	is report is true and accurate to the best	of my knowledge and belie	 I certify that all dr 	inking water treatment ch	hemicals used at this plant conform to					
NS	F International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this nt were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed										
piai	iii were prepared each d	lay that a licensed operator staffed or vi	sited this plant during the n	nonth indicated above	: (1) records of amounts	of chemicals used and chemical feed					
ves	rs and to make them an	, appropriate treatment process performa	ance records. Furthermore,	agree to retain thes	e additional operations re	ecords at the plant site for at least ten					
<i>,</i> •••	ars and to make them available for review upon request.										
/	100 5-3-05 Roy J. Mericle C13808										
Sig	gnature and Date Printed or Typed Name License Number										

PWS	PWS Identification Number: 3590615 Plant Name: Utilites, Inc. of Florida													
111. 0	III. Daily Data for the Month/Year of: April/2005													
Mean	of Achi	eving Four-I	og Virus In	activation/Rem	oval: *	Free Cl	nlorine		hlorine D	Dioxide	□ Oz	one 🔲 (Combined Chlorine (C	Chloramines)
וט 🗀 ו	traviolet	Radiation	Other (Describe):		_ 				-			·	
			ual Maintain	ed in Distribut	ion System:	ΧF	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Diox	ride
			C'	T Calculations, or	IV Dose, to De									
					CT Calcu		31/20 TV				Dose			
1						Lowest CT						Lowest		
1 :				Lowest Residual	Disinfectant	Provided						Residual		
}				Disinfectant Concentration	Contact Time (T) at C	Before or]			Minimu	Disinfectant Concentration		
		Net Quantity		(C) Before or at	Measurement	at First Customer	Temp.		Minimu m CT	Lowest Operating	m UV Dose	at Remote		
Day of		of Finished		First Customer	Point During	During	of	pH of	Required.	UV Dose,	Required,	Point in	Emergency or Abnormal	Operating Conditions; Repair
the	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-	Distribution	or Maintenance Work	that Involves Taking Water
Month	Operation		Rate, gpd	Plow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm ²	seo/cm²	System, mg/L	System Compon	ents Out of Operation
<u></u>	24	62,000										1.3		
2	24	35,000										1.5		
3	24	78,000				<u> </u>				<u> </u>				
	24	79,000 59,000				ļ			<u> </u>		ļ	1.8		
6	24	72,000		 		 	}	 	<u> </u>		ļ	1.7		
7	24	90,000		 	ļ		ļ			ļ		1.8		
8	24	46,000		 		 	 					1.6		
9	24	55,000		 	 			 	 		ļ	1,5		
10	24	96,000	 	 		 	 	 	 	<u> </u>		1.8		
11	24	96,000		 			 	 	 	 	 	1.6		
12	24	70,000		 		 	 	ļ	 	 	 	2.3		
_13	24	82,000		1		 	}	 		 		3.0		
14	24	96,000	· · · · · · · · · · · · · · · · · · ·	·		 	 	 		 	 	2.0		
15	24	78,000					1	 				2.8		
16	24	75,000									 	2.4		
17	24	129,000								1	1			
18	24	129,000										2.0		
19	24	104,000	<u> </u>									2.4		
20	24	91,000	 	<u> </u>			1					2.2		
21	24	111,000 84,000	ļ	 		 			ļ	ļ		2.2		
23	24	69,000	 -		 	 	 	<u> </u>			ļ	1.6	<u> </u>	
24	24	99,000	 	 	 	ļ	 	 	 		ļ	1.8		
25	24	99.000	 		·	 	 	}		<u> </u>	 			
26	24	58,000	 	 	 	ļ	-		 			1.6		
27	24	88,000	 	 	 		 	ļ	 	 	ļ	1,5		
28	24	89,000		 	 	 	 	 	 	 	 	3.0		
29	24	71,000	 		 	 	 	 	+	 	 	3.0		
30	24	78,000	<u> </u>		 	 	 	 	 	+	 	1.7		
31		I	1	1			1	 	 	 	 	 		·
Total		2,468,000						<u></u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>			L.,	
Avera		82,266]											
Maxin	um	129,000	1											

^{*} Refer to the instructions for this report to determine which plants must provide this information.

FILE COPY



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See page 4 for instructions.

ce page 4 for manuemons	> .					
I. General Information	for the Month/Year of: May/2005					
. Public Water System (
PWS Name: Jansen				PWS Id	entification N	ımber: 3590615
PWS Type:	Community Non-Transient Non-	-Community	sient Non-Community	Consecutive	;	
	onnections at End of Month: 253			Served at End of Mo		
PWS Owner: Utilities		. ". "."				
Contact Person: Patric			Contact Person's	Title: Regional Dire	ctor	
Contact Person's Mai	ling Address: 200 Weathersfield Ave.		City: Altamonte S		State: Fl	Zip Code: 32714
	phone Number: 407-869-1919	***********		ax Number: 407-86	69-6961	
	lail Address: p.c.flynn@utilitiesinc-usa.	com				
B. Water Treatment Plan	t Information					
Plant Name: Utilites,	Inc. of Florida			Plant T	elephone Num	ber: 407-869-1919
Plant Address: 200 W	eathersfield Ave.		City: Altamonte S			Zip Code: 32714
Type of Water Treate	ed by Plant: Raw Ground Water	Purchased Finish		<u> </u>		
Permitted Maximum	Day Operating Capacity of Plant, gallon	ns per day: 309,000				
Plant Category (per s	ubsection 62-699.310(4), F.A.C.): V		Plant Class (per si	ubsection 62-699.31	0(4), F.A.C.):	С
Licensed Operators		License C				
Lead/Chief Operator:	Kathy Sillitoe	С	13094		Mon- Fr	
Other Operators:	Terry Sillitoe	В	12749		Thurs, Fri,	Sat Days
	Roy Mericle	C	13808	Tı	es- Fri Days Fron	n5/1 Untill 5/17/05
	Alex Lorenzo	С	13756		Mon, We	d. Days
	Roger Holsapple	С	7436		Tues.	Days
II. Certification by Lea	ad/Chief Operator					
the undersigned water t	reatment plant operator licensed in Flori	do and the lead/abit Cam	Cil	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1: D . T C.1	· · · · · · · · · · · · · · · · · · ·
nformation provided in t	reatment plant operator licensed in Flori his report is true and accurate to the best	t of my knowledge and b	erator of the water treat	ment plant identifie	a in Part I of the	is report. I certify that the
NSF International Standa	rd 60 or other applicable standards refer	enced in subsection 62-5	55 320(3) FAC Inte	in linking water treati	llowing addition	and operations records for this
plant were prepared each	day that a licensed operator staffed or v	isited this plant during th	e month indicated above	ve: (1) records of an	nowing addition	icals used and chemical feed
rates; and (2) if applicable	e, appropriate treatment process perform	nance records. Furthermo	ore. I agree to retain the	se additional operate	tions records at	the plant site for at least ten
ears and to make them a	vailable for review upon request.		,0 10 10 10 111	z opotu		P 22. 22. 47. 44.
,) (• •					
	20-6 dital	Kathy Sillitoe			C-13094	
Signature and Date		Printed or Typed Nam	ie		License Nu	ımber

PWS	PWS Identification Number: 3590615 Plant Name: Utilites, Inc. of Florida												
111. Daily Data for the Month/Year of: May/2005													
Mean	s of Achie	eving Four-L	og Virus In	activation/Rem	oval: *	Free Cl	lorine	ΩС	hlorine I	Dioxide	Oz	one 🔲 (Combined Chlorine (Chloramines)
		Radiation		Describe):									
Type	of Disinfo	ectant Residu	ual Maintain	ed in Distribut	ion System:	⊠F	ree Chl	lorine	☐ Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
<u> </u>	Ì		CI	Calculations, or I	JV Dose, to De CT Calcu	monstrate Fo	ur-Log V	Virus Inactiv	ation, if Ap	plicable*	Dose		
				24 54	4.00	Lowest CT				UV	LAUSO	Lawest	
		, and	3	Lowest Residual		Provided				**		Residual	
				Disinfectant Concentration	Contact Time (T) at C	Before or at First			k diminas	1		Disinfectant Concentration	
		Net Quantity		(C) Before or at	Measurement	Customer			CT	Lowest Operating	UV Dose	at Remote	
Day of	Hours Plant in	of Finished Water	Peak Flow	First Customer During Peak	Point During Peak Flow,	During	of *	pH of	Required,	UV Dose.	Required.	Point in	Emergency or Abnormal Operating Conditions, Repair
Month		Produced, gal	Rate, gpd	Flow, mg/L	minutes	Peak Flow, mg-min/L	eC.	Water, if Applicable	mg- min/L	mW- sec/cm²	mW-	Distribution System, mg/L.	or Maintenance Work that Involves Taking Water System Components Out of Operation
1	24	98,500						**************************************	200		Maria de la la fina		ar) and the contract of the co
3	24 24	98,500 63,000										0.80	
4	24	63,000					ļ	ļ			<u> </u>	0.60	
5	24	51,000				 				 	 	1.10 1.00	
6	24	58,000									 	1.00	
7 8	24	70,000 76,000										1.10	
9	24	76,000		ļ		 						1.60	
10	24	76,000		<u> </u>	 			 		 -	 	1.60	
11	24	80,000				 	<u> </u>	<u> </u>				2.00	
12	24	66,000 79,000										1.70	
14	24	89,000			<u> </u>							1.40	
15	24	125,000	 		 	 	 	 	 	 		1.30	
16	24	125,000				 		 	 	 		1.00	
17	24	84,000								t	 	0.80	
19	24	84,000 62,000	<u> </u>									1.40	
20	24	80,000			 	 	 	 	 	 		1.80	
21	24	79,000				 	<u> </u>		 			2.00 2.40	
22	24	113,500									 	2,10	
23	24	113,500 83,000										2.00	
25	24	138,000		 		-	 					1.60	
26	24	86,000		t		 		ļ	 	 -	 	1.80	
27	24	106,000					 	 		 	 	1.80	
28 29	24	87,000 100,500										1.90	
30	24	100,500		 									
31	24	82,000	 	 						 		2.00	
Total		2,693,000				!		L	<u> </u>	<u> </u>	<u> </u>	1.90	

^{*} Refer to the instructions for this report to determine which plants must provide this information.

MONTHLY OPERATION REPORT FOR PV	VSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER
PWS Identification Number: 3590615	Plant Name: Utilites, Inc. of Florida
IV Summary of Use of Polymer Containing Acrylamide, Po	lymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * May/2005
A. Is any polymer containing the monomer acrylamide used at the	e water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as
follows:	IA1id-Toyal 9/1-
Polymer Dose, ppm =	Acrylamide Level, % [†] =
B. Is any polymer containing the monomer epichlorohydrin used	at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the
polymer are as follows:	
Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =
C. Is any iron or manganese sequestrant used at the water treatme	ent plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:
Type of Sequestrant (polyphosphate or sodium silicate):	
Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of silica	ate as SiO ₂ =
If sodium silicate is used, the amount of added plus naturally	
* Complete and submit Part IV of this report only with the month	ly operation report for December of each year and only for water treatment plants using polymer containing

acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.



See page 4 for instructions.

							<u> </u>				
		for the Month/Year of: June/2005									
Ā.	Public Water System (P	WS) Information									
	PWS Name: Jansen					PWS Identification	Number: 3590615				
		Community Non-Transient Non-C	Community Transien	t Non-Community	ПСс	onsecutive					
	Number of Service Cor	nnections at End of Month: 253		Total Population Ser	ved at E	End of Month: 886					
	PWS Owner: Utilities,	Inc. of Florida									
	Contact Person: Patricl	k Flynn		Contact Person's Tit	le: Regi	onal Director					
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Spri	ings	State: Fl	Zip Code: 32714				
		hone Number: 407-869-1919		Contact Person's Fax	Numbe	er: 407-869-6961					
	Contact Person's E-Ma	il Address: p.c.flynn@utilitiesinc-usa.co	om								
В.	Water Treatment Plant	Information			_						
	Plant Name: Utilites, I	nc. of Florida				Plant Telephone Nu	mber: 407-869-1919				
	Plant Address: 200 We	eathersfield Ave.		City: Altamonte Spr	ings	State: Fl	Zip Code: 32714				
	Type of Water Treated		Purchased Finished W								
	Permitted Maximum D	Day Operating Capacity of Plant, gallons			-						
		bsection 62-699.310(4), F.A.C.): V		Plant Class (per subs	section (62-699.310(4), F.A.C.): C				
	Licensed Operators	Name	License Class	License Number			ft(s) Worked				
	Lead/Chief Operator:	Kathy Sillitoe	С	13094			Fri. Days				
	Other Operators:	Alexander Lorenzo	С	13756			Thur. Days				
	•	Terry Sillitoe	В	12749		Thur.Fri.	& Sat. Days				
	: '										
					······································						
					***	·					
					•						
	Certification by L	A/Chinf Oppositor									
Ĭť	1. Certification by Lead/Chief Operator the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the										
inf	ormation provided in the	is report is true and accurate to the best.	ia, am the lead/chief operato	r of the water treatme	ent plan	t identified in Part I of	this report. I certify that the				
NS	F International Standar	is report is true and accurate to the best of d 60 or other applicable standards refere	or my knowicage and belief	. Teeriny mat an drii 20(2) E.A.C. Laka	nking W	ater treatment chemics	tional operations records for this				
pla	int were prepared each d	lay that a licensed operator staffed or vis	sited this plant during the ma	onth indicated above:	(1) reco	nat the following addi	micals used and chemical feed				
rate	es; and (2) if applicable,	, appropriate treatment process performa	ance records. Furthermore	agree to retain these	additio	nal operations records	at the plant site for at least ten				
yea	ars and to make them av	ailable for review upon request.			2031110	op	prant site for at least toll				
,		•	\								
<u>,</u>	Kal N 5000	Time 7.5.05	Karty S.11:10E			C-13	3094				
Sig	gnature and Date		Printed or Typed Name			License 1					

D~~~ 1

PWS	PWS Identification Number: 3590615 Plant Name: Utilites, Inc. of Florida														
III. Daily Data for the Month/Year of: June/2005															
Means	Means of Achieving Four-Log Virus Inactivation/Removal: *														
Ul	Ultraviolet Radiation Other (Describe): Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide														
Type	of Disinf	ectant Residi	ual Maintain	ned in Distribut	ion System:						lorine (C	hloramines)	Chlorine Dioxide		
			C	l' Calculations, or l	JV Dose, to De	monstrate Fo	our-Log	Virus Inactiv	ation, if Ap		8				
1 1		1 2			CT Calcul	Lowest CT				UV	Dose	Lowest			
				Lowest Residual	Disinfectant	Provided	7					Residual			
				Disinfectant	Contact Time	Before or						Disinfectant			
	!	Net Quantity		Concentration (C) Before or at	(T) at C Measurement	at First Customer	Temp.		Minimum CT		Minimum UV Dose	Concentration at Remote			
Day of	Hours	of Finished		First Customer	Point During	During	of	pH of	Required,	UV Dose.	Required.	Point in	Emergency or Abnormal Operating Conditions; Repair		
the	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-	Distribution	or Maintenance Work that Involves Taking Water		
Month	Operation 24	Produced, gal 59,000 /	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm ²	sec/cm ²	System, mg/L	System Components Out of Operation		
1 2	24	51,000 /	 	 	 		.		ļ			2.60			
3	24	48,000 1/	l	 	 		 				 	2.4			
4	24	53,000 🗸		 			 	 			 	2.7			
5	24	64,500 J		<u> </u>			 		 		 				
6	24	64,500 /										2.2			
7	24	59,000 🗸										2.1			
8	24	44,000 /	}									2.2			
10	24	60,000 J 32,000 J		 	<u> </u>	ļ	<u> </u>		ļ		ļ	2.1			
11	24	56,000 /		 	 		 		<u> </u>		 	2.2			
12	24	66,600 /	 			<u> </u>	 		 		 	2,4			
13	24	66.00 /	İ			 	1			 	 	2.2			
14	24	50,000 🗸					<u> </u>					2.4			
15	24	62,000 /										2.2			
16	24 24	60,000 ✓					<u> </u>					2.4			
18	24	62,000 \(\sigma \)	 		<u> </u>	 	ļ	ļ	<u> </u>			2.2			
19	24	78,000 ✓			 	 	├ ─	 	 		 	1.7			
20	24	78,000 /		 	 	 	 	<u> </u>	 	 	 	2.0	 		
21	24	72,000 🗸				 	 	 	 	 	 	1.8	1		
22	24	67,000 ✓				1	1	 	 		 	0.4			
23	24	49,000 🗸										2.4			
24	24 24	55,000 /										2.3			
26	24	65,000 J	}		<u> </u>		ļ					2.6			
27	24	91,600	1		 	ļ	_				 	<u></u>			
28	24	53,000 /		 	 	 	 	 	 	 		1.8			
29	24	52,000 /	 	 	 	 	 		 	 	 	2.0			
30	24	54,000 J		 		†	 	t	 	 	 	2.4			
31	24			1	1			 	 		 	†			
Total		1,832,000						***************************************				· 			
Averag		61,066 91,500	18,330	.00											
Maxim	เนเน	1 91.500	,												

^{*} Refer to the instructions for this report to determine which plants must provide this information.

P	PWS Identification Number: 3590615 Plant Na	me: Utilites, Inc. of Florida
	IV. Summary of Use of Polymer Containing Acrylamide, Polymer Co	ontaining Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * June/2005
		eatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as
	follows:	
	Polymer Dose, ppm =	Acrylamide Level, % [†] =
В.	B. Is any polymer containing the monomer epichlorohydrin used at the wa	ater treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the
	polymer are as follows:	
	Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =
C.	C. Is any iron or manganese sequestrant used at the water treatment plant?	No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:
	Type of Sequestrant (polyphosphate or sodium silicate):	
	Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of silicate as SiO)2 =
	If sodium silicate is used, the amount of added plus naturally occurring	s silicate, in mg/L as SiO ₂ =

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.



See page 4 for instructions.

see page 4 for instructions.	
1. General Information for the Month/Year of: July 2005	
A. Public Water System (PWS) Information	
PWS Name: Jansen	PWS Identification Number: 3590615
PWS Type: Community Non-Transient Non-Community Transient Non-Commun	
)	on Served at End of Month: 886
PWS Owner: Utilities, Inc. of Florida	M 507760 ut Dita 07 Month. 000
	's Title: Regional Director
Contact Person's Mailing Address: 200 Weathersfield Ave. City: Altamonto	
	's Fax Number: 407-869-6961
Contact Person's E-Mail Address: p.c. flynn@utilitiesinc-usa.com	57 th 14th 1861. 107 007 0701
B. Water Treatment Plant Information	
Plant Name: Utilities, Inc. of Florida	Plant Telephone Number: 407-869-1919
Plant Address: 200 Weathersfield City: Altamont	
Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water	3
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 309,000	
Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (ne	r subsection 62-699.310(4), F.A.C.): C
Licensed Operators Name License Class License Numb	
Lead/Chief Operator: Kathy Sillitoe C 13094	Mon - Fri Days
Other Operators: Alexander Lorenzo C 13756	Mon - Thurs, Days
Terry Sillitoe B 12749	Thur. Fri & Sat. Days
} D 1 12/47	
12/47	Har. The Sac, Days
12,47	That. The dat, Days
	That. The dat. Days
	That. The out, Days
	That. The dat. Days
	That, if it did not be a second of the secon
	That. The out, Days
H. Certification by Lead/Chief Operator	
II. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida am the lead/chief operator of the undersigned water treatment plant operator licensed in Florida am the lead/chief operator of the undersigned water licensed in Florida am the lead/chief operator operator	
H. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water tre information provided in this report is true and accurate to the best of my knowledge and belief. I certify that al NSF International Standard 60 or other applicable standards referenced in subsection 62,555,220(2), F.A.C. II	eatment plant identified in Part I of this report. I certify that the ll drinking water treatment chemicals used at this plant conform to
II. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water tre information provided in this report is true and accurate to the best of my knowledge and belief. I certify that al NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I plant were prepared each day that a licensed operator staffed or visited this plant during the mouth in direct of	eatment plant identified in Part I of this report. I certify that the II drinking water treatment chemicals used at this plant conform to also certify that the following additional operations records for this
H. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water tre information provided in this report is true and accurate to the best of my knowledge and belief. I certify that al NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated at rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, Logree to the standard of the contraction of the water treatment of the water treat	eatment plant identified in Part I of this report. I certify that the II drinking water treatment chemicals used at this plant conform to also certify that the following additional operations records for this
H. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water tre information provided in this report is true and accurate to the best of my knowledge and belief. I certify that al NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated at trates; and (2) if applicable, appropriate treatment process performance records. Furthermore, Logree to the standard of the contraction of the water treatment of the water	eatment plant identified in Part I of this report. I certify that the II drinking water treatment chemicals used at this plant conform to also certify that the following additional operations records for this
H. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment provided in this report is true and accurate to the best of my knowledge and belief. I certify that all NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated abrates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide owner can retain them, together with copies of this report, at a convenient location for at least ten years.	eatment plant identified in Part I of this report. I certify that the II drinking water treatment chemicals used at this plant conform to also certify that the following additional operations records for this
H. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water tre information provided in this report is true and accurate to the best of my knowledge and belief. I certify that al NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated at trates; and (2) if applicable, appropriate treatment process performance records. Furthermore, Logree to the standard of the contraction of the water treatment of the water	eatment plant identified in Part I of this report. I certify that the ll drinking water treatment chemicals used at this plant conform to also certify that the following additional operations records for this

D--- 1

PWS	Identific	cation Nu	mber: 35906	515		Plant Na	me: Utiliti	es, Inc.	of Florid	a				
111.	Daily Da	ita for th	e Month/Ye	ear of: July	2005									
Mean	is of Ach	ieving Fo	our-Log Viru	ıs Inactivation (Describ	on/Removal: *	Free	Chlorine		Chlorine	Dioxide		zone	Combin	ed Chlorine (Chloramines)
					istribution Syst	em: 🛛	Free Chle	orine	Cor	nbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
				C	T Calculations, or	UV Dose, to De	monstrate F	our-Log	Virus Inactiv	ation, if Ar	plicable*	Cinoraliii		Childring Bloxide
į.	Days					CT Calcul	ations					Dose		
l	Plant Staffed				Lowest Residual	District	Lowest CT						Lowest	
l	or				Disinfectant	Disinfectant Contact Time	Provided Before or						Residual Disinfectant	물레이 바이를 하는 것으로 보다 하다.
1	Visited				Concentration	(T) at C	at First			Minimum	Lowest	Minimum	Concentration	
Day of	by Operator	Hours	Net Quantity of Finished		(C) Before or at First Customer	Measurement	Customer	Temp.		_ CT	Operating	UV Dose	at Remote	Emergency or Abnormal Operating
the	(Place	Plant in	Water	Peak Flow	During Peak	Point During Peak Flow,	During Peak Flow,	of Water,	pH of Water, if	Required, mg-	UV Dose, mW-	Required, mW-	Point in Distribution	Conditions; Repair or Maintenance Work that Involves Taking Water System Components
Month			Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm²		System, mg/L	Out of Operation
1 2	X	24	42,000										2.10	
3	X	24	66,000 72,500		ļ								2.30	
4	X	24	72,500									<u> </u>		
5	X	24	73,000										3.00	
6	X	24	86,000		 				ļ	<u> </u>			1.80 2.40	
7	X	24	79,000		 			-					1.60	collected bacts
8	X	24	62,000							l		 	1.00	conected bacts
9	X	24	59,000										1.70	
10	x	24	67,500											
12	$\frac{\lambda}{X}$	24	67,500 61,000										1.60	
13	X	24	48,000		 					ļ			0.80	
14	X	24	50,000						<u> </u>			<u> </u>	1.40	
15	X	24	64,000		İ			ļ				 -	1.20	
16	X	24	63,000										1.50	
17		24	71,500										1.50	
18	X	24	71,500										1.40	
20	$\frac{\lambda}{X}$	24	66,000 48,000		ļ								0.80	
21	X	24	56,000		 								1.60	
22	X	24	59,000					 		ļ			1.00	
23	X	24	64,000										1.20	
24		24	78,500							ļ			00.1	
25	X	24	78,500										0.60	
26 27	X	24	68,000										1.20	
28	X	24	62,000									<u> </u>	2.00	
29	$\frac{\hat{x}}{X}$	24	78,000 79,000										1.40	
30	X	24	69,000										1.30	
31		24	,,,,,,,,										1.40	
Total			1,982,000	· · · · · · · · · · · · · · · · · · ·	1							L	L	
Averag			66,066											

Maximum 86,000

* Refer to the instructions for this report to determine which plants must provide this information.





See	page 4 for instructions.					
		for the Month/Year of: August 2005				
Α.	Public Water System (P	WS) Information				
	PWS Name: Jansen				PWS Identification N	lumber: 3590615
		Community Non-Transient Non-	Community Transien	t Non-Community C	onsecutive	
	Number of Service Con	nnections at End of Month: 253		Total Population Served at	End of Month: 886	
	PWS Owner: Utilities,	Inc. of Florida				
	Contact Person: Patricl	k Flynn		Contact Person's Title: Reg		
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Sptings	State: Fl	Zip Code: 32714
	Contact Person's Telep	hone Number: 407-869-1919		Contact Person's Fax Numb	er: 407-869-6961	
	Contact Person's E-Ma	il Address: p.c.flynn@utilitiesinc-usa.c	om			
B.	Water Treatment Plant					
	Plant Name: Utilities,	Inc. of Florida			Plant Telephone Nun	
	Plant Address: 200 We			City: Altamonte Springs	State: Fl	Zip Code: 32714
	Type of Water Treated		Purchased Finished V	Vater		
		Day Operating Capacity of Plant, gallons	s per day: 309,000			
		bsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection	62-699.310(4), F.A.C.)	: C
	Licensed Operators	Name	License Class	License Number	Day(s)/Shif	t(s) Worked
	Lead/Chief Operator:	Kathy Sillitoe	С	13094	Mon - F	Fri Days
	Other Operators:	Alexander Lorenzo	C	13756	Mon - Th	nurs. Days
		Terry Sillitoe	В	12749	Thur. Fri 8	k Sat. Days
		Allan Finch	C	7806	Mon - I	Fri Days
11	. Certification by Lea	d/Chief Operator				
		eatment plant operator licensed in Florid	do am the lead/chief operate	or of the water treatment when	et identified in Dort Loft	this report. I contifu that the
inf	ormation provided in th	is report is true and accurate to the best	of my knowledge and belief	of the water treatment plan. I certify that all drinking w	vater treatment chemical	ls used at this plant conform to
NS	F International Standar	d 60 or other applicable standards refere	enced in subsection 62-555	320(3) FAC Lalso certify	that the following additi	ional operations records for this
pla	int were prepared each o	lay that a licensed operator staffed or vi-	sited this plant during the m	onth indicated above: (1) rec	ords of amounts of cher	nicals used and chemical feed
rat	es; and (2) if applicable.	, appropriate treatment process perform:	ance records. Furthermore.	l agree to provide these addi	tional operations record	s to the PWS owner so the PWS
ow	mer can retain them, tog	ether with copies of this report, at a con	venient location for at least	ten years.	•	
	1					
C:	Karb Sill	to 9-6-05	Kathy Sillitoe		C-13094	
218	gnature and Date		Printed or Typed Name		License N	lumber

Means of Achieving Four-Log Virus Inactivation/Removal:	PWS	Identific	ation Nu	mber: 35906	515		Plant Nar	ne: Utilitie	es, Inc.	of Florida	1				
District Redistion															
Part Part		traviolet	Radiatio	ın 📋 Otl	her (Describ	e):		Chlorine		Chlorine	Dioxide	∐ O	zone	Combine	ed Chlorine (Chloramines)
Part Part	Type	of Disin	fectant R	esidual Mair	ntained in Di	stribution Syst	em: 🛛							nes)	Chlorine Dioxide
Plant Staffed Plant Staffed Plant				1 2 1	C	Calculations, or t	JV Dose, to De				ation, if Ap				
Sulf-ord Order O							CT Calcul					UV	Dosc		
Part Part								Lowest CT							
															(홍영) 그 중요한 본 경우 하시다는 그 그 그
Part Hour											Minimum	Lowest	Minimum		
				Net Quantity		(C) Before or at	Measurement	Customer	Temp.		CT	Operating	UV Dose		
Month Y.Y.							Point During	During		pH of	Required,	UV Dose,	Required.	Point in	Conditions; Repair or Maintenance Work that
X										Water, if	mg-	mW-	mW-,		Involves Taking Water System Components
2					Raic, gpd	riow, mg/L	minutes	mg-min/L	-7C	Applicable	min/L	sec/cm ⁻	sec/cm		Out of Operation
3											 				
4 X 24 28,000 1.10 5 X 24 87,000 1.00 6 X 24 81,500 1.120 7 24 81,500 1.10 8 X 24 81,500 1.10 9 X 24 63,000 1.10 11 X 24 63,000 1.00 11 X 24 63,000 1.00 11 X 24 63,000 1.00 12 X 24 70,000 1.00 13 X 24 70,000 1.00 13 X 24 70,000 1.10 14 24 74,500 1.10 15 X 24 74,500 1.10 16 X 24 74,500 1.00 17 X 24 100,000 1.00 18 X 24 78,000 <t< td=""><td></td><td></td><td></td><td></td><td> </td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>WELL 2 BACTS COLLECTED</td></t<>					 										WELL 2 BACTS COLLECTED
5 X 24 87,000 100 6 X 24 61,000 120 7 24 81,500 1.10 8 X 24 81,500 1.10 9 X 24 63,000 1.10 10 X 24 63,000 1.00 11 X 24 62,000 1.00 12 X 24 70,000 0.80 13 X 24 62,000 1.10 14 24 74,500 0.80 15 X 24 74,500 16 X 24 75,000 15 X 24 74,500 16 X 24 85,000 17 X 24 85,000 19 X 24 85,000 20 X 24 85,000 21 24 73,000 22 X						<u> </u>		 			 	 	 		
6 X 24 51,000 1,20 7 24 81,500 1,10 8 X 24 81,500 1,10 9 X 24 63,000 1,10 10 X 24 63,000 1,10 11 X 24 62,000 1,10 12 X 24 70,000 80 13 X 24 70,000 80 13 X 24 74,500 1,10 15 X 24 74,500 1,10 15 X 24 74,500 1,10 16 X 24 56,000 0,60 16 X 24 56,000 0,80 17 X 24 100,000 0,80 18 X 24 85,000 0,60 20 X 24 85,000 0,60 21 24 73,000 0	5								 		 	 			
7 24 81,500 1.10 8 X 24 81,500 1.10 9 X 24 63,000 1.40 10 X 24 63,000 1.00 11 X 24 62,000 0.50 12 X 24 70,000 0.50 13 X 24 62,000 1.10 14 24 74,500 1.10 15 X 24 74,500 0.60 16 X 24 56,000 0.80 17 X 24 100,000 0.80 18 X 24 85,000 0.80 19 X 24 79,000 0.60 20 X 24 66,000 0.60 21 24 73,000 0.60 22 X 24 66,000 0.60 23 X 24 66,000 0.60 <	6	Х	24								·		 		
8 X 24 81,500 1.10 9 X 24 63,000 1.40 10 X 24 63,000 100 11 X 24 62,000 0.50 12 X 24 70,000 0.80 13 X 24 62,000 1.10 14 24 74,500 0.60 15 X 24 74,500 0.60 16 X 24 56,000 0.60 17 X 24 100,000 0.80 18 X 24 85,000 0.60 19 X 24 79,000 0.60 20 X 24 79,000 0.60 21 24 73,000 0.60 22 X 24 64,000 23 X 24 66,000 25 X 24 66,000 26 X	7		24					 			 	 	 	1.20	
9 X 24 63,000 1.40 10 X 24 63,000 1.00 11 X 24 62,000 0.55 12 X 24 70,000 0.80 13 X 24 62,000 1.10 14 24 74,500 1.10 15 X 24 74,500 0.60 16 X 24 74,500 0.60 17 X 24 10,000 0.80 17 X 24 10,000 0.80 18 X 24 85,000 0.60 19 X 24 79,000 0.60 20 X 24 66,000 0.60 21 24 73,000 0.60 22 X 24 66,000 0.60 23 X 24 66,000 0.60 24 X 24 60,000	8	Х	24					 	 		 	 		1.10	
10	9	X	24	63,000	<u> </u>							 	 		
11			24	63,000							 	 	 		
12				62,000			\				 	1			
14											 		†		
15		Х												1.10	
16 X 24 56,000 0.80 17 X 24 100,000 0.60 18 X 24 85,000 1.20 19 X 24 79,000 1.20 20 X 24 66,000 0.60 21 24 73,000 0.60 22 X 24 73,000 0.60 23 X 24 66,000 0.60 24 X 24 64,000 0.60 25 X 24 72,000 1.80 26 X 24 60,000 1.30 27 X 24 55,000 0.60 28 24 89,500 0.60 30 X 24 68,000 0.70 31 X 24 57,000 1.10												1			
17						<u> </u>								0.60	
18 X 24 85,000 1.20 19 X 24 79,000 1.20 20 X 24 66,000 0.60 21 24 73,000 0.60 22 X 24 73,000 0.60 23 X 24 66,000 0.60 24 X 24 64,000 0.60 25 X 24 72,000 1.80 26 X 24 60,000 1.30 27 X 24 55,000 0.60 28 24 89,500 0.60 29 X 24 89,500 0.80 30 X 24 68,000 0.80 31 X 24 57,000 0.80					ļ	<u> </u>									
19 X 24 79,000 1,20 20 X 24 66,000 0,60 21 24 73,000 0,60 22 X 24 73,000 0,60 23 X 24 66,000 0,60 24 X 24 64,000 1,80 25 X 24 72,000 2,00 26 X 24 60,000 1,30 27 X 24 55,000 0,60 29 X 24 89,500 0,60 30 X 24 68,000 0,80 31 X 24 57,000 0,80						ļ					<u> </u>	<u> </u>			
20 X 24 66,000 0.60 21 24 73,000 0.60 22 X 24 73,000 0.60 23 X 24 66,000 0.60 24 X 24 64,000 1.80 25 X 24 72,000 2.00 26 X 24 60,000 1.30 27 X 24 55,000 0.60 29 X 24 89,500 0.60 29 X 24 89,500 0.80 30 X 24 68,000 0.80 31 X 24 57,000 110					 						<u> </u>	<u> </u>			
21 24 73,000 0.60 22 X 24 73,000 0.60 23 X 24 66,000 0.60 24 X 24 64,000 1.80 25 X 24 72,000 2.00 26 X 24 60,000 1.30 27 X 24 55,000 0.60 28 24 89,500 0.60 29 X 24 89,500 0.70 30 X 24 68,000 0.80 31 X 24 57,000 110					 	ļ		ļ	<u> </u>		<u> </u>	<u> </u>			
22 X 24 73,000 0.60 23 X 24 66,000 0.60 24 X 24 64,000 1.80 25 X 24 72,000 2.00 26 X 24 60,000 1.30 27 X 24 55,000 0.60 28 24 89,500 0.60 29 X 24 89,500 0.70 30 X 24 68,000 0.80 31 X 24 57,000 110					 	 		 	 	 	ļ			0.60	
23 X 24 66,000 0.60 24 X 24 64,000 1.80 25 X 24 72,000 2.00 26 X 24 60,000 1.30 27 X 24 55,000 0.60 28 24 89,500 0.60 29 X 24 89,500 0.70 30 X 24 68,000 0.80 31 X 24 57,000 110	22	X			 	 		 	 -	 	 	 		0.60	
24 X 24 64,000 1.80 25 X 24 72,000 2.00 26 X 24 60,000 1.30 27 X 24 55,000 0.60 28 24 89,500 0.60 29 X 24 89,500 0.70 30 X 24 68,000 0.80 31 X 24 57,000 1.10	23					 		-	 		 	 	<u> </u>		
25 X 24 72,000 26 X 24 60,000 27 X 24 55,000 28 24 89,500 29 X 24 89,500 30 X 24 68,000 31 X 24 57,000		X	24			 		 			 	 	 		
26 X 24 60,000 27 X 24 55,000 28 24 89,500 29 X 24 89,500 30 X 24 68,000 31 X 24 57,000			24	72,000		T		 	 	 	 	 	 		
27 X 24 55,000 28 24 89,500 29 X 24 89,500 30 X 24 68,000 31 X 24 57,000				60,000	1			 	 		 	 	 		
28		X						 	t	 	 	 	 		
30 X 24 68,000 0.80 31 X 24 57,000 1.10		<u> </u>					i		1	 	†		 	0.00	
30 X 24 68,000 31 X 24 57,000										 		 	 	0.70	
31 X 24 57,000											†	 	† 		
		X	24									1	 		
101al 2,229,000 Average 71,903	Total			2,229,000											<u> </u>

150,000

^{*} Refer to the instructions for this report to determine which plants must provide this information.





see	page 4 for instructions.	•					
1.	General Information	for the Month/Year of: SEPTEMBE	R 2005				
	Public Water System (F						
1	PWS Name: Jansen					PWS Identification N	umber: 3590615
		Community Non-Transient Non-C	Community Transier	t Non-Community	Co	nsecutive	
		nnections at End of Month: 253	- I I I I I I I I I I I I I I I I I I I	Total Population Se			
	PWS Owner: Utilities,						
	Contact Person: Patric			Contact Person's Tit	tle: Regio	onal Director	
		ng Address: 200 Weathersfield Ave.		City: Altamonte Spt		State: Fl	Zip Code: 32714
		phone Number: 407-869-1919		Contact Person's Fa		r: 407-869-6961	
		ail Address: p.c.flynn@utilitiesinc-usa.co	om			<u> </u>	
В.	Water Treatment Plant		.			· · · · · · · · · · · · · · · · · · ·	
	Plant Name: Utilities,		······································			Plant Telephone Num	iber: 407-869-1919
	Plant Address: 200 We		· · · · · · · · · · · · · · · · · · ·	City: Altamonte Sp	rings	State: Fl	Zip Code: 32714
	Type of Water Treated	l by Plant: X Raw Ground Water	Purchased Finished V		ы.	•	
		Day Operating Capacity of Plant, gallons		<u> </u>	******		
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): V	<u> </u>	Plant Class (per sub	section 6	2-699.310(4), F.A.C.):	C
	Licensed Operators	Name	License Class				
	Lead/Chief Operator:	ALLAN FINCH	С	7806		Mon - F	
	Other Operators:	Terry Sillitoe	В	12749		Thur. Fri &	Sat. Days
		Roger Holsapple	С	7436		Weekend	Checks
		Domenic Gentillucci	С	12562		weekend	checks
П	. Certification by Lead	d/Chief Operator					
		eatment plant operator licensed in Florida	a am the lead/chief charate	r of the water treatm	ont plant	identified in Part Laft	vis report. I certify that the
info	ormation provided in the	is report is true and accurate to the best of	a, am me read/enter operato of my knowledge and belief	I certify that all dri	ent piant nking wa	ter treatment chemicals	s used at this plant conform to
NS	F International Standard	d 60 or other applicable standards referen	iced in subsection 62-555 3	20(3) FAC I also	certify th	at the following addition	anal operations records for this
pia	nt were prepared each d	lay that a licensed operator staffed or visi	ited this plant during the mo	onth indicated above:	(1) reco	rds of amounts of chem	icals used and chemical feed
rate	s; ang (2) if applicable,	, appropriate treatment process performat	nce records. Furthermore.	agree to provide the	se additio	onal operations records	to the PWS owner so the PWS
ow:	ner can retain them, tog	ether with copies of this report, at a conv	enient location for at least	ten years.	A 1200111 2001		
	1 11/2 18 5			•			
. / /	well much	10-3-05	Allan Finch			C-7806	
Sig	nature and Date		Printed or Typed Name			License Nu	ımber

PWS			ımber: 3590		OKT TOK		me: Utiliti					<u> </u>		
	Voile De	to fourt	o Mond-/V	ann a C. CIND	TEMBER 20	0.6								
Mean	s of Ach		our-Log Vir		on/Removal: *		Chlorine		Chlorine	Dioxide		Ozone	Combin	ed Chlorine (Chloramines)
Type	of Disin	fectant R	Residual Mai	ntained in D	istribution Sys	tem: 🔀	Free Chl	orine	Col	mbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
				C	T Calculations, or	UV Dose, to De	monstrate F	our-Log	Virus Inactiv	ation, if Ap				
1	Days					CT Calcu	lations"				UV	Dose		
	Plant Staffed or Visited by Operator		Net Quantity of Finished		Lowest Residual Disinfectant Concentration (C) Before or at First Customer	Disinfectant Contact Time (T) at C Measurement Point During	at First Customer During	Temp.	рНof	l cr	Operating	Minimum UV Dose Required,	Lowest Residual Disinfectant Concentration at Remote Point in	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,		Water, if	mg-	mW-	mW-	Distribution	Involves Taking Water System Components
Month	"X")		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm²	sec/cm ²	System, mg/L	Out of Operation
$\frac{1}{2}$		24 24	56000	1	<u> </u>		<u> </u>	<u> </u>			<u> </u>	<u> </u>	1.0	
3		24	44000							├ -			<u> </u>	
4		24	70500		 		 	ļ		 		ļ		
5		24	70500	70500	 	 	 	 		 	 	 	0,9	
6		24	22000	83000	 			 		 	 	 -	0.9	
7		24	55000	1 100	 		 			 	 	 	0.9	
8		24	53000		 		 	 					0,9	
9		24	48000										0.9	<u> </u>
10		24	44000										1,0	
11		24	87500									1		
12		24	87500										0.8	
14		24	81000		 							<u> </u>	0.8	
15		24	76000	 			ļ					 	0.8	
16		24	78000	 			ļ					<u> </u>	0.3	
17		24	73000	 	 		 					 	0.2	
18		24	119 500		 	 				 		 	0.2	
19		24	119 500	<u> </u>			 		-	 	 	}	0.4	
20		24	88000					 				 	0.5	
21		24	60000									 	0.5	
22		24	79000										1.0	
23		24	38000											
25		24	62000										רים	
26		24	63500		ļ	<u> </u>								
27		24	63,500 57000	 	 		<u> </u>						0.7	
28		24	65000	 	 			ļ					و، بر	
29		24	58000		 			ļ			 	ļ	1.0	
30		24	67000	 	 			 		_	 	 	0.8	
31		24		 							 	 		
Total			0 -	2,14700	00					L	L		L	L
Averag	t .		71566	74,5660	(5)									

^{*} Refer to the instructions for this report to determine which plants must provide this information.



See page 4 for instructions.

see	page 4 for instructions.							
1.	General Information f	or the Month/Year of: October 200	5			, , , , , , , , , , , , , , , , , , , 		
	Public Water System (P			-				
	PWS Name: Jansen						PWS Identification Nu	mber: 3590615
	PWS Type: 🕅 C	ommunity Non-Transient Non-	Community	Transien	t Non-Community	Co	nsecutive	
		nnections at End of Month: 253			Total Population Se			
	PWS Owner: Utilities,			<u>-</u>			ar ar ar ar ar ar ar ar ar ar ar ar ar a	
	Contact Person: Patrick	Flynn			Contact Person's Ti	tle: Regio	onal Director	
	Contact Person's Mailin	ng Address: 200 Weathersfield Ave.			City: Altamonte Sp	tings	State: Fl	Zip Code: 32714
	Contact Person's Telep	hone Number: 407-869-1919			Contact Person's Fa		er: 407-869-6961	
		il Address: p.c.flynn@utilitiesinc-usa.c	om					
В.	Water Treatment Plant	Information						
	Plant Name: Utilities, I				ADDOKA		Plant Telephone Numb	er: 407-869-1919
	Plant Address: 200 We	athersfield 6236 Bear LAKE	TERRACE		City: Altamonte Sp		State: FI	Zip Code: 32714-32703
	Type of Water Treated	by Plant: X Raw Ground Water	Purchase	ed Finished W				
		ay Operating Capacity of Plant, gallons	s per day: 309,0	000				_
		osection 62-699.310(4), F.A.C.): V		-	Plant Class (per sul	osection 6	62-699.310(4), F.A.C.): (
	Licensed Operators	Name	L	icense Class	License Number		Day(s)/Shift(s	s) Worked
	Lead/Chief Operator:	ALLAN FINCH		С	7806		Mon - Fri	Days
	Other Operators:	Terry Sillitoe		В	12749		Thur. Fri & S	Sat. Days
	·	Roger Holsapple		С	7436		Weekend (Checks
		Domenic Gentillucci		C	12562		weekend o	checks
П	. Certification by Lead	I/Chief Operator						
		eatment plant operator licensed in Floric	da am the lead	/chief operato	or of the water treatm	ent plant	identified in Part Lof thi	s report Legrify that the
		is report is true and accurate to the best						
		d 60 or other applicable standards refere						
pla	int were prepared each d	ay that a licensed operator staffed or vi-	sited this plant	during the mo	onth indicated above	e: (1) reco	ords of amounts of chemi	cals used and chemical feed
rat	es; and (2) if applicable,	appropriate treatment process performa	ance records. I	Furthermore,	I agree to provide th	ese additi	onal operations records t	to the PWS owner so the PWS
		ether with copies of this report, at a con	avenient locatio	on for at least	ten years.			
	Mb. Prince	C-7806 11-1-05	A 11 - 122 - 1				0.7007	
4	wan junci	1 0 1000 11-1-05	Allan Finch				<u>C-7806</u>	
Sis	nature and Date		Printed or Tv	ned Name			License Nu	mber

D--- 1

S	Identific	cation Nu	mber: 35906	615		Plant Nar	ne: Utiliti	es, Inc.	of Florida	1				
Ш. Т	Daily Da	ta for th	e Month/Ye	ar of: Octo	ber 2005									
Mean	s of Ach	ieving Fo	our-Log Viru	is Inactivation	on/Removal: *	⊠ Free	Chlorine		Chlorine	Dioxide		zone	Combin	ed Chlorine (Chloramines)
					istribution Syst	em: 🕅	Free Chle	rine	Cor	nhined C	hlorine (Chlorami	nec)	Chlorine Dioxide
-750	0. 2.3	l l	Colduar Ivian	C	Calculations, or	IV Dose to De	monstrate F	our-Log	Vinus Inactiv	ation if Ar	nlicable*	-IIIOI ailli	nes)	Ciliorate Dioxide
	Days					CT Calcul					UV	Dose		
	Plant						Lowest CT		1000	700	Y-24 (1975)		Lowest	
	Staffed				Lowest Residual		Provided						Residual	
	or Visited	l	[Disinfectant	Contact Time							Disinfectant	
	by		Net Quantity		Concentration (C) Before or at	(T) at C Measurement	at First Customer	Тетр.		Minimum CT	Lowest	Minimum UV Dose	Concentration at Remote	Emergency or Abnormal Operating
	Operator		of Finished		First Customer	Point During		of	pH of	Required	UV Dose,	Required	Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak		Peak Flow,		Water, if	mg-	mW-	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable		sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
2		24	62,000										1,2	
3	-	24	86000											
4	 	24	86000										1.0	
5		24	74,000										1,0	
6	 	24	56000 50000					<u> </u>			<u> </u>		Ç.8	
7	 	24	55000		ļ			ļ						
8	 	24	50.000										1,0	
9		24	76,500		ļ			 			├		1.2	
10		24	76,500					 					-,	
11		24	68 000		l			 			 		1.7	
12		24	70,000					 			 		1.4 1.4	
13		24	72.000										1.0	
14		24	53.000					1		l			0.9	
15	ļ	24	63,000 91,500									i	0.7	
16		24	91,500											
17 18		24	9500										0.7	
19	 	24		64,000									0.8	
20	 	24	\$0,000	79,000	 			<u> </u>					1.0	
21	 	24	34,000	58,000						<u> </u>			ره	
22	 	24	30.000	70,000				 				ļ	0.8	
23		24	4/5000	72,000	 			}		 	 		0.4	
24	·	24	45,000	72,000				 	 	 	 		<u> </u>	
25		24		307.000	 						 	<u> </u>	0.9	the same of the sa
26		24	63 000	30 4000				 		 -	 		0.8	BUSIN FOUNTED READING HIGH WITH
27		24	169,000					<u> </u>	 _	 	 		0.4	BLOW, CALDING HOLH PLON REED.
28		24	82.000					 	 	 	 		1.0	
29		24	61,000					1	t		1	 	1,2	
30	 	24	86500								1	<u> </u>		
31	<u> </u>	24	80,500										1,0	
Total			2,487,000									*	· · · · · · · · · · · · · · · · · · ·	
Avera	ge		86.225	l										

Maximum

* Refer to the instructions for this report to determine which plants must provide this information.

FILE COPY



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See page 4 for instructions.

,	page 4 for instructions.					
	General Information f		005			
١.١	Public Water System (P	WS) Information				
[PWS Name: Jansen				PWS Identification N	umber: 3590615
	PWS Type: 🛛 C	ommunity Non-Transient Non-	Community Transien	t Non-Community	Consecutive	
	Number of Service Cor	nections at End of Month: 255		Total Population S	erved at End of Month: 893	
I	PWS Owner: Utilities,	Inc. of Florida				
- 1	Contact Person: Patrick	Flynn			itle: Regional Director	
	Contact Person's Mailin	ng Address: 200 Weathersfield Ave.		City: Altamonte Sp		Zip Code: 32714
	Contact Person's Telep	hone Number: 407-869-1919		Contact Person's F	ax Number: 407-869-6961	
	Contact Person's E-Ma	il Address: p.c.flynn@utilitiesinc-usa.co	om			
B.	Water Treatment Plant I					
	Plant Name: Utilities, I	nc. of Florida			Plant Telephone Nun	
	Plant Address: 6236 Be	ear Lake Terrace		City: Apopka	State: Fl	Zip Code: 32703
	Type of Water Treated		Purchased Finished V	Vater		
		ay Operating Capacity of Plant, gallons	per day: 309,000			
		osection 62-699.310(4), F.A.C.): V			bsection 62-699.310(4), F.A.C.):	
	Licensed Operators	Name	License Class	License Number	The state of the s	t(s) Worked
	Lead/Chief Operator:	ALLAN FINCH	C	7806	Mon -	Fri Days
	Other Operators:	Terry Sillitoe	В	12749		k Sat. Days
		Alex Lorenzo	C	13756	Mon -	Fri Days
		Kathy Sillitoe	C	13094	Mon -	Fri Days
	L			<u> </u>	<u> </u>	
П	Certification by Lead	I/Chief Operator				
		eatment plant operator licensed in Floric	da am the lead/chief operato	or of the water treat	ment plant identified in Part I of t	his report. I certify that the
		is report is true and accurate to the best				
		60 or other applicable standards refere				
		ay that a licensed operator staffed or vis				
		appropriate treatment process performa				
		ether with copies of this report, at a con			STEERING WEEK OF THE STEERING TO THE TOTAL TO STEER THE STEERING TO STEER THE STEERING TO STEER THE STEERING TO	
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	× · · · · · · · · · · · · · · · · · · ·		
	Kall 300	12-2-05	Kathy Sillitoe		C-13094	
Sig	gnature and Date		Printed or Typed Name		License N	lumber

PWS	Identific	ation Nu	mber: 35906	15		Plant Nan	ne: Utilitie	s, Inc.	of Florida					
III. I	aily Da	ta for th	e Month/Ye	ar of: Nove	ember 2005									
Mean	of Achi	ieving Fo	ur-Log Viru	s Inactivatio	n/Removal: *	X Free	Chlorine		Chlorine	Diovide		zone	Combine	ed Chlorine (Chloramines)
U	traviolet	Radiatio	on Ot	her (Describ	e):	Z3 1100	Cinorine	لبا	Cinornic	Dioxide		20110	Comoni	ed Chiornic (Chiorannics)
				tained in Di	stribution Syste	em: 🔯	Free Chlo	rine	Cor	nbined C	hlorine (Chlorami	nes) [](Chlorine Dioxide
					Calculations, or U				Virus Inactiv	ation, if Ar	plicable*			
	Days					CT Calcul	ations				* UV	Dosc	4	
	Plant		Let NAB				Lowest CT						Lowest	
	Staffed or				Lowest Residual	Disinfectant	Provided		7.1.3			1	Residual	
	Visited				Disinfectant Concentration	Contact Time	Before or						Disinfectant	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
· '	by	100	Net Quantity		(C) Before or at	(T) at C Measurement	at First Customer	Temp.		Minimum	Lowest Operating	Minimum	Concentration at Remote	Emergency or Abnormal Operating
	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of	CT:	UV Dose,	Required	Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak		Peak Flow,		Water, if	Required,	mW-	mW•	Distribution	Involves Taking Water System Components
Month	"X") X	Operation 24	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	mg-min/L	sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
2	$\frac{\lambda}{X}$	24	60,000 49,000	 										
3	$\frac{\hat{x}}{x}$	24	50,000	 						ļ			ļ	
4	X	24	54,000				l —			 				Est. flow due to meter repair/collected 4 bacts
5	Х	24	49,000						 	 				
6		24	79,000	<u> </u>						 	ļ 		· · · · · · · · · · · · · · · · · · ·	
7	X	24	79,000							 				
8	X	24	66,000											
9	X	24	74,000											
10	X	24	68,000	 										
12	$\frac{\lambda}{X}$	24	59,000 52,000											
13		24	82,500											
14	X	24	82,500							ļ	<u> </u>			
15	X	24	60,000							 				
16	X	24	65,000									 		
17	X	24	69,000							 				
18 19	X	24	64,000											Grouted remote well
20	<u>X</u>	24 24	47,000 85,000	 										
21	X	24	85,000	 	 									
22	X	24	42,000				<u> </u>			 				
23	X	24	91,000						 	 				
24	X	24	90,000							<u> </u>				
25	X	24	60,000							 				
26	X	24	68,000							<u> </u>			<u> </u>	
27 28	X	24	81,000	 										
29	X	24	81,000 68,000				ļ							
30	X	24	64,000		 						ļ			
31		24	21,000	 			ļ			 		 	_	
Total			2,024,000		L	L		L	L	L	L	L	L	
Averag	e		67.466	1										

91,000

^{*} Refer to the instructions for this report to determine which plants must provide this information.

FILE COPY

MATEM MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED



QM

them pure		Printed or Typed Name		biJ	Митрег
\sim \sim	, , , ,	Allan Finch		o	
ormation provided in th 1SF International Standar Jant were prepared each of Jant were prepared each	d/Chief Operator deceased in Floridative report is true and accurate to the best of 60 or other applicable standards refered day that a licensed operator staffed or vise, appropriate treatment process performance.	I my knowledge and benefit seed in subsection 62-55 ited this plant during the m nce records. Furthermore,	320(3), F.A.C. I also onth indicated above I agree to provide th	certify that the following: (1) records of amounts of	tional operations records for this micals used and chemical feed
			ļ		
	Kathy Sillitoe		1,000		
	Alex Lorenzo	3	\$60£1 9\$7£1		Fri Days
Other Operatora:	Terry Sillitoe		64721		Fri Days
Lead/Chief Operator:	VTTVN EINCH	3	9084		Fri Days & Sat, Days
Licensed Operators	Name	Ticeuse Class			ft(s) Worked
Plant Category (per sul	V:(.D.A.7, (4),016.69-26 noitoese			section 62-699.310(4), F.	O :
Permitted Maximum D	ay Operating Capacity of Plant, gallons p	er day: 309,000		1 (7/010 00) 03 1	
Type of Water Treated	The state of the s	V borchased Finished V	Vater		
Plant Address: 6236 Be			City: Apopka	State: Fl	Zip Code: 32703
Plant Name: Utilities, I				Plant Telephon	mber: 407-869-1919
Water Treatment Plant I					
	il Address: p.c.flynn@utilitiesinc-usa.con				
	ng Address: 200 Weathersfield Ave. Hone Number: 407-869-1919			Number: 407-869-6961	
Contact Person: Patrick			City: Altamonte Spti		Zip Code: 32714
PWS Owner: Utilities, I		<u> </u>	tiT ginesia Person's Tit	le: Regional Director	
	nections at End of Month: 255	T	Lotal Population Ser	ved at End of Month: 893	
	ommunity Non-Transient Non-Co		t Non-Community	Consecutive Consecutive	
PWS Name: Jansen					lumber: 3590615
Public Water System (P/				3:7 FT 5/RG	3130032 ::
General Information for	or the Month/Year of: December 200	ç			
s page 4 for instructions.					
					\$\alpha

Printed or Typed Name

PWS	ldentific	ation Nu	mber: 35906	15		Plant Nar	ne: Utilitie	es, Inc.	of Florida					
III. D	aily Da	ta for th	e Month/Ye	ar of: Dece	ember 2005									
		ieving Fo		s Inactivation her (Describ	on/Removal: * oe):	⊠ Free	Chlorine		Chlorine	Dioxide		zone	Combin	ed Chlorine (Chloramines)
Туре	of Disini	fectant R		tained in Di	stribution Syste	em: 🛛	Free Chlo	orine	Cor	nbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
	Days Plant			G	Calculations, or	CT Calcul	ations Lowest CT		Virus Inactiv	ration, if A	oplicable*	Dose	Lowest	
	Staffed or Visited				Lowest Residual Disinfectant Concentration	Disinfectant Contact Time (T) at C	Provided Before or at First				Lowest	Minimum	Residual Disinfectant Concentration	
the	by Operator (Place	Hours Plant in	Net Quantity of Finished Water	Peak Flow	(C) Before or at First Customer During Peak	Measurement Point During Peak Flow,	Customer During Peak Flow,	Temp. of Water,		CT Required,	Operating UV Dose, mW-	UV Dose Required, mW-	at Remote Point in Distribution	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components
Month	"X") X	Operation 24	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	mg-min/L	sec/cm*	sec/cm ²	System, mg/L	Out of Operation
$\frac{1}{2}$	X	24	67,000		<u> </u>		 	 	 	 	 	 	1.3	
3	X	24	50,000		 			 		1	 	 	1.3	
4		24	86,000		† · · · · · · · · · · · · · · · · · · ·				<u> </u>				1	
5	Х	24	80.000										1.6	
6	X	24	68,000										1.4	
7	X	24	59,000	ļ	ļ		ļ <u>.</u>	 		 			0.4	
8	X	24	64,000		-	ļ	ļ	 		ļ	 		1.2	
10	X	24	52,000		 	 	-	 				ļ	1,0	
11		24	73,500				 	 			 	 	1.1	
12	x	24	73,500	 	 	 	 	 	 -	 	 	 	1.0	
13	X	24	59,000					 		1	1	·	0.9	
14	X	24	56,000			<u> </u>			<u> </u>	1			6.9	
15	X	24	67.000										0.8	
16	X	24	49,000										0.9	
17	X	24	47,000	ļ		<u> </u>	ļ	 	ļ	 	ļ	ļ	1,2	
18	- V	24	77,500	 	 	<u> </u>	 	+			 	 		
20	X	24	77,500 56,000	 		 	 	+	 	 	 	 	0.8	
21	X	24	70,000	 	 	 	 -	+	 	+	 	 -	0.7	
22	X	24	59.000			 	1	 		†	 	1	0.7	
23	X	24	61,000	†	1	 		1			1		0.5	
24	Х	24	66.000					1					0.6	
25		24	12,000											
26	X	24	12,000						ļ				0.7	
27	X	24	69,000	ļ		ļ	ļ	 		-	 	ļ	9.0	
28	X	24	71,000	<u> </u>	 	-	 	+	-	-	- -	- 	0.4	
30	X	24	92,000	 	 	 	1	+	+		+	 	0,3	
31	$\frac{\lambda}{X}$	24	66,000	1		 		+	 	+		 	0.6	
Total	' 	1 27	2,026,000						-l				1 0. 8	
Avera	ge		65 354	1										

^{*} Refer to the instructions for this report to determine which plants must provide this information.

PWS Identification Number: 3590615	Plant Name: Utilities, Inc. of Florida						
IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * December 2005							
A. Is any polymer containing the monomer <u>acrylamide</u> used at the water treatment plant? Yes, and the polymer dose and the acrylamide level in the polymer are as							
follows:	<u> </u>						
Polymer Dose, ppm =	Acrylamide Level, % [†] =						
3. Is any polymer containing the monomer epichlorohydrin use	ed at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the						
polymer are as follows:							
Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =						
C. Is any iron or manganese sequestrant used at the water treati	ment plant? No 🔀 Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:						
Type of Sequestrant (polyphosphate or sodium silicate):							
Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of sil	icate as $SiO_2 = 0.15 \text{ mg/O}$						
If sodium silicate is used, the amount of added plus naturall	y occurring silicate, in mg/L as SiO ₂ =						

^{*} Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

† Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

Jansen

Docket No. 060253-WS

25.30-440(5) Inspection Reports

Test Year Ended December 31, 2005

State of Florida Department of Environmental Protection Central District

SANITARY SURVEY REPORT

Plant Name	JANSEN SUBDIVISION	County	Seminole	PWS ID # _	3590615
	Corner of Bear Lake Dr. & Sombrero Av				
	Itilities, Inc. of Florida			_ Phone	
Owner Address	200 Weathersfield Avenue, Altamonte S	Springs, FL 32714	1		
Contact Person Pa	atrick Flynn/Kathy Sillitoe Title Reg. D	Director/Mgr.	Phone 40	7.869.1919/407	7.869.8588 x229
This Survey Date	10/27/05 Last Survey Date	10/29/02	Las	st C.I. Date	4/3/03
PWS TYPE & CL. ⊠ Community (46)	ASS	RAW WAT	ER SOURC		
	Non-community				
Non-Communi				Capacity	
	,	Emorgo	may water	Capacity	
Serial #3178 3/	em with approval number & date /6/59, clrd 8/6/59; WC59-2015 issued	Source*	☐ None Elliot Power	Not Requesters Propagation	ne generator
	;WC59-2015A issued 2/16/88, clrd	Capacity of	Standby (k	(W)	60
12/13/88; WC59 Unapproved sy	9-227347 issued 3/31/93 clrd 6/14/93 ystem	Standby Pla	an: 🔀 Yes	natic	
SERVICE AREA	CHARACTERISTICS				*1 hr/wk.
Single family hom				it operate?	
Single laminy hon	ic subdivision	Vveii į	Santias <u>#1</u>	mno NY/A	
Food Service:	Yes ☐ No ⊠ N/A	☐ ⊓ign ·	Service Pur	mps <u>N/A</u> ment <u>All</u>	
1 000 001 VIOC.	, see				s No Unk
OPERATION & M	AINTENANCE				ecorded through
Certified Operator	: ⊠ Yes □ No □ Not required	_ August 20		icadings only i	ccorded through
Operator(s) & Cer	tification Class-Number	_ August 20	05.		
Alan Finch C-780	6, Terry Sillitoe B-12749			4.7	
		TREATME	NT PROCE	SSES IN USE	=
	es 🗌 No 🗌 Not required	Disinfection	on-hypochlor	rination; Iron s	equestration-
Operator Visitation	า Frequency	<u>Aquadene</u>	(also for cor	rosion control	per 1993 permit)
Hrs/day: Required	dActual				
Days/wk: Require	ed 5+1 Actual 5+1			ent is needed	?
	Days? ☐ Yes ☐ No ☒ N/A	None at th			
	egularly? X Yes No N/A	For control	of what def	iciencies?	
	MORs? No Yes N/A	_ N/A			·
Using wrong MO		DIOTRIBLIA	TION 01/07		
1 otal, average & r	max flows sometimes incorrect.	DISTRIBUT			X ()
				Flow	Meter
Number of Consider	Connections 253 (MOR)	Meter Size			na MNa
	1 886 Basis 3,5/svc. cx.			evices: 🔲 Ye	*2 M 140
Average Day (from		Cross-conn		rigation on Control Pr	ogram: Yes
	ORs)0.063 MGD 08/05			on Control Pri n: ⊠ Yes	
- `	Capacity310 MGD			ded on irrigatio	
•	zapacity	Comments	TI T DIOVIC	Jed on migatio	ii iiic.
Comments					

PWS ID#	3590615
Date	10/27/05

GROUND WATER SOURCE

Well Num	ber	1	2		
Year Drille	ed	~1958	1980		
Depth Dril	led	250'	450'		
Drilling Me	ethod	Unknown	Cable tool		
Type of G	rout	Unknown	Neat cement		
Static Wa	ter Level	65'	65'		
Pumping \	Water Level	Unknown	76'		
Design W	ell Yield	Unknown	190 gpm		
Test Yield		Unknown	400 gpm		
Actual Yie	ld (if different than rated capacity)	Unknown	200 gpm		
Strainer		Unknown	Open hole		
Length (o	utside casing)	80'	191' 4"		
Diameter	(outside casing)	6"	6"		
Material (d	outside casing)	Steel	Black steel		
Well Conta	amination History	None	None		
Is inundati	on of well possible?	No	No		
6' X 6' X 4	" Concrete Pad	Yes	Cracked		
	Septic Tank	>150'	>200'		
SET	Reuse Water	N/A	N/A	,	
BACKS	WW Plumbing	>100'	>200'		
	Other Sanitary Hazard	None observed	None observed		
	Туре	Vertical turbine	Submersible		
	Manufacturer Name	Peerless	Sta-Rite		
PUMP	Model Number	Unknown	Unknown		
	Rated Capacity (gpm)	240gpm@290TDH	190gpm@290TDH		
	Motor Horsepower	25	20		
Well casing 12" above grade?		Yes	Yes		
Well Casir	ng Sanitary Seal	Yes	Yes		
Raw Wate	r Sampling Tap	Yes	Yes		
Above Gro	ound Check Valve	Yes	Yes		
Fence/Hou	using	Yes	Yes		
Well Vent	Protection		Yes		

COMMENTS: Well 1 – AAH2579, Well 2 – AAH2580. Crack in well #2 pad. Note: wells alternate automatically.

PWS ID#	3590615
Date	10/27/05

CHLORINATION (Disinfection)	STORAGE FACILITIES				
Type: ☐ Gas ☒ Hypo	(G) Ground (H) Hydropneumatic (E) Elevated				
Make Stenner Capacity 17x2 gpd	(B) Bladder (C) Clearwell				
Chlorine Feed Rate <u>6.75x2</u>	Tank Type/Number	H1	H2		
Avg. Amount of Cl ₂ gas used N/A	Capacity (gal)	3,000	3,000		
Chlorine Residuals: Plant 0.9 Remote 0.3					
Remote tap location 6245 Linneal Beach Dr.	Material	Steel	Steel		
DPD Test Kit: On-site With operator	Gravity Drain	Yes	Yes		
☐ None ☐ Not Used Daily Injection Points Prior to hyrdo tanks	By-pass Piping	Yes	Yes		
Booster Pump Info N/A	Pressure Gauge	Yes	Yes		
Comments Aquadene injected into raw water line. 0.7	Sight Glass or	Yes	Yes		
ppm as PO ₄ ; Stenner 3 gpd. There is also a chlorine	Level Indicator	1 45	100		
ORP meter.	Fittings for Sight Glass	N/A	N/A		
Chlorine Gas Use YES NO Comments	Protected Openings	Yes	Yes		
Requirements	PRV/ARV	Both	Both		
Dual System	On/Off Pressure				
Auto-switchover	Access Padlocked	Yes	Yes		
Alarms: Loss of Cl ₂ capability	Height to Bottom of		*		
Loss of Cl ₂ residual	Elevated Tank		·		
Cl ₂ leak detection	Height to Max.			•	
Scale	Water Level				
Chained Cylinders	Comments				
	Single sight glass for h				
Reserve Supply	Hydro tanks in parallel, and gravity drain lines are coupled together & discharge to blowoff line located				
Adequate Air-pak	outside rear fence of plant.				
Sign of Leaks					
Fresh Ammonia					
Ventilation)				
Room Lighting	Pump Number	75			
Warning Signs	Type				
Repair Kits	Make				
Fitted Wrench	Model				
Housing/Protection	Capacity (gpm)				
	. , , , ,				
AERATION (Gases, Fe, & Mn Removal)	Motor HP				
TypeCapacity Aerator Condition	Date Installed				
	Maintenance				
Bloodworm PresenceVisible Algae Growth					
Protective Screen Condition	Comments			\	
Comments				<u> </u>	

PWS ID#	3590615
Date	10/27/05

DEFICIENCIES:

- 1. Monthly Operation Reports (MORs) not entirely and/or correctly filled out. The "Days Plant Staffed or Visited" column is regularly not indicated. The MORs are frequently messy and difficult to read. A new form should be used whenever a mistake is made in data entry. No entries should be scratched out. The indicated max day flow is frequently incorrect based on the data provided in the daily flow.
- 2. Provide information, if available, for spaces throughout the report marked "Unknown".
- 3. There is a crack in well pad number two. This deficiency was first noted during the October 29, 2005, sanitary survey.

MONITORING AND REPORTING:

- Bacteriologicals due monthly
- Nitrate/Nitrite due 2006
- Primary Inorganics due 2006
- Lead and Copper Tap Sampling due 06/2008-09/2008
- SOCs due 2006
- Radiologicals due 2009
- VOCs due 2006
- Secondaries due 2006
- Disinfection Byproducts due 07/2006-09/2006

Please be advised that the following items must be completed **no later than December 31, 2005**:

Emergency Response Plan - Develop a written emergency preparedness/response plan in accordance with *Emergency Planning for Water Utilities*, AWWA Manual M19, as adopted in Rule 62-555.335, F.A.C. Update and implement the plan as necessary thereafter.

Operations and Maintenance Manual - Provide an operation and maintenance manual for each drinking water treatment plant, and update the manual thereafter as necessary to reflect plant alterations and additions. The manual shall contain operation and control procedures, and preventive maintenance and repair procedures, for all plant equipment and shall be made available for reference at the plant or at a convenient location near the plant. Bound and indexed equipment manufacturer manuals shall be considered sufficient to meet the requirements of this subsection.

Drinking Water Distribution System Map - Develop and maintain an up-to-date map of the drinking water distribution system. Such a map shall show the location and size of water mains if known; the location of valves and fire hydrants; and the location of any pressure zone boundaries, pumping facilities, storage tanks, and interconnections with other public water systems.

PWS ID#	3591061
Date	10/27/05

MONITORING AND REPORTING (Continued...)

Audio-Visual Alarm System for Standby Power - At each site where standby power is required an audio-visual alarm system that is activated in the event any power source fails must be provided. If the site is not staffed during all hours the standby-powered water system components are in operation, the alarm also shall be telemetered to a place staffed during all hours the standby-powered water system components are in operation, or shall trigger an automatic telephone dialing or paging device, to enable notification of an authorized representative of the supplier of water.

Inspector	Title	Env. Specialist III	Date	10/27/05	
Approved by	Title	Environmental Manager	Date	12/1/05	

RESPON:	<u>SE</u> :	Please indicate changes to the	following:
PWS ID Numb	ber: 3590615	Business Name:	
PWS Name:	Jansen S/D	Owner(s) Name:	
Attn: Patrick	k Flynn, Utilities, Inc. of Florida		
	ss:	Mailing Address:	
Drinking Wa 3319 Maguit Orlando, Flo		on gram	
In response to	ggie Phillips, Environmental Specialist o the Department's Sanitary Survey Rep actions were done to correct the listed de	port for the subject public water system d	ated October 27, 2005,
Deficiency Item No.	Corrective A	action Done	Date Done
			_
(Attach addition	onal sheet if necessary)		
I hereby certify	y to the correctness of the above informa	ition:	
PWS Owner/F	Representative Signature:	- All Control of the	
Name of PWS	Owner/Representative:		
		(Please Type or Print)	

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

VIA: E-mail and United States Mail

Mr. Reggie Phillips
Department of Environmental Protection
Central District
3319 Maguire Blvd., Suite 232
Orlando, FL 32803-3767

Re: Seminole County – PW

Ravenna Park
Crystal Lake
PWS ID No. 3591061
PWS ID No. 3590258
Bear Lake
PWS ID No. 3590069
Weathersfield
PWS ID No. 3591451
Oakland Shores
PWS ID No. 3590912
Jansen
PWS ID No. 3590615

Dear Mr. Phillips:

Enclosed please find the responses to the deficiencies noted during your inspection of the above-referenced facilities on October 18 and October 27, 2005.

These responses have also been transmitted to you via email. If you have any questions or need anything further, please do not hesitate to contact me at (407) 869-8588, ext. 229.

Sincerely,

Kathy Sillitoe Area Manager

cc Kim Dodson, Environmental Manager, FDEP Patrick C. Flynn, Regional Director, UIF Scotty L. Haws, Assistant Operations Manager, UIF

S Of the

Page 1 of 1 Document1 FHILE CORY

RESPONSE:	Please indicate changes to the	following:
PWS ID Number: 3590615	Business Name: <u>Utilities, Inc. of Florida</u>	1
PWS Name: Jansen S/D	Owner(s) Name: Utilities, Inc. of Florid	a
Attn: Patrick Flynn, Utilities, Inc. of Florida		
Mailing Address: 200 Weathersfield Avenue	Mailing Address: 200 Weathersfield Av	enue
Altamonte Springs, FL 32714	Altamonte Springs, F	L 32714
Date: December 13, 2005	Phone Number(s): 407-869-1919	
Florida Department of Environmental Protection Drinking Water Compliance/Enforcement Progra 3319 Maguire Boulevard, Suite 232 Orlando, Florida 32803 Attention: Reggie Phillips, Environmental Specialist In response to the Department's Sanitary Survey Report the following actions were done to correct the listed defined.	ram ort for the subject public water system da	ted <u>October 27, 2005</u> ,
Deficiency Item No. Corrective Ac	tion Done	Date Done
1 The monthly operations report contained correction	ons for the month of November 2005, All	December 2005
future MORs will be legible and completed accura	itely.	
2 Unable to locate any additional information for the	spaces marked "unknown."	
3 The Jansen remote well pad was repaired on Nov	ember 18, 2005.	November 18, 2005
		And the second s

(Attach additional sheet if necessary)		
I hereby certify to the correctness of the above information	n: & CHym 12/11	
PWS Owner/Representative Signature:	12/11	705
Name of PWS Owner/Representative: Patrick C. Flynn, R	tegional Director U (Please Type or Print)	where the same times

Jansen

Docket No. 060253-WS

25.30-440(6) Permits

Test Year Ended December 31, 2005



November 15, 2000

POST OFFICE BOX 1429

FAX (Executive) 329-4125

PALATKA, FLORIDA 32178-1429

TELEPHONE 904-329-4500 TDD 904-329-4450 TDD SUNC

Finance) 329-4508

(Legal) 329-4485 (Permitting) 329-43 SERVICE CENTERS

618 E. South Street 7775 Baymeadows Way Orlando, Florida 32801 Suite 102 407-897-4300 Jacksonville, Florida 32256 904-730-6270 TDD 407-897-5960

TDD 904-448-7900

PERMITTING 305 East Drive Melbourne, Florida 32904 407-984-4940 TDD 407-722-5368

33 N. Wickham Road Florida 32935-8109 407-752-3100 TDD 407-752-3102

Utilities Inc of Florida 200 Weathersfield Ave Altamonte Springs, FL 32714

SUBJECT: Consumptive Use Permit Number 8347

JANSEN

Dear Sir/Madam:

Enclosed is your permit and the forms necessary for submitting information to comply with conditions of the permit as authorized by the St. Johns River Water Management District on November 15, 2000.

Permit issuance does not relieve you from the responsibility of obtaining permits from any federal, state and/or local agencies asserting concurrent jurisdiction over this work.

The enclosed permit is a legal document and should be kept with your other important records. Please read the permit and conditions carefully since the referenced conditions may require submittal of additional information. All information submitted as compliance with permit conditions must be submitted to the nearest District Service Center and should include the above referenced permit number.

Please be advised that the period of time within which a third party may request an administrative hearing on this permit may not have expired by the date of issuance. A potential petitioner has twenty-six (26) days from the date on which the actual notice is deposited in the mail, or twenty-one (21) days from publication of this notice when actual notice is not provided. within which to file a petition for an administrative hearing pursuant to Sections 120.569 and 120.57, Florida Statutes. Receipt of such a petition by the District may result in this permit becoming null and void.

Sincerely.

Gloria Dowis, Director of Permit Data Services Division

Enclosures: Permit, Conditions for Issuance, Compliance Forms, Map, Well Tags

cc: District Permit File

Agent:

THE COLINAS GROUP INC 515 N. VIRGINIA AVENUE Winter Park, FL 32789

William Kerr, CHAIRMAN MELBOURNE BEACH

Ometrias D. Long, VICE CHAIRMAN APOPKA

Jeff K. Jennings, SECRETARY MAITLAND

Duane Ottenstroer, TREASURER SWITZERLAND

PERMIT NO. 8347

PROJECT NAME: JANSEN

A PERMIT AUTHORIZING:

The District authorizes, as limited by the attached permit conditions, the use of 37.30 million gallons per year of ground water from the Floridan aguifer for public supply for an estimated population of 814.

LOCATION:

Site: JANSEN

Seminole County

Section(s):

19

Township(s):

21S

Range(s):

29E

ISSUED TO:

Utilities Inc of Florida 200 Weathersfield Ave Altamonte Springs, FL 32714

Permittee agrees to hold and save the St. Johns River Water Management District and its successors harmless from any and all damages, claims, or liabilities which may arise from permit issuance. Said application, including all maps and specifications attached thereto, is by reference made a part hereof.

This permit does not convey to permittee any property rights nor any rights of privileges other than those specified herein, nor relieve the permittee from complying with any law, regulation or requirement affecting the rights of other bodies or agencies. All structures and works installed by permittee hereunder shall remain the property of the permittee.

This permit may be revoked, modified or transferred at any time pursuant to the appropriate provisions of Chapter 373, Florida Statutes and 40C-1, Florida Administrative Code.

PERMIT IS CONDITIONED UPON:

See conditions on attached "Exhibit A", dated November 15, 2000

AUTHORIZED BY:

St. Johns River Water Management District Department of Resource Management

By:

がwight T Jenkins

Division Director

"EXHIBIT A" CONDITIONS FOR ISSUANCE OF PERMIT NUMBER 8347 UTILITIES INC OF FLORIDA DATED NOVEMBER 15, 2000

- 1. District Authorized staff, upon proper identification, will have permission to enter, inspect and observe permitted and related facilities in order to determine compliance with the approved plans, specifications and conditions of this permit.
- 2. Nothing in this permit should be construed to limit the authority of the St. Johns River Water Management District to declare a water shortage and issue orders pursuant to Section 373.175, Florida Statutes, or to formulate a plan for implementation during periods of water shortage, pursuant to Section 373.246, Florida Statutes. In the event a water shortage, is declared by the District Governing Board, the permittee must adhere to the water shortage restriction as specified by the District, even though the specified water shortage restrictions may be inconsistent with the terms and conditions of this permit.
- 3. Prior to the construction, modification, or abandonment of a well, the permittee must obtain a Water Well Construction Permit from the St. Johns River Water Management District, or the appropriate local government pursuant to Chapter 40C-3, Florida Administrative Code. Construction, modification, or abandonment of a well will require modification of the consumptive use permit when such construction, modification or abandonment is other than that specified and described on the consumptive use permit application form.
- 4. Leaking or inoperative well casings, valves, or controls must be repaired or replaced as required to eliminate the leak or make the system fully operational.
- 5. Legal uses of water existing at the time of the permit application may not be interfered with by the consumptive use. If unanticipated interference occurs, the District may revoke the permit in whole or in part to curtail or abate the interference unless the permittee mitigates for the interference. In those cases where other permit holders are identified by the District as also contributing to the interference, the permittee may choose to mitigate in a cooperative effort with these other permittees. The permittee must submit a mitigation plan to the District for approval prior to implementing such mitigation.
- 6. Off-site land uses existing at the time of permit application may not be significantly adversely impacted as a result of the consumptive use. If unanticipated significant adverse impacts occur, the District shall revoke the permit in whole or in part to curtail or abate the adverse impacts, unless the impacts can be mitigated by the

permittee.

- 7. The District must be notified, in writing, within 30 days of any sale, conveyance, or other transfer of a well or facility from which the permitted consumptive use is made or within 30 days of any transfer of ownership or control of the real property at which the permitted consumptive use is located. All transfers of ownership or transfers of permits are subject to the provisions of section 40C-1.612, Florida Administrative Code.
- 8. A District-issued identification tag shall be prominently displayed at each withdrawal site by permanently affixing such tag to the pump, headgate, valve or other withdrawal facility as provided by Section 40C-2.401, Florida Administrative Code. Permittee shall notify the District in the event that a replacement tag is needed.
- 9. If the permittee does not serve a new projected demand located within the service area upon which the annual allocation was calculated, the annual allocation will be subject to modification.
- 10. The permittee must ensure that all service connections are metered.
- 11. Landscape irrigation is prohibited between the hours of 10:00 a.m. and 4:00 p.m., except as follows:
 - a) Irrigation using a micro-irrigation system is allowed anytime.
 - (b) The use of reclaimed water for irrigation is allowed anytime, provided appropriate signs are placed on the property to inform the general public and District enforcement personnel of such use. Such signs must be in accordance with local restrictions.
 - (c) Irrigation of, or in preparation for planting, new landscape is allowed any time of day for one 30 day period provided irrigation is limited to the amount necessary for plant establishment.
 - (d) Watering in of chemicals, including insecticides, pesticides, fertilizers, fungicides, and herbicides when required by law, the manufacturer, or best management practices is allowed anytime within 24 hours of application.
 - (e) Irrigation systems may be operated anytime for maintenance and repair purposes not to exceed ten minutes per hour per zone.
- All submittals made to demonstrate compliance with this permit must include the

permit number 8347 plainly labeled on the submittals.

- 13. This permit will expire on November 15, 2005.
- 14. Maximum annual ground water withdrawals must not exceed 37.30 million gallons.
- 15. The permittee must conduct an annual water audit within 30 days of the anniversary date of issuance of this permit. If the water audit shows that the system losses exceed 10%, a leak detection and repair program must be implemented.
- 16. The permittee must assure that all service connections continue to be metered.
- 17. The permittee must implement the Water Conservation Plan submitted to the District on August 18, 2090, in accordance with the schedule contained therein.
- 18. Wells no. 1 and 2 must continue to be monitored with totalizing flowmeters. These meters must maintain 95% accuracy, be verifiable and be installed according to the manufacturer's specifications.
- 19. Total withdrawals from wells no. 1 and 2 must be recorded continuously, totaled monthly, and reported to the District at least every six months from the initiation of the monitoring using Form No. EN-50. The reporting dates each year will be as follows for the duration of the permit:

Reporting Period

Report Due Date

January - June

July 31

July - December

January 31

- 20. The permittee must maintain all flowmeters. In case of failure or breakdown of any meter, the District must be notified in writing within 5 days of its discovery. A defective meter must be repaired or replaced within 30 days of its discovery.
- 21. The permittee must have all flowmeters checked for accuracy at least once every 3 years within 30 days of the anniversary date of permit issuance, and recalibrated if the difference between the actual flow and the meter reading is

greater than 5%. District Form No. EN-51 must be submitted to the District within 10 days of the inspection/calibration.

22. The lowest quality water source, such as reclaimed water or surface/storm water, must be used as irrigation water when deemed feasible pursuant to District rules and applicable state law.

Notice Of Rights

- 1. A person whose substantial interests are or may be determined has the right to request an administrative hearing by filing a written petition with the St. Johns River Water Management District (District), or may choose to pursue mediation as an alternative remedy under Sections 120.569 and 120.573, Florida Statutes, before the deadline for filing a petition. Choosing mediation will not adversely affect the rights to a hearing if mediation does not result in a settlement. The procedures for pursuing mediation are set forth in Sections120.569 and 120.57, Florida Statutes, and Rules 28-106.111 and 28-106.401-.405, Florida Administrative Code. Pursuant to Chapter 28-106 and Rule 40C-1.1007, Florida Administrative Code, the petition must be filed at the office of the District Clerk at District Headquarters, P. O. Box 1429, Palatka, Florida 32178-1429 (4049 Reid St., Palatka, FL 32177) within twenty-six (26) days of the District depositing notice of District decision in the mail (for those persons to whom the District mails actual notice) or within twenty-one (21) days of newspaper publication of the notice of District decision (for those persons to whom the District does not mail actual notice). A petition must comply with Chapter 28-106, Florida Administrative Code.
- 2. If the Governing Board takes action which substantially differs from the notice of District decision, a person whose substantial interests are or may be determined has the right to request an administrative hearing or may choose to pursue mediation as an alternative remedy as described above. Pursuant to District Rule 40C-1.1007, Florida Administrative Code, the petition must be filed at the office of the District Clerk at the address described above, within twenty-six (26) days of the District depositing notice of final District decision in the mail (for those persons to whom the District mails actual notice) or within twenty-one (21) days of newspaper publication of the notice of its final agency action (for those persons to whom the District does not mail actual notice).

 Such a petition must comply with Rule Chapter 28-106, Florida Administrative Code.
- 3. A substantially interested person has the right to a formal administrative hearing pursuant to Section 120.569 and 120.57(1), Florida Statutes, where there is a dispute between the District and the party reqarding an issue of material fact. A petition for formal hearing must comply with the requirements set forth in Rule 28-106.201, Florida Administrative Code
- 4. A substantially interested person has the right to an informal hearing pursuant to Sections 120.569 and 120.57(2), Florida Statutes, where no material facts are in dispute. A petition for an informal hearing must comply with the requirements set forth in Rule 28-106.301, Florida Administrative Code.
- 5. A petition for an administrative hearing is deemed filed upon delivery of the petition to the District Clerk at the District headquarters in Palatka, Florida.
- 6. Failure to file a petition for an administrative hearing, within the requisite time frame shall constitute a waiver of the right to an administrative hearing (Section 28-106.111, Florida Administrative Code).
- 7. The right to an administrative hearing and the relevant procedures to be followed are governed by Chapter 120, Florida Statutes, and Chapter 28-106, Florida Administrative Code and Section 40C-1.1007, Florida Administrative Code.

Notice Of Rights

- 8. An applicant with a legal or equitable interest in real property who believes that a District permitting action is unreasonable or will unfairly burden the use of his property, has the right to, within 30 days of receipt of notice of the District's written desision regarding a permit application, apply for a special master proceeding under Section 70.51, Florida Statutes, by filing a written request for relief at the office of the District Clerk located at District headquarters, P. O. Box 1429, Palatka, FL 32178-1429 (4049 Reid St., Palatka, Florida 32177). A request for relief must contain the information listed in Subsection 70.51(6), Florida Statutes.
- 9. A timely filed request for relief under Section 70.51, Florida Statutes, tolls the time to request an administrative hearing under paragraph no. 1 or 2 above (Paragraph 70.51(10)(b), Florida Statutes). However, the filing of a request for an administrative hearing under paragraph no. 1 or 2 above waives the right to a special master proceeding (Subsection 70.51(10)(b), Florida Statutes).
- 10. Failure to file a request for relief within the requisite time frame shall constitute a waiver of the right to a special master proceeding (Subsection 70.51(3), Florida Statutes).
- 11. Any substantially affected person who claims that final action of the District constitutes an unconstitutional taking of property without just compensation may seek review of the action in circuit court pursuant to Section 373.617, Florida Statutes, and the Florida Rules of Civil Procedures, by filing an action in circuit court within 90 days of the rendering of the final District action, (Section 373.617, Florida Statutes).
- 12. Pursuant to Section 120.68, Florida Statutes, a person who is adversely affected by final District action may seek review of the action in the District Court of Appeal by filing a notice of appeal pursuant to the Florida Rules of Appellate Procedure within 30 days of the rendering of the final District action.
- 13. A party to the proceeding before the District who claims that a District order is inconsistent with the provisions and purposes of Chapter 373, Florida Statutes, may seek review of the order pursuant to Section 373.114, Florida Statutes, by the Florida Land and Water Adjudicatory Commission, by filing a request for review with the Commission and serving a copy on the Department of Environmental Protection and any person named in the order within 20 days of adoption of a rule or the rendering of the District order.
- 14. For appeals to the District Court of Appeal, a District action is considered rendered after it is signed on behalf of the District, and is filed by the District Clerk.
- 15. Failure to observe the relevant time frames for filing a petition for judicial review described in paragraphs #11 and #12, or for Commission review as described in paragraph #13, will result in waiver of that right to review.

Notice Of Rights

Certificate of Service

I HEREBY CERTIFY that a copy of the foregoing Notice of Rights has been sent by U.S. Mail to:

Utilities Inc of Florida 200 Weathersfield Ave Altamonte Springs, FL 32714

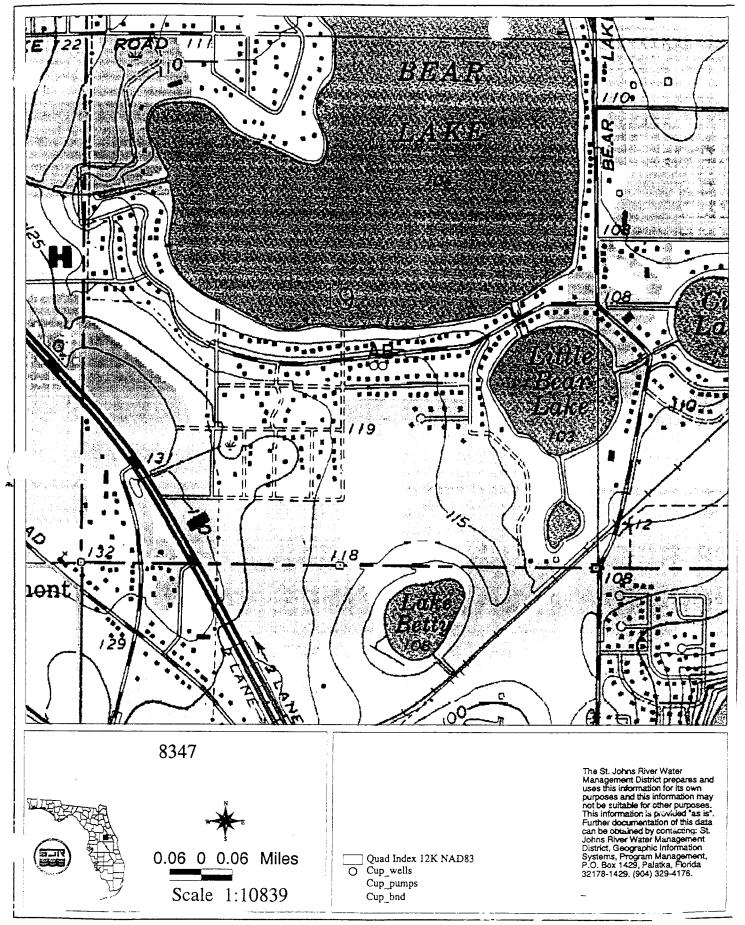
at 4:00 p.m. this 15th day of November, 2000.

Division of Permit Data Services Gloria Lewis, Director

St. Johns River Water Management District Post Office Box 1429 Palatka, FL 32178-1429 (904) 329-4152

Permit Number: 8347

UTILITIES INC OF FLORIDA
SECT 19-NOV-FOOR
FLORIDAN ACCIFER
HOUSEROLD
LABORATION
CARROLL
COO INCHES



Source: /work/cupdata/maping.apr 09/22/1999

FLOW METER WATER CALIBRATION RECORD - EN51

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT Post Office Box 1429

Palatka, Florida 32178-1429

Permittee Name: Utilities Inc of Florida Date of Permit Issuance: November 15, 2000 Station Name: 1
Pump Capacity: 200 GPM Serial Number on Meter:
Meter Model:
Discharge Pipe Diameter:
Date of Last Meter Calibration:/
Date of This Calibration:/
Name of Person Performing Calibration:
Method or Equipment Used for Calibration:
Initial Meter Reading at Start of Calibration:
Final Meter Reading at End of Calibration:
Readings on Equipment Used for Calibration:
Start: End:
(Attach Formulas Used to Make Calculations)
Percent of Error Between Meter Reading and Calibration Equipment:%
Name of Person Completing Form (Please Print):
Company Name:
Address:
Cit- 'State/Zip:
Daytime Telephone: (

Please Retain a Copy for Your Records

FLOW METER WATER CALIBRATION RECORD - EN51

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT Post Office Box 1429

Palatka, Florida 32178-1429

Consumptive Use Permit Number: 8347 - Janeta		
Permittee Name: Utilities Inc of Florida		
Date of Permit Issuance: November 15, 2000 Station Name: 2		
Pump Capacity: 225 GPM		
Serial Number on Meter:		
Meter Model:		
Discharge Pipe Diameter:		
Date of Last Meter Calibration:/		
Date of This Calibration:/		
Name of Person Performing Calibration:		· · · · · · · · · · · · · · · · · · ·
Mc+bod or Equipment Used for Calibration:		
Initial Meter Reading at Start of Calibration:		
Final Meter Reading at End of Calibration:		
Readings on Equipment Used for Calibration:		
Start: End:		
(Attach Formulas Used to Make Calculations)		
Percent of Error Between Meter Reading and Calibration Equipment:	%	
Name of Person Completing Form (Please Print):	·	
Company Name:		
Address:		
Cit-/State/Zip:		
Daytime Telephone: ()		

Please Retain a Copy for Your Records





St. Johns River Water Management Distric P. O. Box 1429 Palatka, Florida 32178-142

WATER USE RECORD

FORM EN - 50

CUP# **8347**

PERMIT ISSUE DATE 15-nov-2000

DISTRICT ID

OWNERS ID

PERMITTEE Utilities Inc of Florida

PROJECT JANSEN

WELL NAME 1

PUMP NAME

COMPLE	ETE THE	FORM	/I BY PF	RINTING E	ACH "NU	MBER" \	VITHOUT	TOUCH	IING TH	E SIDES	OF THE	вох
		0	•				5	6	7	8	9]
Step 1.	MA			THAT SE THIS				0	WELL	. CAPF	PED	
		0	WELL	ABANI	OONE) (40C	-3, FAC	;) ₍₎	PROF	PERTY	SOLD	
		0	COMI	MENTS:	(PLEA	ASE PR	RINT): _	······································				
						<u>-</u>					·	
tep 2. RE FL				HLY W READIN								

GALLONS

OR METER READINGS

JAN	01										
FEB	01										
MAR	01										
APR	01										
MAY	01										
JUN	01										
Step 3.		NTACT		 		 					
	PH	ONE N	JMBER	 							



15588





St. Johns River Water Management District P. O. Box 1429 Palatka, Florida 32178-1429

WELL CAPPED

15589

WATER USE RECORD

MARK ALL THAT APPLY

O NO USE THIS PERIOD

FORM EN - 50

CUP# 8347

PERMIT ISSUE DATE 15-nov-2000

DISTRICT ID

OWNERS ID

PERMITTEE Utilities Inc of Florida

PROJECT JANSEN

WELL NAME 2

Step 1.

PUMP NAME

COMPLETE THE FORM BY PRINTING EACH "NUMBER" WITHOUT TOUCHING THE SIDES OF THE BOX

○ COMMENTS: (PLEASE PRINT): _____

0 1 2 3 4 5 6 7 8 9

○ WELL ABANDONED (40C-3, FAC) ○ PROPERTY SOLD

Step 2. REPORT MONTHLY WATER USE BELOW. RECORD EITHER FLOW METER READINGS OR GALLONS USED (NOT BOTH).										
		GALLONS		OR METER	READINGS					
JAN	01									
FEB	01									
MAR	01									
APR	01									
MAY	01									
JUN	01									
Step 3.	CC	NTACT NAME								
otep J.										
	PH	ONE NUMBER								





St. Johns River Water Management Distric P. O. Box 1429 Palatka, Florida 32178-1429

WATER USE RECORD

FORM EN - 50

CUP# 8347

PERMIT ISSUE DATE 15-nov-2000

DISTRICT ID

OWNERS ID

PERMITTEE Utilities Inc of Florida

PROJECT JANSEN

WELL NAME 1

PUMP NAME

COMPLETE THE FORM BY PRINTING EACH "NUMBER" WITHOUT TOUCHING THE SIDES OF THE BOX

		0	•	2	3	•-	5	6	7	8	9
Step 1.	MAI	RK A	ALL T	HAT	APPL	Υ.			<u> </u>	·	
		\circ N	10 US	ETHIS	PERI	OD		0	WELL	CAPF	PED
		0 V	VELL A	BAND	ONED	(40C	3, FAC) ₍	PROF	PERTY	SOLD
		\circ (СОММЕ	ENTS:	(PLEA	SE PF	RINT):				

Step 2. REPORT MONTHLY WATER USE BELOW. RECORD EITHER FLOW METER READINGS OR GALLONS USED (NOT BOTH).

GALLONS

OR METER READINGS

					 _	 			
JUL	00								
AUG	00								
SEP	00								
ОСТ	00								
NOV	00								-
DEC	00						-		
Step 3.	CC	ONTACT N	AME _	 		 			
	PH	HONE NUM	IBER _						



15588





St. Johns River Water Management Distric P. O. Box 1429 Palatka, Florida 32178-1429

WATER USE RECORD

FORM EN - 50

CUP# 8347

PERMIT ISSUE DATE 15-nov-2000

DISTRICT ID

OWNERS ID

PERMITTEE Utilities Inc of Florida

PROJECT JANSEN

WELL NAME 2

PUMP NAME

COMPLETE THE FORM BY PRINTING EACH "NUMBER" WITHOUT TOUCHING THE SIDES OF THE BOX

	•	\circ	1	2	3		5	6	7	8	9
Step 1.	MAF	RK	ALL T	HAT	APPL	Υ					
•		01	10 US	E THIS	S PERI	OD		\circ	WELL	CAPE	PED
. -		0 \	VELL	ABAND	ONEC	(40C-	3, FAC) o	PROF	PERTY	SOL
		0 (СОММ	ENTS:	(PLEA	SE PF	RINT):				

Step 2. REPORT MONTHLY WATER USE BELOW. RECORD EITHER FLOW METER READINGS OR GALLONS USED (NOT BOTH).

GALLONS

OR METER READINGS

JUL 00		
AUG 00		
SEP 00		
OCT 00		
NOV 00		
DEC 00		
0.0p 0.	ONTACT NAME	- -



15589

Jansen

Docket No. 060253-WS

25.30-440(7) Notices

NOTICES

None

Jansen

Docket No. 060253-WS

25.30-440(8) Field Employees

Employees Involved in Utilities, Inc. of Florida Operations During Test Year 2005:

Patrick Flynn, Regional Director: Oversees all operations and employees in Florida.

Bryan Gongre, Regional Manager: Manages operations and employees for all Central Florida systems.

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.

Bill Coates, Project Manager: Lake and Marion County systems.

Tony Wierzbicki, Project Manager: Manages capital projects and developer activity within the West Coast and South Florida Operations areas

[Open], Project Manager: Seminole and Orange County systems.

Kathy Sillitoe, Area Manager: Seminole and Orange County Plants.

John Marinelli, Area Manager: Seminole and Orange County Field Maintenance.

Chuck Schwades, Area Manager: Lake and Marion County Field Maintenance.

Michael T. Dunn, Regional Manager

Scotty Lee Haws, Regional Manager

John G Holdman, Area Manager

Gaary Wade Musselwhite Jr., Area Manager

Field Employees:

Pasco and Pinelles Counties:

Steve Habery, Lead Operator ("C" Water License and "C" Wastewater License) Jack Adkins, Operator ("C" Water License)

Marion County:

Daniel Anderson, Operator ("A" Water License and "A" Wastewater License)

Seminole and Orange Counties:

Allan Finch, Operator ("C" Water License)

Chris Phillips, Meter Reader Terry Sillitoe, Operator, Part Time ("A" Water License and "A" Wastewater License)

Thomas W Abendroth, Field tech James Roger Adlay, Operator Robert K Cooper, Field Tech Robb Douglas Crow, Operator Michael John Gavaletz, Operator Jimmie H. Hollister, Field Tech Alexander Lorenzo, Operator Roy Mericle, Operator Raymond Alan Parrish, Operator Jeffrey Pinder, Field Supervisor Frederick E Quinlan II, Field Tech Roberto Remigio, Meter Reader Mickey A Shue, Field Tech Ronald D. White, Field Supervisor William B Willingham, Field Tech James Dennis Yingling, PT Field Tech James Howard Pendarvis, Field Tech Preston S Boardway, PT Field Tech James Edward Carroll, Operator Leonard E Ledwell, Operator David Ryniak, Operator

Facilities:

The minimum staffing requirement at all Utilities, Inc. of Florida water systems is 6 visits per week provided by a minimum class "C" operator. The minimum staffing requirement at the Crownwood wastewater treatment plant in Marion County is ½ hour per day, 6 days per week.

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.

Jansen

Docket No. 060253-WS

25.30-440(9) Vehicles

FL Vehicles as of 5-5-06

Veh.#	Yr/Make/Model	VIN	Driver Assigned	Cost	Company Name
	99 DODGE DAKOTA	1B7FL26X6XS261957	CORY SUDOL		Alafaya Utilities, Inc.
9932	99 DODGE DAKOTA	1B7FL26XXXS277898	NO DRIVER YET	\$15,467.19	Alafaya Utilities, Inc.
636	06 CHEV COLORADO	1GCCS146568234592	JEROME HAMPTON	\$16,622.26	Alafaya Utilities, Inc.
221	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.
	03 CHEV C15 FULL	1GCEC14X23Z114639	EDWARD ROBERTS		Alafaya Utilities, Inc.
	03 CHEV C15 FULL	1GCEC14X83Z115665	SCOTT LEARNED		Alafaya Utilities, Inc.
	04 CHEV C25	1GCHK24U04E296751 1GCCS14W9YK229577	DON TAYLOR		Alafaya Utilities, Inc. Bayside Utility Services, Inc.
	00 CHEV S-10 06 CHEV C15	1GCEC14V81R229377	ALVIN BISHOP		Bayside Utility Services, Inc.
	86 INTERNATIONAL	1HTLDTVN2GHA45725	VACUUM TRUCK		Bayside Utility Services, Inc.
	02 CHEVY S-10	1GCCS14W628209453	WILLIAM NEAL		Cypress Lakes, Utilities, Inc.
	06 CHEV C15 V-8	1GCEC14V26Z102011	DAVID SHOFFSTALL		Cypress Lakes, Utilities, Inc.
	00 CHEV CS10803	1GCCS14W2YK195806			Eastlake Water Service, Inc.
	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			Mid-County
	01 CHEV 1500	1GCEC14W81Z185977	SPARE		Mid-County
	04 CHEV C15	1GCEC14X24Z336714	ROBERT BUONO		Mid-County
	99 DODGE DAKOTA	1B7FL26X4XS261955	LENNY GODWIN		Sandalhaven Sandalhaven
	04 CHEV C15 FULL	1GCEC14X44Z274751 1B7FL26X1XS277899	MIKE MONAT HAROLD EBERT		Sanlando Utilities, Inc.
	99 DODGE DAKOTA 99 DODGE DAKOTA	1B7FL26X4XS277900	NO DRIVER YET		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.
	05 CHEV COLORADO	1GCCS146358238591	DOUG GOODWIN		Sanlando Utilities, Inc.
	01 CHEV S10	1GCCS14W01K129261	ROBERTO REMIGIO	\$15,053.85	Sanlando Utilities, Inc.
220	02 CHEVY S-10	1GCCS14W128209201	ROY MERICLE	\$13,356.21	Sanlando Utilities, Inc.
14	00 CHEV CS10803	1GCCS14W1YK195845	ALEXANDER LORENZO		Sanlando Utilities, Inc.
	01 CHEV S10	1GCCS14W71K129239	ELISA STEGER		Sanlando Utilities, Inc.
	98 CHEV S-10	1GCCS14X0WK247116			Sanlando Utilities, Inc.
	98 CHEV S-10	1GCCS14X6WK246309	THOMAS KEYS		Sanlando Utilities, Inc.
	01 CHEV 1500	1GCEC14V11E249162 1GCEC14V31E249471	KEVIN COOPER JEFF PINDER		Sanlando Utilities, Inc. Sanlando Utilities, Inc.
	01 CHEV 1500 02 CHEVY C15 FULL	1GCEC14V312Z313941	DALE WHITE		Sanlando Utilities, Inc.
	3 00 CHEV 1500	1GCEC14V6YE249071	THOMAS ABENDROTH		Sanlando Utilities, Inc.
	01 CHEV 1500	1GCEC14V91E265755	MATTHEW MORRELL		Sanlando Utilities, Inc.
	3 01 CHEV 1500	1GCEC14W21Z187837	JIMMIE HOLLISTER		Sanlando Utilities, Inc.
	01 CHEV 1500	1GCEC14W71Z185310	JAMES PENDARVIS	\$17,227.78	Sanlando Utilities, Inc.
112	2 01 CHV 1500	1GCEC14W81Z183727	SHAWN EBERT		Sanlando Utilities, Inc.
312	2 03 CHEV C15 FULL	1GCEC14X03Z114378	MICK SHUE		Sanlando Utilities, Inc.
	03 CHEV C15 FULL	1GCEC14X63Z115177	FRED QUINLAN		Sanlando Utilities, Inc.
	3 04 FORD F-750	3FRXF75424V600407	SANLANDO DUMP TRUCK		Sanlando Utilities, Inc.
	03 CHEV C15 FULL	1GCEC14X23Z115810	JERRY HAHN		! Tierre Verde
	89 FORD F-350	1FDKF37G5KNA56982 1G2WP5216WF270000	DUMP TRUCK NO DRIVER YET		Utilities, Inc, of Florida Utilities, Inc, of Florida
	5 97 PONTIAC GRAND AM 5 00 CHEV C25 BOOM	1GBGK24R5YF484662	CENTRAL FL BOOM TRUCK		Utilities, Inc. of Florida
	3 05 CHEV COLORADO	1GCCS146658179178	CHRIS PHILLIPS		Utilities, Inc. of Florida
	2 06 CHEV COLORADO	1GCCS146768129150	CHRIS ALDAY		Utilities, Inc, of Florida
	7 06 CHEV C15	1GCEC14V96E197609	JEFF FINEHIRSH		Utilities, Inc. of Florida
	2 02 CHEVY C15 FULL	1GCEC14W12Z314210	CHARLES SCHWADES		Utilities, Inc. of Florida
	1 03 CHEV C15 FULL	1GCEC14X04Z274231	ALLEN FINCH		Utilities, Inc, of Florida
436	04 CHEV C15 FULL	1GCEC14X24Z201474	JACK ADKINS		Utilities, Inc. of Florida
	1 03 CHEV C15 FULL	1GCEC14X63Z115146	STEVE HABERY		Utilities, Inc, of Florida
	2 04 CHEV C15 EXT CAB	1GCEC19VX4Z270758	RICHARD RETZ		Utilities, Inc, of Florida
	9 05 CHEV C15 4X4 EXT	1GCEK19T35E230984	JOHN MARINELLI		Utilities, Inc. of Florida
	9 06 CHEV C15 4X4 EXT	1GCEK19Z26Z225726	BILL COATES		Utilities, Inc, of Florida Utilities, Inc, of Florida
	3 04 CHEV S10 TRAILBLAZER	1GNDT13S442340667	BRYAN GONGRE		Utilities, Inc. of Florida
	2 05 CHEV TAHOE) 06 CHEV TAHOE 4X4	1GNEC13T85R199267 1GNEK13TX6R148941	PATRICK FLYNN JOHN HOY		Utilities, Inc. of Florida
	92 DODGE	2B7GB11X5NK163811	SEWER VIDEO EQUIP VAN		Utilities, Inc. of Florida
	2 02 CHEVY IMPALA	2G1WF55E329381533	SCOTTY HAWS		Utilities, Inc, of Florida
	5 99 CHEV LUMINA	2G1WL52M1X9177423	KATHY SILLITOE		Utilities, Inc. of Florida
	3 04 CHEV C15 EXT CAB	2GCEC19T341374628	TONY WIERZBICKI		Utilities, Inc. of Florida
	9 06 CHEV C25	2GCEC19VX61115736	SCOTT STEWART		Utilities, Inc, of Florida
	9 01 CHEV FULL 1500 4WD	2GCEK19T111381348	WILLIAM NEAL		Utilities, Inc, of Florida
.3	3 00 DODGE DAKOTA	1B7GG22X7YS753556	SPARE	\$20,427.35	Utilities, Inc. of Pennbrooke

105 01 CHEV S10 314 03 CHEV C15 FULL 511 05 CHEV C15 REG CAB 1GCCS14WX18159350 JAMES YINGLING 1GCEC14X43Z114271 STEVEN PFOUTS 1GCEC14X75Z230180 DAN ANDERSON

\$15,998.46 Utilities, Inc. of Pennbrooke \$19,053.10 Utilities, Inc. of Pennbrooke \$18,064.18 Utilities, Inc. of Pennbrooke Jansen

Docket No. 060253-WS

25.30-440(10) Customer Complaints

CUSTOMER COMPLAINTS

Please refer to the CD provided to the Commission Clerk with the filing.

Little Wekiva

Docket No. 060253-WS

Seminole County

Little Wekiva

Docket No. 060253-WS

25.30-440(1) Detailed Map

MAPS

SUBMITTED TO COMMISSION SEPARATELY

Little Wekiva

Docket No. 060253-WS

25.30-440(2) Chemicals Used

CHEMICALS USED

To Be Provided

Little Wekiva Docket No. 060253-WS

25.30-440(3) Chemical Analyses

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 E-Mail: uif@iag.net

August 29, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Dept. of Environmental Protection 3319 Maguire Blvd. Orlando, Fl. 32803

Re:

Annual TTHM and HAA5s, 2005

Little Wekiva Utilities, Inc. PWS ID# 3590762

Dear Mr. Morrison:

Enclosed please find the results of samples taken July 14, 2005 and July 28, 2005 for the above referenced analysis and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 234.

Sincerely,

UTILITIES, INC. OF FLORIDA

Kathy Sillitoe Area Manager

EC: Patrick Flynn, Regional Director, UIOF

Scotty L. Haws, Assistant Operations Manager

DISINFECTION BYPRODUCTS (TOTAL TRIHALOMETHANES [TTHMs] AND HALOACETIC ACIDS FIVE [HAA5s])

MONITORING FREQUENCY: \(\text{\text{QUARTERLY}} \) ANNUALLY

E-MAIL ADDRESS (optional):S.L.Haws@Utilitiesinc-usa.com	FAX MUMBER (optional): 407-869-6961						
CONTACT PERSON: Scotty Haws	PHONE NUMBER: 407-869-1919 EXT.234						
PWS ID NUMBER: 3590762	9lonim92 : YTNUC						
PWS NAME: Little Wekiva							
SYSTEM INFORMATION							
	QUARTERLY REPORTING PERIOD: July 2005 thur June 2006	C007 : VV~1					
		YEAR: 2005					

	to lev	ed tnanimatn	oO mumixeM e	Does the RAA for HAA5s violate the 0.060 mg/L for HA5s? (YES/NO)		to leve	ontaminant Le	O mumixeM e	Does the RAA for TTHMs violate th 0.080 mg/L for TTHMs? (YES/NO)
				Calculate the Running Annual Average of the quarter		calculate he last four	TTHMs (i.e., o averages for t	og (AAA) for checkfis yla	Calculate the Running Annual Avera the arithmetic average of the quarter
				Provide the arithmetic average of all HAA5 samples taken in each quarter for the last four quarters					Provide the arithmetic average of all TTHM samples taken in each quarter for the last four quarters
				Provide the number of HAA5 samples taken during the last quarter*	A-14				Provide the number of TTHM samples taken during the last quarter*
				Actual Quarter/Year					Actual Quarter/Year
₽ ЯТО	ε ятр	s ятр	ז אדם	Last Four Quarters	₽ ЯТД	ε ятр	2 ятр	г ятр	Last Four Quarters
		YAAMMUS	OMPLIANCE	HAA5 C			YAAMMU2 3	OMPLIANCE	TTHM C
	TTHM/HAR5 COMPLIANCE SUMMARY FOR PWSS MONITORING ON A QUARTERLY OR MORE FREQUENT BASIS							OT YAAMM	TTHM/HAPS COMPLIANCE SU

*Also, for each sample taken during the last quarter, provide the information requested in the tables on pages 3 and 4 of this format.

TTHM/HAA5 REPORTING COMPLIANCE SUMMARY FOR PWSs MONITORING ANNUALLY								
TTHM COMPLIANCE SUMMARY	HAA5 COMPLIANCE SUMMARY							
Provide the number of TTHM samples taken during the last year*	1	Provide the number of HAA5 samples taken during the last year*	1					
Calculate the arithmetic average of all TTHM samples taken over the last year	16.7	Calculate the arithmetic average all HAA5s samples taken over the last year	12.97					
Does the arithmetic average of the TTHM samples exceed the Maximum Contaminant Level of 0.080 mg/L for TTHMs? (YES/NO)**	NO	Does the arithmetic average of the HAA5 samples exceed the Maximum Contaminant Level of 0.060 mg/L for HAA5s? (YES/NO)**	NO					

^{*}Also, for each sample taken during the last year, provide the information requested in the tables on pages 3 and 4 of this format.

^{**}If the TTHM or HAA5 sample (or average of the samples, if more than one sample is taken) exceeds the Maximum Contaminant Level, the system must increase monitoring to one TTHM and one HAA5 sample per treatment plant per quarter, taken at a point in the distribution system reflecting the maximum residence time, until the system meets the criteria in 40 CFR 131.132(b)(1)(iv). Please see 40 CFR 141.132 (b)(1) for complete details.

Sample Location	Sample Location in the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (mo/da/yr)	FOR REPORTING Disinfectant Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Sample	Date of Analysis (mo/da/yr)	Analytical Method	Laboratory Name & Certification Number	TTHM Analysis Result (ug/L
789 Richbee Drive	MRT	7/14/05	0.4	Alexander Lorenzo	7/20/05	E502.2	Advanced Enviromental Laboratories # E82574	16.7
			 	 		 		

Sample Location	Sample Location in the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (mo/da/yr)	Disinfectant Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Sample	Date of Analysis (mo/da/yr)	Analytical Method	Laboratory Name & Certification Number	HAA5 Analysis Result (ug/L
789 Richbee Drive	MRT	7/28/05	.8	Kathy Sillitoe	8/5/05	EPA552.2	Advanced Environmental Laboratories E 82574	12.97
W								

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by sampler – Please	type or print legibly)
System Name: <u>LITTLE WEKIVA</u>	PWS	1.D. #: 359076Z
System Type (check one): Community	☐Nontransient Noncommu	nity Transient Noncommunity
Address: LITTLE W	EKIVA DR.	
		······································
City: <u>ACTAMONTE SPRIM</u>	065 State: <u>F</u>	CA, ZIP Code:
Phone #: 407-869-191	9Fax#:	407-869-6961
E-Mail Address: S. C. HAWS	@UTILITIES INC.	
SAMPLE INFORMATION (to be completed	by sampler)	
Sample Number: A052432-01	Location Code (if known):
Sample Date: <u>7/14/05</u>	Sample Time: _	9:45 AM PM (Circle One)
Sample Location (be specific): 789 RICHB		
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic aci	ids): <u>0, 4</u> mg/L Field pH:
_		
Sample Type (Check Only One)		Sample (Check all that apply)
Distribution	Routine Compliance (with 62-550)	Quarterly (Which Quarter?)
Entry Point (to Distribution)	Confirmation of MCL Exceedance	<u> </u>
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**	☐Violation Resolution
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)
Max Residence Time	Other:	
☐Ave Residence Time	Sampling Procedure Used or Other	Comments:
☐Near First Customer		
*See 62-550.500(6) for requireme NOTE: See 62-550.512(3) for ad for nitrate or nitrite MCL e	ditional requirements att	e 62-550.550(4) for requirements and ach a results page for each site.
Sampler's Name: <u>ACEXANDE</u>	R CORENZO	
Sampler's Phone #:	1202 Sampler's Fax #	<u> 407-869-6961</u>
Sampler's E-Mail Address:	<i> A</i>	
CERTIFICATION (to be completed by s	ampler)	
I, <u>ALEXANDER</u> CO	RENZO,	OPERATOR ,
do HEREBY CERTIFY that the abov complete and correct.		, ·
Signature: Wexan	de Torenzo	Date: <u>8(15/05</u>

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

	TORY CERTIFICATION CURRENT DOH ANAL		pleted by lab - Please type or p	print legibly)
LabName	: Advanced Environme	ental Labs - Orlando	Florida	Certification #: E53076
Address:	528 S. North Lake Bl	vd., Suite 1016	Certification E	Expiration Date: 6/30/2006
	Altamonte Springs, F	L 32701		Telephone #: (407) 937-1594
ANALYSIS	S INFORMATION (to be	e completed by lab		
PWS ID (f	rom page 1):		Date Sample	(s) Received: 7/14/2005 3:56:00
Lab Assig	ned Report Number or	Job ID A052432	Sample Number (F	From page 1) A052432-01
Group(s) A	Analyzed Results attac	hed for compliance with chap	ter 62-550, F.A.C. (check all t	hat apply):
	Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts
[All 17	☐ All 30	☐ All 21	✓ Trihalomethanes
[Partial	All Except Dioxin	Partial	Haloacetic Acids
	Nitrate	Partial	Radionuclides	☐ Bromate
	Nitrite	Dioxin Only	Single Sample	Chlorite
	Asbestos Only		Qtrly Composite**	Secondaries
			_ daily composite	All 14
				☐ Partial
Were any	analyses subcontracted	d? ✓ Yes 🗌 No		
If yes, plea	se provide DOH certific	cation number E82574		
ATTACH D	OH ANALYTE SHEET	FOR EACH SUBCONTRAC	TED LAB	
		CERTI	FICATION	
I, Myrna S		, Laboratory Manager	*	
do HEREB		ached analytical data are corr y Accreditation Conference (N	ect and unless noted meet all NELAC).	requirements of the
Signature:	humast	autiago	Date:	7-26-05
analysis res	sults will result in rejecti	rrent Florida DOH lab certification of the report, possible enformed Bureau of Laboratory	ation number and a current Ar orcement against the public w Services.	nalyte Sheet for the attached vater system for failure to sample,
** Please p	rovide radiological sam	ple dates and locations for e	ach quarter.	
COMPLIAN	ICE DETERMINATION	(to be completed by DEP	or DOH)	
Sample Col	llection Info Satisfactory	y Es ⊠a No	Sample Analysis Info Sa	tisfactory: 😰 Yes 📓 No
'		(circle or highlight group(s) above		sted (circle or highlight group(s) above)
Addition	al Monitoring Required	(circle or highlight group(s) a	bove)	
Reason(s):	■ MCL(s) Exceeded	- D-44:	o=/o)	The Incomplete Depart
	Missing Analyte Sh	Detection	• •	Incomplete Report
	Other:	E Locatio	n Unsatisfactory	Analysis Unsatisfactory
Person Noti	final.			
Comments			Date N	Notified:
	uad:	DERIDOL	L Poviouing Official:	, = 42.4
Date Reviev	veu.	DEP/DOF	Reviewing Official:	



6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

A052432

7/14/2005

7/14/05 15:56

7/24/2005

Report No.:

Date Sampled:

Date Received:

Date Reported:

Client:

Utilities, Inc.

Project Name:

Little Wekiva

Project Number:

PWS ID#:

Attention:

Kathy Sillitoe

Phone Number: 8002721919

Address:

200 Weathersfield Ave.

Altamonte Springs, FL 32714

Project Description

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name:

Little Wekiva

Approved By:

Myrna Santlago, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages = 8

Analytical Report

Client: Utilities, Inc.

Project Name: Little Wekiva

Matrix: Drinking Water

PWS ID#:

Client Sample ID: 1

Site: 789 Richbee

Sample Number: A052432-01

Report No.: A052432

Date/Time Sampled: 07/14/05

Date/Time Received: 7/14/05 15:56

Sampled By: Alexander Lorenz

Shipping Method: Client drop off

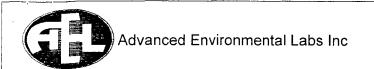
Disinfection	Ryproducts
Disiliection	Dyproducts

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert.#
2941	Chloroform		ug/L	9.3		E502.2	0.31	7/20/2005	1:11	E82574
2942	Bromoform		ug/L	0.36	U	E502.2	0.36	7/20/2005	1:11	E82574
2943	Bromodichloromethane		ug/L	5.0		E502.2	0.38	7/20/2005	1:11	E82574
2944	Dibromochloromethane		ug/L	2.4	,	E502.2	0.28	7/20/2005	1:11	E82574
U The comp	pound was analyzed for but not detected	d.		-/16	.7					

U The compound was analyzed for but not detected.

MDL Method Reporting Limit

For all Results qualified with an I, the PQL is defined to be 4 times the MDL



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Client: UT	ILITIES, INC. (UTL-	A)		Project name	: LITTLE WE	KIVA			
Date/Time Rcvd: 7/1	4/05 1	5.56	Log-	In request number	: A052432				
Received by: BD	M			Completed by	: RPG				
Courier: 🗖 AEL 🔯 C	lient 🗆 UPS 🗖 Po	ny Express 🗖 F	edE>	□ Other (describe)):		+		
Type: ⊠ Cooler □ Bo	x Other (describe	e)							
Cooler temperature	Identify the cooler a	nd document the	e tem	nerature blank or ic	e water meas	uramai	nt		
Oooler terriperature.	racinary are ecolor a	I decament the	o tem	perature blank or ic	e water meas	urerner	II.		
Cooler ID	1								
Temp (°C)	2								
	☐ Temp blank	☐ Temp blank		☐ Temp blank	☐ Temp blank		☐ Temp blank		
remp taken nom							Cooler		
	☐ Thermometer (enter	☐ Thermometer (en	nter	☐ Thermometer (enter	☐ Thermometer	(enter			
with	ID):	10):	!	ID):	ID):		ID):		
Temp (°C) 2 Temp taken from ☐ Temp blank ☐ Temp blank ☐ Cooler ☐ Cooler ☐ Cooler ☐ Cooler ☐ Cooler ☐ Cooler ☐ IR gun ☐									
		the "Comments"	' sect	tion below.					
		CHECKI IOT				T/70.0		•••	
1 Ware custody se	ols on chinning contai					YES	NO		
						+	 		
			atch I	abels\?			-	 	
				1					
			anals	vsis preservatives\?			-		
			allaly	isis, preservatives):		<u> </u>		 	
							+		
		· · · · · · · · · · · · · · · · · · ·	on the	lahal?					
			on the	iauer:				-	
			bles?			+			
			oles:					i	
			heck	one: EI NO ICE EI BI	LIE ICE	+ /	+		
			HCCK	one. I NO ICE II DI	OL ICL		-		
			trol?			+	1		
		• •						/	
						+ /	-		
·····						+	+		
							1		
17'4 ID	0					- 			
KITIU	<u>comments:</u>								

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A052432

CustomerName: Utilities, Inc.

Collector: Alexander Lorenzo

AEL Jax 6601 Southpoint Parkway Jacksonville, FI 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

Check if Rus	h
--------------	---

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)
A052432-01	1	THMs (DW)	Drinking Water	7/14/2005	9:45	7/14/05 15:56	7/28/2005		40mL VOC vial

Orlando Relinquisher:

Shipping Relinquisher: AEL Courier

Shipping Receiver: AEL Courier

i

Jacksonville Receiver:

Date/Time:

me: 7/14/03

ta/Timo:

5 0900



Advanced
Environm

nental Laboratories, Inc.

6601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574

9610 Princess Palm Ave • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589 2106 NW 67th Place, Ste. 7 • Gainesville, FL 32606 • 352.367.1500 • Fax 352.367.0050 • E82620 528 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • E53076

A052432

LA

		,						,		,				表示不正		
CLIENT NAME:	Utilities Inc.	PROJECT NAME:		Litt	le Wek	iva		BOTTLE SIZE	,	1				icis		
DDRESS: 2	200 Weathersfield Ave	P.O. NUMBER/PROJECT NUMB	BER:					& TYPE	40mL Vials							
Altamor	nte Springs, FL 32714	PROJECT LOCATION:														7
PHONE: 407	-869-1919	FAX:						ا ۾ ا								
CONTACT:		SAMPLED BY: ALEX	ANDE	R (0)	CENZO	9						ı	1	-		\
	TURN AROUND TIME:			CIAL INSTRU			*	1 8 1						İ		
STANDARD								REQUIRED					İ			LAB
RUSH								<u>S</u>	40	'		ļ	ļ	ļ		NUMBER
		1						ANALYSIS	THM'S				Ī			Z
								£							BE	
WW≃waste wa	ler SW=surface water GW=groun	d water DW=drinking water	·	OIL.	A=air	SO=soil	SL≖sludge	₹			ļ					ス
SAMPLE	SAMPLE DESC	CRIPTION	Grab	SAM	PLING	MATRIX	NO.	Preserv	_ I,T				İ			
ID			Comp	DATE	TIME		COUNT	4	73.24		Later 6					
1	789 RICHBEE	DR.	G	1/14/05	0945 1005 42	ww	3		Х					1		-91
		· · · · · · · · · · · · · · · · · · ·	<u> </u>	 												-
ĺ							}									
			 	 	 -	 	 			 						+1
							<u> </u>			<u> </u>						
		\$												Ì		
				ļ												
													ļ			
I-Ice	H=(HCI) S=(H2SO4 N=(HNO3	3) T=(Sodium Thiosulfate)	1	<u></u>	l		Relin	quish by:	L	Date	Time	Re	ceived by:	Date	1	ime
Shipment	Method Sa	ample Kit Cooler#			1	aliexa	nder 1	12 mgs	5	7/12/05	1220	Buine	metin	71141	51 15	5-6
Out	Via: R				2											
Ret	Via: At	ip Bl.			3	 				 						
Received on Ice		C sent		neivad	ــــــــــــــــــــــــــــــــــــــ					1	L			revised		







Laboratory Scope of Accreditation

Page 4 of 27

THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code:

FL00949

(904) 363-9350

E82574

 ${\bf Advanced\ Environmental\ Laboratories, Inc.}$

6601 Southpoint Parkway Jacksonville, FL 32216

Matrix: Drinking Water			Certification	
Analyte	Method/Tech	Category	Туре	Effective Date
Silica as SiO2	EPA 200.7	Primary Inorganic Contaminants	NELAP	1/21/2005
Silver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Silvex (2,4,5-TP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Simazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
Sodium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
tyrene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
tyrene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Sulfate	EPA 375.4	Secondary Inorganic Contaminants	NELAP	2/13/2003
urfactants - MBAS	EPA 425.1	Secondary Inorganic Contaminants	NELAP	1/21/2005
etrachloroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
etrachloroethylene (Perchloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
hallium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
oluene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
oluene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
otal coliforms	SM 9222 B	Microbiology	NELAP	4/4/2002
otal coliforms & E. coli	SM 9223 B	Microbiology	NELAP	9/5/2002
otal haloacetic acids	EPA 552.2	Synthetic Organic Contaminants	NELAP	1/21/2005
otal trihalomethanes	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
otal trihalomethanes	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
oxaphene (Chlorinated camphene)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
ans-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
rans-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
richloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
richloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
richloroethene (Trichloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
urbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	7/17/2002
inyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
inyl chloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
ylene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
ylene (total)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
inc	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002

6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:

Utilities, Inc.

Project Name:

Wekiva

Project Number:

Report No.:

A052494

Date Sampled:

7/20/2005

Date Received:

7/20/05 13:15

Date Reported:

7/24/2005

Attention:

Kathy Sillitoe

Phone Number: 8002721919

Address:

200 Weathersfield Ave.

Altamonte Springs, FL 32714

Project Description

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

> Project Name: Wekiva

Approved By:

Myrna Santlago; Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages = (o

Analytical Report

Client: Utilities, Inc.

Report No.: A052494

Project Name: Wekiva

Date/Time Received: 7/20/05 13:15

Lab Code: A052494-01

Date/Time Sampled: 7/20/2005 9:15

Client Sample ID: 1

Shipping Method: AEL Courier

Site: EFA-1

Sampled By: Corey Sudol

Matrix: Water

Sampling Method: G

Miscellaneous Analytes

Analytes:	Dilution	Adjusted MDL	Adjusted PQL	Results	Units	Qualifier(s)	Method	Parameter Comment	Lab
Fecal Coliform (MF)	1	1.0	1.0	1	cfu/100ml		SM9222D		0

O DOH Certification # E53076 (AEL Orlando) (FL NELAC Certification)

Analytical Report

Client: Utilities, Inc.

Report No.: A052494

Project Name: Wekiva

Date/Time Received: 7/20/05 13:15

Sample Cross Reference Information

Lab Code: A052494-01 Client Sample Number: 1 Site: EFA-1

Matrix: Water

Test Description

Prep Method

Analysis Date/Time Analytical Batch ID

Analyst

Fecal Coliform (MF)

Analysis Method SM9222D

NONE

MICA-072005-FC

7/20/2005 14:35

Prep Batch ID

Prep Date/Time

If the Analytical Batch ID and Prep Batch IDis null, the analysis was not performed by AEL, and the original report from the subcontracted laboratory will be provided containing this information.

Page 3

Analytical Report

Client: Utilities, Inc.

Report No.: A052494

Project Name: Wekiva

Date/Time Received: 7/20/05 13:15

Quality Assurance Report

Method Blanks

		Miscellaneous Ar	alytes				
QCBatchID	Analyte	QC Sample Type	Method	MDL	Result	Units	Qualifier
MICA-072005-FC	Fecal Coliform (MF)	Pre Filter	SM9222D	1.0	1.0	cfu/100ml	U
MICA-072005-FC	Fecal Coliform (MF)	Post Filter	SM9222D	1.0	1.0	cfu/100ml	U

Quality Assurance Qualifiers:

J The compound was analyzed for but not detected.

Definitions:

Water matrix refers to all aqueous matrices except drinking water, including but not limited to, wastewater, ground water, surface water, aqueous wastes and leach Soil matrix refers to all non-aqueous matrices, including soils, solids, sludges, semi-solids, and non-aqueous waste samples
All results in mg/kg or % are reported in dry weight basis, unless notated otherwise. All results in mg/L are reported in wet weight basis.

MDL Method Detection Limit, without correction for dilution or moisture content
Adjusted Reporting Limit is the MDL accounting for all dilutions and moisture content cacluations.

PQL is defined to be 4 times the MDL, for all results qualified with a "i" qualifier.

Sampling Method; G=Grab, P=Pump, C=Composite

The estimated measurements of uncertainty can be provided upon request

This is the last page of the analytical report.



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Client: UTILITIES, INC. (UTL-A) Project name: WEKIVA		
Date/Time Rcvd: 7/20/05 13.15 Log-In request number: A052494		
Received by: RPG Completed by: RPG		
Cooler/Shipping Information:		
Courier: ☐ AEL ☐ Client ☐ UPS ☐ Pony Express ☐ FedEx ☐ Other (describe):		
Type: ☐ Cooler ☐ Box ☐ Other (describe) Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement		
Cooler ID 1		
Temp (°C) 3		
	Temp blank Cooler	
Town Board	IR gun	
lemp measured □ Thermometer (enter with ID): □ Thermometer (enter □ Thermometer	Thermometer (er	nter
Any discrepancies should be explained in the "Comments" section below. CHECKLIST YES 1. Were custody seals on shipping container(s) intact?	NO NA	٦
2. Were custody papers properly included with samples?		\dashv
3. Were custody papers properly filled out (ink, signed, match labels)?		7
4. Did all bottles arrive in good condition (unbroken)?		
 5. Were all bottle labels complete (sample #, date, signed, analysis, preservatives)? 6. Did the sample labels agree with the chain of custody? 		4
6. Did the sample labels agree with the chain of custody? 7. Were correct bottles used for the tests indicated? ✓		\dashv
8. Were proper sample preservation techniques indicated on the label?		1
9. Were samples received within holding times?		1
10. Were all VOA vials checked for the presence of air bubbles?	1	
11. Were there air bubbles present in the VOA vials?		_
12. Were samples in direct contact with wet ice? If "No," check one: ☐ NO ICE ☐ BLUE ICE 13. Was the cooler temperature less than 6°C?		\dashv
14. Were sample pHs checked and recorded by Sample control?		\dashv
NOTE: VOA samples are checked by laboratory analysts.		
15. Were the sample containers provided by AEL?		
16. Were samples accepted into the laboratory?17. Was it necessary to split samples into other bottles?		
	<u> </u>	
Kit ID Comments:		

CHAIN OF CUSTODY RECORD

LAR MI MADED.

CLIENT NAME	::	6 NW 67th Place, Suite 7, 0	PROJECT	NAME:	, ax (002) 507-00			BOTTL	E	\mathcal{L}	105	44	74	
3/71617	COO WEATHER			WEKN	4			SIZE	Stal	1	455 456	,	1	1
ADDRESS: 2	200 WEATHER	es FIECE ALF	P.O. NUMBI	R / PROJECT	NUMBER: 7	1-68	 کد		Ma					
ALTAIN	IUNTE SE	32701	PROJECT L	OCATION:				A R N E A Q						L
PHONE: (407) 682	1000TE SPE- - 5651	AX:	1	. Cim 1				LU						В
CONTACT:	Ton Key		SAMPLED	BY: O				SR	$ \mathcal{D} $					U
TURN AROUNI		REMARKS / SPE	CIAL INSTRU	(OL	64 Sc	1006		S D	FECAL					B
		TIEMATING / SPEC	CIAL INSTRU	TIONS:					5					R
ZÍ STANDARD								İ						
🗆 RUSH														
WW= waste water	SW=surface water	GW=ground water	DW =drinking wate	OIL A	a=air SO ≔s	soil S	L=sludge	Preserv		-				-
			9			_		1		i				
SAMPLE ID	SAMPLE	DESCRIPTION	Gr	ab SAN	/PLING	_			17		-			-
SAMPLE ID			Gr Comp	osite DATE	APLING TIME	MATRIX			//					
SAMPLE ID		E DESCRIPTION STREAM	Gr Comp	ab SAN	APLING TIME	_			<i>Y</i>					,
SAMPLE ID			Gr Comp	osite DATE	APLING TIME	MATRIX			//					,
SAMPLE ID			Gr Comp	osite DATE	APLING TIME	MATRIX			//					,
SAMPLE ID			Gr Comp	osite DATE	APLING TIME	MATRIX			//					1
SAMPLE ID			Gr Comp	osite DATE	APLING TIME	MATRIX			//					
SAMPLE ID			Gr Comp	osite DATE	APLING TIME	MATRIX			//					,
SAMPLE ID			Gr Comp	osite DATE	APLING TIME	MATRIX			//					•
	EFA-1		Gr Comp	osite DATE	APLING TIME	MATRIX			//					1
= lce H = (HCI)) S = (H ₂ SO ₄) N =	STRFAM STRFAM (HNO ₃) T = (Sodium	Gr Comp	ab SAN DATE 7/20/05	APLING TIME	MATRIX	NO. CONT		//	Receiv	red by:		Pato	
= Ice H = (HCI)	EFA-1	STREAM STREAM (HNO ₃) T = (Sodium	Gr Comp	Beli	MPLING TIME OPIN	MATRIX	Date	Time	X	Receiv	red by:	1/2		Time
= Ice H = (HCI) Shipment Dut: / / Via	$EFA-I$ S = (H_2SO_4) N = Method Sample Kit	STRFAM STRFAM (HNO ₃) T = (Sodium Cooler #	Gr Comp	Beli	MPLING TIME OPIN	MATRIX	NO. CONT	Time	X	Receiv	red by:		12/25/12	

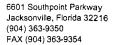
Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATION	N (to be completed by	sampler – Plea	ase type o	r print legibly)		
System Name: Little Wekiva		PW	VS I.D. #:	3 5 9	7	62
System Type (check one): Community	□Nontrans	sient Noncomn	nunity	□Transi	ent Noncor	nmunity
Address: L.HE WEKINA	DR					
		04-4-	М1	71D Code	2271	1
City: Altamoste Springs						
Phone #: 407-869-1919						
E-Mail Address: <u>S.L. Haws@ U</u>	THINKS INC	-USH . CC	2111			
SAMPLE INFORMATION (to be completed it	by sampler)					
		Location Code	e (if known): <u>MRT</u>	_	
Sample Date: 7-28-05		Sample Time	: 071	9	(M) PM	(Circle One)
Sample Location (be specific): 789 R						
Disinfectant Residual (Required when reporting	results for trihalomethan	es and haloacetic	acids):	.8 mg/L	Field	oH:
Sample Type (Check Only One)		Reason(s) f	for Samp	le (Check all that	apply)	
☑Distribution		ance (with 62-550	0) []Quarterly (Wh	ich Quarter?)
Entry Point (to Distribution)	☐Confirmation of	MCL Exceeda	nce*]Special (not fo	r compliance	with 62-550)
Plant Tap (not for compliance with 62-550)	☐Composite of M	ultiple Sites**]Violation Res	olution	
Raw (at well or intake)	☐Clearance (permi	tting)]Replacement	(of Invalidate	ed Sample)
☐Max Residence Time	Other:					
☐Ave Residence Time	Sampling Procedu	re Used or Oth	ner Comn	nents:		
☐Near First Customer						····
*See 62-550.500(6) for requireme NOTE: See 62-550.512(3) for ad for nitrate or nitrite MCL e	ditional requirements			50.550(4) for re results page for		and
Sampler's Name: Kathy Sill:	301					
Sampler's Phone #: 401-869-19	19	Sampler's Fax	x#:	107-869	- 6961	
Sampler's E-Mail Address: K.Sillitor	E @ Dtilitics	INC-USF	7. com	7		
CERTIFICATION (to be completed by s	sampler)					
1, Kathy Sillitor (Print Name)		ARE	ia m	ANAGER		1
do HEREBY CERTIFY that the above complete and correct.				` '		
Signature: Kar Solid				Date: _8	<u> </u>	-

Reporting Format 62-550.730 Effective January 1995, Revised January 2004

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

	ORY CERTIFICATION CURRENT DOH ANALY		N (to be comple	ted by lab - Please type	e or print legibly)
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Advanced Environmen		ındo	Flo	rida Certification #: E53076
Address:					on Expiration Date: 6/30/2006
Addices.	Altamonte Springs, FL				Telephone #: (407) 937-1594
-					<u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>
ANALYSIS	S INFORMATION (to be	completed by	lab		
PWS ID (f	rom page 1):	THE STREET, AND ADDRESS OF THE PROPERTY OF		Date Sam	nple(s) Received: 7/28/2005 2:35:00
Lab Assigi	ned Report Number or J	lob ID A05263	5	Sample Numb	er (From page 1) A052635
Group(s) A	Analyzed Results attach	ned for complia	nce with chapte	r 62-550, F.A.C. (check	all that apply):
!	Inorganics	Synthetic Org	ganics	Volatile Organics	Disinfection Byproducts
_	All 17	All 30		All 21	Trihalomethanes
-	Partial	All Except	Dioxin	Partial	✓ Haloacetic Acids
Σ.	Nitrate	Partial	2.07		Bromate
	Nitrite	Dioxin On	lv.	Radionuclides	Chlorite
Ĺ	_	Dioxiii Oiii	y .	Single Sample	harries .
	_ Asbestos Only			Qtrly Composite**	Secondaries
					All 14
					Partial
Were any	analyses subcontracted	? 🗹 Yes	No No		
If yes, plea	se provide DOH certific	ation number	E82574		- <u></u>
ATTACH D	OH ANALYTE SHEET	FOR EACH SU	JBCONTRACTE	D LAB	
			CERTIFI	CATION	
I, Myrna S		Laboratory Ma	anager	, , , , , , , , , , , , , , , , , , , ,	
do HEREB					et all requirements of the
National Er	nvironmental Laboratory	Accreditation	Conference (NE	LAC).	, ,
Signature:	MANUEL	But al) 	Date:	8/25/05
analysis re	provide a valid and cur sults will result in rejecti esult in notification of the	on of the repor	t, possible enfor	cement against the pub	nt Analyte Sheet for the attached blic water system for failure to sample,
** Please p	rovide radiological sam	ple dates and	locations for eac	ch quarter.	
COMPLIAN	NCE DETERMINATION	(to be comp	oleted by DEP o	r DOH)	
Sample Co	lection Info Satisfactory	∕ 🛣 Yes 🗓	No No	Sample Analysis Info	o Satisfactory: 🍙 Yes 🍱 No
Replacer	ment Sample(s) Requested	(circle or highligh	t group(s) above)	屬 Revised Report R	equested (circle or highlight group(s) above)
* Addition	al Monitoring Required	(circle or highli	ght group(s) abo	ove)	
Reason(s):	MCL(s) Exceeded		Detection	n(s)	
	Missing Analyte Sh	eet(s)		Unsatisfactory	Analysis Unsatisfactory
	Ma Other:				,,,,,,,,
Person Not	(Carlo				ate Notified:
Comments					
Date Review	wed:			Reviewing Official:	<u> </u>
JULO 1 (0410)					and the same and the same and the



A052635

7/28/2005

7/28/05 14:35

8/23/2005

Report No.:

Date Sampled:

Date Received:

Date Reported:



Client:

Utilities, Inc.

Project Name:

Little Wekiva

Project Number:

PWS ID#:

Attention:

Kathy Sillitoe

Phone Number: 8002721919

Address:

200 Weathersfield Ave.

Altamonte Springs, FL 32714

Project Description

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

> Project Name: Little Wekiva

Approved By:

Myrna Santlago, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages =

Analytical Report

Client: Utilities, Inc.

Report No.: A052635

Project Name: Little Wekiva

Date/Time Sampled: 07/28/05

Matrix: Drinking Water

Date/Time Received: 7/28/05 14:35

PWS ID#:

Client Sample ID: 1

Sampled By: Kathy Sillitoe

Site: 789 Richbee

Shipping Method: Client drop off

Sample Number: A052635-01

Disinfection Byproducts

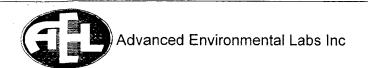
Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert.#
2450	Chloroacetic Acid		ug/L	0.81	U	E552.2	0.81	8/5/2005	14:21	E82574
2451	Dichloroacetic Acid		ug/L	5. 5		E552.2	0.56	8/5/2005	14:21	E82574
2452	Trichloroacetic Acid		ug/L	5.2		E552.2	0.60	8/5/2005	14:21	E82574
2453	Bromoacetic Acid		ug/L	0.47	i	E552.2	0.34	8/5/2005	14:21	E82574
2454	Dibromoacetic Acid		ug/L	1.8	1/120	E552.2	0.45	8/5/2005	14:21	E82574

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.

MDL Method Reporting Limit

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

U The compound was analyzed for but not detected.



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Client: UT	ILITIES, INC. (UTL-	A)		Project name	: LITTLE WEI	KIVA		
Date/Time Rcvd: 7/2	8/05	14.35	Log-	In request number	: A052635			
Received by: RP	G	·		Completed by	: RPG			
Cooler/Shipping	Information:							
		Eva	- al-	. II Other (describe	٧.			
Courier: ☐ AEL ⊠ C								
Type: ⊠ Cooler □ Bo	x □ Other (describe)						
Cooler temperature:	Identify the cooler a	nd document the	e tem	perature blank or ic	e water measu	ıremer	nt	
Cooler ID	1							
Temp (°C)	2							
Temp taken from	☐ Temp blank	☐ Temp blank		☐ Temp blank	☐ Temp blank		☐ Temp b	lank
-	⊠ Cooler ⊠ IR gun	☐ Cooler ☐ IR gun		□ Cooler □ IR gun	☐ Cooler ☐ IR gun		☐ Cooler☐ IR gun	
Temp measured with	☐ Thermometer (enter ID):	☐ Thermometer (en ID):	iter	☐ Thermometer (enter ID):	☐ Thermometer (dID):	enter		meter (enter
Other Information Any discrepancies sho			' sect	tion below.		V.E.C	NO.	.
1 Ware custody as	eals on shipping contai	CHECKLIST				YES	NO	NA ✓
	apers properly include					1	-	
	apers properly filled or		atch l	abels)?		1	 	
	rrive in good condition					1		
	abels complete (sample		analy	sis, preservatives)?		1		
	abels agree with the cl					/		
	ttles used for the tests		41	1.1.10		1		
	nple preservation technoceived within holding		on the	label?		1	-	
	ials checked for the pr		bles?			-	+	
	ubbles present in the \		01001			<u> </u>	1	1
12. Were samples in	direct contact with w	et ice? If "No," c	heck	one: 🗆 NO ICE 🗆 BI	UE ICE	1		
	emperature less than 6					1		
	is checked and recorde							1
	mples are checked by containers provided by		its.					
	cepted into the labora					1	+	
	to split samples into						1	
Kit ID	Comments:							
			-					

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando	528 South North Lake BIVG, 3	Altamonte Springs FL 32701

Contact Person: Myrna Santiago

CustomerName: Utilities, Inc. Project #: A052635

Check if Rush

904-363-9350 Fax 904-363-9354

6601 Southpoint Parkway

AEL Jax

Jacksonville, Fl 32216

Contact Person: Sean Hyde

Collector: Kathy Sillitoe

Lab Code A052635-01

Bottle Type (Pres.) 40mL Vial Amber Due Date # Bottles 7/28/2005 7:19 7/28/05 14:35 **8/11/2005** Collect Date / Time Receive Date 550 Haloacetic Acids (J)-55 Drinking Water Client Sample ID

Shipping Receiver: AEL Courje

Jacksonville Receiver:

Shipping Relinquisher: AEL Courier

Orlando Relinquisher:

Date/Time: 7/28/15 174

Date/Time: 7

Page 1 of 1

6601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589 2106 NW 67th Place, Ste. 7 • Gainesville, FL 32606 • 352.367.1500 • Fax 352.367.0050 • E82620 528 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • E53076		Advanced Environmental Laboratories,	Inc.										LAB NUM	BFR [.]			
Altamonte Springs, FL 32714 PROJECT LONDAN Altamonte Springs, FL 32714 PROJECT LOCATION PHONE 407-448-1715 FAX CONTACT: Kathy Sillitoe SAMPLED BY: K.S.III. 1-0-C TUNN AROUND TIME TUNN AROUND TIME WWW-seath water: SW-surface wa		6601 Southpoint Pkwy. • Jac 9610 Princess Palm Ave. • 1 2106 NW 67th Place, Ste. 7	cksonville, FL 32216 • 904.36 Tampa, FL 33619 • 813.630,9 • Gainesville, FL 32606 • 352	616 • Fax	813.630.43 • Fax 352.3	27 • E84589 67.0050 • E	9 E82620	• E53076					$\mathbf{A0}$	5 26	35		·
Altamonte Springs, FL 32714 PROJECT IOCATION PHONE: 407-448-1715 FAX CONTACT: Kathy Sillitoe SAMPLED BY: K.S.III. A GC TURN AFOUND TIME REMARKSSPECIAL INSTRUCTIONS WWW-words water SW-surface water CW-ground water DW-district water DW-district water DW-district water DW-district water DW-district Wa	CLIENT NAME:	Utilities Inc.	PROJECT NAME:		Litt	le Wel	kiva										
Altamonte Springs, FL 32714 PROJECT LOCATION: PROME: 407-448-1715 FAX CONTACT: Kathy Sillitoe SAMPLE DESCRIPTION Grab Comp DATE TIME TIME SAMPLE DESCRIPTION TORN ACQUIND TIME SAMPLE	ADDRESS:	200 Weathersfield Ave	P.O. NUMBER/PROJECT NUMB	BER:						40mL Vials			ı	National Control of the Control of t	1		
CONTACT: Kathy Sillitoe SAMPLED BY: K.S.III.10×C. TURN ARCUND TIME: REMARKSSPECIAL INSTRUCTIONS: WWw-waste water SW-surface water GW-ground water DW-drinking water Oil. A=air SO=soil SL=studge W T SAMPLE ID SAMPLE DESCRIPTION Grab Comp DATE TIME 1 7 8 7 R. Chibsi Dir. Q238 G Water SW-surface water GW-ground water DW-drinking water Oil. A=air SO=soil SL=studge W T MATRIX NO DATE TIME X X	Altamo	nte Springs, FL 32714	PROJECT LOCATION:			·····					•						
TRUSH WW-waste water SW-surface water GW-ground water DW-dimining water Oil. A=air SO=soil SL=studge SAMPLE SAMPLE DESCRIPTION Grab Comp DATE TIME NO COUNT 1 785 R.ch bs: Diz Q2-8 G 7/26/05 0719 WW 3 TW 3	PHONE:	407-448-1715	FAX:					·····									
TRUSH WW-waste water SW-surface water GW-ground water DW-dimining water Oil. A=air SO=soil SL=studge SAMPLE SAMPLE DESCRIPTION Grab Comp DATE TIME NO COUNT 1 785 R.ch bs: Diz Q2-8 G 7/26/05 0719 WW 3 TW 3	CONTACT:	Kathy Sillitoe	SAMPLED BY: K.S:11.	Joe					꼴								
TRUSH WW-waste water SW-surface water GW-ground water DW-dimining water Oil. A=air SO=soil SL=studge SAMPLE SAMPLE DESCRIPTION Grab Comp DATE TIME NO COUNT 1 785 R.ch bs: Diz Q2-8 G 7/26/05 0719 WW 3 TW 3		TURN AROUND TIME:			ECIAL INSTRI	JCTIONS:			9					ļ			
TRUSH WW-waste water SW-surface water GW-ground water DW-dimining water Oil. A=air SO=soil SL=studge SAMPLE SAMPLE DESCRIPTION Grab Comp DATE TIME NO COUNT 1 785 R.ch bs: Diz Q2-8 G 7/26/05 0719 WW 3 TW 3	STANDARD								RE								8
SAMPLE ID SAMPLE DESCRIPTION Grab Comp DATE TIME AMATRIX NO COUNT TOWN TOWN TOWN TOWN TOWN TOWN TOWN T	ł								<u>S</u>						Ì		Z
SAMPLE ID SAMPLE DESCRIPTION Grab Comp DATE TIME AMATRIX NO COUNT TOWN TOWN TOWN TOWN TOWN TOWN TOWN T			1						}	-							I≥
SAMPLE ID SAMPLE DESCRIPTION Grab Comp DATE TIME AMATRIX NO COUNT TOWN TOWN TOWN TOWN TOWN TOWN TOWN T									I₹								BE
ID SAMPLE DESCRIPTION Comp DATE TIME MATRIX COUNT 1 789 R.chbri Dr. Cl3-8 G 7/26/05 0719 WW 3 X		ater SW=surface water GW=ground	water DW=drinking water	1			SO=soil	SL=sludge		<u> </u>		<u> </u>			-	<u> </u>	22
1 789 Richbri Dir Cl3-8 G 7/28/05 0719 WW 3	1	SAMPLE DESC	RIPTION			· · · · · · · · · · · · · · · · · · ·	MATRIX		Preserv	NH4CI	2				<u> </u>	<u> </u>	
					 		-		a distance di					14.54.543.27X		<u> </u>	1
	1	789 Richbe	E OR C13=18	G	128/05	0719	WW	3		Х							ļ
							1 1/10										T
	<u> </u>				ļ	ļ											
						<u> </u>	<u> </u>					 				 	+
				<u> </u>	<u> </u>	<u> </u>											
		- -											i				
	<u> </u>				<u> </u>			 									
	1																

H=(HCI) I-Ice Relinquish by: S=(H2SO4 1/28/05 eceived by: N=(HNO3) T=(Sodium Thiosulfate) Date Time Time Shipment Method 435 1435 Sample Kit Cooler# RВ D/T 2 ΑB D/T 3 Via: Trip Bl. 4 Yes No Received on Ice QC | sent received

revised 8/01







Laboratory Scope of Accreditation

Page 1

of 27

THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

S1410 2511-

State Laboratory ID: E82574

EPA Lab Code:

FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway

Jacksonville, FL 32216

Matrix: Drinking Water Analyte	Method/Tech	Category	Certification Type	Effective Date
1,1,1-Trichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
1,1,1-Trichloroethane	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
1,1,2-Trichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
1,1,2-Trichloroethane	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
1,1-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
1,1-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
1,2,4-Trichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
1,2,4-Trichlorobenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
,2-Dibromo-3-chloropropane (DBCP)	EPA 504.1	Synthetic Organic Contaminants	NELAP	4/4/2002
1,2-Dibromoethane (EDB, Ethylene dibromide)	EPA 504.1	Synthetic Organic Contaminants	NELAP	4/4/2002
1,2-Dichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
1,2-Dichlorobenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
,2-Dichloroethane	EPA 502,2	Other Regulated Contaminants	NELAP	4/4/2002
,2-Dichloroethane	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
,2-Dichloropropane	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
,2-Dichloropropane	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
,4-Dichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
,4-Dichlorobenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
,4-D	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Machlor	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
Alkalinity as CaCO3	SM 2320 B	Primary Inorganic Contaminants	NELAP	1/21/2005
Aluminum	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Antimony	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
Antimony	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Arsenic	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Atrazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
Barium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Benzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Benzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Benzo(a)pyrene	EPA 525.2	Synthetic Organic Contaminants	NELAP	1/21/2005
Beryllium	EPA 200.7	Primary Inorganic Contaminants	NELAP	· 4/4/2002
is(2-Ethylhexyl) phthalate (DEHP)	EPA 525.2	Synthetic Organic Contaminants	NELAP	1/21/2005
Bromoacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
Bromochloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
Bromodichloro methane	EPA 502.2	Other Regulated Contaminants, Group II Unregulated Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 06/29/2005-E82574







Laboratory Scope of Accreditation

Page 2 of 27

THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code:

FL00949

(904) 363-9350

E82574 Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216

Bromodichloromethane	Matrix: Drinking Water			C ('C ('	
Bromoform EPA 502.2 Other Regulated Contaminants, Group II Unregulated Contaminants NELAP 4/4/200 Contaminants Bromoform EPA 524.2 Group II Unregulated Contaminants NELAP 4/4/200 Contaminants Cadmium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Control Contaminants Carbor tetrachloride EPA 501.1 Synthetic Organic Contaminants NELAP 4/4/200 Control Contaminants Carbon tetrachloride EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Control Contaminants Carbon tetrachloride EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Control Contaminants Chloridae (tech) EPA 508 Synthetic Organic Contaminants NELAP 1/21/200 Control Contaminants Chloridae EPA 508.2 Synthetic Organic Contaminants NELAP 1/21/200 Control Contaminants Chloridae EPA 508.2 Synthetic Organic Contaminants NELAP 1/21/200 Control Contaminants Chloridae EPA 502.2 Group I Unregulated Contaminants NELAP 4/200 Contaminants Chloridae EPA 524.2 Other Regulated Conta	Analyte	Method/Tech	Category		Effective Date
Contaminants Croup 1 Unregulated Contaminants NELAP 1/21/20 Cadmium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Cadmium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Carbofuran (Furaden) EPA 201.1 Synthetic Organic Contaminants NELAP 4/4/200 Carbon tetrachloride EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Carbon tetrachloride EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Carbon tetrachloride EPA 54.2 Other Regulated Contaminants NELAP 1/21/200 Carbon tetrachloride EPA 54.2 Other Regulated Contaminants NELAP 1/21/200 Carbon tetrachloride EPA 52.3 Secondary Inorganic Contaminants NELAP 1/21/200 Chloride EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Chloride EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Chlorobenzane EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Chlorobenzane EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Chloroform EPA 200.7 Primary Inorganic Contaminants NELAP 1/21/200 Cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Contaminants NELAP 1/21/200 Contaminants NELAP 1/21/200 Contaminants NELAP 1/21/200 Contaminants NELAP 1/2	Bromodichloromethane	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
Cadmium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Calcium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Carbor tetrachloride EPA 531.1 Synthetic Organic Contaminants NELAP 4/4/200 Carbon tetrachloride EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Carbon tetrachloride EPA 508.2 Other Regulated Contaminants NELAP 1/21/20 Chloridae (tech.) EPA 308 Synthetic Organic Contaminants NELAP 1/21/20 Chloride EPA 325.3 Secondary Inorganic Contaminants NELAP 1/21/20 Chloride EPA 352.2 Group I Unregulated Contaminants NELAP 1/21/20 Chlorobenzene EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chloroform EPA 524.2 Other Regulated Contaminants NELAP 1/21/20	Bromoform	EPA 502.2	Contaminants, Group II Unregulated	NELAP	4/4/2002
Calcium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Carbofuran (Furaden) EPA 531.1 Synthetic Organic Contaminants NELAP 4/4/200 Carbon tetrachloride EPA 524.2 Other Regulated Contaminants NELAP 4/4/200 Carbon tetrachloride EPA 508 Synthetic Organic Contaminants NELAP 1/21/20 Chloride EPA 508 Synthetic Organic Contaminants NELAP 3/24/20 Chloride EPA 325.3 Secondary Inorganic Contaminants NELAP 1/21/20 Chloride SM 4500 Cl- E Secondary Inorganic Contaminants NELAP 1/21/20 Chloride EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/20 Chlorobenzene EPA 552.2 Other Regulated Contaminants NELAP 1/21/20 Chlorobenzene EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chloroform EPA 524.2 Group II Unregulated Contaminants NELAP 1	Bromoform	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
Carboforran (Furaden) EPA 531.1 Synthetic Organic Contaminants NELAP 4/19/20 Carbon tetrachloride EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Carbon tetrachloride EPA 524.2 Other Regulated Contaminants NELAP 1/21/20 Chloridae (tech.) EPA 508 Synthetic Organic Contaminants NELAP 3/24/20 Chloride EPA 325.3 Secondary Inorganic Contaminants NELAP 1/21/20 Chloride SM 4500 CI-E Secondary Inorganic Contaminants NELAP 2/13/20 Chloride SM 4500 CI-E Secondary Inorganic Contaminants NELAP 2/13/20 Chlorobenzene EPA 502.2 Group II Unregulated Contaminants NELAP 1/21/20 Chlorobenzene EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chloroform EPA 524.2 Group II Unregulated Contaminants NELAP 1/21/20 Chloroform EPA 524.2 Group II Unregulated Contaminants N	Cadmium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Carbon tetrachloride EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Carbon tetrachloride EPA 524.2 Other Regulated Contaminants NELAP 1/21/20 Chloridane (tech) EPA 508 Synthetic Organic Contaminants NELAP 3/24/20 Chloride EPA 325.3 Secondary Inorganic Contaminants NELAP 1/21/20 Chloride SM 4500 CI-E Secondary Inorganic Contaminants NELAP 2/13/20 Chlorobenzene EPA 502.2 Group I Unregulated Contaminants NELAP 1/21/20 Chlorobenzene EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chromium EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Cis-1,2-Dichloroethylene EPA 524.2 Other Regulated Contaminants NELAP	Calcium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Carbon tetrachloride EPA 524.2 Other Regulated Contaminants NELAP 1/21/20 Chlordane (tech.) EPA 508 Synthetic Organic Contaminants NELAP 3/24/20 Chloride EPA 325.3 Secondary Inorganic Contaminants NELAP 1/21/20 Chloride SM 4500 Cl- E Secondary Inorganic Contaminants NELAP 2/13/20 Chloroacetic acid EPA 502.2 Group I Unregulated Contaminants NELAP 1/21/20 Chlorobenzene EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chromium EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chromium EPA 502.2 Other Regulated Contaminants NELAP 1/21/20	Carbofuran (Furaden)	EPA 531.1	Synthetic Organic Contaminants	NELAP	4/19/2005
Chlordane (tech.) EPA 508 Synthetic Organic Contaminants NELAP 3/24/20 Chloride EPA 325.3 Secondary Inorganic Contaminants NELAP 1/21/20 Chloride SM 4500 Cl- E Secondary Inorganic Contaminants NELAP 2/13/20 Chloroacetic acid EPA 552.2 Group I Urregulated Contaminants NELAP 1/21/20 Chlorobenzene EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chromium EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Color EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 <t< td=""><td>Carbon tetrachloride</td><td>EPA 502.2</td><td>Other Regulated Contaminants</td><td>NELAP</td><td>4/4/2002</td></t<>	Carbon tetrachloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Chloride EPA 325.3 Secondary Inorganic Contaminants NELAP 1/21/20 Chloride SM 4500 Cl- E Secondary Inorganic Contaminants NELAP 2/13/20 Chloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/20 Chlorobenzene EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Chloroform EPA 524.2 Group II Unregulated Contaminants NELAP 1/21/20 Chromium EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Color EPA 502.2 Other Regulated Contaminants NELAP 1/21/20 Color EPA 511.3 Synthetic Organic Contaminants NELAP 1/21/20 <td>Carbon tetrachloride</td> <td>EPA 524.2</td> <td>Other Regulated Contaminants</td> <td>NELAP</td> <td>1/21/2005</td>	Carbon tetrachloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Chloride SM 4500 Cl- E Secondary Inorganic Contaminants NELAP 2/13/20 Chloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/20 Chlorobenzene EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Chloroform EPA 524.2 Other Regulated Contaminants NELAP 4/4/200 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Chromium EPA 502.2 Group II Unregulated Contaminants NELAP 4/4/200 Chromium EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Color EPA 510.2 Secondary Inorganic Contaminants NELAP 4/4/200 Copper EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Copper EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/200 <td>Chlordane (tech.)</td> <td>EPA 508</td> <td>Synthetic Organic Contaminants</td> <td>NELAP</td> <td>3/24/2005</td>	Chlordane (tech.)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Chloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Chlorobenzene EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Chlorobenzene EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Chromium EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Chromium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 cis-1,2-Dichloroethylene EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Color EPA 110.2 Secondary Inorganic Contaminants NELAP 1/21/200 Copper EPA 200.7 Primary Inorganic Contaminants NELAP 1/21/200 Copper EPA 500.7 Primary Inorganic Contaminants NELAP 1/21/200 Copper EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/200 Dic-othylhexyl)adipate EPA 525.2 Synthetic Organic Contaminants NELAP 1/21/200 Dicomochloromethane EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Contaminants, Group II Unregulated Contaminants NELAP 1/21/200 Contaminants, Group II Unregulated Contaminants NELAP 1/21/200 Contaminants, Group II Unregulated Contaminants NELAP 1/21/200 Contaminants NEL	Chloride	EPA 325.3	Secondary Inorganic Contaminants	NELAP	1/21/2005
Chlorobenzene EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Chlorobenzene EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Chloroform EPA 524.2 Group II Unregulated Contaminants NELAP 1/21/200 Chromium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Color EPA 510.2 Secondary Inorganic Contaminants NELAP 1/21/200 Color EPA 110.2 Secondary Inorganic Contaminants NELAP 4/4/200 Copper EPA 200.7 Primary Inorganic Contaminants NELAP 1/21/200 Di(2-ethylhexyl)adipae EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/200 Di(2-ethylhexyl)adipae EPA 522.2 Synthetic Organic Contaminants NELAP<	Chloride	SM 4500 CI- E	Secondary Inorganic Contaminants	NELAP	2/13/2003
Chlorobenzene EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Chloroform EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Chromium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 cis-1,2-Dichloroethylene EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Color EPA 110.2 Secondary Inorganic Contaminants NELAP 1/21/200 Copper EPA 200.7 Primary Inorganic Contaminants NELAP 1/21/200 Copper EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Contaminants Dalapon EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/200 Di(2-ethylhexyl)adipate EPA 525.2 Synthetic Organic Contaminants NELAP 1/21/200 Dibromoacetic acid EPA 525.2 Group I Unregulated Contaminants Dibromochloromethane EPA 524.2 Group II Unregulated Contaminants Dibromochloromethane EPA 515.3 Group II Unregulated Contaminants NELAP 1/21/200 Dichloromethane EPA 515.3 Group II Unregulated Contaminants NELAP 1/21/200 Dichloromethane EPA 525.2 Group I Unregulated Contaminants NELAP 1/21/200 Dichloromethane EPA 525.2 Group I Unregulated Contaminants NELAP 1/21/200 Dichloromethane EPA 525.2 Group I Unregulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 522.2 Other Regulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	Chloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
Chloroform EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Contaminants Group II Unregulated Contaminants NELAP 1/21/200 Chromium EPA 524.2 Group II Unregulated Contaminants NELAP 1/21/200 Chromium EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 cis-1,2-Dichloroethylene EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Color EPA 110.2 Secondary Inorganic Contaminants NELAP 1/21/200 Copper EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Contaminants, Secondary Inorganic Contaminants NELAP 1/21/200 Contaminants NELA	Chlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Contaminants, Group II Unregulated Contaminants Chloroform EPA 524.2 Group II Unregulated Contaminants NELAP 1/21/200 Chromium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Color EPA 110.2 Secondary Inorganic Contaminants NELAP 1/21/200 Copper EPA 200.7 Primary Inorganic Contaminants NELAP 1/21/200 Copper EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Contaminants, Secondary Inorganic Contaminants, Secondary Inorganic Contaminants Dilapon EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/200 Dibromochloromethane EPA 525.2 Synthetic Organic Contaminants NELAP 1/21/200 Dibromochloromethane EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 NELAP 1/21/200 Dibromochloromethane EPA 524.2 Group I Unregulated Contaminants NELAP 1/21/200 Dibromochloromethane EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Dibromochloromethane EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Dibromochloromethane EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200 Other Regulated Contaminants NELAP 1/21/200	Chlorobenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Chromium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Cos-1,2-Dichloroethylene EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Color EPA 110.2 Secondary Inorganic Contaminants NELAP 2/13/200 Copper EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Contaminants, Secondary Inorganic Contaminants NELAP 1/21/200 Contaminants Secondary Inorganic Contaminants NELAP 1/21/200 Dichoromocacetic acid EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/200 Dibromochloromethane EPA 525.2 Group I Unregulated Contaminants NELAP 1/21/200 Contaminants Dibromochloromethane EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Dichoromochloromethane EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Dichoromochloromethane EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Dichoromochloromethane EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Dichoromochloromethane EPA 524.2 Group I Unregulated Contaminants NELAP 1/21/200 Dichoromochloromethane EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Dichoromochloromethane (DCM, Methylene chloride) EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Dichoromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Dichoromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Dichoromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Dichoromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	Chloroform	EPA 502.2	Contaminants, Group II Unregulated	NELAP	4/4/2002
cis-1,2-Dichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 cis-1,2-Dichloroethylene EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Color EPA 110.2 Secondary Inorganic Contaminants NELAP 2/13/200 Copper EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Contaminants Secondary Inorganic Contaminants NELAP 1/21/200 Contaminants Secondary Inorganic Contaminants NELAP 1/21/200 Contaminants NELAP 1/21/200 Contaminants NELAP 1/21/200 Didromocactic acid EPA 525.2 Synthetic Organic Contaminants NELAP 1/21/200 Dibromocactic acid EPA 502.2 Group I Unregulated Contaminants NELAP 1/21/200 Contaminants NELAP 1/21/200 Contaminants NELAP 1/21/200 Contaminants Group II Unregulated Contaminants NELAP 1/21/200	Chloroform	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
Color EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Copper EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Contaminants, Secondary Inorganic Contaminants NELAP 1/21/200 Contaminants, Secondary Inorganic Contaminants NELAP 1/21/200 Contaminants Synthetic Organic Contaminants NELAP 1/21/200 Di(2-ethylhexyl)adipate EPA 525.2 Synthetic Organic Contaminants NELAP 1/21/200 Dibromoacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Dibromochloromethane EPA 502.2 Other Regulated NELAP 4/4/200 Contaminants, Group II Unregulated Contaminants NELAP 1/21/200 Contaminants Dibromochloromethane EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Dicamba EPA 515.3 Group II Unregulated Contaminants NELAP 1/21/200 Dichloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Dichloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	Chromium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Color EPA 110.2 Secondary Inorganic Contaminants NELAP 2/13/200 Copper EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Contaminants, Secondary Inorganic Contaminants NELAP 1/21/200 Dalapon EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/200 Di(2-ethylhexyl)adipate EPA 525.2 Synthetic Organic Contaminants NELAP 1/21/200 Dibromoacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Dibromochloromethane EPA 502.2 Other Regulated NELAP 4/4/200 Dibromochloromethane EPA 524.2 Group II Unregulated Contaminants NELAP 1/21/200 Dicamba EPA 515.3 Group II Unregulated Contaminants NELAP 1/21/200 Dichloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Dichloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	cis-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Copper EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/200 Dalapon EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/200 Di(2-ethylhexyl)adipate EPA 525.2 Synthetic Organic Contaminants NELAP 1/21/200 Dibromoacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Dibromochloromethane EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Dibromochloromethane EPA 524.2 Group II Unregulated Contaminants NELAP 1/21/200 Dicamba EPA 515.3 Group II Unregulated Contaminants NELAP 1/21/200 Dicamba EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Dichloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	cis-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Contaminants, Secondary Inorganic Contaminants Dalapon EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/200 Di(2-ethylhexyl)adipate EPA 525.2 Synthetic Organic Contaminants NELAP 1/21/200 Dibromoacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Contaminants, Group II Unregulated Contaminants Dibromochloromethane EPA 524.2 Group II Unregulated Contaminants NELAP 1/21/200 Contaminants Dicamba EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Dichloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Dichloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 502.2 Other Regulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 NELAP 1/21/200 NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	Color	EPA 110.2	Secondary Inorganic Contaminants	NELAP	2/13/2003
Di(2-ethylhexyl)adipate EPA 525.2 Synthetic Organic Contaminants NELAP 1/21/200 Dibromoacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Dibromochloromethane EPA 502.2 Other Regulated Contaminants Dibromochloromethane EPA 524.2 Group II Unregulated Contaminants Dicamba EPA 515.3 Group II Unregulated Contaminants NELAP 1/21/200 Dicamba EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Dichloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 3/24/200 Dichloromethane (DCM, Methylene chloride) EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	Copper	EPA 200.7	Contaminants, Secondary Inorganic	NELAP	4/4/2002
Dibromoacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Dibromochloromethane EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Dibromochloromethane EPA 524.2 Group II Unregulated Contaminants NELAP 1/21/200 Dicamba EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Dichloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	Dalapon	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Dibromochloromethane EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Dicamba EPA 515.3 Group II Unregulated Contaminants NELAP 1/21/200 Dichloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 3/24/200 Dichloromethane (DCM, Methylene chloride) EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	Di(2-ethylhexyl)adipate	EPA 525.2	Synthetic Organic Contaminants	NELAP	1/21/2005
Contaminants, Group II Unregulated Contaminants Dibromochloromethane EPA 524.2 Group II Unregulated Contaminants NELAP 1/21/200 Dicamba EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Group I Unregulated Contaminants NELAP 3/24/200 Dichloromethane (DCM, Methylene chloride) EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	Dibromoacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
Dicamba EPA 515.3 Group I Unregulated Contaminants NELAP 1/21/200 Dichloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 3/24/200 Dichloromethane (DCM, Methylene chloride) EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	Dibromochloromethane	EPA 502.2	Contaminants, Group II Unregulated	NELAP	4/4/2002
Dichloroacetic acid EPA 552.2 Group I Unregulated Contaminants NELAP 3/24/200 Dichloromethane (DCM, Methylene chloride) EPA 502.2 Other Regulated Contaminants NELAP 4/4/200 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	Dibromochloromethane	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
Dichloromethane (DCM, Methylene chloride) EPA 502.2 Other Regulated Contaminants NELAP 4/4/2000 Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	Dicamba	EPA 515.3	Group I Unregulated Contaminants	NELAP	1/21/2005
Dichloromethane (DCM, Methylene chloride) EPA 524.2 Other Regulated Contaminants NELAP 1/21/200	Dichloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	3/24/2005
	Dichloromethane (DCM, Methylene chloride)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
O'control (Accepted to the Control of The Control o	Dichloromethane (DCM, Methylene chloride)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
	Dinoseb (2-sec-butyl-4,6-dinitrophenol, DNBP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Diquat EPA 549.2 Synthetic Organic Contaminants NELAP 4/19/200	Diquat	EPA 549.2	Synthetic Organic Contaminants	NELAP	4/19/2005

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 06/29/2005-E82574







Laboratory Scope of Accreditation

Page 3 of 27

THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code:

FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc.

6601 Southpoint Parkway

Jacksonville, FL 32216

Matrix: Drinking Water			Certification	
Analyte	Method/Tech	Category	Type	Effective Date
Endothall	EPA 548.1	Synthetic Organic Contaminants	NELAP	1/21/2005
Endrin	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Ethylbenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Ethylbenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
gamma-BHC (Lindane, gamma-Hexachlorocyclohexane)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heptachlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heptachlor epoxide	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heterotrophic plate count	SM 9215 B	Microbiology	NELAP	1/21/2005
Hexachlorobenzene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Hexachlorocyclopentadiene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Iron	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Lead	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
Lead	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Magnesium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Manganese	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Mercury	EPA 245.1	Primary Inorganic Contaminants	NELAP	4/4/2002
Mercury	SM 3112 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Methoxychlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Nickel	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Nitrate	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Nitrate-nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Nitrite as N	SM 4500-NO2 B	Primary Inorganic Contaminants	NELAP	1/21/2005
Odor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	2/13/2003
Orthophosphate as P	EPA 365.1	Primary Inorganic Contaminants	NELAP	2/13/2003
Orthophosphate as P	SM 4500-P E	Primary Inorganic Contaminants	NELAP	1/21/2005
Oxamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	4/19/2005
PCBs	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Pentachlorophenol	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Н	EPA 150.1	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	NELAP	4/4/2002
Picloram	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Potassium	EPA 200.7	Secondary Inorganic Contaminants	NELAP	1/21/2005
Residue-filterable (TDS)	EPA 160.1	Secondary Inorganic Contaminants	NELAP	4/4/2002
Selenium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/17/2002
Selenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 06/29/2005-E82574







Laboratory Scope of Accreditation

Page 4 of 27

THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code:

FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc.

6601 Southpoint Parkway Jacksonville, FL 32216

Matrix: Drinking Water			Certification			
Analyte	Method/Tech	Category	Type	Effective Date		
Silica as SiO2	EPA 200.7	Primary Inorganic Contaminants	NELAP	1/21/2005		
Silver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002		
Silvex (2,4,5-TP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005		
Simazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005		
Sodium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002		
Styrene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002		
Styrene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005		
Sulfate	EPA 375.4	Secondary Inorganic Contaminants	NELAP	2/13/2003		
Surfactants - MBAS	EPA 425.1	Secondary Inorganic Contaminants	NELAP	1/21/2005		
Tetrachloroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002		
Tetrachloroethylene (Perchloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005		
Thailium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002		
Toluene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002		
Coluene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005		
Total coliforms	SM 9222 B	Microbiology	NELAP	4/4/2002		
Total coliforms & E. coli	SM 9223 B	Microbiology	NELAP	9/5/2002		
Total haloacetic acids	EPA 552.2	Synthetic Organic Contaminants	NELAP	1/21/2005		
Total trihalomethanes	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002		
Total trihalomethanes	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005		
Toxaphene (Chlorinated camphene)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005		
rans-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002		
rans-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005		
Trichloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005		
richloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002		
Trichloroethene (Trichloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005		
Curbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	7/17/2002		
inyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002		
/inyl chloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005		
(ylene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002		
Kylene (total)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005		
Zinc	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002		

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 E-Mail: uif@iag net

June 15, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. Orlando, Fl. 32803

Re: Annual Nitrate and Nitrite Analysis, 2005

Chapter 62-550 FAC Little Wekiva PWS ID# 3590762

Dear Mr. Morrison:

Enclosed please find the results of samples taken June 2, 2005, for the above referenced analysis and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 234.

Sincerely,

UTILITIES, INC. OF FLORIDA

Kathy Sillitoe

Area Manager Manager

Enclosure

EC:

Patrick C. Flynn, Regional Manager, UIOF Scotty L. Haws, Assistant Operations Manager, UIOF

Page 1 of 1 Operations:600:606:3: 2:2005:Ann.NO2&NO3.2005.Little Wekiva

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by sampler – Please type or print legibly)
System Name: <u>Little We</u>	KIVA PWS 1.D. #: 3 5 9 0 7 6 2
System Type (check one): Community	✓ ☐ Nontransient Noncommunity ☐ Transient Noncommunity
Address: Little WEKINA O	R
City: Altamoute Springs	State: <u>५</u> \ ZIP Code: <u>3271</u>
Phone #: 407-869-1919	Fax#: 407-869-6961
E-Mail Address:	
SAMPLE INFORMATION (to be completed	by sampler)
Sample Number: <u>A051884</u>	D / Location Code (if known):
Sample Date: 6/2/05	Sample Time: SCC AM PM (Circle One)
	HIE WEKINA WATER PLANT
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids): mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
Distribution	Routine Compliance (with 62-550) Quarterly (Which Quarter?
Entry Point (to Distribution)	☐Confirmation of MCL Exceedance* ☐Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	☐Composite of Multiple Sites** ☐Violation Resolution
Raw (at well or Intake)	☐Clearance (permitting) ☐Replacement (of invalidated Sample)
☐Max Residence Time	Other:
☐Ave Residence Time	Sampling Procedure Used or Other Comments:
☐Near First Customer	
*See 62-550.500(6) for requireme NOTE: See 62-550.512(3) for ad for nitrate or nitrite MCL e	Iditional requirements attach a results page for each site.
Sampler's Name: TERRY S:11:4	+0E
Sampler's Phone #: 407-869-19	119 Sampler's Fax #: 407-869-6961
Sampler's E-Mail Address:	
CERTIFICATION (to be completed by s	sampler)
1 9:000 11/6/1/2	00000
(Print Name)	Print Title)
	ve public water system and sample collection information is
complete and correct.	
Signature: July follower	Date: <u>4/14/05</u>

Reporting Format 62-550.730 Effective January 1995, Revised January 2004 Page 1 of &

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

LABORATORY CERTIFICATION INFORMATION (to be completed by lab - Please type or print legibly) ATTACH CURRENT DOH ANALYTE SHEET* LabName: Advanced Environmental Labs - Orlando Florida Certification #: E53076 528 S. North Lake Blvd., Suite 1016 Certification Expiration Date: 6/30/2005 Altamonte Springs, FL 32701 Telephone #: (407) 937-1594 ANALYSIS INFORMATION (to be completed by lab PWS ID (from page 1): Date Sample(s) Received: 6/2/2005 11:25:00 Lab Assigned Report Number or Job ID A051884 Sample Number (From page 1) A051884-01 Group(s) Analyzed Results attached for compliance with chapter 62-550, F.A.C. (check all that apply): Inorganics Synthetic Organics Volatile Organics Disinfection Byproducts All 17 ☐ All 30 All 21 Trihalomethanes All Except Dioxin Partial Partial Haloacetic Acids ✓ Nitrate Partial Bromate Radionuclides ✓ Nitrite Dioxin Only ☐ Chlorite Single Sample Asbestos Only Secondaries Qtrly Composite** ☐ All 14 Partial Were any analyses subcontracted? If yes, please provide DOH certification number E82574 ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB CERTIFICATION I, Myrna Santiago , Laboratory Manager (Print Name) do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC). Signature: * Failure to provide d valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the report, possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory Services. ** Please provide radiological sample dates and locations for each quarter. COMPLIANCE DETERMINATION (to be completed by DEP or DOH) Sample Collection Info Satisfactory Yes No Sample Analysis Info Satisfactory: Yes Replacement Sample(s) Requested (circle or highlight group(s) above) Revised Report Requested (circle or highlight group(s) above) Additional Monitoring Required (circle or highlight group(s) above) Reason(s): MCL(s) Exceeded Detection(s) Incomplete Report Missing Analyte Sheet(s) Location Unsatisfactory Analysis Unsatisfactory Other: Person Notified: Date Notified: Comments Date Reviewed: DEP/DOH Reviewing Official:



6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:

Utilities, Inc.

Report No.:

A051884

Project Name:

Little Wekiva

Date Sampled:

Date Reported:

6/2/2005

Project Number:

Date Received:

6/2/05 11:25 6/9/2005

PWS ID#:

Attention:

Kathy Sillitoe

Phone Number: 8002721919

Address:

200 Weathersfield Ave.

Altamonte Springs, FL 32714

Project Description

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

> Project Name: Little Wekiva

Approved By:

Myrna Santiago, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages =

Analytical Report

Client: Utilities, Inc.

Report No.: A051884

Project Name: Little Wekiva

Date/Time Sampled: 06/02/05 8:00

Matrix: Drinking Water

Date/Time Received: 6/2/05 11:25

PWS ID#:

Client Sample ID: 1

Site: Point of Entry

Sampled By: Terry Silhitoe

Sample Number: A051884-01

Shipping Method: Client drop off

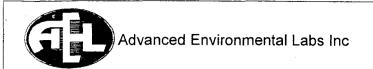
Inorganic Contaminants

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
1040	Nitrate (as N)	10	mg/L	0.42		SM4500NO3-F	0.014	6/3/2005	13:57	E82574
1041	Nitrite (as N)	1.0	mg/L	0.013	U	SM4500NO3-F	0.013	6/3/2005	13:57	E82574

U The compound was analyzed for but not detected.

MDL Method Reporting Limit

For all Results qualified with an I, the PQL is defined to be 4 times the MDL



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Date/Time Rcvd: 6/2/2005 11.25 Log-In request number: A051884	Log-In request number: A051884								
Received by: BDM Completed by: BDM	Completed by: BDM								
Cooler/Shipping Information:									
Courier: ☐ AEL ☐ Client ☐ UPS ☐ Pony Express ☐ FedEx ☐ Other (describe):									
Type: ⊠ Cooler □ Box □ Other (describe)									
Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement									
Cooler ID 1									
☐ Temp blank ☐ Temp blank ☐ Temp blank ☐ Temp blank ☐ Temp blank									
Temp taken from ☐ Cooler ☐ Cooler ☐ Cooler ☐ Cooler ☐ Cooler ☐ Cooler									
Temp measured ☐ IR gun ☐ IR gun ☐ IR gun ☐ IR gun ☐ IR gun ☐ IR gun ☐ Thermometer (enter ☐ T	(enter								
with ID): ID): ID):	(•								
Any discrepancies should be explained in the "Comments" section below.									
CHECKLIST YES NO N.									
1. Were custody seals on shipping container(s) intact?	_								
2. Were custody papers properly included with samples?3. Were custody papers properly filled out (ink, signed, match labels)?	\dashv								
4. Did all bottles arrive in good condition (unbroken)?									
5. Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	\dashv								
6. Did the sample labels agree with the chain of custody?	\dashv								
7. Were correct bottles used for the tests indicated?									
8. Were proper sample preservation techniques indicated on the label?									
9. Were samples received within holding times?									
10. Were all VOA vials checked for the presence of air bubbles?	_								
11. Were there air bubbles present in the VOA vials? 12. Were samples in direct contact with wet ice? If "No," check one: □ NO ICE □ BLUE ICE	_								
12. Were samples in direct contact with wet ice? If "No," check one: □ NO ICE □ BLUE ICE 13. Was the cooler temperature less than 6°C?									
14. Were sample pHs checked and recorded by Sample control?	\dashv								
NOTE: VOA samples are checked by laboratory analysts.									
15. Were the sample containers provided by AEL?									
16. Were samples accepted into the laboratory? ✓									
17. Was it necessary to split samples into other bottles? ✓									
Kit ID Comments:									



Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myma Santiago

Project #: A051884 CustomerName: Utilities, Inc. Collector: Terry Silhitoe AEL Jax 6601 Southpoint Parkway Jacksonville, FI 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

Check i	f Rush

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)
A051884-01	1	Nitrate (J)-DW	Drinking Water	6/2/2005	8:00	6/2/05 11:25	6/3/2005		250mL Poly
A051884-01	1	Nitrite (J)-DW	Drinking Water	6/2/2005	8:00	6/2/05 11:25	6/3/2005		250mL Poly

Gainesville Relinquisher:

Shipping Relinquisher: AEL Courier

Shipping Receiver: AEL Ceurie

Jacksonville Receiver:



Advanced

Environmental Laboratories, Inc.

6601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589

2106 NW 67th Place, Ste. 7 • Gainesville, FL 32606 • 352.367.1500 • Fax 352.367.0050 • E82620 528 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597• E53076

A051884

		s. 1010 Akamonic Springs, 1	2 02.01	01.001.100	7 T GIX 10	7.007.1007							4			,
CLIENT NAME:	Utilities Inc.	PROJECT NAME: Little Wekiv				iva		BOTTLE SIZE & TYPE	뒽				Week.	1		
ADDRESS:	200 Weathersfield Ave	P.O. NUMBER/PROJECT NUMB	O. NUMBER/PROJECT NUMBER:						250 mL							
Altamo	nte Springs, FL 32714	PROJECT LOCATION: 705	65	THE	Mer	va l	UTP]
PHONE:	407-448-1715	FAX:														
CONTACT:	Kathy Silitoe	SAMPLED BY:) SAME SI	APLED BY: 1801 SUITHER R17249													
	TURN AROUND TIME:	REI	MARKS/SPEC	IAL INSTRU	CTIONS:			O							Į	
STANDARD								RE	7							B
RUSH								ANALYSIS REQUIRED	NO3/NO2							AB NUMBER
								%	3/						İ	Z
				ŵ,				¥	Ö						İ	[품]
WW=waste wa	ater SW=surface water GW=ground	d water DW=drinking water	(OIL	A≃air	SO≃soil	SL≃sludge	₹	Z							ᄁ
SAMPLE	SAMPLE DESC	CRIPTION	Grab	SAM	PLING	MATRIX	NO.	Preserv	1							
ID			Comp	DATE	TIME		COUNT	4.25	ver fam		(mercian (201)		200	Same Control		r 8 (6. 10 t
1	BE NO3/NOR Li	The waking	G	A/05	0800	DW	1		Х							-61
				,				34								
								22742								
															1	
																-
								in the								
												_				
																-
l-lce	H=(HCI) S=(H2SO4 N=(HNO3	3) T=(Sodium Thiosulfate)	L				Relin	quish by:		Date	Time	Re	eceived by:	Date	е Т	ime
hipment	1 1	ample Kit Cooler#			1	11	11.00	Milas		6/2/05	1125	Buin	O. meurs	6/21	11]ن	25
ut	Via: RI				2	10	- 2-			1				1		
ət	Via: Tr	D/T			3											
eceived on Ice	/	C sent	☐ rec	eived	<u> </u>					<u></u>	L			revised	8/01	







John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Laboratory Scope of Accreditation

Page 3 of 27

THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code:

FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc.

6601 Southpoint Parkway Jacksonville, FL 32216

Matrix: Drinking Water			G .:	
Analyte	Method/Tech	Category	Certification Type	Effective Date
Endothall	EPA 548.1	Synthetic Organic Contaminants	NELAP	1/21/2005
Endrin	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Ethylbenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Ethylbenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
gamma-BHC (Lindane, gamma-Hexachlorocyclohexane)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heptachlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heptachlor epoxide	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heterotrophic plate count	SM 9215 B	Microbiology	NELAP	1/21/2005
Hexachlorobenzene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Hexachlorocyclopentadiene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Iron	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Lead	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
Lead	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Magnesium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Manganese	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Mercury	EPA 245.1	Primary Inorganic Contaminants	NELAP	4/4/2002
Mercury	SM 3112 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Methoxychlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Nickel	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Nitrate	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003 ·
Nitrate-nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Nitrite as N	SM 4500-NO2 B	Primary Inorganic Contaminants	NELAP	1/21/2005
Odor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	2/13/2003
Orthophosphate as P	EPA 365.1	Primary Inorganic Contaminants	NELAP	2/13/2003
Orthophosphate as P	SM 4500-P E	Primary Inorganic Contaminants	NELAP	1/21/2005
Oxamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	4/19/2005
PCBs	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Pentachlorophenol	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
рН	EPA 150.1	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	NELAP	4/4/2002
Picloram	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Potassium	EPA 200.7	Secondary Inorganic Contaminants	NELAP	1/21/2005
Residue-filterable (TDS)	EPA 160.1	Secondary Inorganic Contaminants	NELAP	4/4/2002
Selenium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/17/2002
Selenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 04/24/2005-E82574

Little Wekiva

Docket No. 060253-WS

25.30-440(4) Operations Reports

Test Year Ended December 31, 2005



See page 4 for instructions.

Sec	page 4 for instructions.									
I.	General Information t	for the Month/Ye	ar of: January 2004							
A .]	Public Water System (P	WS) Information								
	PWS Name: Little Wel	kiva					PWS Identification N	umber: 3590762		
[PWS Type: 🛛 C	Community	Non-Transient Non-Community	Transier	t Non-Community	Пс	onsecutive			
- [Number of Service Cor	nnections at End of	f Month: 61		Total Population S					
	PWS Owner: Utilities,	Inc. of Florida								
	Contact Person: Patricl	k Flynn			Contact Person's T	itle: Regi	onal Director			
	Contact Person's Mailin	ng Address: 200 W	/eathersfield Ave.		City: Altamonte S	prings	State: Fl	Zip Code: 32714		
ļ	Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961									
			nn@utilitiesinc-usa.com		•					
В.	Water Treatment Plant									
ı	Plant Name: Utilites, In			•••			Plant Telephone Num			
	Plant Address: 200 We				City: Altamonte S	prings	State: Fl	Zip Code: 32714		
	Type of Water Treated		Store	ased Finished V	Vater					
			acity of Plant, gallons per day: 47	,000						
	Plant Category (per sul	bsection 62-699.31				bsection	62-699.310(4), F.A.C.):			
	Licensed Operators		Name		License Number		Day(s)/Shift			
į		Mike Gavaletz		С	5642		Mon - Fri 8 a.:			
	Other Operators:	Terry Sillitoe		С	12749		Sat. 8 A,M.	- 4:30 P.M.		
										
				<u> </u>		<u> </u>				
	Certification by Lead									
l, tl	ne undersigned water tre	eatment plant opera	ator licensed in Florida, am the le	ad/chief operato	or of the water treati	ment plan	t identified in Part I of tl	his report. I certify that the		
info	ormation provided in thi	is report is true and	l accurate to the best of my know	ledge and belief	. I certify that all d	lrinking w	ater treatment chemicals	s used at this plant conform to		
NS	F International Standard	d 60 or other applie	cable standards referenced in sub-	section 62-555.3	20(3), F.A.C. I als	o certify t	hat the following addition	onal operations records for this		
pia	nt were prepared each d	ay that a licensed	operator staffed or visited this pla nent process performance records	int during the m	onth indicated abov	e: (1) reco	ords of amounts of chem	nicals used and chemical feed		
vea	rs and to make them av	, appropriate treatif	upon request	. rurmermore,	agree to retain the	se addino	nai operations records a	t the plant site for at least ten		
, ca										
	Michael &	(ravater	2/3/0Y Michael J.	Gavaletz			C5642			
Sig	nature and Date	7	Printed or	Typed Name			License No	umber		

Dans 1

PWS	VS Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida - 4.7748 WEKING												
Means	of Achieraviolet	eving Four-L Radiation	og Virus In	f: January 20 activation/Rem (Describe):	ioval: *	Free Cl	lorine		Chlorine D	Dioxide	Oz	one [] (Combined Chlorine (Chloramines)
Type o	of Disinfo	ectant Residu	ual Maintair	ed in Distribut	ion System:	⊠ F	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
			- C	T Calculations, or l	JV Dose, to De	to Demonstrate Four-Log Virus Inactivation, if Applicable*							
						ations				UV	Dose		
Day of the	Hows Plant in	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at Pirst Customer During Peak	Contact Time (T) at C Measurement Point During Peak Flow,	During Peak Flow,	Tenor Salet Walt	pH of Water, if	mg-	Operating UV Dose, mW-	mW-	Distribution	Emergency or Abnormal Operating Conditions; Repair of Maintenance Work that Involves Taking Water
1	1 7	17,000	Kate, Blv	Flow, mg/L	minutes	mg-min/L	<u>. U</u>	Applicable	min/L	sec/cm²	sec/cm	System, mg/L	System Components Out of Operation
2	24	12,000		 					 	 	-	1:7	
3	24	9,000										0.9	
4	24	17,000											
5	29	18,000										0.4	
7	3 8	13:000							<u> </u>			1.3	
8	24 24	10,000		 		<u> </u>	 			}	<u> </u>	0,9	
9	24	14,000	 	 					 	 	 	1.0	
10	24	15,000	 	†			 -	 	 	 	 	1.5	
11	24	19,000			†	†	——	 	 	 	†		
12	34	19,000										0.8	
13	24	11:000										01	
14	λ	12,000	}	 	 			ļ	ļ	ļ		 	
16	24 24	12,000	 	 	 	ļ	<u> </u>	ļ	 	ļ		1.3	
17	74	47 888	 			 		 	 	 	 	1.0	
18	३५	17:000	<u> </u>	 	 	 	-	 	 	 	 	1.0	
19	27	1175,000		 	·			 		<u> </u>	† 	1,0	
20	24 24	19:000										1.2	
21	24	11:000										[.]	
22	ЗV	12,000		ļ	<u> </u>			<u> </u>		<u> </u>		1.3	
23	24	4 000			<u> </u>	ļ				├ ──		1.0	
24 25	24 24	17,000	 		 	 	 -	 	ļ	 	ļ	0.8	
26	70	17:000			 	 	 	-		 	-		
27	34	13,000	 	 	 	 -	 	 	-	 	┼	13	
28	24	9', 000			 	 	 	 	 	 	 	1.0	
29	24	12 000		 	 	 	 	 	 	 	 	1.0	
30	24	13,000		<u> </u>	1						T	1.0	
31	24	9.000										191	
Total	en est graffer i	45000											

Daga 2

^{*} Refer to the instructions for this report to determine which plants must provide this information.





see page 4 for instructions.												
	or the Month/Year of: February 2004											
A. Public Water System (P	WS) Information											
PWS Name: Little Wel	kiva				PWS Identification Nu	ımber: 3590762						
PWS Type:	Community Non-Transient Non-Community	☐ Transie	nt Non-Community		nsecutive							
Number of Service Con	nnections at End of Month: 61		Total Population S	erved at E	and of Month: 214							
PWS Owner: Utilities,	Inc. of Florida											
Contact Person: Patrick	k Flynn		Contact Person's T	itle: Regio								
Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Sp	orings	State: Fl	Zip Code: 32714						
Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961												
Contact Person's E-Ma	Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com											
B. Water Treatment Plant												
Plant Name: Utilites, In					Plant Telephone Num							
Plant Address: 200 We			City: Altamonte S	prings	State: Fl	Zip Code: 32714						
Type of Water Treated		hased Finished	Water									
	Day Operating Capacity of Plant, gallons per day: 47	7,000	•									
	Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): D											
Licensed Operators	Name	License Class	License Number		Day(s)/Shift							
Lead/Chief Operator:	Mike Gavaletz	С	5642		Mon - Fri 8 a.ı							
Other Operators:	Terry Sillitoe	С	12749		Sat. 8 A.M.	4:30 P.M.						
					<u> </u>							
一种美国 医大脑神经病												
		<u> </u>										
		1										
II. Certification by Lea	A/Chief Operator											
I the undersigned water tr	eatment plant operator licensed in Florida, am the l	ead/chief operat	or of the water treat	ment nlan	t identified in Part I of t	nis report. I certify that the						
information provided in th	is report is true and accurate to the best of my know	vledge and belie	f. I certify that all d	lrinking w	ater treatment chemicals	s used at this plant conform to						
NSF International Standar	d 60 or other applicable standards referenced in sub	section 62-555.	320(3), F.A.C. I als	o certify t	hat the following addition	onal operations records for this						
plant were prepared each of	day that a licensed operator staffed or visited this pl	ant during the n	nonth indicated above	/e: (1) reco	ords of amounts of chem	icals used and chemical feed						
rates; and (2) if applicable	, appropriate treatment process performance record	s. Furthermore,	I agree to retain the	se additio	nal operations records a	t the plant site for at least ten						
years and to make them av	vailable for review upon request.											
2001 1 1 1	(ravak) 3/4/04 Michael J Printed on				05(40							
Muhal	(Joural) Michael J	I. Gavaletz			<u>C5642</u>							
Signature and Date	Printed or	r Typed Name			License N	umber						

D--- 1

PWS	dentifica	tion Number	: 3590762		P	lant Name	: Utilit	es, Inc. of	Florida				
III. D	aily Data	a for the Mo	onth/Year o	f: February 2	2004	· · · · · · · · · · · · · · · · · · ·							
Means	of Achie	eving Four-L	og Virus In	activation/Rem	ioval: * [Free Cl	lorine	□с	hlorine D	ioxide	☐ Oz	one []	Combined Chlorine (Chloramines)
		Radiation		(Describe):		K7				L' 1 G'	1	1.1	Doll : Pivil
Type	of Disinfe	ectant Residu	ial Maintair	ned in Distribut	ion System:	Free Chlorine				nbined Chlorine (Chloramines		hloramines)	Chlorine Dioxide
1.00				L Carculations, of the	CT Calcul		m-rok	VITUS INSCLIV	auon, ii Ap		Dose		
Day of the Month	Plant in	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During	Temp, of Water,	pH of Water, if Applicable	Minimum CT Required, mg- min/L	Lowest Operating	Minimum UV Dose Required, mW-	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	ブター	15,000	rune, ppo		1000000	Mile stunder	•	Applicable	1822 LULI 17 6-388	SCOTON	secretti	System, mgr	System Components Out of Operation
2	24	15,000										(1)	
3	24	10:000										1.1	
4	JY	13,000		 						L		1.3	
5	24 24	12,000		 	}			!		 		1.0	
7		7,000						ļ	 		 	1:2	
8	λγ λγ	15,000		 	t		-	 			 	1:0-	
9	24	15.000					 				1	7.0	
10	24	13,000											
11	24	(0,000										10	
12	2 <u>Y</u>	14:000		1							L	0.9	
13	24	14 000			ļ			<u> </u>	 		 	1.1	
14	24	8,000			 				 	<u> </u>	 	1.0	<u> </u>
15	24 24	16,000	ļ	 	 	 -	 	 	 		┼	1.0	
17	24	13,000	} -		ļ	 	├	 	 	 	 	1.2	
18	24	13,000	 	 	}	 	 	 	 	 	 	1.1	
19	29	12,000	 	 	_	 	1	 	 	1	 	1.0	
20	24 24	11,000										0.9	
21	27	(1,000 (1,000			I							0.1	
22	24	16, 100											
23	24	17,000			↓						<u> </u>	1.3	
24	24	13,000	<u> </u>		 	 	 	 		 		1-1-1	
25	کلا کلا	12,000		 	 			 	+	 	+	1.0	
27	24	11,000		 	+	1	 	 	 	 	+	1 15	
28	2¥	3,000		 	 	 	-	 	 	 	+	0.8	
29	24	16,000	t	 	+	 	1-	 	 	1	 	1	
30		"1"	 	 	 	1	 	+	1	1	1	1	
31													
Total		368 002											

n--- 1

^{*} Refer to the instructions for this report to determine which plants must provide this information.





see	page 4 for instructions.									
		for the Month/Year of: March 20	04							
Α.	Public Water System (P	WS) Information								
	PWS Name: Little Wel	kiva			PWS Identification N	lumber: 3590762				
		Community Non-Transient No	on-Community Transier	nt Non-Community	Consecutive					
	Number of Service Con	nnections at End of Month: 61		Total Population Served	at End of Month: 214					
	PWS Owner: Utilities,	Inc. of Florida								
	Contact Person: Patricl	k Flynn		Contact Person's Title: I						
	Contact Person's Mailing Address: 200 Weathersfield Ave. City: Altamonte Springs State: Fl Zip Code: 32714									
	Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961									
	Contact Person's E-Ma	ail Address: p.c.flynn@utilitiesinc-us	a.com							
В.	Water Treatment Plant									
	Plant Name: Utilites, In	nc. of Florida			Plant Telephone Nun	nber: 407-869-1919				
	Plant Address: 200 We	water the second		City: Altamonte Spring	s State: Fl	Zip Code: 32714				
	Type of Water Treated			Water						
	Permitted Maximum D	Day Operating Capacity of Plant, gall	ons per day: 47,000							
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): V		Plant Class (per subsect	ion 62-699.310(4), F.A.C.)	D				
	Licensed Operators	Name	License Class	License Number	Day(s)/Shif	t(s) Worked				
	Lead/Chief Operator:	Mike Gavaletz	С	5642	Mon - Fri 8 a	.m 4:30 p.m.				
	Other Operators:	Terry Sillitoe	С	12749	Sat. 8 A.M.	- 4:30 P.M.				
		1/2 :		<u> </u>						
	. Certification by Lead									
		eatment plant operator licensed in Flo								
		is report is true and accurate to the be								
		d 60 or other applicable standards ref lay that a licensed operator staffed or								
		ay that a needsed operator staffed or appropriate treatment process performs.								
		ailable for review upon request.	imance records. Furthermore,	i agree to retain these aut	illional operations records a	it the plant site for at least ten				
	Michael / /	ravat 4/5/04	Michael J. Gavaletz		C5642					
Sig	mature and Date		Printed or Typed Name		License N	umber				
ے. ح		ω	Timed of Typed Nume		Elsonso i v					

Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Ch										
Means of Achieving Four-Log Virus Inactivation/Removal: *										
Ultraviolet Radiation Other (Describe):										
	ine Dioxide									
CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* CT Calculations UV Dose										
Lowest CT Lowest CT Lowest										
Lowest Residual Disinfectant Provided Residual	보기본 개발 기가 있다.									
Disinfectant Contact Time Before or Disinfectant										
Concentration (T) at C at First Minimum Lowest Minimum Concentration Net Quantity (C) Before or at Measurement Customer Temp. CT Operating IIV Dose at Remote										
	Abnormal Operating Conditions; Repair									
the Plant in Water Peak Flow During Peak Peak Flow, Peak Flow, Water, Water, if mg- mW- mW- Distribution or Maintenan	nce Work that Involves Taking Water									
Month Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L °C Applicable min/L sec/cm² sec/cm² System, mg/L System	n Components Out of Operation									
$\frac{1}{24}$ $\frac{24}{1100}$ $\frac{1}{100}$										
2 34 15000 3 24 10000										
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$										
6 24 11,000										
1 2Y 19,000										
8 24 19,000										
9 24 18,000										
10 24 13 000 (.0										
11 34 17,000										
12 34 16 20 1 13 34 16 20 1										
13 3Y 11 337 14 2Y (3,000										
15 24 14,000 16 34 14,000										
17 24 14,000										
18 24 74,000										
19 24 /5 000										
20 24 18 23										
21 34 20,000										
22 34 25,000 23 34 74,000										
26 37 12 12 12 12 13 14 15 15 15 15 15 15 15										
27 24 12,000										
28 64 22,000										
29 37 23 (22)										
30 24 18,000										
31 14 14 000										
Total 472 00 0 Average 16 000										

Da~~ 1

^{*} Refer to the instructions for this report to determine which plants must provide this information.



See page 4 for instructions.

	FO.						"The second seco			
		for the Month/Year of: April 2004								
Α,	Public Water System (P									
	PWS Name: Little Wel	kiva				PWS Identification N	Number: 3590762			
	PWS Type:	Community Non-Transient Non-Community	/ Transier	nt Non-Community	Co	nsecutive				
	Number of Service Co	nnections at End of Month: 61		Total Population S	erved at E	End of Month: 214				
	PWS Owner: Utilities,	Inc. of Florida								
	Contact Person: Patricl	k Flynn		Contact Person's T	itle: Regio	onal Director				
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Sp		State: Fl	Zip Code: 32714			
		phone Number: 407-869-1919		Contact Person's F	ax Numbe	er: 407-869-6961				
	Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com									
В.	Water Treatment Plant									
	Plant Name: Utilites, I	nc. of Florida				Plant Telephone Nur	mber: 407-869-1919			
	Plant Address: 200 We			City: Altamonte S	prings	State: Fl	Zip Code: 32714			
	Type of Water Treated		hased Finished V		<u> </u>	<u> </u>				
		Day Operating Capacity of Plant, gallons per day: 4								
		bsection 62-699.310(4), F.A.C.): V	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Plant Class (per su	bsection 6	62-699.310(4), F.A.C.)	: D			
	Licensed Operators		License Class	License Number			ft(s) Worked			
	Lead/Chief Operator:	Mike Gavaletz	С	5642	***		ı.m 4:30 p.m.			
	Other Operators:	Terry Sillitoe	С	12749			4:30 P.M.			
	Outer Operators.		<u> </u>							
			-							
			 			····				
						· · · · · · · · · · · · · · · · · · ·				
										
			 							
			<u> </u>							
	I. Certification by Lea									
Ī,	the undersigned water tr	eatment plant operator licensed in Florida, am the l	ead/chief operate	or of the water treat	ment plant	t identified in Part I of	this report. I certify that the			
in	formation provided in th	is report is true and accurate to the best of my know	wledge and belief	f. I certify that all d	rinking w	ater treatment chemica	ils used at this plant conform to			
N:	SF International Standar	d 60 or other applicable standards referenced in sub	bsection 62-555.3	320(3), F.A.C. I als	o certify the	hat the following addit	tional operations records for this			
pl	ant were prepared each of	day that a licensed operator staffed or visited this pl	lant during the m	onth indicated abov	/e: (1) reco	ords of amounts of che	micals used and chemical feed			
ra	tes; and (2) if applicable	, appropriate treatment process performance record	ls. Furthermore,	I agree to retain the	se addition	nal operations records	at the plant site for at least ten			
ye	ears and to make them av	vailable for review upon request.								
	muladi	raisat 5/5/04 Michael	J. Gavaletz			C5642				
	mucaux (Michael 3				License N	Jumbor			
Si	gnature and Date	Printed or	r Typed Name			License r	Mullingi			
	V	\mathcal{O}								

PWS	dentifica	tion Numbe	r: 3590762		F	lant Name	: Utilit	es, Inc. of	Florida				
III. D	aily Dat	a for the Mo	onth/Year o	f: April 2004									
Means	of Achi	eving Four-I	og Virus In	activation/Rem	oval: *	Free Cl	ılorine		Chlorine I	Dioxide	□ Oz	one 🔲	Combined Chlorine (Chloramines)
		Radiation ectant Residu		(Describe): ned in Distribut	ion System:	ΜF	ree Ch	lorine	Corr	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
- J PO 1		Column Nosia							Combined Chlorine (Chloramines) Pation, if Applicable* UV Dose Lowest				
28.0					CT Calcu	lations		24.86	4 K		Dose ·		
		1.5		Lowest Residual	Disipfectant	Lowest CT Provided			25	1.21.		Lowest	
1.45				Disinfectant	Contact Time							Residual Disinfectant	
				Concentration	(T) at C	at First		1.00	Minimum	Lowest	Minimum	Concentration	
D	Hours	Net Quantity of Finished		(C) Before or at	Measurement	Customer	Temp.		CT.	Operating	UV Dose	at Remote	
the	Plant in	Water	Peak Flow	First Customer During Peak	Point During Peak Flow,	During Peak Flow,	of Water,	pH of Water, if	Mequired mg-	UV Dose, mW-	mW-	Point in Distribution	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water
	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm²	sec/cm²	System, mg/L	System Components Out of Operation
1	14	23,000										1.3	
2	24	19,000										1.3	
3	29	14,000		ļ					ļ			[4]	
5	24 24	74,000 74,000	 	 		<u> </u>	 		<u> </u>	 	<u> </u>		
6	<u> 1</u> V	25,000			ļ	 			 		 	1.3	
7	ŽΫ	2(,000		 	 	 	 	-			 	1.3	
8	24	24,000				 		 			 	1.0	
9	2¥ 2¥	17.000									 	1.1	
10	24	11,000										1.0	
11	19	23,000											
12	2¥ 2¥	14,000	ļ. <u>.</u>	<u> </u>		ļ				ļ	<u> </u>	1.0	
13	24	20,000	 _				 	 	 	 		(.0	
15	24	18 000	 	}			 	 -	 	 	<u> </u>	1:3	
16	24	18,000	 	 	 	 	 	 	 	-	 	1.3	
17	24	13,000		<u> </u>		 	 	<u> </u>	 	 	 	11.7	
18	24	29,000											
19	24	30,000										(-3	
20	24	17,000	<u> </u>	 		ļ	ļ	ļ	 		1	(-3	
21	24	16,000	 	 		 	ļ	-			 	[-]	
23	29	22,000	 	 	 	ļ	 	 	 	 	 	1.2	
24	24 24	12,000	 	 	†	 	 			 	 	11:7	
25	2¥	78 000				1							
26	24	28,000				ļ						1.0	
27	24	14,000	<u> </u>			Ļ	<u> </u>					1.0	
28 29	24	20,000			 	 	 		 	 	ļ	0.9	
30	24	11,000	 	 	 	 	├	 	 	 	 	1.0	
31		11100		 		 	 	 	 	 	 	1.0	
Total	- 197	595, 000		<u> </u>		- 	<u> </u>			<u> </u>		<u> </u>	
Averag	e	20,000											
Marin	1100	20 000	7										

Da -- 2

^{*} Refer to the instructions for this report to determine which plants must provide this information.





MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER The Contract of the Contract o

See	page 4 for instructions.					The state of the s					
I.	General Information	for the Month/Year of: May 200	04								
A.	Public Water System (F	WS) Information									
	PWS Name: Little We	kiva			PWS Identification	Number: 3590762					
	PWS Type:	Community Non-Transient N	Non-Community Trans	ient Non-Community	Consecutive						
į	Number of Service Co	nnections at End of Month: 61			ved at End of Month: 214						
	PWS Owner: Utilities,	Inc. of Florida									
	Contact Person: Patric	k Flynn		Contact Person's Tit	le: Regional Director						
	Contact Person's Mailing Address: 200 Weathersfield Ave. City: Altamonte Springs State: Fl Zip Code: 32714										
	Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961										
	Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com										
В.	Water Treatment Plant	Information									
	Plant Name: Utilites, I	nc. of Florida			Plant Telephone N	umber: 407-869-1919					
	Plant Address: 200 We	eathersfield Ave.		City: Altamonte Spr		Zip Code: 32714					
	Type of Water Treated	l by Plant: X Raw Ground Wat	ter Purchased Finished								
	Permitted Maximum I	Day Operating Capacity of Plant, ga	llons per day: 47,000								
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): V		Plant Class (per sub	section 62-699.310(4), F.A.C	.): D					
	Licensed Operators	Name	License Cla			uift(s) Worked					
	Lead/Chief Operator:	Mike Gavaletz	С	5642		a.m 4:30 p.m.					
	Other Operators:	Terry Sillitoe	С	12749		M 4:30 P.M.					
П	. Certification by Lea	d/Chief Operator									
		eatment plant operator licensed in F	ilorida am the lead/chief oper	ator of the water treatme	ant plant identified in Dort I o	f this report I cortify that the					
inf	ormation provided in th	is report is true and accurate to the b	hest of my knowledge and hel	ief. I certify that all driv	cht plant identified in Fart 10.	als used at this plant conform to					
NS	F International Standard	d 60 or other applicable standards re	eferenced in subsection 62-55	5 320(3) FAC Taleo	certify that the following add	itional operations records for this					
pıa	int were prepared each d	lay that a licensed operator staffed o	or visited this plant during the	month indicated above:	(1) records of amounts of che	emicals used and chemical feed					
rate	es; and (2) if applicable,	, appropriate treatment process perfe	ormance records. Furthermor	e. I agree to retain these	additional operations records	s at the plant site for at least ten					
yea	ars and to make them av	ailable for review upon request.		, 5	T	•					
	m.1.11	- to the same									
<u> </u>		avaly 6/4/04	Michael J. Gavaletz		C5642						
Sig	gnature and Dat		Printed or Typed Name		License	Number					

D-~- 1

											G00 F -	2	MANA
	777										000'0FC	1	IntoT
	17										36,000	he	31
											36,000	75	30
	וים										200 112	ηc	67
	97	,								T	30,00	75	87
	6'0										36,000		
	انع										31.000	<u></u>	77
	8'0											ΛT	97
	07										34,000	ለሮ	32
	<i>V</i> /							· · · · · · · · · · · · · · · · · · ·			30,000	ለሚ	74
	60										30,000	Λč	23
	07										000 81	<u> </u>	77
	- 7./- 										31,000	75	71
	- / // 										32'000	45	70
	91										०००/१९	ላሮ	61
	6'0										000,6	አፒ	81
	0'1										000,55	ለሮ	41
											3/1,000	45	91
	0')										000,05	he	SI
	1.1										000,25	λc	ÞÌ
	0./										20,000	ΛĊ	£1
	Ÿ										000'58	र्रह	71
	9.1										Q(X) b1	۸T	11
	0,1										37,000	र्रेट	10
									***************************************		000196	40	6
	[1]										000'51	15	8
	1'0										000 1	र्रस्ट	L L
	2.0										000 KI	25	9
	1.0				· · · · · · · · · · · · · · · · · · ·					****	000'91	he.	ç
	0.1										000'01		
	07										000 81	<u>た</u> なぞ	<u> </u>
							 						<u>ε</u>
	177										000'81	10	<u> Z </u>
System Components Out of Operation	7/8W Wasks	TING MAK	"Wo/oos	_J\mim_	Applicable	70.5°	7/41411-810	somurui	Jam ,wolf	Rate, 20d	Produced, gal	ለር	1
Emergency or Abnormal Operating Conditions; Repair Or Maintepance Work that Involves Taking Water	na inio nomiditisia	UV Dose Required, Wm	Operating Decrating	C.I. Required, ing-	10 Hq U. John	Mater ot Caub	at Pirat Customer During Peak Plow	Disimfoctant Contact Time (T) at C Mossurement Point During Feat Flow,	Lowest Residual Disinfectant Concentration Concentration (C) Before or at First Customer First Customer	Posk Plow	Met Quantity of Pinished	Plant in	Day of
	,1	9800					stroite						
	L								Calculations, or U				
Chlorine Dioxide	hloramines)	D) aninol	AD banic	Imo2	orine	ee CpJ	₁ 4 ⊠	on System:	ed in Distributi	nistnisM ls	ectant Residu	Inisid to	Type c
ombined Chlorine (Chloramines)) [] allo	zo 🗆	oxide	d ənirold	 n□	эшцог	Tree Ch	OVAI:	activation/Rem Describe):	og virus in:) Tather (eving rour-L Radiation		
(againmon old'), animold') bonidano'	<u>ال</u> ال	<u> </u>	- F ; ;	G - 17	ייי		10 4	J 7 1	\$002 VBM 3				
									AOOC WOM	VA P			ZI III
				riorida	se' iuc or	ուլյո	ant Name:	ia l		79/.0655 :	tion Mumber	gentifica	LSMA
VIII V (44 GILLOW) I GIOVIN		11-11-1						 	1110 1711				
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	**************************************	- N-1 -	DA CIPLE	11 174-1	77 TO 24 L					NI II I 17 M.		3 MI 1/M	

^{*} Refer to the instructions for this report to determine which plants must provide this information.





See page 4 for instructions.

FILE COPY

	page 4 for instructions.	•									
ī.	General Information	for the Month/	Year of: June 2	004							
A.	Public Water System (F	WS) Information	on								
	PWS Name: Little We	kiva						PWS Identification Nu	ımber: 3590762		
	PWS Type:	Community	Non-Transient	Non-Community	Transien	t Non-Community	Cor	secutive			
	Number of Service Co	nnections at En				Total Population S					
	PWS Owner: Utilities,	Inc. of Florida									
	Contact Person: Patric	k Flynn				Contact Person's T	itle: Regio	nal Director			
	Contact Person's Maili	ng Address: 20	0 Weathersfield A	ve.		City: Altamonte Sp	orings	State: Fl	Zip Code: 32714		
	Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961										
	Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com										
В.	. Water Treatment Plant Information										
	Plant Name: Utilites, I	nc. of Florida						Plant Telephone Numi	ber: 407-869-1919		
	Plant Address: 200 We	eathersfield Ave) .			City: Altamonte S	prings	State: Fl	Zip Code: 32714		
	Type of Water Treated		🛚 Raw Ground W		nased Finished V	Vater					
	Permitted Maximum D				,000						
	Plant Category (per su		9.310(4), F.A.C.):	V				2-699.310(4), F.A.C.): 1	D		
	Licensed Operators		Name	2	License Class	License Number		Day(s)/Shift(s) Worked		
	Lead/Chief Operator:	Mike Gavaletz			С	5642		Mon-Fri 8 a.m	1 4:30 p.m.		
	Other Operators:	Terry Sillitoe			C	12749		Sat. 8 A.M	4:30 P.M.		
	. Certification by Lea	d/Chiat Opani	toe								
				Florida am the le	ad/chief operate	of the water treats	nent plant	identified in Part Lofth	is report. I certify that the		
									used at this plant conform to		
									onal operations records for this		
									icals used and chemical feed		
rat	es; and (2) if applicable	, appropriate tre	atment process pe						the plant site for at least ten		
yea	ars and to make them av	ailable for review	ew upon request.								
	mille	.11/-	-1.10c								
	IIIWW	1 cas	at 7/1/04	Michael J.				C5642			
Sig	gnature and Date	\mathcal{O}	/ 1	Printed or	Typed Name			License Nu	ımber		
		(\cup								

Second S											-	040 805		IsioT
93 9. 27 13,000 We controlled in the centre of the control of the												044 9-3	T	-
We Distriction Number 3590762 Sim Number 3590762 Plant Numer 199086 Plant Numer 199086 Plant Numer 199086 Plant Number 3590762												000121	10	
We District Residual Maintained in Distribution System Maintained in Distribution System: Tree Chlorine Distribution												000,511	17	
WS Identification Number; 3500762 Market Ma		£1					 -					23,000		
WS Identification Number; 3500762 District Concentration (Chicamines) Pient Name: Utilities, Inc. of Fourth Pient Name: District		٤٠١)									<u>_</u>	COOLER	7 7	
W.S. Identification Number; 3500762 W.S. Identification Number; 3500762 W.S. Identification Number; 3500763 W.S. Identification Number; 3500763 W.S. Identification Number; 3500763 W.S. Identification Number; 350076 W.S. Identification Numbe														
We flow in the contribution Number: 350705. We found from the contribution of the con		17											h7	
WS Identification Number: 3590762 Main Name: Utilities, Inc. of Floring District		1 4										200166		
Wy Identification Number: 3590762 We shall be a state of Florida Chicamines and Lorent Chicamines Desired Chicamines Chi		0'1											\\\-\\\\-\\\\	
WS Identification Number: 3590762 WYS Identification Number: 3590762 WYS Identification Number: 3590763 WYS Identification Number: 3590764 WYS Identification Number: 3590764 WYS Identification Number: 3590764 WYS Identification Number: 3590764 WYP OF IDENTIFICATION Number: Maintenance Number: Official Number Number: Maintenance Number: 3590764 WYP OF IDENTIFICATION NUMBER: Maintenance Number: Ma		1^												
W5 Identification Number: 3590765 W5 Identification Number: 3590765 W6 Identification Number: 3590765 W6 Identification Polyte (Describs) W6 Identification Polyte (Describs) W6 Identify W6 Ident		01										000/55	77	
WS Identification Number: 3590762 Was already of Plontine (Chloramines) Work of Plontine (Chloramines) Work of Plontine (Chloramines) Work of Plontine (Chloramines) Work of Plontine (Chloramines) Work of Plontine (Chloramines) Work of Plontine (Chloramines) Work of Plontine (Chloramines) Work of Plontine (Chloramines) Work of Plontine (Chloramines) Work of Plontine (Chloramines) Work of Plontine (Chloramines) Lowest Taking Work of Plontine (Chloramines) Work of Plontine (Chloramines) Lowest Taking Work of Plontine (Chloramines) Lowest Taking Work of Plontine (Chloramines) Work of Plontine (Chloramines) Lowest Taking Work of Plontine (Chloramines) Lowest Taking Work of Plontine (Chloramines) Lowest Taking Work of Plontine (Chloramines) Lowest Taking Work of Plontine (Chloramines) Lowest Taking Work of Plontines Lowest Taking Work of Plontines Completed And Work of Montal Maintaines Lowest Taking Work of Montal		0.)												
WS Identification Number: 3590762 West Children Date (Choloramines) Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Hardward Constitution of Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Residual Maintained in Distribution System: Work of Choloring Choloring The Before or Residual Distribution System: Work of Choloring Choloring The Before or Residual Distribution System: Work of Choloring The Before or Residual Distribution System: Work of Choloring The Before or Residual Distribution System: Work of Choloring The Before or Residual Distribution System: Work of Choloring The Before or Residual Distribution System: Work of Choloring The Before or Residual Distribution System: Work of Choloring The Before or Residual Distribution System: Work of Choloring The Before or Residual Distribution System: Work of Choloring The Before or Residual Distribution System: Work of Choloring The Before or Residual Distribution System: Work of Choloring The Before or Residual Distribution System: Work of Cho													h = 1	
WS Identification Number: 3590762 Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Florida Plant Name: Utilities, Inc. of Plant Nam		-6 .											17	
WS Identification Number: 3590762 Plant Alamin Corf He Alamin Control of British Control of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Proceedings of Processing Management (Chloramines) Processing Management (Chloramin													10°	
WS Identification Number: 3590762 Plant Manner													- č	
WS Identification Number: 3507062 Name													ht	
WS Identification Number: 3500762 Name of Achieving Pour-Log Vins Institute Canal Residual Manietan Connecting Pour-Log Vins Instituted in Distribution System: Pirec Chlorine Chlorine Chlorine Chlorine Chlorine Combined Chlorine (Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Combined Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlo		Z.)												
WS Identification Number: 3500762 Name of Achieving Pour-Log Vins Institute Canal Residual Manietan Connecting Pour-Log Vins Instituted in Distribution System: Pirec Chlorine Chlorine Chlorine Chlorine Chlorine Combined Chlorine (Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Combined Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlo		67	1										- (*	
WS Identification Number: 3590762 West of Disinfectant Residual Maintained in Distribution System: Telegolation Power Retidual Distribution System: Of Hours Water Retidual Distribution Power Retidual Distribution Power Retidual Distribution (Concention Of Distribution Power Retidual Distribution Power Retidual Distribution (Concention Of Distribution Power Retidual Distribution Power Retidual Distribution Power Retidual Distribution Power Retidual Distribution (Concention Of Distribution Power Retidual Distribution Power Reti												<u> </u>	17	
WS Identification Number: 3590762 West of Disinfectant Residual Maintained in Distribution System: Distribution Produced gail Rue, god Distribution Produced gail Rue, god Distribution Produced gail Rue, god Distribution Produced gail Rue, god Distribution Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail Rue, god Produced gail														
W3 Identification Number: 3590762 Plant Marce Chiorine Dioxide Chiorine Dioxide Combined Chlorine (Chloramines) Plant Name: Utilities, Inc. of Floride Combined Chlorine (Chloramines) Chlorine Dioxide Chlorine Chlorine (Chloramines) Chlorine Chlorine (Chloramines) Chlorine Chlori		1.										000 301	Жĕ	
WS Identification Number: 3590762 Plant Name Pour Chlorine June 2004 Plant Name: Unities, Inc. of Florida Pour Chlorine June 2004 Pour Chlorine June 2004 Pour Chlorine June 2004 Pour Chlorine June 2004 Pour Chlorine June 2004 Pour Chlorine June 2004 Pour Chlorine June 2004 Pour Chlorine June 2004 Pour Chlorine June 2004 Pour Chlorine June 2004 Pour Pour Chlorine June 2004 Pour Pour Chlorine June 2004 Pour		٠, د										00000	100	
WS Identification Number: 3590762 June 2004 June		0.)										000 151	(1)	
Daily Data for Houseld Residual Maintained in Distribution System Plant Name: Utilites, Inc. of Florine Dioxide Ozone Combined Chlorine (Chloramines)													-1)~	_
WS Identification Number: 3590762 Daily Dain for the Mouth Pear of England Maintained in Distribution System Concentration Utraviolet Radiation		ر.ع												
WS Identification Number: 3990762 Daily Dain for the Anne Log Virus Inscrivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)													// /-	
Season of Achieving Pour-Log Virus Inactivation Number: 3590762 Lowest Residual Maintained in Distribution System: Distribution Produced, gall Rate, gad of Floring Plant in Pour December Plant in Pour Concentration December Plant in Pour Concentration During Peak Flow During Peak During Peak Flow During Peak Flow During Peak Flow During Peak Flow During Peak Flow During Peak Flow During Peak During Peak Flow During Peak Flow During Peak Flow During Peak Flow During Peak Flow During Peak Flow During Peak During Peak Flow During Peak Flow During Peak During Pe		77					<u> </u>						17	
Direction Number: 3590762 Plant Mame: Utilites, Inc. of Florida Plant Number: 3590762 Plant Mame: Utilites, Inc. of Florida Plant Number: 3590762 Plant Mame: Utilites Plant Number: 3590762 Plant Number: 359		£ 1										000,01		
Distriction Number: 3590762 Plant Mame: Utilities, Inc. of Florida Plant Mame: Utilities, Inc. of Florida Ozone Ozon		77										000 5		
WS Identification Number: 3590762 Plant Name: Utilites, Inc. of Ploride Achieving Four-Log Virus Inactivation/Removal: * Prec Chlorine Chlorine Dioxide Combined Chlorine (Chloramines)												70170		
WS Identification Number: 3590762 Plant Name: Utilities, Inc. of Plorine Distribution Of Principles (Concentration Number: 3590762) Plant Name: Describe (Concentration Of Principles)								Bernelsen Frank		A Am Local	oda amai		Operation	
WS Identification Number: 3590762 Latin Data for the Month Vent of: June 2004 Latin Data for the Month Vent of: June 2004 Ultraviolet Radiation	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water	Residual Disinfectant Concentration at Remote in Point in Contribution	Minimum UV Dose Required, Wm	Lowest Operating UV Dose, Win	Ecquirod, Required, TT	10 Hq Water, if	10 Valet	Provided Before or at First Customer During Pesk Flow;	Disinfectant Contact Time (T) as C Measurement Point During Peak Flow,	Disinfectant Concentration (C) Before or at First Customer First Customer		badaini To Vater	ni insiq	pu
WS Identification Number: 3590762 Latip Data for the Month/Vent of: Ultraviolet Radiation Other (Describe): Ultraviolet Radiation Other (Describe): CT Calculators of 197506 in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide Combined Chloramines Chlorine Dioxide Combined Chloramines Chloramines		125WO.]		100 mg 1 mg 1 mg	4 / 6 9 9	e Table	9.5		CT Calcula	ar santa				1
WS Identification Number: 3590762 Latip Data for the Month/Vent of: Ultraviolet Radiation			245000000	U.VII	ומיד וו לימו	BADOWIT SO II	A 8071-1	non augustion	A DORE TO DEU	Calculations, or U	10			
WS Identification Number: 3590762 L. Daily Data for the Month/Year of: June 2004 eans of Achieving Four-Log Virus Inactivation/Removal: * Tree Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):		1	1	Anidanii	MATI MAT	ATTLE	MIN 33	JJ 🔯	on System:	marinsia ni ba	al Maintaine	ctant Residua	f Disinfe	o ada
WS Identification Number: 3590762 Later for the Month/Venr of: June 2004 Later for the Month/Venr of: June 2004 Later for the Month/Venr of: June 2004 Later for the Month/Venr of: June 2004 Later Chlorine Dioxide Doxide Doxide Chlorine (Chloramines)	Chlorine Dioxide	(zənimeroli	ماناه (ريا	Id > baric	رسال	ediac	145 00	-4 [2]	7-0				aviolet	AIU [
WS Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida Plant Name: Utilites, Inc. of Florida June 2004			_						~ · · · · · · · · · · · · · · · · · · ·	Jecceipe). Yukundu kenn	S virus ma	VINE FOUR-LC	oi Acnie	csus
WS Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida	ombined Chlorine (Chloramines)	One C	ozo 🗌	əbixo	Iorine Di	ЦСР	anino	142 gard [* .[e/(Mod doitovito	IO IPAL MIN	IOIAL AUD LIQU	ADEA THE	80 .1
spinol 1 30 out soil 141	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \									4005 anul.	to may/dir	of the order	(]!!	-(1
spinol 1 30 out soil 141								LATTINA T ATTE	v v l		70/0600	non Number:	ientifica	NZ IG
					lorida	s, Inc. of F	Utilite	ant Name:	ीर्व					

Average | 7,100 | 36,000 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,100 | 17,





See page 4 for instructions.

FILE COPY

	page : let men deticule.						
	General Information f		204				
A.	Public Water System (P	WS) Information /					
	PWS Name: Little Wek	tiva				PWS Identification Nu	mber: 3590762
	PWS Type: $\boxtimes C$	ommunity Non-Transient Non-Community	Transier	t Non-Community	ПСо	nsecutive	
	Number of Service Cor	nnections at End of Month: 61		Total Population Se	rved at E	nd of Month: 214	
	PWS Owner: Utilities,	Inc. of Florida					
	Contact Person: Patrick	Flynn		Contact Person's Ti	tle: Regio	onal Director	
	Contact Person's Mailin	ng Address: 200 Weathersfield Ave.		City: Altamonte Spi	rings	State: Fl	Zip Code: 32714
	Contact Person's Telep	hone Number: 407-869-1919		Contact Person's Fa	x Numbe	r: 407-869-6961	
	Contact Person's E-Ma	il Address: p.c.flynn@utilitiesinc-usa.com					
B.	Water Treatment Plant	Information					
	Plant Name: Utilites, In	nc. of Florida				Plant Telephone Num	ber: 407-869-1919
	Plant Address: 200 We	athersfield Ave.		City: Altamonte Sp	rings	State: Fl	Zip Code: 32714
	Type of Water Treated	by Plant: Raw Ground Water Purch	ased Finished V	Vater			
	Permitted Maximum D	Day Operating Capacity of Plant, gallons per day: 47	,000				
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): V			section (52-699.310(4), F.A.C.):	D
	Licensed Operators	Name	License Class	License Number		Day(s)/Shift	(s) Worked
	Lead/Chief Operator:	Mike Gavaletz	С	5642		Mon - Fri 8 a.r	n 4:30 p.m.
	Other Operators:	Terry Sillitoe	С	12749		Sat. 8 A.M	4:30 P.M.
		RAYMOND LA PLARISH	C	12740			
		/					
			<u> </u>	<u> </u>			
	L Certification by Lea	d Chief Operator					
	the undersigned water tr	eatment plant operator licensed in Florida, am the le	ead/chief operat	or of the water treatn	ent plan	t identified in Part I of t	his report. I certify that the
in	formation provided in th	is report is true and accurate to the best of my know	ledge and belie	f. I certify that all dr	inking w	ater treatment chemical	s used at this plant conform to
N	SF International Standar	d 60 or other applicable standards referenced in sub	section 62-555.	320(3), F.A.C. I also	certify t	hat the following addition	onal operations records for this
pl	ant were prepared each	day that a licensed operator staffed or visited this pla	ant during the m	nonth indicated above	e: (1) rec	ords of amounts of chem	nicals used and chemical feed
ra	tes; and (2) if applicable	, appropriate treatment process performance records	s. Furthermore,	I agree to retain thes	se additio	nal operations records a	t the plant site for at least ten
уe	ears and to make them as	vailable for review upon request.					
		1/5/2				05640	
	ammel M.	will 8-2-2004 for Michael J	. Gavaletz			C5642	
΄6	gnature and Date	Printed or	Typed Name			License N	umber

Dece 1

PWS	S Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida - LITTLE WEKIM													
111. 1	1. Daily Data for the Month/Year of: July 2009 eans of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Dozone Combined Chlorine (Chloramines)													
							alorina		hloring r	Niovido.			3- 1: 1011 : (011 :)	
□ UI	traviolet	Radiation		(Describe):	iovai.	Mee C	nioi inc	шч	morme L	noxide		zone 📋 C	Combined Chiorine (Chioramines)	
				ned in Distribut	on Custom:	M D	ree Ch	lania a		1: 10	1 . (6			
1.700	JI DISIIII	cetaint reesita	iai iviallitali	T Calculations, or	IV Does to De	1 Q	ree Cn	iorine	U Com	bined Ch	ilorine (C	hloramines)	Chlorine Dioxide	
			***		CI Calmi	stions	MELLUK	ATTENDED TO	andt'n Vi	Gricabie.	Dose			
				54-010, 490 SERVER		Lowest CT	Terror S	BOSTA STREET CONTROL TO SEE	Page 370	- 04	2088	Lowest		
1 1				Lowest Residual	Disinfectant	Lowest CT Provided	X				, Y 7	Residual		
	1,74			Disinfectant	Contact Time	Before or	0.7		10.00		1000	Disinfectant		
		Net Quantity		Concentration (C) Before or at	(T) at C Measurement	et First Customer	,		Minimym	Lowest	Minimum	Concentration		
Day of	Hours	of Finished	A Carried	First Customer	Point During	During	Temp.	pH of	Remised	UV Dose	UV Dose Required	at Remote Point in	Emergency or Abnormal Operating Conditions; Repair	
the	Plant in	Water	Peak Plow	During Peak	Peak Flow	Peak Flow.	Water.	Water, If	me-	mW-	mW.	Distribution	or Maintenance Work that Involves Taking Water	
Month		Produced, gal	Rate, and	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/em²	sec/am	Distribution System, mg/L	System Components Out of Operation	
1 2	24	15,000		 		ļ	ļ					1,0		
3		14,000		 				<u> </u>			ļ	111		
4		17,000	<u> </u>	 	 	}			}		ļ	40		
5		18,000		†			├	 	 	 	 	7.0	 	
6		26.000		†			 	 		 		0.8		
7		6,000							 	 	 	1.0		
8		17,000							1		 	1,0		
9		22,000										1,0		
10 11		11,000		<u> </u>								111		
12	-	21.00		 			↓	ļ						
13		15,000	 	 		 	ऻ	 	<u> </u>		ļ	1.0		
14	1/	16,000	 	 			 		}			1,2		
15	24	21.000		† -			 	 	 		 	1,0		
16		12,000		 			 	 	 	 	 	1.1		
17		8.000			f	1		 	1		 	1,2-		
18		25,000									 	1		
19		25.000									<u> </u>	1,2		
20	\vdash	7.000	ļ	 	ļ	ļ		\				1,2		
22		19.000		 	 	 	 	<u> </u>	 		ļ	1.3		
23		25.000	1	+	 	 	┼	 	 	 	 	1:2		
24		11,000	 	 		 	 	 	 	 		1,2		
25		29,000		 	 	 	 	 	 	 	 	115		
26		30,000		1	 		 		 	 	 	1.3		
27		12. 000						1	1	1	 	1.0		
28		15.000							I		1	1.7		
29	1	22,000										1.0		
30	1-1/1/	17.000	 	 		<u> </u>		<u> </u>				1,1		
Total	L 7_	13.000 536.000	 	<u> </u>	L	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	L	1,2		
Averag	c	17.000	1											

n--- 1

Maximum 30,000 * Refer to the instructions for this report to determine which plants must provide this information.





See	page 4 for instructions.								
	General Information (1: August 20	004					
Α.	Public Water System (P	WS) Information							
	PWS Name: Little Wel	kiva						PWS Identification N	umber: 3590762
	PWS Type:	Community No	n-Transient Non-Co	ommunity	Transie	nt Non-Community	Co	nsecutive	
	Number of Service Cor	nnections at End of Me	onth: 6i			Total Population S	Served at E	and of Month: 214	
	PWS Owner: Utilities,	Inc. of Florida							
	Contact Person: Patricl	k Flynn				Contact Person's 7	itle: Regio	onal Director	
	Contact Person's Maili	ng Address: 200 Weat	hersfield Ave.			City: Altamonte S	prings	State: Fl	Zip Code: 32714
	Contact Person's Telep	hone Number: 407-86	9-1919			Contact Person's F	ax Number	er: 407-869-6961	
	Contact Person's E-Ma		utilitiesinc-usa.com	n					
В.	Water Treatment Plant	Information							
	Plant Name: Utilites, I							Plant Telephone Nun	nber: 407-869-1919
	Plant Address: 200 We					City: Altamonte S	prings	State: Fl	Zip Code: 32714
	Type of Water Treated		Ground Water		ed Finished V	Water			
	Permitted Maximum D			per day: 47,00	00				
	Plant Category (per su	bsection 62-699.310(4						52-699.310(4), F.A.C.):	
	Licensed Operators	E San Garage Control	Name	I	icense Class	License Number	3.75 (All 100)	Day(s)/Shif	t(s) Worked
	Lead/Chief Operator:	Mike Gavaletz			<u> </u>	5642		Mon - Fri 8 a	
	Other Operators:	Terry Sillitoe			С	12749		Sat. 8 A.M.	- 4:30 P.M.
							ļ		
			·			<u> </u>			
				<u>-</u>					
	I was a second of the						<u> </u>		
							 		
									
						<u> </u>	<u> </u>		
	. Certification by Lea	d/Chief Operator							
Ī. 1	he undersigned water tr	eatment plant operator	licensed in Florida	a am the lead	/chief operat	or of the water treat	ment plan	t identified in Part I of	this report. I certify that the
int	formation provided in th	is report is true and ac	curate to the best of	f my knowled	ige and belie	f. I certify that all of	drinking w	ater treatment chemical	Is used at this plant conform to
NS	SF International Standar	d 60 or other applicab	le standards referen	ced in subsec	ction 62-555.	320(3), F.A.C. I al:	so certify t	hat the following addit	ional operations records for this
pla	ant were prepared each	day that a licensed ope	rator staffed or visi	ted this plant	during the n	onth indicated abo	ve: (1) reco	ords of amounts of chei	nicals used and chemical feed
га	tes; and (2) if applicable	, appropriate treatmen	t process performar	nce records.	Furthermore,	I agree to retain the	ese additio	nal operations records	at the plant site for at least ten
ye	ars and to make them a	vailable for review upo	on request.						
	mulail &	Gavater	f/3/0Y	Michael J. G	avaletz			C5642	
Si	gnature and Date	71		Printed or Ty	yped Name			License N	lumber

PWS	Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida												
Means	eans of Achieving Four-Log Virus Inactivation/Removal; * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):												
								·					· ·
Type	of Disinf	ectant Residu	ual Maintain	ed in Distribut	ion System:	⊠F	ree Ch	orine	Com	bined Ch		hloramines)	Chlorine Dioxide
			C	Calculations, or U	/Y Dose, to De	monstrate Po	mi-ros	Virus Inactiv	ation, if Ar	plicable*	Does		
					24.31.1	Lowest CT	Charles Communication and			7.117	7.88	Lowest	
				Lowest Residual Disinfectars	Disinfectant	Provided					13.40	"Residual	
1				Concentration	Contact Time (T) at C	Before or		1.00		Lowest	Minimum	Disinfectant Concentration	
 	W-1 1-1	Net Quantity of Finished		(C) Before or at	Monsurement	Customer			Cer.	Operating	UV Dose	at Remote	
Day of	Hours Plant in	Water	Peak Plow	Pirst Customer During Peak	Point During Peak Flow,	During Peak Flow,	of	pH of Water, If	Required.	UV Dose,	Required, mW-	Point in Distribution	Emergency of Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water
	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	€	Applicable	min/L	sec/cm²	200/03M	System, mg/L	System Components Out of Operation
1	74	23,000 23,000											
3	24	15,000		 	 	 	ļ					1.0	
4	24	26,000	 	 	 	 	 			 		1.0	
5	24	15,000				 		 				1.0	
6	علا	123,000										0.3	
8	2Ý 2Ý	15,000	 	<u> </u>		 		}				1.3	
9	27	8,000	 	 		 		 	}	 	├	1.1	
10	24	174,000				<u> </u>		 	1	1	 	1:3	
11	24	13,000										(.3	
12	کر 24	15,000 16,000	ļ					<u> </u>	 	ļ		1.2	
14	34	6,000		 	 	}	}	 	 	 	 	1.1.1.	Marking Charle
15	24	21, 100					 	}		 	 	0.5	Hudroin Sura Com
16	29	23,000										0,8	Floshing & Stop
17	24	45,000 83,000						ļ	<u> </u>		L	1.0	Short of seption
19	14	27/000	 		 	 	 -	 	 	 		8,6	1, (
20	51/	21,000	<u> </u>			 	 	 	 	 	 	1.2	
21	λY	11,000										0.7	
22	24	26,000	ļ										
23	24	14,000	 		 	 	┼	 	 	 	-	1.0	
25	24	14,000	 	 	 	 	+-	 	1	 	 	1-1:1	
26	Įγ	19,000								1		1.2	
27	1 27	16,000							 			1.2	
28	27	7,000	 		 	 	┼	 	 	 	 	1.0	
30	127	20,000	 	 	 		+	+	 	 	-}	 77 	
31	24	11/000										1.0	
Total	**************************************	631, 800											

n--- 1

^{*} Refer to the instructions for this report to determine which plants must provide this information.





See page 4 for instructions.

FILE COPY

	pege : ioi inon uotionis:						
I.		for the Month/Year of: Sect 20	ભ				
A.	Public Water System (P	WS) Information					
	PWS Name: Little Wel	kiya				PWS Identification N	umber: 3590762
	PWS Type:	Community Non-Transient Non-	-Community	nt Non-Community	Со	nsecutive	
	Number of Service Cor	nnections at End of Month: 61		Total Population	Served at E	ind of Month: 214	
	PWS Owner: Utilities,	Inc. of Florida					
	Contact Person: Patricl	k Flynn		Contact Person's	Title: Regio	onal Director	
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte S		State: F1	Zip Code: 32714
	Contact Person's Telep	hone Number: 407-869-1919		Contact Person's	Fax Number	er: 407-869-6961	
	Contact Person's E-Ma	ul Address: p.c.flynn@utilitiesinc-usa.c	com				
B.	Water Treatment Plant						
	Plant Name: Utilites, I					Plant Telephone Num	ber: 407-869-1919
	Plant Address: 200 We			City: Altamonte S	Springs	State: Fi	Zip Code: 32714
	Type of Water Treated		Purchased Finished \	Vater			
	Permitted Maximum D	Day Operating Capacity of Plant, gallon	s per day: 47,000				
		bsection 62-699.310(4), F.A.C.): V		Plant Class (per s	ubsection 6	52-699.310(4), F.A.C.):	D
	Licensed Operators	Name	License Class	License Number	2 at 25 A.	Day(s)/Shift	(a) Worked
	Lead/Chief Operator:	Mike Gavaletz	С	5642		Mon-Fri 8 a.ı	
	Other Operators:	Terry Sillitoe	C	12749		Sat. 8 A.M.	
	The state of the s						
	l. Certification by Lea	1.ChinE On materia					
			ide on the land/shief and			the contract of the contract of	
in	formation provided in th	eatment plant operator licensed in Floristic is report is true and accurate to the best	t of my knowledge and belie	or of the water treat	tment plant	dentified in Part I of the	his report. I certify that the
N:	SF International Standar	d 60 or other applicable standards refer	enced in subsection 62 555	1. I Ceruity unat and	urinking w	ater treatment chemical	s used at this plant conform to
pla	ant were prepared each of	lay that a licensed operator staffed or v	isited this plant during the m	onth indicated abo	ve [.] (1) reco	nat the following additional areas of chemical areas of the second	sicals used and chemical feed
rat	tes; and (2) if applicable	, appropriate treatment process perform	ance records. Furthermore.	Lagree to retain the	ese addition	nal onerations records a	t the plant site for at least ten
ye	ars and to make them av	vailable for review upon request.	imile revolus. Turnormore,	r agree to return the	ese udditio	nai operations records a	the plant site for at least ten
	mulael)	Garat 10/5/04	Michael J. Gavaletz			C5642	
Si	gnature and Date		Printed or Typed Name		***	License No	ımber
	_	1 /	,,				

PWS I	S Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida - LHTLE WHOW												
III. D	Daily Data for the Month Year of: Section												
Means	of Achi	eving Four-L	og Virus In	activation/Rem	oval: *	Free Ch	lorine	С	hlorine D	ioxide	Oz	one 🔲 (Combined Chlorine (Chloramines)
		Radiation	Other ((Describe):									
Type o	of Disint	ectant Residu	ial Maintain	ed in Distribut	ion System:	⊠ Fı	ree Chl	orine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
This filter was become a constant of the const			· · · · · · · · · · · · · · · · · · ·	Calculations or l	V. 0.000 (0.00			K BUSINESS				A STATE OF THE STATE OF THE STATE OF	
			14 (2 (1))			100	74.1	Secretary of the second	BASSESSA AND THE SAME	1000年100日 1000	ROOMERS AND THE PARTY WAS THE	Lowest	
				Lowest Residual Disinfectant	Disinfectant Contact Time	Provided						Residue Disjulacion	Conference of the Conference o
				Concentration	Contact Tune	Herore or			Minimum			Distancent Concentration	
	100	Net Quantity		(C) Before or at	(I) at C Measurement Point During	Chatester During	Temp.	250		OH HE	UV	et Remote	
Day of the		of Pinished Water	Peak Flow	Pirst Customer	Point During	During	of		Required	UV Date	Required	A POST TO SERVICE AND A SERVIC	Engerage v.o. Abnormal Operating Conditions: Repair
Month	Operation	Produced, gai	Rate, and	During Peak Flow, mg/L	Peak Flow, minutes	mg-min/L		Avallable	Mar.	10 P. 10 P.	Ja W.	Distribution System, mg/L	or Maintanance Work that Involves Taking Water System Components Out of Operation
1	24	13.000			1000	Marie Barraga	100	Same or observe on the Same	AND THE PARTY OF	SH. TALKALINE	Marka Amerika	1.0	System Composition Cut of Operation
2	24	13,000										(j)	
3	25/	14,000										1.0	
4	3 4	70,000							ļ			1.0	
6	- 2V -	70,000										1.1	
7	24	28,000									ļ	1.0	
8	24	10,000		İ								0,6	
9	24	8,000										0.9	
10	24	13,000										1.0	
11	1 Y	14,000										ļ	
13	24	18.000			 	 			<u> </u>		ļ	1.0	
14	24	10,000		†	 				 			1.0	
15	24	16.00			1						-	175	
16	24	13,000										1.0	
17 18	29	14,000		ļ								1.1	
19	14 14	7,000		<u> </u>		 							
20	24	18 000				 			 	 		1.0	
21	27	13,000				1			┼╌──		1	1.0	
22	٧٤	16,000										110	
23	24	12000										1.0	
24	21	13,000			}		ļ					1.)	
26	- 11	18.00		 	 	 			 	ļ	ļ	 	
27	24	18,000	<u> </u>	 	 	 		 	 	 	 	0.7	
28	24	13,000				1		 	 	 	 	0,5	
29	14	19,00										0.8	
30	24	13,000										1.0	
Total	-110 No. 25 To	ATTE ALKO			<u> </u>								
Averag		18.000	545.00	OQ .									
1		10000	1 `										

^{*} Refer to the instructions for this report to determine which plants must provide this information.



See page 4 for instructions.

	page : for instructions.						
١.	General Information (for the Month/Year of: Oct 2004					
٩. ِ	Public Water System (P	WS) Information					
	PWS Name: Little Wel					PWS Identification Nur	nber: 3590762
		Community Non-Transient Non-Community	Transien	t Non-Community	_	nsecutive	
	Number of Service Con	nnections at End of Month: 61		Total Population Ser	ved at E	End of Month: 214	
	PWS Owner: Utilities,	Inc. of Florida					
ļ	Contact Person: Patricl	k Flynn		Contact Person's Tit	le: Regio	onal Director	
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Spri	ings	State: Fl	Zip Code: 32714
	Contact Person's Telep	hone Number: 407-869-1919		Contact Person's Fax	Numbe	er: 407-869-6961	
	Contact Person's E-Ma	nil Address: p.c.flynn@utilitiesinc-usa.com					
В.	Water Treatment Plant						
	Plant Name: Utilites, I					Plant Telephone Numb	er: 407-869-1919
	Plant Address: 200 We	eathersfield Ave.		City: Altamonte Spr	ings	State: Fl	Zip Code: 32714
	Type of Water Treated		hased Finished V				
	Permitted Maximum D	Day Operating Capacity of Plant, gallons per day: 4	7,000				
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): V		Plant Class (per subs	section (62-699.310(4), F.A.C.): Г)
	Licensed Operators	Name	License Class	License Number	TWO PAGE	Day(s)/Shift(s	
	Lead/Chief Operator:	Mike Gavaletz	С	5642	Manage Manage A.	Mon - Fri 8 a.m.	
	Other Operators:	Terry Sillitoe	С	12749		Sat. 8 A.M 4	1:30 P.M.
						4	
			1				
			1				
				·			
	. Certification by Lea						
ı, t	he undersigned water tr	eatment plant operator licensed in Florida, am the l	ead/chief operato	or of the water treatme	ent plant	t identified in Part I of thi	s report. I certify that the
MIC	ormation provided in th	is report is true and accurate to the best of my know	vledge and belief	. I certify that all dri	nking w	ater treatment chemicals	used at this plant conform to
nla nla	or miternational Stangar	d 60 or other applicable standards referenced in sub	section 62-555.2	520(3), F.A.C. Talso	certify t	hat the following addition	nal operations records for this
rat	es: and (2) if annlicable	day that a licensed operator staffed or visited this pl	ant during the m	onth indicated above:	(1) reco	ords of amounts of chemi-	cals used and chemical feed
ve	ars and to make them as	, appropriate treatment process performance record railable for review upon request.	s. rurmermore,	i agree to retain these	additio	nai operations records at	the plant site for at least ten
50		1 1-					
	mulall !	rus ato 11/04/08 Michael J	. Gavaletz			C5642	
Sie	gnature and Date	7100000	Typed Name			License Nur	nhar
Ju	S Duice	/ Printed of	ypeu name			Ficeuse indi	HUGI

D--- 1

													A verse
			T		· · · · · · · · · · · · · · · · · · ·		-				000 155		Total
	1-010	<u> </u>	 			<u> </u>					000 L	۲C	16
	8.0	ļ									9,000	አፒ	30
	011			<u> </u>		L					12,000	J.C	67
	5.1	ļ				i					00011	रेट	82
	ह ी										000 LC	रिट	LZ
	1.3	L									०० हा	हेर	97
	1.2				1						13,000	िर	25
			i								90,81		
	ξ.					1						70	54
	0.1										000.0	15C	23
	0.1										००० स	7.5	77
	5.0		†	 		 	 				०००वा	トて	71
	0)										6,000	7-5	70
	01						 				CC0, Y	77	61
	 				 						0000	人て	81
	1.0	 		 	ļ	 					000791	たて	LI
	0.1			 		 					C/10.8	አር	91
	7.0		 			<u> </u>					000,0	ht.	SI
	1 9.1				ļ	<u> </u>					2000	hτ	ti
			<u> </u>								17'000	h7	[3]
	0')										0001	h र	71
	V 1										23,000	ht	11
				<u> </u>							COD ET	7C	01
	0.1										600.6	አኛ	6
	7.0										000,61	15	8
	- 14										700 4 5	ht	L
	0.7										000, 9	λ ς	9
	0')		<u> </u>								00-11	hc hc	5
											000'81	ht	7
											000 8	75	ε
	(1)										000	75	_
	0.1										QQQ 157		7
System Components Out of Operation	Main motove	-Wat	Mo/oos	7/mm	Applicable	3.	J/nim-2m	minutes	Mow, malf	Rate, god		りて	
Emergency or Abnormal Operating Conditions; Repair or Meintenance Work that Involves Taking Water	Rendent Diginfedent Consentration E. Keneda	pannboy	Operating (IV)	Minimum CT Required, ings-	PA OC.	demo T	Provided Before or at Piret Customer During Paster Flow.	Disinfectant Contact Time (T) at C Measurement Point During Posit Flow,	Lowest Residual Disinfectant Concentration Concentration (C) Before or at Pirst Customer Pirst Customer Print Series Print Series Page 1997	Poak Plow	Met Quantity of Finished Water	Hours Plant in Operation	Day of
	Miles of the	1200000	1 40	1	F. W. W. S.	A Service	LOWest CT					* * * * * * * * * * * * * * * * * * * *	1: .
A Company of the Comp	10000		IAN		And the second	# 15 b	SUUL	CT Calcul	3 (4)	Agariasia.		4 10	
anixold amiono	(communication)	D OH O	Staldarile	- A 11 noth	wither Mri	Poo lew	AN STOCK	P. Dose to Des	Calculations, or L	l)			L
Chlorine Dioxide	hloramines)	O) anino	A) bario	ارس ک	orine	ее СрІ	년 🔀	on System:	ed in Distributi	nisınisM ls	ectant Residu	inisia ic	Type
									Descripe):	Other (Radiation		
ombined Chlorine (Chloramines)	One C	zo 🗀	əbixoi	d sninoln	СΙС	Horine	Free Ch	ovaí: *	activation/Rem	ni suri y go	eving rour-L	may to	IAICSIIS
								hooc	100 I	0.1001.4000	Oly Min toles	; 7° V 3° '	a double
								//corc	1,20		a for the Mo	well din	d 111
				Florida	es, Inc. of	: Other	lant Name	d		70/0600	tion Number	21111112DI	CAL
THASED FINISHED WATER	2710-1-710	7717	AA CINI			_			1110 1511	C7L0036 **	- damilé goite	- Pitrah	5/Nd

Average

Maximum 27 600

Maximum 27 600

* Refer to the instructions for this report to determine which plants must provide this information.



Ã.C	LOTHELA			•	****			200 P & 2000 2000 N Day	5 e
See	page 4 for instructions.								
1	General Information	for the Month/Year of: MaV2	004						
	Public Water System (P								
	PWS Name: Little Wel						PWS Identification	Number: 3500762	
		Community Non-Transient Nor	n-Community	Transien	t Non-Communit	,	nsecutive	Number: 3330702	
		nnections at End of Month: 61	Community		Total Population				
	PWS Owner: Utilities,			<u></u> . J	Total Topulation	SQLVCG at 1	and of ividitii.		
	Contact Person: Patric				Contact Person's	Title: Regio	onal Director		
		ing Address: 200 Weathersfield Ave.			City: Altamonte		State: Fl	Zip Code: 32714	ļ
		phone Number: 407-869-1919			Contact Person's			121p code: 3271	
	Contact Person's E-Ma	ail Address: p.c.flynn@utilitiesinc-usa	.com		Contact 1 Ciscins	1 dx 1 tuilloc	31, 407-007-0701		
B.	Water Treatment Plant	Information							
	Plant Name: Utilites, I	nc. of Florida		**			Plant Telephone Nu	ımber: 407-869-1919	
	Plant Address: 200 Wo	eathersfield Ave.			City: Altamonte	Springs	State: Fl	Zip Code: 3271	4
	Type of Water Treated			ased Finished V				1=4	·
	Permitted Maximum I	Day Operating Capacity of Plant, gallo	ns per day: 47	,000				· · · · · · · · · · · · · · · · · · ·	
		bsection 62-699.310(4), F.A.C.): V			Plant Class (per	subsection (62-699.310(4), F.A.C.	.): D	
	Licensed Operators			License Class	License Number			ift(s) Worked	
	Lead/Chief Operator:	Mike Gavaletz		С	5642			a.m 4:30 p.m.	
	Other Operators:	Terry Sillitoe		С	12749		Sat. 8 A.N	Л 4:30 P.M.	
		<u> </u>							
H	l. Certification by Lea	d/Chief Operator							
		eatment plant operator licensed in Flo	rida am the le	ad/chief operato	r of the water tres	atment nlant	identified in Part Lot	f this report Leartify th	at the
inf	formation provided in th	is report is true and accurate to the bes	st of my know	ledge and belief	I certify that all	drinking w	ater treatment chemic	als used at this plant co	nform to
N:	SF International Standar	d 60 or other applicable standards refe	erenced in subs	section 62-555.3	20(3), F.A.C. 1a	lso certify the	hat the following addi	itional operations record	is for this
pla	ant were prepared each (day that a licensed operator staffed or	visited this pla	int during the mo	onth indicated abo	ove: (1) reco	ords of amounts of che	emicals used and chemi	cal feed
rat	es; and (2) if applicable	, appropriate treatment process perform	mance records	. Furthermore,	l agree to retain th	nese addition	nal operations records	at the plant site for at l	east ten
ye		vailable for review upon request.							
	milail) Garage 12/2/04	Michael J.	Gavaletz			C5642		
Si	gnature and Date	7 010000 157-101		Typed Name			License	Number	
UI,	grande and Date		Fillifed Of	i ypeu ivaine			License	Number	

PWS I	S Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida														
III. D	I. Daily Data for the Month/Year of: MAY 2009 leans of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine														
Means	eans of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe): We of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Combined Chlorine Dioxide														
Type o	f Disinfe	ectant Residu	ıal Maintain	ed in Distribut	ion System:	⊠ Fı	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide		
			C	l'Calculations, or l	V Dose to De	ations -	ne log	Vine tech	etion, if An	elabo) (UV))Xee	See to			
Day of the Month	Plant in	Net Quantity of Pinished Water Produced, gal	Peak Flow Rate, and	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (I) at C Measurement Point Ducing Peak Flow, minutes	Lowest Cl. Provided Before or at First Customor During Peak Flow, mg-min/L	of	pli of Weter, if	Majara Majara Regara Regara			Lowest Residual Residual Distribution g Remote "Point in Distribution System, mg/L	Brosspancy or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Qut of Operation		
1	<u> </u>	18.000			2004			A Daleston		Marie Company	MS	0.0	Production of the state of the		
	24	14,000										1.0			
3	29	18:000										(-0			
5	1 4	1(,000 12,000					<u> </u>	ļ	 			1-1-1			
6	24	11,000	 		 	<u> </u>		 	 		 	1.3			
7	24	20,000		 	 	 		 	 	 		 			
8	24	21/020						 				1.2			
9	ΣŲ	li3 boo										12			
10	24	13:00										(.3			
11	29	16,000	<u> </u>					<u> </u>		<u> </u>		1.3			
12	24	11,000	ļ	 	 	 	 		ļ	<u> </u>	ļ	1-1-3-			
13	24 24	11,000	 		 	}	├	 	 	 	 	1.3			
15	24	15,000	 		 	 	╁──∸		 	 	 	1.0	 		
16	2Y	12,000	 		†	 		 		1	 	1.3	<u></u>		
17	24	74.000										1.9			
18	24	11,000					L					1.2			
19	24	12,000										1.4			
20	24 34	10,000	ļ	 	 	ļ	— —	 	 	 	 	1,3			
21	34	20,000	 	 	 -	 	-		 	-	 	j.2			
23	29	11,000	 	 	 	 	-	 	+	 	 	1.3			
24	24	7,000	 	 	 	†	 	1	1	 		1 17			
25	24	14.000				 	1	1	1	 	1	1.2			
26	37	6 000	.1		1		1			1		1.3			
27	74	\$7,000										1.4			
28	àY.	15,000													
29	34	15,000		<u> </u>		1				<u> </u>		1.3			
30	24	15,000	 /	4	 		 	4	 	 	 	1.5			
Total	L	478 083	 	1	1	1	1			<u> </u>		1	<u> </u>		
Avera		408,000	┨ ソ/												
Maxim		13/100	┥ ′												

^{*} Refer to the instructions for this report to determine which plants must provide this information.



See page 4 for instructions.

FILE COPY 606

1.	General Information	for the Month/Year of: Dec- 200	<i></i>			Ψ02
A.	Public Water System (PWS) Information	\			
	PWS Name: Little We				DWC Identification	N 1 25005(2
		Community Non-Transient Non-Commu	nity Transie	nt Non-Community	PWS Identification Consecutive	Number: 3590762
	Number of Service Co	onnections at End of Month: 6 l	inty I lansic	Total Population Served		
	PWS Owner: Utilities	Inc. of Florida		1 Total Population Served	at End of Wonth; 217	
	Contact Person: Patric			Contact Person's Title: F	Panianal Diseases	
	Contact Person's Mail	ing Address: 200 Weathersfield Ave.		City: Altamonte Springs	State: Fl	7:- Cada: 22714
	Contact Person's Teler	phone Number: 407-869-1919		Contact Person's Fax Nu		Zip Code: 32714
	Contact Person's E-Ma	ail Address: p.c. flynn@utilitiesinc-usa.com		Contact reison's rax int	111001. 407-809-0901	
В.	Water Treatment Plant	Information				
	Plant Name: Utilites, I	inc. of Florida			Plant Telephone Nu	imber: 407-869-1919
	Plant Address: 200 We	eathersfield Ave.		City: Altamonte Springs		Zip Code: 32714
	Type of Water Treated	d by Plant: 🛛 Raw Ground Water 🗍 P	urchased Finished \		1 Joune, 11	121p Code: 32714
		Day Operating Capacity of Plant, gallons per day	: 47.000			
	Plant Category (per su	ibsection 62-699.310(4), F.A.C.): V		Plant Class (per subsecti	on 62-699.310(4), F.A.C.). D
Ì	Licensed Operators	Name	License Class			ift(s) Worked
ļ	Lead/Chief Operator:	Mike Gavaletz	С	5642		a.m 4:30 p.m.
ı	Other Operators:	Terry Sillitoe	С	12749		1 4:30 P.M.
ı						
J					······································	
١						
						
						
- 1	A Part of the same					

					· 	
m	Certification by Lead	d/Chiaf () warnton				
l th	e undersigned water tr	earment plant operator licensed in Florida and the	- l 1/-1'-C	C.1	1 11 10 11 0 1 0	
info	rmation provided in th	eatment plant operator licensed in Florida, am th	e lead/chief operato	or of the water treatment p	lant identified in Part I of	this report. I certify that the
NSI	F International Standard	is report is true and accurate to the best of my kn d 60 or other applicable standards referenced in s	iowieage and belief	. I certify that all drinking	g water treatment chemica	ils used at this plant conform to
plar	it were prepared each d	day that a licensed operator staffed or visited this	nlant during the m	onth indicated above: (1)	ry that the following addition	minute used and chemical food
rate	s; and (2) if applicable.	, appropriate treatment process performance reco	ords Furthermore	I agree to retain these addi	itional operations records	at the plant site for at least ten
yea	rs and to make them av	ailable for eview upon request.	i A	agree to retain these add	•	
1	7. 611	/// RAY	MOND ITLAN	MARRISH	C-17	2 <i>740</i>
Δ	Hannel Ita	Jarrish 1/2/2005 Michael	MOND ALAN el J. Gavaletz		C5642	
Sig	nature and Date	Printed	or Typed Name		License N	Number



Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Combined Chlorine (Chloramines)	PWS Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida - LITTLE WEKINA														
Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)															
Type of Disinfectant Residual Context Time Content (Ch) Before or at Plant in Water Marian Management Plant in Water Man	Manus CA 11: 1 P. 1 VV														
Day of House Political House Politic	Ultraviolet Radiation Other (Describe):														
Day of House Political House Politic	Type	of Disin	fectant Resid	ual Maintair	ned in Distribut	ion System:	Ŋ F	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide	
Content Concentration Co		•	1.0	C	T Calculations, or	UV Dose, to De	monstrate F	our-Log	Virus Inactiv	ation, if Ar	plicable			C. C. C. C. C. C. C. C. C. C. C. C. C. C	
Day of House Net Quactity Disinfectant Di						CT Calcu	lations					Dose	j		
Day of Hours Day of Hours Day of Hours Day of Hours Day of Hours Day of Hours Peak Flow							Lowest CT		T				Lowest		
Day of Hours Plant in Month Operation Produced, gal Peak Flow Plant in Month Operation Pla			[l	1	1			Residual		
Day of the bound to produced, gas plant in both Operation Plant in	1 1		ĺ					1	. ,	l					
Day of Pours Principle Pour			Net Quantity					Temp			Lowest	Minimum	Concentration		
Description Description Description Peak Flow Month Operation Produced, gas Peak Flow Month Operation Produced, gas Peak Flow Minutes Peak Flow Minu	Day of	Hours	of Finished			Point During			nH of		UV Doce	Dequired	at Remote	E-manuscript About 1 Countries Countries D	
Nonth Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L C Applicable min/L sec/cm ² sec/cm ² System Components Out of Operation Lift	the		Water	Peak Flow									Distribution	or Maintenance Work that Involves Taking Works	
1	Month	Operation		Rate, gpd	Flow, mg/L	minutes							System mg/L	System Components Out of Operation 4	
13,000 11.5 1.5	-	24							1						
1 1 1 1 1 1 1 1 1 1															
			12,000												
1			10,00										1,4		
1					<u> </u>										
1			15,000		ļ								1,2		
15 15 10 13 20 11 12 11 13 20 12 14 24 13 20 14 24 13 20 14 20 14 20 14 20 20 20 20 20 20 20 2			12,000										1.3		
10			17,000										1.2	(
11			15,000										1,2		
13													1.1		
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$													0.9		
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		1/					ļ								
15								<u> </u>					1,2		
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		<u> </u>											1,2		
17					ļ								1.3		
18'															
19			11,000					ļ							
20. 3, oro								ļ					1.3		
21								 					, ,	**************************************	
22															
13,000								<u> </u>						4. U	
24 10,000 1,5 25 10,000 1,4 26 12,500 1,500 27 11,500 1,5 28 11,000 1,0 29 9,000 1,0 30 V 12,000 1,5 Total 12-11 391,000 1,5							·								
25 10,000 1,4 1,4 1,5		_													
126	- 25														
27 11,500 1,5 1,5 1,0 1,0 1,0 1,0 1,5			12.500										1.9		
28 11, oro 1.0 1.0 1.0 1.0 1.0 1.5	27		12.500												
100 100 100 100 100 100 100 100 100 100													4.3		
30 V 12.000 31 2 Y 12.000 Total 3 3 1.0 00 V	29	20 (1)													
131 2 4 12,000 Total 12 1 391,000 1	30	30~ \ /2,000													
Total 391.0 00 1/		31 24 12,000													
Average 13,000		otal 391,000 /													
	Average	AND AND A		/											

D--- 1

^{*} Refer to the instructions for this report to determine which plants must provide this information.



FILE COPY



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See page 4 for instructions.

300	page 4 for instructions.							
Ī.	General Information	for the Month/Year of: January/200	5					
Ä.	Public Water System (P	WS) Information						
1	PWS Name: Little Wel	kiva					PWS Identification Nu	mber: 3590762
		Community Non-Transient Non-	Community	Transien	t Non-Community	ПС	onsecutive	
		nnections at End of Month: 61			Total Population Se	erved at I	End of Month: 214	
	PWS Owner: Utilities,							
	Contact Person: Patricl				Contact Person's Ti	itle: Regi	onal Director	
		ng Address: 200 Weathersfield Ave.			City: Altamonte Sp		State: Fl	Zip Code: 32714
		phone Number: 407-869-1919			Contact Person's Fa	ax Numb	er: 407-869-6961	
		ail Address: p.c.flynn@utilitiesinc-usa.c	om					
В.	Water Treatment Plant							
	Plant Name: Utilites, I						Plant Telephone Num	ber: 407-869-1919
	Plant Address: 200 We				City: Altamonte Sp	orings	State: Fl	Zip Code: 32714
	Type of Water Treated	by Plant: Raw Ground Water	Purch	ased Finished V				
		Day Operating Capacity of Plant, gallons	s per day: 47	,000				
		bsection 62-699.310(4), F.A.C.): V		1	Plant Class (per su	bsection	62-699.310(4), F.A.C.):	D
	Licensed Operators	Name		License Class	License Number		Day(s)/Shift(s) Worked
	Lead/Chief Operator:	Roy Mericle		С	13808		Tue - Fri 8 a.n	n 4:30 p.m.
	Other Operators:	Terry Sillitoe		С	12749		Sat. 8 A.M	4:30 P.M.
	The second secon	Ray Parrish		С	12740		Mon 8 A.M.	- 4:30 P.M.
	. Certification by Lea	A/Chief Opportun						
		reatment plant operator licensed in Flori	do om the le	ad/ahiaf anarata	or of the water treatr	nant plan	at identified in Part I of th	is report. I certify that the
inf	formation provided in th	is report is true and accurate to the best	of my know	ledge and belief	F I certify that all di	ncin pian rinking u	vater treatment chemicals	used at this plant conform to
NS	SF International Standar	d 60 or other applicable standards refere	enced in sub	section 62-555 3	320(3) FAC Lals	o certify	that the following addition	onal operations records for this
pla	ant were prepared each of	day that a licensed operator staffed or vi	isited this pla	ant during the me	onth indicated above	e: (1) rec	ords of amounts of chem	icals used and chemical feed
rat	es; and (2) if applicable	, appropriate treatment process perform	ance records	s. Furthermore,	I agree to retain the	se additio	onal operations records at	the plant site for at least ten
ye	ars and to make them av	vailable for review upon request.		,	0		•	-
	11	$\exists 11 = 1$						
	1 con	-114 L-2-5	Roy J. Me	ricle			C13808	
Si	gnature and Date		Printed or	Typed Name			License Nu	ımber

D--- 1

PWS Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida															
	III. Daily Data for the Month/Year of: January/2005														
	Means of Achieving Four-Log Virus Inactivation/Removal: *														
Type o	of Disinf	ectant Residu	ıal Maintair	ned in Distribut	ion System:	⊠F	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide		
	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*														
	CT Calculations UV Dose														
Day of the	Hours Plant in	Net Quantity of Finished Water	Peak Flow	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow,	at First	Temp. of Water,	pH of Water, if	Minimum CT Required, mg-	Operating	Minimum UV Dose Required, mW-	Lowest Residual Disinfectant Concentration at Remote Point in Distribution	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water		
Month		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm²	sec/cm ²	System, mg/L	System Components Out of Operation		
1	24	13,000										0.8			
2	24	14,000					ļ	<u> </u>							
3	24	14,000			!				<u> </u>			1.0			
5	24	12,000		 		ļ	<u> </u>	<u> </u>				1.0			
6	24	11,000		 			L	<u> </u>	<u> </u>			1.0			
7	24	12,000		 		ļ	ļ	ļ			ļ	1.4			
8		13,000				ļ	<u> </u>					3.3			
9	24	9,000	ļ				<u> </u>					3.2			
10	24	16,000 17,000		ļ		ļ	ļ	<u> </u>	ļ						
11	24	13,000		 		<u> </u>		<u> </u>		ļ	<u> </u>	1.8			
12	24	13,000				<u> </u>	ļ					2.0			
13	24	12,000		-		ļ						1.5			
14	24	10,000					 	 	<u> </u>			1.5			
15	24	10,000				ļ	ļ		 		ļ	1.5			
16	24	12,000	 			ļ		 	ļ		 	1.3			
17	24	12,000				 			 	 	 	1.3			
18	24	13,000		 	 	 	├	 		 		1.3			
19	24	10,000	t	1	 	 	 	 	 			1.5			
20	24	10,000		 	 	 	 	1	 		 	2.0			
21	24	11,000	i	 		 	 		 	 	+	2.5			
22	24	8,000	<u> </u>	 	· · · · · · · · · · · · · · · · · · ·	 	1	 	 		 	1.9			
23	24	13,000			 	 	 	 	 	1		1.7			
24	24	13,000					 		 	 	 	2.0			
25	24	13,000					1	1	 	 	 	2.0			
26	24	13,000		1	T	 	-	 	 	 	+	2.1			
27	24	12,000			1	1	1	 	 	 	 	2.0			
28	24	14,000				†	t	 	 	1	+	1.7			
29	24	7,000				1	1	 	 	†	1	1.6			
30	24	16,000			1		1	1	 	 	 	 			
31	24	16,000				1	1	1	1	1	1	0.70			
Total		382,000				-1				*	· · · · · · · · · · · · · · · · · · ·				
Averag		12,322	1												
Maxim	um	17,000	1												

17,000

^{*} Refer to the instructions for this report to determine which plants must provide this information.





See page 4 for instructions.

		for the Month Year of: February/200)5									
٩.,	Public Water System (F											
	PWS Name: Little We	kiva			PWS Identification Nu	mber; 3590762						
		Community Non-Transient Non-Community	Community Transien	t Non-Community	Consecutive							
		nnections at End of Month: 61		Total Population Serv	ed at End of Month: 214							
	PWS Owner: Utilities,	Inc. of Florida										
	Contact Person: Patric	k Flynn		Contact Person's Title; Regional Director								
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Springs State: Fl Zip Code: 32714								
	Contact Person's Teler	phone Number: 407-869-1919			Number: 407-869-6961							
	Contact Person's E-Ma	il Address: p.c.flynn@utilitiesinc-usa.co	om									
В.	Water Treatment Plant	Information										
	Plant Name: Utilites, 1			·	Plant Telephone Numb	per: 407-869-1919						
	Plant Address: 200 We			City: Altamonte Spri	ngs State: Fl	Zip Code: 32714						
	Type of Water Treated		Purchased Finished V	Vater								
	Permitted Maximum [Day Operating Capacity of Plant, gallons	per day: 47,000									
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): V		Plant Class (per subs	ection 62-699.310(4), F.A.C.): 1	D						
	Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked						
	Lead/Chief Operator:	Roy Mericle	С	13808	Tue - Fri 8 a.m							
	Other Operators:	Terry Sillitoe	С	12749	Sat. 8 A.M	4:30 P.M.						
		Ray Parrish	C	12740	Mon 8 A.M	4:30 P.M.						
					_							
m	. Certification by Lea	d Chief Operator										
		eatment plant operator licensed in Floric	lo are the lead/shief are and		-4 -14 :14:6-1:- D4 I -64	is asset I soutify that the						
inf	ormation provided in th	is report is true and accurate to the best	of my knowledge and belief	or of the water treatme	nt plant identified in Part 1 of the	used at this plant conform to						
NS	F International Standard	d 60 or other applicable standards refere	nced in subsection 62-555	2003) FAC Islead	ertify that the following addition	and operations records for this						
pla	nt were prepared each c	lay that a licensed operator staffed or vis	sited this plant during the me	onth indicated above	(1) records of amounts of chem	icals used and chemical feed						
rati	es; and (2) if applicable,	appropriate treatment process performa	ince records. Furthermore.	I agree to retain these	additional operations records at	the plant site for at least ten						
yea	ars and to make them av	ailable for review upon request.				—— — • • • • • • • • • • • • • • • • • • •						
	lax.	When 2-28-05	Roy J. Mericle		C13808	<u> </u>						
Sig	nature and Date		Printed or Typed Name		License Number							

PWS Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida														
III. Daily Data for the Month Vear of: February/2005														
Means	Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)													
Ul	raviolet	Radiation	Other ((Describe):							· 			
Type	of Disinf	ectant Residu	ual Maintain	ed in Distribut	on System:	ΧF	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)		Chlorine Dioxide
			C	T Calculations, or	JV Dose, to De	monstrate Fo	our-Log	Virus Inactiv						
					CT Calcu						Dose			
((1		7			Lowest CT		1				Lowest	ł	
!				Lowest Residual	Disinfectant	Provided		Ì			!	Residual	1	
ŀ				Disinfectant	Contact Time	Before or	1	Ì		١.	Minimu	Disinfectant	1	
1		Net Quantity		Concentration	(T) at C	at First	T		Minimu	Lowest	m UV	Concentration at Remote	1	
Day of	Hours	of Finished	[(C) Before or at First Customer	Measurement Point During	Customer During	Temp.	pH of	m CT	Operating UV Dose,			Eme	rgency or Abnormal Operating Conditions; Repa
the	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-	Distribution	or	Maintenance Work that Involves Taking Water
Month	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable		sec/cm ²	sec/cm ²	System, mg/L		System Components Out of Operation
1	24	13,000										1.6		
2	24	13,000										1.4		
3	24	12,000										1.0		
4	24	13,000										1.3		
5	24	9,000										0.8		
6	24	15,000												
7	24	15,000										0.9		
8	24	12,000				I						1.2		
9	24	14,000										1.5		
10	24	14,000										1.4		
11	24	13,000										1.2		
12	24	8,000										0.8	<u> </u>	
13	24	15,000				<u> </u>				<u> </u>		<u> </u>	1	<u> </u>
14	24	16,000	<u> </u>			<u> </u>	<u> </u>		<u> </u>	<u> </u>		1.5	 	
15	24	16,000				ļ				<u> </u>		1.6	 	
17	24 24	14,000	ļ	ļ		_	<u> </u>	ļ				2.0	-	
18	24	15,000 14,000	 	 	<u> </u>	ļ	-		4		ļ	2.0	↓	
19	24			 	ļ		 		<u> </u>	 	 	1.1	+	
20	24	13,000	 	 	 		-			-		0.8	+	
21	24	17,000	 	 	 	 	 	 	 	 	+	 	+	
22	24	13,000	 	 	}	 	 	 		 	 	1.2	+	
23	24	13,000	-	 	 	 	 	+	 	 	 	1.3	+	
24	24	13,000	 	 	 	 	+	 	+	 	+	1.3	+-	
25	24	15,000	 	 	 	 	+	 	+	+	+	1.2	+	
26	24	10,000	 	 	 	+	+	+	+	 	+	1.1	 	
27	24	13,000	†	 	 	 	+	+	+	+	+	1.1	+	
28	24	14,000	1	 	 	 	+	+		+	+	1.4	+	
29	24	1	 	 	 	 	+	+	 	 	+	1	1—	
30	24	1	1	1	 	 	1	 	 	 	 	1	 	
31	24	1	 			1	1	1	+	 	1	 	1	
Total		379,000	1					-1			<u></u>	······································		
Averag	ç	13,535	1											
Mayin	um	17,000	7											

^{*} Refer to the instructions for this report to determine which plants must provide this information.



See	page 4 for instructions.	,											
		for the Month/Year of: March/2005					7.7						
Α.	Public Water System (F	WS) Information											
	PWS Name: Little We	kiva ·				PWS Identification N	Number: 3590762						
	PWS Type: 🛛 🔾 C	Community Non-Transient Non-Commu	unity Transien	nt Non-Community	ПСо	nsecutive							
	Number of Service Co	nnections at End of Month: 61		Total Population Se	erved at E	End of Month: 214							
	PWS Owner: Utilities,	Inc. of Florida											
	Contact Person: Patric	k Flynn		Contact Person's Ti	tle: Regio	onal Director							
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Sp	rings	State: Fl	Zip Code: 32714						
	Contact Person's Teler	phone Number: 407-869-1919		Contact Person's Fa		er: 407-869-6961							
	Contact Person's E-Ma	ail Address: p.c.flynn@utilitiesinc-usa.com											
В.	Water Treatment Plant	Information											
	Plant Name: Utilites, I					Plant Telephone Nui	mber: 407-869-1919						
	Plant Address: 200 Wo			City: Altamonte Sp	orings	State: Fl	Zip Code: 32714						
	Type of Water Treated	l by Plant: 🔀 Raw Ground Water 🔲	Purchased Finished V	Vater									
		Day Operating Capacity of Plant, gallons per da	ay: 47,000										
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): V		Plant Class (per su	bsection (62-699.310(4), F.A.C.)	: D						
	Licensed Operators	Name	License Class	License Number		Day(s)/Shi	ft(s) Worked						
	Lead/Chief Operator:	Roy Mericle	С	13808		Tue - Fri 8 a	ı.m 4:30 p.m.						
	Other Operators:	Terry Sillitoe	С	12749		Sat. 8 A.M	4:30 P.M.						
		Ray Parrish	С	12740		Mon 8 A.M	1 4:30 P.M.						
	ļ												
	1.												
T	. Certification by Lea	d/Chief Operator											
		eatment plant operator licensed in Florida, am	the lead/chief energic	or of the water treats	aant plant	identified in Dort Lof	this remove I contify that the						
inf	formation provided in th	is report is true and accurate to the best of my	knowledge and belief	of the water freath	inking w	i luciliticu III Fait I Ol star trastment chemics	de used at this plant conform to						
NS	SF International Standar	d 60 or other applicable standards referenced in	n subsection 62-555 3	320(3) FAC Lalso	certify t	hat the following addit	ional operations records for this						
pla	int were prepared each of	day that a licensed operator staffed or visited th	is plant during the mo	onth indicated above	e: (1) reco	ords of amounts of che	micals used and chemical feed						
rat	es; and (2) if applicable	, appropriate treatment process performance re	cords. Furthermore,	I agree to retain thes	e addition	nal operations records	at the plant site for at least ten						
ye	ates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten ears and to make them available for review upon request.												
)0 0 - ~ ~											
	1694		J. Mericle			C13808							
Si	gnature and Date)	Print	ed or Typed Name			License N	lumber						

PWS Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida															
				f: March/200											
	Means of Achieving Four-Log Virus Inactivation/Removal: *														
	Ultraviolet Radiation Other (Describe): Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide														
Type	of Disinte	ectant Residu	ual Maintain	ed in Distribut	ion System:	⊠ F	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide		
				Calculations, or l	CT Calcul	monstrate ro	ur-Log	Virus Inactiv	ation, if Ap		Dose				
						Lowest CT					LASE	Lowest			
				Lowest Residual	Disinfectant	Provided						Residual			
				Disinfectant Concentration	Contact Time (T) at C	Before or at First			Minimum	Lowest	Minimum	Disinfectant Concentration			
		Net Quantity		(C) Before or at	Measurement		Temp.		СТ	Operating	UV Dose	at Remote			
Day of the	Hours Plant in	of Finished Water	Peak Flow	First Customer	Point During	During	of	pH of	Required,	UV Dose,	Required,	Point in	Emergency or Abnormal Operating Conditions; Repair		
			Rate, gpd	During Peak Flow, mg/L	Peak Flow, minutes	Peak Flow, mg-min/L	water,	Water, if Applicable	mg- min/L	mW- sec/cm²	mW- sec/cm²	Distribution System, mg/L	or Maintenance Work that Involves Taking Water System Components Out of Operation		
ı	24	12,000						ррачесь.		0000111	50000111	1.2	Bysicin Components Out of Operation		
2	24	13,000										1.0			
3	24	13,000 11,000		ļ								1.2			
5	24	12,000				<u> </u>						1.2 1.0			
. 6	24	14,000		 	 		 					1.0	7		
· 7	24	15,000		1								1.2			
8	24	11,000										1.2			
9	24	13,000										1.5			
11	24	11,000				<u> </u>					ļ	1.4			
12	24	11,000		 		 	-	<u> </u>			<u> </u>	1.6 1.4			
13	24	16,000		1				ļ	·						
14	24	16,000										1.6			
15 16	24	12,000 9,000		ļ	ļ	_	ļ					2.2			
17	24	7,000		 								2.1 1.5			
18	24	10,000			†			· · · · · · · · · · · · · · · · · · ·		ļ		1.6			
19	24	14,000										1.4			
20	24	16,000													
21	24 24	16,000 8,000				 				<u> </u>	 	1.5			
23	24	10,000	 					 	 	 	 	1.4			
24	24	11,000			 		 		 		 	1.4			
25	24	9,000										1.6			
26	24	11,000										1.5			
27	24 24	14,000	 	.	 	 	├	ļ			ļ	1.3			
29	24	10,000	 	 	 	 	 	 	ļ	 	 	2.0			
30	24	13,000				 					 	2.0			
31	24	14,000										2.00			
Total		376,000	1												

Maximum

D--- 7

^{*} Refer to the instructions for this report to determine which plants must provide this information.

FILE COPY



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See page 4 for instructions. 1. General Information for the Month/Year of: April/2005 A. Public Water System (PWS) Information PWS Name: Little Wekiya PWS Identification Number: 3590762 PWS Type: Community Consecutive Non-Transient Non-Community Transient Non-Community Number of Service Connections at End of Month: 61 Total Population Served at End of Month: 214 PWS Owner: Utilities, Inc. of Florida Contact Person: Patrick Flynn Contact Person's Title: Regional Director Zip Code: 32714 Contact Person's Mailing Address: 200 Weathersfield Ave. City: Altamonte Springs State: Fl Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com B. Water Treatment Plant Information Plant Name: Utilites, Inc. of Florida Plant Telephone Number: 407-869-1919 Plant Address: 200 Weathersfield Ave. Zip Code: 32714 City: Altamonte Springs State: Fl Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 47,000 Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): D Licensed Operators Name License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operator: Roy Mericle 13808 Tue - Fri 8 a.m. - 4:30 p.m. C Other Operators: Terry Sillitoe C Sat. 8 A.M. - 4:30 P.M. 12749 Ray Parrish \mathbf{c} Mon 8 A.M. - 4:30 P.M. 12740 H. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555,320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten years and to make them available for review upon request. C13808 Roy J. Mericle Signature and Date Printed or Typed Name License Number

	MICHITET OPERATION REPORT FOR PWSS TREATING RAVE GROUND WATER OR PORCHAGED THICHED WATER													
PWS	PWS Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida													
THE PARTS DATA CONTROL AND ADMINISTRATION OF THE PARTS OF														
	III. Daily Data for the Month/Year of: April/2005 Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)													
Mean	Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine													
	traviolet	Radiation												
Type	of Disinf	ectant Resid	ual Maintair	ned in Distribut	ion System:	⊠F	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide	
			C	T Calculations, or l	UV Dose, to De						The second second	A STATE OF THE STA		
1	CT Calculations UV Dose													
		<u>'</u>				Lowest CT						Lowest	,	
1				Lowest Residual	Disinfectant	Provided				1.		Residual		
]			1	Disinfectant	Contact Time	Before or	1	1			Minimu	Disinfectant		
1		Not Quantity		Concentration	(T) at C	at First	_	ļ	Minimu	Lowest	m UV	Concentration		
Day of	Hours	of Finished		(C) Before or at First Customer	Measurement Point During	Customer		. 17 . 6	m CT	Operating UV Dose,	Dose	at Remote Point in	Emergency or Abnormal Operating Conditions; Repair	
the	Plant in	Water	Peak Flow	During Peak	Peak Flow.	During Peak Flow	Of	pH of Water, if	Required, mg-	mW-	Required, mW-	Distribution	or Maintenance Work that Involves Taking Water	
Month		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable		sec/cm ²	sec/cm ²	System, mg/L	System Components Out of Operation	
ī	24	9,000	333377 603	,	- Innitiation	IIIA-IIIII E	— -	Approache	Gitti/12	SCO/CIII	Jourgan .	1.6		
2	24	8,000				 	 		 		 	1.8		
3	24	13,000	 			 		 	 	 	 	4:0		
4	24	14,000			 		 	 		 	 	1.8		
5	24	15,000	†		· · · · · · · · · · · · · · · · · · ·	 	 	 	 	 		2.0		
6	24	12,000		1		 		2.0						
7	24	17,000		<u> </u>	 	+	 	 	 		 	2.0		
8	24	9,000	 	· · · · · · · · · · · · · · · · · · ·	 	 	 	 	 		 	1.8		
9	24	13,000	1			 	 	 	 	 	 	1.6	***************************************	
10	24	22,000	 		 	 		 	 	 	 			
11	24	22,000		1		 		 		 		1.4		
12	24	12,000		1	 	†	1	1		 	 	1.5		
13	24	17,000	1			T	 	1	†	 	1	1.4		
14	24	18,000		1		1	 		 	 		1.3		
15	24	21,000			·		† 		 	 	† 	1,5		
16	24	18,000				1		1	†		 	1.3		
17	24	21,000			 	1	1		†	† ·····	 			
18	24	22,000				 	1			1	 	1.6		
19	24	15,000		T	1	1	1		1	 	1	0.9		
20	24	17,000		T		1	1	1	1		1	1.2		
21	24	21,000		1		T	T		1	T	T	1.1		
22	24	16,000			T					1	1	1.2	İ	
23	24	15,000			1	1	1	1		1	1	1.3		
24	24	17,000					1		1	1	T	1		
25	24	18,000					1		1		T	1.4		
26	24	10,000					T					1.5		
27	24	13,000							T T	1	1	1.5		
28	24	15,000					1				1	1.4		
29	24	14,000					T				 	1,5		
30	24	17,000				T	1		1	1	1	1.5		
31							1		1		1			
Total		471,000]										And the second s	
Avera		15,700]											
Maxin	านกา	22,000	1											

^{*} Refer to the instructions for this report to determine which plants must provide this information.

FILE COPY



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See page 4 for instructions.

,,,,	page 4 for instructions.												
		or the Month/Year of: May/2005											
Α. [Public Water System (P	WS) Information											
[PWS Name: Little Wel	kiva				PWS Identification Nur	nber: 3590762						
	PWS Type:	ommunity Non-Transient Non-Community	y Transier	t Non-Community		secutive							
	Number of Service Cor	nnections at End of Month: 61		Total Population S	erved at Er	nd of Month; 214							
ı	PWS Owner: Utilities, Inc. of Florida												
	Contact Person: Patrick	Flynn		Contact Person's T		nal Director							
	Contact Person's Mailin	ng Address: 200 Weathersfield Ave.		City: Altamonte Sp	orings	State: Fl	Zip Code: 32714						
	Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961												
		il Address; p.c.flynn@utilitiesinc-usa.com					2.2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1						
В.	Water Treatment Plant					, ,							
	Plant Name: Utilites, In	nc. of Florida				Plant Telephone Numb							
	Plant Address: 200 We			City: Altamonte S	prings	State: Fl	Zip Code: 32714						
	Type of Water Treated	by Plant: Raw Ground Water Purc	chased Finished V	Vater									
		Day Operating Capacity of Plant, gallons per day: 4	7,000										
		bsection 62-699.310(4), F.A.C.): V			bsection 62	2-699.310(4), F.A.C.): I							
	Licensed Operators	Name	License Class	License Number	es de la companya de la companya de la companya de la companya de la companya de la companya de la companya de	Day(s)/Shift(s	i) Worked						
	Lead/Chief Operator:	Kathy Sillitoe	С	13094		Mon- Fri	Days						
	Other Operators:	Terry Sillitoe	В	12749		Thurs, Fri, S	at. Days						
		Roy Mericle	С	13808		Tues-Fri Days From 5	5/1 Untill 5/17/05						
		Alex Lorenzo	С	13756		Mon. Wed	. Days						
		Roger Holsapple	С	7436		Tues. D	ays						
				l	L								
	. Certification by Lea	d/Chief Operator											
		eatment plant operator licensed in Florida, am the	lead/chief operate	or of the water treat	ment plant	identified in Part I of thi	is report. I certify that the						
	Information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to ISF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this												
pla	lant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed												
rat	ates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten												
yea	rears and to make them available for review upon request.												
¥	Kathy Sillitoe C-13094												
Sig	enature and Date		or Typed Name			License Nu	mber						

PWS Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida														
	111. Daily Data for the Month/Year of: May/2005													
	Means of Achieving Four-Log Virus Inactivation/Removal: *													
			ıal Maintain	ed in Distribut	ion System:	⊠F	ree Ch	lorine	☐ Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide	
			c	Γ Calculations, or U	JV Dose, to De	monstrate Fo	ur-Log	Virus Inactiv	ation, if Ar	plicable*	1			
			77.76		CT Calcu	ations:	and the second			UV	Dase 🕒			
Day of	Hours Plant in	Net Quantity of Finished Water	Peak Flow	Lowest Residual Disinfectant Concentration (C) Before of at First Customer During Peak	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow,	Lowest CT Provided Before or at First Customer During Peak Flow,		pH of	CT Required,	Lowest Operating UV Dose, mW-	UV Dose Required	Lowest Residual Disinfectant Concentration at Remote Point in Distribution		
Month		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	mg- min/L	seq/cm ³	sec/cm	System, mg/L	System Components Out of Operation	
1	24	19,000			************			E BACKA M STOCKSCHARAGESTON				B) F 3-3 Calaba Base 2 Section	ACTION COMPANY AND ACTION OF THE PROPERTY OF T	
2	24	19,000										1,20		
3	24	11,000									,	1.30		
- 4	24	12,000										1.10		
5	24	14,000										1.70		
6	24	12,000					<u> </u>					1.20		
7	24	11,000	ļ	ļ			ļ	ļ	ļ	ļ	<u> </u>	1.10		
8	24 24	19,500 19,500		ļ	ļ	<u> </u>		<u> </u>						
10	24	17,000				ļ	 	 	 	ļ	ļ	1.80		
11	24	16,000	 	 		 	-		 	 		1.30 1.30		
12	24	14,000	 				 	 	 	-	 	1.20		
13	24	12,000	 	 	 	 	 	 	 	 	 	1.10		
14	24	16,000				 	1		<u> </u>		<u> </u>	1.10		
15	24	26,500				1	1		 			 		
16	24	26,500					1		 	1		1.40		
17	24	15,000										1.60		
18	24	24,000			<u> </u>							1.20		
19	24	19,000	<u> </u>									1.30		
20	24	20,000	ļ	 		ļ	1					1.40		
22	24	17,000 24,500	 	ļ	 	1	<u> </u>		<u> </u>	ļ	<u> </u>	1.40		
23	24	24,500	 	 	 	 	1	ļ	1	 		1	<u> </u>	
24	24	16,000	 		 	 	┼	 		 	 	1.20		
25	24	24,000	 	 	 	 	 	 	+		-	1.30		
26	24	10,000	 	 		 	 	 	 	 	 	1.00		
27	24	22,000		<u> </u>	 	 	†		 	+	 	1.40		
28	24	20,000	T				 	1	 	 	 	1.50	 	
29	24	18,000				1	1	 		 	 	1		
30	24	18,000			1		1	1	†	ļ	1	1.30		
31	24	17,000						T		1		1.70		
Total		554,000	1							······································				
Averag		17,870	4											
Maxim	um	26,500	1											

^{*} Refer to the instructions for this report to determine which plants must provide this information.

	MONTHLY OPERATION REPORT FOR PWSs TREATING RA	AW GROUND WATER OR PURCHASED FINISHED WATER
P۱	PWS Identification Number: 3590762 Plant Name: Utilites, Inc.	
I	IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epicl	hlorohydrin, and Iron or Manganese Sequestrant for the Year: * May/2005
Α.	A. Is any polymer containing the monomer <u>acrylamide</u> used at the water treatment plant?	No Yes, and the polymer dose and the acrylamide level in the polymer are as
	follows:	
	Polymer Dose, ppm =	Acrylamide Level, % [†] =
В.	B. Is any polymer containing the monomer epichlorohydrin used at the water treatment pl	lant? No Yes, and the polymer dose and the epichlorohydrin level in the
	polymer are as follows:	
		Epichlorohydrin Level, % [†] =
C.		Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:
	Type of Sequestrant (polyphosphate or sodium silicate):	
	Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of silicate as SiO ₂ =	
	If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/	L as $SiO_2 =$

^{*} Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

† Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.



FILE COPY 606 See page 4 for instructions. 1. General Information for the Month/Year of: June/2005 A. Public Water System (PWS) Information PWS Name: Little Wekiya PWS Identification Number: 3590762 PWS Type: **⋈** Community Non-Transient Non-Community Transient Non-Community Consecutive Number of Service Connections at End of Month: 61 Total Population Served at End of Month: 214 PWS Owner: Utilities, Inc. of Florida Contact Person: Patrick Flynn Contact Person's Title: Regional Director Contact Person's Mailing Address: 200 Weathersfield Ave. City: Altamonte Springs State: Fl Zip Code: 32714 Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com B. Water Treatment Plant Information Plant Name: Utilites, Inc. of Florida Plant Telephone Number: 407-869-1919 Plant Address: 200 Weathersfield Ave. Zip Code: 32714 City: Altamonte Springs State: Fl Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 47,000 Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): D Licensed Operators Name License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operator: Kathy Sillitoe 13094 Mon. - Fri. Davs C Other Operators: Alexander Lorenzo С 13756 Mon. - Thur. Days Terry Sillitoe 12749 Thur.Fri. & Sat. Days II. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten years and to make them available for review upon request. 7.5.05 Kathy S:11:10E

Printed or Typed Name Signature and Date

D--- 1

PWS Identification Number: 3590762 Plant Name: Utilites, Inc. of Florida															
111. Daily Data for the Month/Year of: June/2005															
Mean:	Means of Achieving Four-Log Virus Inactivation/Removal: *														
				ned in Distribut	ion System:	ΧF	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide		
				T Calculations, or l					ation, if An	plicable*			Cinorino Dioxido		
					CT Calcu		197, 707, 707	re-roomerconer.			Dose				
		Net Quantity		Lowest Residual Disinfectant Concentration (C) Before or at	Disinfectant Contact Time (T) at C Measurement	Lowest CT Provided Before or at First Customer	Temp.		Minimum CT	Lowest	Minimum UV Dosc	Lowest Residual Disinfectant Concentration at Remote			
Day of	Hours	of Finished		First Customer	Point During	During	of	pH of	Required,	UV Dose,	Required,	Point in	Emergency or Abnormal Operating Conditions; Repair		
the Month	Plant in Operation	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-	Distribution	or Maintenance Work that Involves Taking Water		
1	24	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm ²	sec/cm ³	System, mg/L	System Components Out of Operation		
2	24	10,000 /				ļ	 					1.4			
3	24	11,000 /		 	 	 	├	ļ	ļ ——			1.5			
4	24	10,000 /			 	 	 		 		 	1.6	· · · · · · · · · · · · · · · · · · ·		
5	24	14,500		 	 		 		 	ļ	 	1.6			
6	24	14,500		<u> </u>	· · · · · · · · · · · · · · · · · · ·	ł	╆		 		 	1.6			
7	24	9,000			 		 	 			 	1.4	<u> </u>		
8	24	15,000	<u> </u>	1		 	<u>† </u>		 		 	1.6			
9	24	14,000			ļ · · · · · · · · · · · · · · · · · · ·		 	 			 	1.4			
10	24	10,000								<u> </u>		1.4			
11	24	12,000					T			<u> </u>		1.5			
12	24	16,000									·				
13	24	16,000										1.2			
15	24 24	10,000										1.0			
16	24	16,000 9,000				ļ						1.2			
17	24	12,000		 	ļ	ļ	ļ					0.9			
18	24	15,000		 		ļ	<u> </u>			<u> </u>	ļ	1.3			
19	24	16,500		<u> </u>	 		<u> </u>	ļ	 		ļ	0.9			
20	24	16,500 -	 	 		 	-		 	<u> </u>	 	0.0			
21	24	14,000				·	 	 	 	<u> </u>	 	0.8			
22	24	13,000			 	 	 		 		 	0.8			
23	24	13,000				1	 	 	 		 	0.6			
24	24	16,000			†		†	 	—	· · · · · · · · · · · · · · · · · · ·	 	0.0			
25	24	5,000				1	†	 			 	0.6			
26	24	16,500						 	 	<u> </u>	 	<u></u>			
27	24	16,500							1		†	0.4			
28	24	14,000									i	0.8	<u> </u>		
30	24 24	11,000	ļ	ļ								0.8			
. 31	24	9,000	 	 								0.8			
Total	- 4	300,000		<u> </u>	<u> </u>	<u> </u>	1								
Averag	e	13,043	34000	<u>.</u>											
Manage	=	13,043	15.												

^{*} Refer to the instructions for this report to determine which plants must provide this information.

PWS Identification Number: 3590762	Plant Name: Utilites, Inc. of Florida
IV. Summary of Use of Polymer Containing Acrylamide, Po	olymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * June/2005
	he water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as
follows:	
Polymer Dose, ppm =	Acrylamide Level, % [†] =
B. Is any polymer containing the monomer epichlorohydrin used	d at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the
polymer are as follows:	
Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =
C. Is any iron or manganese sequestrant used at the water treatm	nent plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:
Type of Sequestrant (polyphosphate or sodium silicate):	
Sequestrant Dose, mg/L of phosphate as PO4 or mg/L of silic	cate as SiO ₂ =
If sodium silicate is used, the amount of added plus naturally	occurring silicate, in mg/L as SiO ₂ =
	this approximation amount for Describer of the state of t

Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.





See page 4 for instructions

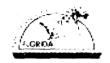
See	page 4 for instructions.						
Ţ.	General Information	for the Month/Year of: July 2005					
	Public Water System (P						
	PWS Name: Little Wel					PWS Identification N	lumber: 3590762
		Community Non-Transient Non-Community	Transien	t Non-Community	ПСо	onsecutive	
		nnections at End of Month: 61	Transier.	Total Population Se	rved at E	End of Month: 214	
	PWS Owner: Utilities.			Total Topalation			
	Contact Person: Patrick			Contact Person's Ti	tle: Regio	onal Director	
		ng Address: 200 Weathersfield Ave.		City: Altamonte Sp		State: Fl	Zip Code: 32714
		phone Number: 407-869-1919		Contact Person's Fa		er: 407-869-6961	
		iil Address: p.c.flynn@utilitiesinc-usa.com		Contact 1 ciscus 1 a	at i tuitio		
В	Water Treatment Plant						
٥.	Plant Name: Utilities,					Plant Telephone Nur	nber: 407-869-1919
	Plant Address: 200 We			City: Altamonte Sp	rings	State: Fl	Zip Code: 32714
	Type of Water Treated		nased Finished V				
		Day Operating Capacity of Plant, gallons per day: 47					
		bsection 62-699.310(4), F.A.C.): V	,,,,,,	Plant Class (per sul	section (62-699.310(4), F.A.C.)	: D
	Licensed Operators	Name	License Class	License Number			ft(s) Worked
	Lead/Chief Operator:	Kathy Sillitoe	С	13094			Fri. Days
	Other Operators:	Alexander Lorenzo	C	13756		Mon 1	hur. Days
	Onici Operators,	Terry Sillitoe	В	12749		Thur, Fri.	& Sat. Days
	·	Torry Silmov		12,7			

	 Certification by Lea 						
I, !	the undersigned water tr	eatment plant operator licensed in Florida, am the le	ad/chief operato	or of the water treatn	nent plan	it identified in Part I of	this report. I certify that the
ini	formation provided in th	is report is true and accurate to the best of my know	ledge and belief	. I certify that all dr	inking w	ater treatment chemica	is used at this plant conform to
nl:	or international Standar	d 60 or other applicable standards referenced in sub	section 62-333.	320(3), F.A.C. Talso	certify t	inat the following addition	micals used and chemical feed
pia	ant were prepared each (day that a licensed operator staffed or visited this pla , appropriate treatment process performance records	ant during the m	onin indicated above	oso oddit	tional operations record	to the PWS owner so the PWS
OV	vner can retain them to	, appropriate treatment process performance records gether with copies of this report, at a convenient location.	s. rurmermore,	ten veers	ese addit	tional operations record	is to the I was owner so the I was
υv			ation for at least	ten years.			
1	Koll Sol	te 8-4-05 Kathy Sill	litoe			C-13094	
Si	gnature and Date		Typed Name			License 1	Number

PWS	PWS Identification Number: 3590762 Plant Name: Utilities, Inc. of Florida													
III. Daily Data for the Month/Year of: July 2005														
Mean	s of Ach traviolet	ieving Fo	our-Log Viru on Otl	is Inactivation	on/Removal: *	Free	Chlorine		Chlorine	Dioxide		zone	Combin_	ed Chlorine (Chloramines)
					istribution Syst	tem:	Free Chlo	orine	Coi	mbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
	*			C	T Calculations, or	UV Dose, to De	monstrate Fo	our-Log			plicable*	Z PAS COLA		
	Days	15.00		A DESCRIPTION OF STREET		CT Calcu					UV	Dose		
}	Plant Staffed						Lowest CT				100 300		Lowest	
	or				Lowest Residual Disinfectant	Disinfectant Contact Time	Provided Before or					* 0.57	Residual Disinfectant	
[Visited				Concentration	(T) at C	at First			Minimum	Lowest	Minimum	Concentration	
L .	by		Net Quantity		(C) Before or at	Measurement	Customer	Temp.		СТ	Operating	UV Dose	at Remote	Emergency or Abnormal Operating
Day of			of Finished		First Customer	Point During	During	of	pH of	Required,	UV Dose,	Required,	Point in	Conditions, Repair or Maintenance Work that
the Month	(Place "X")	Plant in	Water Produced, gal	Peak Flow Rate, gpd	During Peak		Peak Flow,	Water,	Water, if	mg-	mW- sec/cm ²	mW- sec/cm ²	Distribution	Involves Taking Water System Components
1		24	13.000	Nate, gpu	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm	sec/cm	System, mg/L 0.80	Out of Operation
2		24	12,000		 					-	 	 	0.70	
3		24	17,000							 	 	 	0.70	,
4		24	17,000		<u> </u>		 	 		·	1	 	1.00	
5		24	14,000					—		 		 	1.00	
6		24	17,000										1.00	
7		24	17,000					1				f T	1.40	Collected Bacts
8		24	17,000										1.10	
9		24	16,000										1.30	
10		24	14,500											
11		24 24	14,500		·			ļ		<u> </u>		<u> </u>	1.20	
13		24	12,000			 		ļ			ļ		1.40	
14		24	12,000				<u> </u>			 	<u> </u>	<u> </u>	1.20	
15		24	11,000		 	 				 	 	<u> </u>	0.40 1.40	
16		24	8,000		 			 		 		 	0.70	
17		24	16,000		· · · · · · · · · · · · · · · · · · ·	 		 		 	 		0.70	
18		24	16,000	· · · · · · · · · · · · · · · · · · ·					 	 	 	 	1.40	
19		24	12,000			<u> </u>		1		†	 	 	1.40	
20		24	10,000							T	T		1.40	
21		24	12,000										1.20	
22		24	14,000										0.70	
24		24	11,000										1.10	
25		24	16,500 16,500		 	ļ		 	ļ	<u> </u>		<u> </u>		
26		24	17,000		ļ			ļ				Ļ	0.60	
27		24	15,000		 	 						ļ	0.80	
28		24	20,000			 		 		 	 	<u> </u>	1.80	
29		24	10,000			 				 	ļ	 	0.80	
30		24	19,000		 	 	 	 	 	 	 	 	0.90	
31		24			 	t — — —	 	 -	 	+	 	 	0.70	
Total			428,000		*			.	1	1			<u> </u>	<u> </u>
Averag			14,266	Ì										
Maxim	ıunı		20,000	l										

^{*} Refer to the instructions for this report to determine which plants must provide this information.

606.



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER FILE COPY

See page 4 for instructions.

Sec	page 4 for instructions.												
		for the Month/Year of: August 2005											
A.	Public Water System (P	WS) Information											
	PWS Name: Little Wel	kiva			PWS	Identification N	umber: 3590762						
	PWS Type: 🕅 C	Community Non-Transient Non-C	Community Transier	t Non-Community	Consecuti	ve							
1	Number of Service Cor	nnections at End of Month: 61		Total Population Serv	ed at End of M	1onth: 214							
	PWS Owner: Utilities,	Inc. of Florida											
	Contact Person: Patrick	k Flynn		Contact Person's Title	: Regional Dir	rector							
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Sptin		State: Fl	Zip Code: 32714						
		hone Number: 407-869-1919		Contact Person's Fax		869-6961							
	Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com												
B.	Water Treatment Plant	Information											
	Plant Name: Utilities,	Inc. of Florida			Plant	Telephone Num	ber: 407-869-1919						
	Plant Address: 200 We	eathersfield Ave.		City: Altamonte Sprir	ngs State:	Fl	Zip Code: 32714						
	Type of Water Treated	by Plant: Raw Ground Water	Purchased Finished V	Vater									
		Day Operating Capacity of Plant, gallons	s per day: 47,000										
		bsection 62-699.310(4), F.A.C.): V		Plant Class (per subse	ection 62-699.3	310(4), F.A.C.):	D						
	Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked								
	Lead/Chief Operator:	Kathy Sillitoe	C	13094		Mon F	ri. Days						
	Other Operators:	Alexander Lorenzo	С	13756		Mon Th	Mon Thur. Days						
	,	Terry Sillitoe	В	12749		Thur. Fri. &	: Sat. Days						
		Allan Finch	C	7806		Mon F	ri. Days						
	Certification by Lead	d/Chief Operator											
		eatment plant operator licensed in Florid	da am the lead/chief operate	r of the water treatmen	at plant identif	ind in Part Laft	his raport I cartify that the						
inf	ormation provided in th	is report is true and accurate to the best	of my knowledge and belief	I certify that all drink	king water trea	ntment chemical	s used at this plant conform to						
NS	F International Standard	d 60 or other applicable standards refere	enced in subsection 62-555.3	20(3). F.A.C. Lalso ce	ertify that the f	following additi	onal operations records for this						
pla	nt were prepared each d	lay that a licensed operator staffed or vis	sited this plant during the me	onth indicated above: (1) records of a	mounts of chen	ricals used and chemical feed						
rate	es; and (2) if applicable,	, appropriate treatment process performa	ance records. Furthermore,	l agree to provide these	e additional on	perations records	to the PWS owner so the PWS						
ow	ner can retain them, tog	ether with copies of this report, at a con	venient location for at least	ten years.									
١				-									
_*	jan Del	liter 9-6-05	Kathy Sillitoe			C-13094							
Sig	nature and Date		Printed or Typed Name			License N	umber						

PWS Identification Number: 3590762 Plant Name: Utilities, Inc. of Florida														
III. Daily Data for the Month/Year of: August 2005														
					n/Removal: *	Free	Chlorine		Chlorine	Dioxide		zone	Combin	ed Chlorine (Chloramines)
[] UI	traviolet	Radiatio	on 📋 Otl	her (Describ	e):									
Type	of Disin	fectant R	esidual Mair	ntained in Di	stribution Syst	em:	Free Chlo	orine	Cor	mbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
750			1	C	Calculations, or	UV Dose, to De	monstrate Fo	our-Log						
\	Days			**********		CT Calcu					UV	Oose		
1	Plant		ĺ				Lowest CT						Lowest	
	Staffed				Lowest Residual	Disinfectant	Provided						Residual	
	or Visited		· ·	1.3	Disinfectant	Contact Time	Before or at First			98		3	Disinfectant Concentration	[공연] 하는 사람들은 경험하는 경우 기계를 받는다.
	by		Net Quantity		Concentration (C) Before or at	(T) at C Measurement	Customer	Temp.		Minimum CT	Lowest	Minimum UV Dose	at Remote	Emergency or Abnormal Operating
Day of		Hours	of Finished		First Customer	Point During		of	pH of		UV Dose.	Required,		Conditions: Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-	Distribution	Involves Taking Water System Components
Month	"X")		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm ²	sec/cm ²	System, mg/L	
1	X	24	31,000		ļ			<u> </u>					0.80	Bacts collected
3	X	24 24	12,000		ļ	ļ		<u> </u>				ļ	1.00	
4	X	24	16,000			 		 		<u> </u>	 	ļ	2.40	
5	$\frac{\Lambda}{X}$	24	14,000 17,000			 	 	<u> </u>	ļ	 	<u> </u>	 	1.30	
6	l î	24	14,000			 	<u> </u>			 	<u> </u>		1.50	
7	- ^-	24	21,500			 	ł	 					1.00	
8	X	24	21,500		 	 	 	 		 			1.30	
9	X	24	19,000	 		 	 	 		 	 	 	2.00	
10	X	24	13,000				 	 				 	1.70	
11	X	24	16,000	 	· · · · · · · · · · · · · · · · · · ·	 	†	 		 	 	 	1.50	
12	X	24	29,000									 	1.00	
13	X	24	19,000										1.30	
14		24	18,000											
15	X	24	18,000										2.20	
16	X	24	12,000			<u> </u>						<u> </u>	1.20	
17	X	24	20,000	 	ļ	<u> </u>	<u> </u>	<u> </u>		1	ļ	<u> </u>	1.00	
19	X	24	18,000 23,000			 	 	├ ─	ļ	 	 	 	0.90	
20	l î	24	17,000				 	 	<u> </u>	 	 	 	1.20	
21	 ^` -	24	18,000		 	 	 	┼	 	+	 	 	0.80	
22	X	24	18,000	 		 	+	 		 	 	 	1.00	
23	X	24	17,000	 			 	 	 	 	 	 	1.00	
24	Х	24	19,000		 	 	 	 	 	 	 	 	1.00	
25	X	24	21,000				\vdash	1	 	 	 	 	0.60	
26	X	24	17,000			 	 		1		 	 	0.80	
27	X	24	16,000					1		 	 	 	0.50	
28	 	24	23,500										1	
29	X	24	23,500		ļ								0.60	
30	X	24	16,000	<u> </u>									0.60	
Total	1^	24	37,000 595,000	 	<u> </u>	1		<u> </u>	<u> </u>		1		1.00	
Avera	ee.		19 193	1										

37,000

^{*} Refer to the instructions for this report to determine which plants must provide this information.





FILE GOPY See page 4 for instructions. I. General Information for the Month/Year of: September2005 A. Public Water System (PWS) Information PWS Identification Number: 3590762 PWS Name: Little Wekiya PWS Type: ⊠ Community Non-Transient Non-Community Transient Non-Community Consecutive Total Population Served at End of Month: 214 Number of Service Connections at End of Month: 61 PWS Owner: Utilities, Inc. of Florida Contact Person: Patrick Flynn Contact Person's Title: Regional Director State: Fl Zip Code: 32714 City: Altamonte Springs Contact Person's Mailing Address: 200 Weathersfield Ave. Contact Person's Fax Number: 407-869-6961 Contact Person's Telephone Number: 407-869-1919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com B. Water Treatment Plant Information Plant Telephone Number: 407-869-1919 Plant Name: Utilities, Inc. of Florida Plant Address: 200 Weathersfield Ave. State: Fl Zip Code: 32714 City: Altamonte Springs Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 47,000 Plant Class (per subsection 62-699.310(4), F.A.C.): D Plant Category (per subsection 62-699.310(4), F.A.C.): V Licensed Operators Day(s)/Shift(s) Worked Name License Class License Number Lead/Chief Operator: Allan Finch 7806 Mon. - Fri. Days Terry Sillitoe В 12749 Thur. Fri. & Sat. Days Other Operators: Roger Holsapple CWeekend Checks 7436 Dominic Gentillucci Weekend checks С 12562 H. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years. 6-3-05 Allan Finch C-7806 Signature and Date Printed or Typed Name License Number

PWS Identification Number: 3590762 Plant Name: Utilities, Inc. of Florida														
П	III. Daily Data for the Month/Year of: September2005													
Mean	Means of Achieving Four-Log Virus Inactivation/Removal: *													
				ner (Describ		K-3	- ~··			1: 1=	11	Ch.L.		Chlorina Diovida
Туре	of Disin	fectant R	esidual Main	tained in D	istribution Syst	tem:	Free Chlo	orine	Cor	nbined C	hiorine (Chlorami	nes) [_]	Chlorine Dioxide
	Dave		}	<u>C</u>	T Calculations, or	UV Dose, to De CT Calcu		our-Log	virus inactiv	auon, 11 Ap	pucable	Dose		[강경기 : [] [] [] [] [] [] [] [] [] [
	Days Plant		}			Ci Calcu	Lowest CT				7.7	i i	Lowest	
]	Staffed				Lowest Residual	Disinfectant	Provided						Residual	
	or		1		Disinfectant	Contact Time	Before or						Disinfectant	
	Visited by		Net Quantity		(C) Before or at	(T) at C Measurement	at First Customer	Temp.		Minimum CT	Lowest Operating		Concentration at Remote	Emergency or Abnormal Operating
Day of		Hours	of Finished		First Customer	Point During	During	of	nH of	Required	UV Dose,	Required.	Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak		Peak Flow,	Water,	Water, if	mg- "	mW-	mW-	Distribution	Involves Taking Water System Components
Month	"X")		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm²	see/cm ²	System, mg/L	Out of Operation
<u> </u>	X	24	17000		<u> </u>	<u> </u>							1.1	
3	X	24 24	15000										1.0	
4		24	21500		 	 	 					ļ	1.0	
5	X	24	21500		<u> </u>	 	 -	 				 	1,2	
6	X	24	18000	-	· · · · · · · · · · · · · · · · · · ·								1.0	
7	X	24	15000				 	 		 			1,0	
8	X	24	17000										0.8	
9	X	24	15000										0.7	
10	X	24	00011										1.1	
11	- ,;	24	19500		<u> </u>			ļ						
12	X	24 24	18000					ļ	<u></u>			 	1.0	
14	X	24	22000			 	 				<u> </u>		P.a.	
15	X	24	18000		 			 					0.8 0.9	
16	X	24	17000		ļ	 	 	 	ļ			 	0.8	1
17	X	24	17000		<u> </u>			·				 	2.1	
18		24	24,500					1						
19	X	24	24500										0.9	
20	X	24	18000		ļ								0.8	
21	X	24 24	17000		<u> </u>								1.0	
23	X	24	19000 13000		 	 	<u> </u>					 	1.0	
24	X	24	17000				 	 		 	 	 	0,9	
25		24	22000		 		 	-		 	ļ	 	1.0	
26	X	24	22000				<u> </u>					 	1.3	
27	X	24	16000			<u> </u>	†	 	 	 		-	1,0	
28	X	24	17000					İ					0.2	
29	X	24	15,000										0,9	
30	X	24	18000										0.8	
Total		24	5/0000		<u> </u>	L	l		<u> </u>	L	L	l	L	1
Averag	1C	·····	540000											

^{*} Refer to the instructions for this report to determine which plants must provide this information.



See page 4 for instructions.

FILE COPY

PWS Owner: Utilities, Inc. of Florida Contact Person: Patrick Flynn Contact Person's Mailing Address: 200 Weathersfield Ave. City: Altamonte Spr Contact Person's Telephone Number: 407-869-1919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com B. Water Treatment Plant Information Plant Name: Utilities, Inc. of Florida	PWS Identification Number: 3590762 Consecutive Erved at End of Month: 214 tle: Regional Director rings State: Fl Zip Code: 32714 ax Number: 407-869-6961												
PWS Name: Little Wekiva PWS Type: Community Non-Transient Non-Community Number of Service Connections at End of Month; 61 Total Population Set PWS Owner: Utilities, Inc. of Florida Contact Person: Patrick Flynn Contact Person's Mailing Address: 200 Weathersfield Ave. City: Altamonte Spr Contact Person's Telephone Number: 407-869-1919 Contact Person's Fa: Contact Person's E-Mail Address: p.c. flynn@utilitiesinc-usa.com B. Water Treatment Plant Information Plant Name: Utilities, Inc. of Florida	Consecutive erved at End of Month: 214 tle: Regional Director rings State: Fl Zip Code: 32714												
PWS Type: Community Non-Transient Non-Community Number of Service Connections at End of Month; 61 PWS Owner: Utilities, Inc. of Florida Contact Person: Patrick Flynn Contact Person's Mailing Address: 200 Weathersfield Ave. Contact Person's Telephone Number: 407-869-1919 Contact Person's E-Mail Address: p.c. flynn@utilitiesinc-usa.com B. Water Treatment Plant Information Plant Name: Utilities, Inc. of Florida	Consecutive erved at End of Month: 214 tle: Regional Director rings State: Fl Zip Code: 32714												
Number of Service Connections at End of Month: 61 PWS Owner: Utilities, Inc. of Florida Contact Person: Patrick Flynn Contact Person's Mailing Address: 200 Weathersfield Ave. Contact Person's Tit Contact Person's Telephone Number: 407-869-1919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com B. Water Treatment Plant Information Plant Name: Utilities, Inc. of Florida	Consecutive erved at End of Month: 214 tle: Regional Director rings State: Fl Zip Code: 32714												
Number of Service Connections at End of Month: 61 PWS Owner: Utilities, Inc. of Florida Contact Person: Patrick Flynn Contact Person's Mailing Address: 200 Weathersfield Ave. Contact Person's Tit Contact Person's Telephone Number: 407-869-1919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com B. Water Treatment Plant Information Plant Name: Utilities, Inc. of Florida	tle: Regional Director rings State: Fl Zip Code: 32714												
Contact Person: Patrick Flynn Contact Person's Mailing Address: 200 Weathersfield Ave. City: Altamonte Spr Contact Person's Telephone Number: 407-869-1919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com B. Water Treatment Plant Information Plant Name: Utilities, Inc. of Florida	rings State: Fl Zip Code: 32714												
Contact Person's Mailing Address: 200 Weathersfield Ave. Contact Person's Telephone Number: 407-869-1919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com B. Water Treatment Plant Information Plant Name: Utilities, Inc. of Florida	rings State: Fl Zip Code: 32714												
Contact Person's Telephone Number: 407-869-1919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com B. Water Treatment Plant Information Plant Name: Utilities, Inc. of Florida													
Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com B. Water Treatment Plant Information Plant Name: Utilities, Inc. of Florida	x Number: 407-869-6961												
B. Water Treatment Plant Information Plant Name: Utilities, Inc. of Florida													
Plant Name: Utilities, Inc. of Florida													
	Plant Telephone Number: 407-869-1919												
Plant Address: 200 Weathersfield Ave. 805 Little WCKINA OR City: Altamonte Spi	orings State: Fl Zip Code: 32714												
Type of Water Treated by Plant:													
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 47,000													
Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): D													
Licensed Operators Name License Class License Number Day(s)/Shift(s) Worked													
Lead/Chief Operator: Allan Finch C 7806 Mon Fri. Days													
Other Operators: Terry Sillitoe B 12749	Thur, Fri. & Sat. Days												
Roger Holsapple C 7436	Weekend Checks												
Dominic Gentillucci C 12562	Weekend checks												
	<u> </u>												
11. Certification by Lead/Chief Operator													
I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatm	nent plant identified in Part I of this report. I certify that the												
information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all dri													
NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also													
plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above	: (1) records of amounts of chemicals used and chemical feed												
rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, 1 agree to provide the	ese additional operations records to the PWS owner so the PWS												
owner-gan retain them, together with copies of this report, at a convenient location for at least ten years.													
$\mathcal{N}_{N}}}}}}}}}}$													
Mr. M. A. A. A. A. A. A. A. A. A. A. A. A. A.	May hurch 11-1-05 Allan Finch C-7806												
Signature and Date Allan Finch Printed or Typed Name	License Number												

Da-- 1

PWS Identification Number: 3590762 Plant Name: Utilities, Inc. of Florida														
III. Daily Data for the Month/Year of: October 2005														
Mea	Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)													
$\bigcup U$	Itraviolet	t Radiatio	on 🗌 Ot	her (Describ	e):								_	(2
Туре	of Disin	fectant R	esidual Mair	ntained in D	istribution Syst	em: 🛛	Free Chlo		Cor	nbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
	_	1	}	C	T Calculations, or			our-Log	Virus Inactiv	ation, if Ap				
	Days Plant					CT Calcu					UV	Dose	l	
	Staffed		1 1		Lowest Residual	Disinfectant	Lowest CT Provided						Lowest	
į	or	Į	1		Disinfectant	Contact Time	Before or						Residual Disinfectant	
ł	Visited				Concentration	(T) at C	at First			Minimum	Lowest	Minimum	Concentration	
 -	by	١	Net Quantity		(C) Before or at	Measurement	Customer	Temp.		CT	Operating	UV Dose	at Remote	Emergency or Abnormal Operating
Day o	Operator (Place	Hours Plant in	of Finished Water	Peak Flow	First Customer	Point During	During	of	pH of		UV Dose,		Point in	Conditions, Repair or Maintenance Work that
Mont		Operation		Rate, gpd	During Peak Flow, mg/L	Peak Flow, minutes	Peak Flow, mg-min/L	Water, °C	Water, if Applicable	mg- min/L	mW- sec/cm ²	mW-	Distribution	Involves Taking Water System Components
	×	24	13000	Audut Bou	1100,1110	- minutes	mg-mmvL		Аррисавис	HIIIVI.	secrem	sec/cm ²	System, mg/L	Out of Operation
2		24	17.000		1			 	 	 	 	 	 ""	
3	X	24	17000					1			 		0.7	
4	X	24	18000								<u> </u>		0.7	
5	<u> </u>	24	13000										0.8	
6	X	24	14000										0.9	
7	×	24	18000		ļ	ļ		<u> </u>					0.8	
8	 ^ _	24	17 500								ļ		1.0	
10	 	24	17500	ļ	 		ļ	├		ļ	ļ			
11	 	24	15,000					 					6.9	
12	X	24	19,000						 		 		0.8	collected 3 Bacts
13	X	24	15000					 	<u> </u>	 	 	 	6.9	LOHICCARD 2 DUGAS
14	X	24	14000					<u> </u>		 	 	 	0.8	
15	X	24	13,000										0.8	
16	<u> </u>	24	18,000											
17	 X	24	19,000		<u> </u>			ļ					67	
18	 	24	14,000		<u> </u>			ļ	ļ	<u> </u>			0.7	
20	 \ \ \ \	24	21,000	 -	 		 						0.8	
21	 	24	14,000		-	 	 	 	_	 	 	ļ	0.8	
22	 	24	17,000	 	 	 		 	 	 	 	 	0.8	
23		24	17500	 			 	 	 	 	 	 	10.0	
24	$\perp_{\mathbf{X}}$	24	17.500	1	 		 	 	 	 	 	 	0.9	
25	Χ	24	17 000							 			0.8	
26	X	24	17 000									1	0.8	
27	X	24	16,000										0.6	
28	X	24	14,000										0,6	
29	X	24	15,000	<u> </u>	ļ.,		1						0.8	
30	1 .	24	22,500	 		ļ		-		<u> </u>				
	loe		1/2 3/2	1										
1	Total 498000 Average (6)004 Maximum 2500													

^{*} Refer to the instructions for this report to determine which plants must provide this information.

FILE COPY



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See page 4 for instructions.

	. 6													
l.	General Information f	or the Month/	Year of: November 2	005										
Α.	Public Water System (P		on											
	PWS Name: Little Wel	kiva						PWS Identification Nu	ımber: 3590762					
	PWS Type: 🛛 🖸 C	Community	Non-Transient Non-	Community	Transier	nt Non-Community	C₀	nsecutive						
	Number of Service Cor	nnections at En	d of Month: 61			Total Population Served at End of Month: 214								
	PWS Owner: Utilities,	Inc. of Florida												
	Contact Person: Patrick	k Flynn				Contact Person's T	itle: Regio	onal Director						
	Contact Person's Mailin	ng Address: 20	0 Weathersfield Ave.			City: Altamonte Sp	rings	State: Fl	Zip Code: 32714					
	Contact Person's Telep					Contact Person's Fa	ax Numbe	er: 407-869-6961						
	Contact Person's E-Ma	il Address: p.c	.flynn@utilitiesinc-usa.co	om										
В.	Water Treatment Plant													
	Plant Name: Utilities, I							Plant Telephone Num	ber: 407-869-1919					
	Plant Address: 805 Litt	tle Wekiva Dri	ve			City: Altamonte Sp	orings	State: Fl	Zip Code: 32714					
	Type of Water Treated	l by Plant:	Raw Ground Water	Purchase	d Finished V									
	Permitted Maximum D	Day Operating (Capacity of Plant, gallons	per day: 47,000	0									
	Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): D													
Licensed Operators Name License Class License Number Day(s)/Shift(s) Worked														
	Lead/Chief Operator:	Allan Finch	A		С	7806		Mon Fi						
	Other Operators:	Terry Sillitoe			В	12749		Thur, Fri. &	Sat. Days					
		Alex Lorenzo			С	13756		Mon Fr	ri. Days					
		Kathy Sillitoe			С	13094		Mon Fi						
														
	'													
	.													
				· · · · · · · · · · · · · · · · · · ·										
m	. Certification by Lead	LICL: CO												
ليد الم	he undersigned water tro	a/C mer Opera	101	1 1 1 1/	1	0.1								
inf	ormation provided in the	eaunent piant o	perator licensed in Florid	ia, am the lead/o	chief operato	r of the water treatn	nent plant	identified in Part I of th	is report. I certify that the					
NS	E International Standard	is report is true	and accurate to the best	of my knowledg	ge and belief.	I certify that all dr	inking wa	ter treatment chemicals	used at this plant conform to					
nia	nt were prepared each d	ov or other ap	oplicable standards refere	nced in subsect	ion 62-555.3	20(3), F.A.C. I also	certify th	hat the following addition	nal operations records for this					
rate	es, and (3) it applicable	ay that a neens	sed operator statted or vis	sited this plant d	luring the mo	onth indicated above	e: (1) reco	rds of amounts of chemi	icals used and chemical feed					
OW.	ner can retain them tox	appropriate tre	eaunem process performa	ance records. Fi	urtnermore,	agree to provide th	iese addītī	onal operations records	to the PWS owner so the PWS					
J W	can roum mom, toge	eniei witti cobi	es of this report, at a con	venient location	i for at least i	en years.								
7	Look seet	ta c	2-13094	Kathy Cillitaa				C 12004						
Sic	gnature and Date	March C	-13044	Kathy Sillitoe				C-13094						
UI	munic and Date			Printed or Typ	ped Name			License Nu	ımber					

PWS Identification Number: 3590762 Plant Name: Utilities, Inc. of Florida														
III. Daily Data for the Month/Year of: November 2005														
Mean	Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)													
		Radiatio		her (Describ									_	Ź
Туре	of Disin	fectant R	esidual Mair		istribution Syst		Free Chlo		Cor	mbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
				C	T Calculations, or	UV Dosc, to De	monstrate F			ation, if A	pplicable*			
	Days Plant				The state of the s	CT Calcul	ations Lowest CT			1	UV	Dose	Lowest	
	Staffed				Lowest Residual	Disinfectant	Provided					2.2	Residual	
ļ	or				Disinfectant	Contact Time	Before or			F-1-19			Disinfectant	
1	Visited				Concentration	(T) at C	at First	(i)			Lowest	Minimum	Concentration	
Day of	by Operator	Hours	Net Quantity of Finished		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating UV Dose	UV Dose	at Remote	Emergency or Abnormal Operating
the	(Place	Plant in	Water	Peak Flow	First Customer During Peak	Point During Peak Flow,	During Peak Flow,	of Water,	pH of	CT Required,	mW-	Required, mW-	Point in Distribution	Conditions; Repair or Maintenance Work that Involves Taking Water System Components
Month	"X")		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	me-min/l	sec/cm²	sec/cm ²	System, mg/L	Out of Operation
1	X	24	14,000							1116	3000		0.80	
2	X	24	14,000								1		0.80	
3	X	24	13.000										0.70	Collected 3 bacts
5	X	24 24	21.000 12,000		 	 		<u> </u>					0.70	
6	1-	24	20.000		ļ			<u> </u>		ļ			0.60	
7	X	24	20,000		 		<u> </u>	├		-	 	ļ	0.70	G-10
8	X	24	18,000		 			 		 	 	 	0.70	Collected repeat well sample Collected repeat well sample
9	X	24	15,000		1	1		 	 	 		 -	0.60	Conceed repeat wen sample
10	X	24	17,000					†	<u> </u>	 	 	 	0.70	
11	X	24	16,000							<u> </u>			0.70	
12	X	24 24	13,000										0.70	
14	X	24	20,500 20,500				<u> </u>			 	<u> </u>	ļ		
15	X	24	13,000					 	 	<u> </u>	}		0.70	
16	X	24	20,000		 	 	 	 	 	 	ļ	ļ	0.70	
17	X	24	16,000			l	<u> </u>	 			 	 	0.80	
18	X	24	13,000							†			0.70	
19	X	24	21,000										0.60	
21	X	24 24	24,000 24,000		ļ		ļ							
22	X	24	10,000		 	 		 		<u> </u>		ļ	0.30	
23	X	24	21,000		 	 		 	 -	ļ	 	 	0.30	
24	X	24	18,000				 	 	 	 	 	 	1.60 1.60	
25	X	24	12,000			l	İ	 		 	 	 	1.80	
26	X	24	15,000				I		T		† -		1.40	
27	X	24	15,500											
29	$\frac{X}{X}$	24 24	15,500 15,000		 								1.80	
30	$\frac{\Lambda}{X}$	24	15,000	<u> </u>	 	 		 		ļ	ļ		1.40	
31		24	10,000		 	 		 	ļ	 			1.40	
Total														
Averag			16,766											
Maxim	um		24,000											

^{*} Refer to the instructions for this report to determine which plants must provide this information.



See page 4 for instructions.

		or the Month/Year of: December 20	005			······································		
A.	Public Water System (P							
	PWS Name: Little Wel					PWS Identification	Number: 3590762	
		Community Non-Transient Non-	Community 🔲 Transier	nt Non-Community	Co	nsecutive		
		nnections at End of Month: 61		Total Population Se	rved at E	nd of Month: 214		
	PWS Owner: Utilities,							
	Contact Person: Patricl			Contact Person's Tit		nal Director		
		ng Address: 200 Weathersfield Ave.		City: Altamonte Spr		State: Fl	Zip Code: 32714	
		hone Number: 407-869-1919		Contact Person's Far	x Numbe	r: 407-869-6961		
		il Address: p.c.flynn@utilitiesinc-usa.co	om					
В.	Water Treatment Plant							
	Plant Name: Utilities, I						umber: 407-869-1919	
	Plant Address: 805 Lit			City: Altamonte Spr	rings	State: Fl	Zip Code: 32714	
	Type of Water Treated		Purchased Finished V	Vater				
	Permitted Maximum Day Operating Capacity of Plant, gallons per day: 47,000							
Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): D								
	Licensed Operators	Name	3,354,354,354,354,354,354,354,354,354,35	License Number			nift(s) Worked	
	Lead/Chief Operator:	Allan Finch	C	7806		Mon Fri. Days		
	Other Operators:	Terry Sillitoe	В	12749		Thur. Fri. & Sat. Days		
		Alex Lorenzo	C	13756		Mon Fri. Days		
		Kathy Sillitoe	С	13094		Mon.	- Fri. Days	

П	. Certification by Lead	I/Chief Operator	The state of the s					
I, t	he undersigned water tre	eatment plant operator licensed in Florid	a, am the lead/chief operato	r of the water treatme	ent plant	identified in Part I of	f this report. I certify that the	
inf	ormation provided in thi	s report is true and accurate to the best of	of my knowledge and belief.	I certify that all drin	nking wat	ter treatment chemica	als used at this plant conform to	
NS	F International Standard	l 60 or other applicable standards refere	nced in subsection 62-555.3	20(3), F.A.C. I also	certify th	at the following addi	itional operations records for this	
pla	nt were prepared each d	ay that a licensed operator staffed or vis	sited this plant during the mo	onth indicated above:	(1) recor	ds of amounts of che	emicals used and chemical feed	
rat	es; and (2) if applicable,	appropriate treatment process performa	ince records. Furthermore,	agree to provide the	se additio	onal operations recor	rds to the PWS owner so the PWS	
ow	ner can retain them, tog	ether with copies of this report, at a con-	venient location for at least	ten years.				
/	Man Junel	1-2-06						
4	man junes	1-2-06	Allan Finch			<u>C-7806</u>		
Sig	ature and Date Printed or Typed Name License Number							

PWS	PWS Identification Number: 3590762 Plant Name: Utilities, Inc. of Florida													
III. I	III. Daily Data for the Month/Year of: December 2005													
Mean	Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):													
Type	of Disin	fectant R	esidual Main	tained in Di	istribution Syste	em: 🖂	Free Chlo	orine	Cor	nbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
				·	T Calculations, or	UV Dose, to De	monstrate Fo	our-Log	Virus Inactiv	ration, if Ap	plicable*	40		
	Days					CT Calcul	ations					Dose	4.47	
1.1	Plant Staffed						Lowest CT						Lowest	[2] 영화 사용 사용 사용 기계 (1982)
	or				Lowest Residual Disinfectant	Disinfectant	Provided		100		- 1 Tab		Residual	
	Visited				Concentration	Contact Time (T) at C	Before or at First					Minimum	Disinfectant Concentration	고 하는 생각이 있었다. 그 그런데 그 사람들이 되었다.
	by		Net Quantity		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating		at Remote	Emergency or Abnormal Operating
Day of	Operator	Hours	of Finished		First Customer	Point During	During .	of	pH of	CT		Required,	Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	Required,	mW-	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation		Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	mg-min/L	sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
2	X	24	12,000					ļ					<u> </u>	
3	$\frac{\hat{x}}{x}$	24	15,000	·	·							ļ	0.9	
4		24	19,500									ļ	1.0	
5	X	24	19.500						 				1,4	
6	X	24	16,000									 	1,3	
7	X	24	16.000										1.4	
8	X	24	19,000										0.6	
9	X	24	19,000		ļ <u></u>								1,0	
10	X	24	13,000		-			ļ	ļ			ļ	0.8	
12	X	24	23,00 O			 		ļ			ļ	ļ		
13	X	24	19,000							 		ļ	0.9	
14	X	24	16,000					ļ	 				1.0	Callected Backs
15	X	24	15,000					i				 	0.9	Callected Backs
16	X	24	11,000			1					<u> </u>		0.9	Collected Repeat well Bost
17	X	24	12,000						ļ				1.0	Collected Repeat well Bact
18		24	17,000		<u> </u>									
19	X	24	17,000			<u> </u>		ļ	ļ	ļ. <u></u>			1.0	
21	X	24	15,000				ļ		ļ	 		ļ <u>:</u>	1.2	
22	X	24	15,000			 	 	 	ļ	 	ļ	 	0,9	
23	X	24	16,000	h	 			 		┼┈──	-	 	P.0	
24	X	24	19,000					 		 		 	0,1	
25		24	18,500			 		 	ļ	 		<u> </u>		
26	X	24	18,500				· · · · · · · · · · · · · · · · · · ·	1		<u> </u>			0.9	
27	X	24	13,000										0.8	
28	X	24	17,000							1			0.7	
30	X	24	19,000		↓	ļ		ļ	ļ		ļ		0.8	
30	X	24	15,000				ļ		 	_			0.8	
Total	^- -	L	503000	· · · · · · · · · · · · · · · · · · ·	1	<u> </u>	L	L	1	L	İ	J	0.8	
Averag	7e		16 77 0	1										

^{*} Refer to the instructions for this report to determine which plants must provide this information.

PWS Identification Number: 3590762	Plant Name: Utilities, Inc. of Florida					
IV. Summary of Use of Polymer Containing Acrylamide, Polymer	lymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * December 2005					
A. Is any polymer containing the monomer <u>acrylamide</u> used at the <u>follows:</u>	water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as					
Polymer Dose, ppm =	Acrylamide Level, % [†] =					
B. Is any polymer containing the monomer <u>epichlorohydrin</u> used a polymer are as follows:	at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the					
Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =					
C. Is any iron or manganese sequestrant used at the water treatme	nt plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:					
Type of Sequestrant (polyphosphate or sodium silicate):						
Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of silica	te as SiO ₂ =					
If sodium silicate is used, the amount of added plus naturally of	occurring silicate, in mg/L as SiO ₂ =					

Page 3

^{*} Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

† Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

Little Wekiva

Docket No. 060253-WS

25.30-440(5) Inspection Reports

Test Year Ended December 31, 2005



Department of Control of Prish 18/05 Environmental Protection

Jeb Bush Governor 3319 Maguire Boulevard, Suite 232 Orlando, Florida 32803-3767

Colleen M. Castille Secretary

VIA EMAIL p.c.Flynn@utilitiesinc-usa.com

November 8, 2005

Patrick Flynn, Regional Director Utilities, Inc. of Florida 200 Weathersfield Avenue Altamonte Springs, FL 32714

OCD-PW-SS-05-0976

Seminole County - PW Little Wekiva Estates - PWS ID # 3590762 Park Ridge - PWS ID #3590993 Phillips Section - PWS ID #3591008

Dear Mr. Flynn:

This letter confirms a visit on October 6, 2005, to the subject community public water systems by Joni Petry and Jeremy RiCharde in the presence of Kathy Sillitoe to conduct a sanitary survey. A copy of the sanitary survey reports is attached for your reference and records.

Deficiencies found during the sanitary survey and in Department records are listed in the enclosed reports. These deficiencies shall be corrected in order to return to compliance with Florida Administrative Code Rules 62-550, 62-555, 62-560 and 62-602.

Please correct the indicated deficiencies, and notify the Department in writing that the deficiencies have been corrected, no later than December 8, 2005. (You may use the attached response form to indicate the corrective actions taken.)

The Department values your continued cooperation in operating and maintaining your water system, and appreciates the assistance provided during the sanitary survey.

If you have any questions, please contact Joni Petry by email at Joni.Petry@dep.state.fl.us or by phone at (407) 894-7555, extension 2294.

Sincerely,

Kim Dodson, Environmental Manager Drinking Water Compliance and Enforcement

KMD/jp Enclosures

cc: Joyce Bittle, Seminole County Health Department (joyce_bittle@doh.state.fl.us)

19.1 Little WEKINSA Line

State of Florida Department of Environmental Protection Central District

SANITARY SURVEY REPORT

Plant NameLITTLE WEKIVA ESTATES	County Seminole PWS ID # 3590762
Plant Location Little Wekiva Dr., Altamonte Springs, FL	32714 Phone 407-869-1919
Owner Name Utilities, Inc. of Florida	Phone 407-869-1919
Owner Address 200 Weathersfield Ave., Altamonte Sprir	ngs, FL 32714/ Fax: 407-869-6961
Contact Person Patrick Flynn, p.c.flynn@utilitiesinc-usa.c	
This Survey Date 10/6/05 Last Su	urvey Date 10/29/02 Last C.I. Date 4/3/03
PWS TYPE & CLASS	RAW WATER SOURCE
☐ Community (5D)	☑ GROUND; Number of Wells 1 1 1 1 1 1 1 1 1 1 1 1 1
□ Non-transient Non-community	Emergency Water Source
☐ Non-Community	Emergency Water Capacity
PWS STATUS	AUXILIARY POWER SOURCE
Approved system with approval number & date	☐ Yes ☒ None ☒ Not Required
Serial #2569 dated 2/7/58, clrd 10/29/59	Source Capacity of Standby (kW)
Serial #2569-A dated 11/18/65, clrd 5/24/66	Capacity of Standby (kW)
	Switchover: Automatic Manual
☐ Unapproved system	Standby Plan: 🗋 Yes 🔲 No
	Hrs Operated Under Load
SERVICE AREA CHARACTERISTICS	What equipment does it operate?
Single-family home subdivision	Well pumps
	High Service Pumps
Food Service: Yes No No N/A	☐ Treatment Equipment
OPERATION & MAINTENANCE	Satisfy 1/2 max-day demand? ☐Yes ☐No ☐Unk
	Comments
Certified Operator: Yes No Not required	***Connection available for portable generator
Operator(s) & Certification Class-Number Allan Finch C-7806 & Terry Sillitoe B-12749	
Alian Finch C-7800 & Terry Stiffice B-12749	TOP ATMENT DOOGEOOFO IN HOE
O & M Log: ⊠ Yes ☐ No ☐ Not required	TREATMENT PROCESSES IN USE
Operator Visitation Frequency	Disinfection-hypochlorination
Hrs/day: Required N/A Actual N/A	
Days/wk: Required 2 Actual 5+1 wknd	What additional treatment is needed?
Non-consecutive Days? ☐ Yes ☐ No ☒ N/A	
MORs submitted regularly? X Yes No N/A	None at this time For control of what deficiencies?
Data missing from MORs? No Yes N/A	N/A
MOR does not show correct plant address.	N/A
System is flushed and isolation valves are exercised	DISTRIBUTION SYSTEM
monthly; please indicate these exercises on the MORs.	Flow Measuring Device Flow Meter
Number of Service Connections61	Meter Size & Type 4" Water Specialties
Population Served 214 Basis 3.5/svc. cx.	Backflow Prevention Devices: X Yes No
Average Day (from MORs) 14,835 gpd	Cross-connections None observed
Max. Day (from MORs) 70,000 gpd 9/04	Written Cross-connection Control Program: Yes
	Coliform Sampling Plan: Yes No N/A
Max-day Design Capacity 48,000 gpd Comments System exceeded the design capacity in	Comments Cross-connection control plan,
August 2004: 145.83% & September 2004: 172.92%	Bacteriological sampling plan (attached to DBP),
August 2004: 143.03/0 & September 2004: 1/2.92/0	Disinfectants/disinfection byproducts plan (DBP)
	received 10/14/05.
	10001704 10/17/03.

PWS ID#_	3590762
Date	10/6/05

GROUND WATER SOURCE

<u> </u>	WAILK SOUNGE			
Well Num	ber	1		
Year Drille	ed	1965		
Depth Dri	lled	150'		
Drilling Me	ethod	Unknown		
Type of G	rout	Unknown		
Static Water Level		30'	Andread Andrea	
Pumping \	Water Level	Unknown		
Design W	ell Yield			
Test Yield				
Actual Yie	eld (if different than rated capacity)			
Strainer		T		
Length (or	utside casing)	106'		
Diameter	(outside casing)	6"		
Material (d	outside casing)	Steel		
Well Cont	amination History	None		
Is inundat	ion of well possible?	No		
6' X 6' X 4	" Concrete Pad	Yes		
	Septic Tank	~150'		
SET	Reuse Water	N/A		
BACKS	WW Plumbing	>100'		
	Other Sanitary Hazard	None observed		
	Туре	Vertical turbine		
	Manufacturer Name	Goulds		
PUMP	Model Number	5CHC		
410	Rated Capacity (gpm)	100 gpm @ 187 ft. TDH		
	Motor Horsepower	7.5		
Well casing 12" above grade?		Yes		
Well Casing Sanitary Seal Raw Water Sampling Tap		Yes		
		Yes		
Above Gro	ound Check Valve	Yes		
Fence/Ho	using	Yes		
Well Vent	Protection	N/A		

COMMENTS	FL ID#: AAH2577.	Provide all unknown	information.		 	
				, , , , , , , , , , , , , , , , , , , 	 	

PWS ID#	3590762
Date	10/6/05

Make <u>Stenner</u> Capacity 17 gpd Chlorine Feed Rate <u>set at 2.75</u>		11	` '	Eleva
	(B) Bladder (C) Cl	earwell H	- K	T -
Nyg. Amount of Cl ₂ gas used N/A	<u> </u>	L	1\	-
Chlorine Residuals: Plant 1.96 Remote 1.06	Capacity (gal)	1,500		
Remote tap location <u>Richbee</u>	Material	Steel		
OPD Test Kit: On-site With operator None Not Used Daily	Gravity Drain	Yes		
njection Points Prior to hydro tank	By-pass Piping	Yes		
Booster Pump Info N/A	Pressure Gauge	Yes		
Comments Small leak at the chlorine injection point. ChemLogic- automated ORP chlorine monitor.	Sight Glass or Level Indicator	Yes		
Chlorine Gas Use YES NO Comments Requirements	Fittings for Sight Glass	N/A		
Dual System	Protected Openings	Yes		
auto-switchover	PRV/ARV	Both		
Narms:	On/Off Pressure	N/A		
Loss of Cl ₂ capability	Access Padlocked	Yes		
Cl ₂ leak detection	Height to Bottom of Elevated Tank	N/A		
Scale	Height to Max.	N/A		
Chained Cylinders	Water Level			
Reserve Supply	Comments Manhole:			
dequate Air-pak	Pressure gauge inside	building;	at 60 ps1.	
Sign of Leaks				
resh Ammonia				
/entilation				
Room Lighting	HIGH SERVICE PUM	PS		
Varning Signs	Pump Number		T	
Repair Kits	Туре			
itted Wrench	Make			
lousing/Protection	Model			
	Capacity (gpm)	$\overline{}$		
ERATION (Gases, Fe, & Mn Removal)	Motor HP	-+		
ype Capacity erator Condition	Date Installed			
Rerator Condition Bloodworm Presence Visible Algae Growth Protective Screen Condition Comments				
'isible Algae Growth	Maintenance Comments			\searrow

PWS ID#	3590762
Date	10/6/05

DEFICIENCIES / COMMENTS:

- 1. There was a leak at the chlorine injection point. Please determine the source of the leak and make the necessary repairs to ensure that chlorine is sufficiently injected into the system. [Rule 62-555.350, F.A.C.]
- 2. Flows exceeded the permitted maximum-day operating capacity twice during 2004. Please submit a report evaluating the supply and demand situations, and raise recommendations towards increasing the capacity of the plant as may be needed to meet the projected demand in the next five years. The report shall analyze the source, treatment, and storage capacity. [Rule 62-555.348 & 62-555.350(4), F.A.C.]
- 3. Ensure the correct plant address is indicated on Monthly Operating Reports (MORs) in Section B. Kathy Sillitoe has reported that she will be making this correction to all future MORs.
- 4. Provide information for items marked "unknown" in this report.

REMINDERS:

1. Cleaning and inspection for finished water storage tanks: Accumulated sludge and bio-growths shall be cleaned routinely (i.e., at least annually) from all treatment facilities that are in contact with raw, partially treated, or finished drinking water and that are not specifically designed to collect sludge or support a bio-growth; and blistering, chipped, or cracked coatings and linings on treatment or storage facilities in contact with raw, partially treated, or finished drinking water shall be rehabilitated or repaired. Finished-drinking-water storage tanks shall be checked at least annually to ensure that hatches are closed and screens are in place; shall be cleaned at least once every five years to remove bio-growths, calcium or iron/manganese deposits, and sludge from inside the tanks; and shall be inspected for structural and coating integrity at least once every five years by personnel under the responsible charge of a professional engineer licensed in Florida. [Rule 62-555.350(2), F.A.C.]

Disinfection and bacteriological evaluation following cleaning: Submit documentation showing proper disinfection and bacteriological evaluations following the intended cleaning of the hydropneumatic tank. Before new or altered treatment or storage facilities, new or altered water mains, and treatment or storage facilities and water mains taken out of operation for repair or maintenance that might lead to contamination of water are placed into, or returned to, operation, they shall be properly disinfected in accordance with the applicable American Water Works Association (AWWA) standard (i.e., AWWA Standard C651, C652, or C653). A total of at least two samples — each taken on a separate day and taken at least six hours apart from the other sample(s) — shall be collected at each of the locations indicated in the applicable AWWA standard. The chlorine residual in the facilities or mains shall be no more than four milligrams per liter. Ensure proper disposal of heavily chlorinated water from the tank disinfection process in accordance with requirements of the state pollution control agency. [Rule 62-555.340, F.A.C.]

Kathy Sillitoe has informed the Department cleaning and inspection of the hydropneumatic tank will be conducted the first quarter of 2006.

2. No later than <u>December 31, 2005</u>, suppliers of water shall provide an operation and maintenance manual for each of their drinking water plants, and shall update the manual thereafter as necessary to reflect plant alterations and additions. The manual shall contain operation and control procedures, and preventive maintenance and repair procedures, for all plant equipment and shall be made available for reference at the plant or at a convenient location near the plant. Bound and indexed equipment manufacturer manuals shall be considered sufficient to meet the requirements of this subsection. [Rule 62-555. 350(13), F.A.C.]

Inspector	Title _	Env. Specialist I	Date	10/19/05
Approved by	Title _	Environmental Manager	Date	11/8/05

RESPONSE		Please indicate changes to the	Please indicate changes to the following:				
PWS ID Num	ber: <u>3590762</u>	Business Name:					
PWS Name:	Little Wekiva Estates	Owner(s) Name:	Owner(s) Name:				
Mailing Addre	ess:						
							
Drinking W 3319 Magui Orlando, Fl Attention: Jo In response t	partment of Environmental Protater Compliance/Enforcement ire Boulevard, Suite 232 orida 32803 ni Petry, Environmental Specialist of the Department's Sanitary Surveyons were done to correct the listed design of the state of t	Program y Report for the subject public water system da	ated <u>October 6, 2005</u> , the				
Deficiency <u>Item No.</u> <u>Corrective Ad</u>		ive Action Done	<u>Date Done</u>				
•							
(Attach additi	onal sheet if necessary)						
I hereby certi	fy to the correctness of the above in	formation:					
PWS Owner/	Representative Signature:						
Name of PW	S Owner/Representative:	(Please Type or Print)					

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 E-Mail: uif@iag.net

November 28, 2005

Ms. Joni Petry Florida Department of Environmental Protection 3319 Maguire Boulevard, Suite 232 Orlando, Florida 32803-3767

RE: Sanitary Survey of Water Treatment Plants

Phillips PWS # 3591008 Park Ridge PWS# 3590993 Little Wekiva PWS# 3590762

Dear Ms. Petry:

Enclosed are the completed response forms indicating the deficiencies that were noted during the sanitary survey on October 6, 2005 have been corrected for the above referenced facilities

If you have any questions or need additional information, please do not hesitate to call me at (407) 869-8588, ext. 229.

Sincerely,

UTILITIES, INC. OF FLORIDA

Kathy Sillitoe Area Manager

ec: Patrick C. Flynn, Regional Director

Scotty L. Haws, Assistant Operations Manager

Page 1 of 1

C: Documents and Settings Leah Wright Desktop Survey ResponceNOV282005 doc

RESPONSE		Please indicate changes to the following:	
PWS ID Number: <u>3590762</u>		Business Name: Utilities, Inc. of Florida	
PWS Name: Little Wekiva Estates		Owner(s) Name: Utilities, Inc. of Florida	
Mailing Add	dress: 200 Weathersfield Avenue	Mailing Address: 200 Weathersfield	Avenue
Altamonte Springs, FL 32714		Altamonte Springs, FL 32714	
Date: N	ovember 29, 2005	Phone Number(s): 407-869-1919 ext. 229	
Drinking 3319 Mag	epartment of Environmental Protectio Water Compliance/Enforcement Progr juire Boulevard, Suite 232 Florida 32803		
Attention:	Joni Petry, Environmental Specialist		
In response following a	e to the Department's Sanitary Survey Repo ctions were done to correct the listed deficier	ort for the subject public water system oncies:	dated <u>October 6, 2005</u> , the
Deficienc <u>Item No</u> .	<u>Corrective Action Done</u>		Date Done
1	Replaced fitting on chlorine line and secured line with no leak detected		10/6/05
2	On August 6, 2004, there was a main break resulting in 80,000 gallons of lost		
	water. Due to damaged caused by Hurricane Charley, large volumes were recorded on		
	August 17, 2004 and August 18, 2004, due to a	water main break and from flushing the	
	system after power outages. These anomalies de	o not warrant an expansion of the WTP.	
3	The correct address of 805 Little Wekiva Drive was added to the October, 2005 MOR		11/10/05
	and will be added to future MORs.		
4	Unable to locate any additional information for ite	ems marked "unknown."	·······
(Attach add	ditional sheet if necessary)		
I hereby ce	ertify to the correctness of the above informati	on:	
DIME Owne	ar/Panrasantativa Signatura:	et Jegn	

Name of PWS Owner/Representative: Patrick C. Flynn, Regional Director
(Please Type or Print)

Little Wekiva Docket No. 060253-WS

25.30-440(6) Permits

Test Year Ended December 31, 2005

PROJECT NAME: Little Wekiva

A PERMIT AUTHORIZING:

The District authorizes, as limited by the attached permit conditions, the use of 8.76 million gallons per year of ground water from the Floridan aquifer for public supply for an estimated population of 214

LOCATION:

Site: Little Wekiva

Seminole County

Section(s):

Township(s): 21S

Range(s):

29E

ISSUED TO:

Utilities Inc of Florida 200 Weathersfield Ave Altamonte Springs, FL 32714

Permittee agrees to hold and save the St. Johns River Water Management District and its successors harmless from any and all damages, claims, or liabilities which may arise from permit issuance. Said application, including all maps and specifications attached thereto, is by reference made a part hereof.

This permit does not convey to permittee any property rights nor any rights of privileges other than those specified herein, nor relieve the permittee from complying with any law, regulation or requirement affecting the rights of other bodies or agencies. All structures and works installed by permittee hereunder shall remain the property of the permittee.

This permit may be revoked, modified or transferred at any time pursuant to the appropriate provisions of Chapter 373, Florida Statutes and 40C-1, Florida Administrative Code.

PERMIT IS CONDITIONED UPON:

See conditions on attached "Exhibit A", dated November 15, 2000

AUTHORIZED BY:

St. Johns River Water Management District Department of Resource Management

Dwight T Jenkins Division Director

"EXHIBIT A" CONDITIONS FOR ISSUANCE OF PERMIT NUMBER 8349 UTILITIES INC OF FLORIDA DATED NOVEMBER 15, 2000

- 1. District Authorized staff, upon proper identification, will have permission to enter, inspect and observe permitted and related facilities in order to determine compliance with the approved plans, specifications and conditions of this permit.
- 2. Nothing in this permit should be construed to limit the authority of the St. Johns River Water Management District to declare a water shortage and issue orders pursuant to Section 373.175, Florida Statutes, or to formulate a plan for implementation during periods of water shortage, pursuant to Section 373.246, Florida Statutes. In the event a water shortage, is declared by the District Governing Board, the permittee must adhere to the water shortage restriction as specified by the District, even though the specified water shortage restrictions may be inconsistent with the terms and conditions of this permit.
- 3. Prior to the construction, modification, or abandonment of a well, the permittee must obtain a Water Well Construction Permit from the St. Johns River Water Management District, or the appropriate local government pursuant to Chapter 40C-3, Florida Administrative Code. Construction, modification, or abandonment of a well will require modification of the consumptive use permit when such construction, modification or abandonment is other than that specified and described on the consumptive use permit application form.
- 4. Leaking or inoperative well casings, valves, or controls must be repaired or replaced as required to eliminate the leak or make the system fully operational.
- 5. Legal uses of water existing at the time of the permit application may not be interfered with by the consumptive use. If unanticipated interference occurs, the District may revoke the permit in whole or in part to curtail or abate the interference unless the permittee mitigates for the interference. In those cases where other permit holders are identified by the District as also contributing to the interference, the permittee may choose to mitigate in a cooperative effort with these other permittees. The permittee must submit a mitigation plan to the District for approval prior to implementing such mitigation.
- 6. Off-site land uses existing at the time of permit application may not be significantly adversely impacted as a result of the consumptive use. If unanticipated significant adverse impacts occur, the District shall revoke the permit in whole or in part to curtail or abate the adverse impacts, unless the impacts can be mitigated by the

permittee.

- 7. The District must be notified, in writing, within 30 days of any sale, conveyance, or other transfer of a well or facility from which the permitted consumptive use is made or within 30 days of any transfer of ownership or control of the real property at which the permitted consumptive use is located. All transfers of ownership or transfers of permits are subject to the provisions of section 40C-1.612, Florida Administrative Code.
- 8. A District-issued identification tag shall be prominently displayed at each withdrawal site by permanently affixing such tag to the pump, headgate, valve or other withdrawal facility as provided by Section 40C-2.401, Florida Administrative Code. Permittee shall notify the District in the event that a replacement tag is needed.
- 9. If the permittee does not serve a new projected demand located within the service area upon which the annual allocation was calculated, the annual allocation will be subject to modification.
- 10. Landscape irrigation is prohibited between the hours of 10:00 a.m. and 4:00 p.m., except as follows:
 - a) Irrigation using a micro-irrigation system is allowed anytime.
 - (b) The use of reclaimed water for irrigation is allowed anytime, provided appropriate signs are placed on the property to inform the general public and District enforcement personnel of such use. Such signs must be in accordance with local restrictions.
 - (c) Irrigation of, or in preparation for planting, new landscape is allowed any time of day for one 30 day period provided irrigation is limited to the amount necessary for plant establishment.
 - (d) Watering in of chemicals, including insecticides, pesticides, fertilizers, fungicides, and herbicides when required by law, the manufacturer, or best management practices is allowed anytime within 24 hours of application.
 - (e) Irrigation systems may be operated anytime for maintenance and repair purposes not to exceed ten minutes per hour per zone.
- 11. All submittals made to demonstrate compliance with this permit must include the permit number 8349 plainly labeled on the submittals.

- 12. This permit will expire on November 15, 2020.
- 13. Maximum annual ground water withdrawals must not exceed 8.76 million gallons.
- 14. The permittee must conduct an annual water audit within 30 days of the anniversary date of issuance of this permit. If the water audit shows that the system losses exceed 10%, a leak detection and repair program must be implemented.
- 15. The permittee must assure that all service connections are metered.
- 16. The permittee must implement the generic Water Conservation Plan prepared by Utilities, Inc., of Florida, which was submitted to the District on March 29, 2000, in accordance with the schedule contained therein.
- 17. Well no. 1 must continue to be monitored with a totalizing flowmeter. This meter must maintain 95% accuracy, be verifiable and be installed according to the manufacturer's specifications.
- 18. Total withdrawals from well no. 1 must be recorded continuously, totaled monthly, and reported to the District at least every six months from the initiation of the monitoring using Form No. EN-50. The reporting dates each year will be as follows for the duration of the permit:

Reporting Period

Report Due Date

January - June

July 31

July - December

January 31

- 19. The permittee must maintain all flowmeters. In case of failure or breakdown of any meter, the District must be notified in writing within 5 days of its discovery. A defective meter must be repaired or replaced within 30 days of its discovery.
- 20. The permittee must have all flowmeters checked for accuracy at least once every 3 years within 30 days of the anniversary date of permit issuance, and recalibrated if the difference between the actual flow and the meter reading is greater than 5%. District Form No. EN-51 must be submitted to the District

within 10 days of the inspection/calibration.

- 21. The lowest quality water source, such as reclaimed water or surface/storm water, must be used as irrigation water when deemed feasible pursuant to District rules and applicable state law.
- 22. The permittee shall submit, to the District, a compliance report pursuant to subsection 373.236(3), F.S., every 5 years during the term of the permit. The permittee shall submit the report by January 31 of the required year. The report shall contain sufficient information to demonstrate that the permittee's use of water will continue, for the remaining duration of the permit, to meet the conditions for permit issuance set forth in the District rules that existed at the time the permit was issued for 20 years by the District. At a minimum, the compliance report must:
 - (a) meet the submittal requirements of section 4.2 of the Applicant's Handbook: Consumptive Uses of Water, February 8, 1999; and
 - (b) supply all of the information specifically required by the compliance report condition(s) on the permit.

Notice Of Rights

- 1. A person whose substantial interests are or may be determined has the right to request an administrative hearing by filing a written petition with the St. Johns River Water Management District (District), or may choose to pursue mediation as an alternative remedy under Sections 120.569 and 120.573, Florida Statutes, before the deadline for filing a petition. Choosing mediation will not adversely affect the rights to a hearing if mediation does not result in a settlement. The procedures for pursuing mediation are set forth in Sections120.569 and 120.57, Florida Statutes, and Rules 28-106.111 and 28-106.401-.405, Florida Administrative Code. Pursuant to Chapter 28-106 and Rule 40C-1.1007, Florida Administrative Code, the petition must be filed at the office of the District Clerk at District Headquarters, P. O. Box 1429, Palatka, Florida 32178-1429 (4049 Reid St., Palatka, FL 32177) within twenty-six (26) days of the District depositing notice of District decision in the mail (for those persons to whom the District mails actual notice) or within twenty-one (21) days of newspaper publication of the notice of District decision (for those persons to whom the District does not mail actual notice). A petition must comply with Chapter 28-106, Florida Administrative Code.
- 2. If the Governing Board takes action which substantially differs from the notice of District decision, a person whose substantial interests are or may be determined has the right to request an administrative hearing or may choose to pursue mediation as an alternative remedy as described above. Pursuant to District Rule 40C-1.1007, Florida Administrative Code, the petition must be filed at the office of the District Clerk at the address described above, within twenty-six (26) days of the District depositing notice of final District decision in the mail (for those persons to whom the District mails actual notice) or within twenty-one (21) days of newspaper publication of the notice of its final agency action (for those persons to whom the District does not mail actual notice).

 Such a petition must comply with Rule Chapter 28-106, Florida Administrative Code.
- 3. A substantially interested person has the right to a formal administrative hearing pursuant to Section 120.569 and 120.57(1), Florida Statutes, where there is a dispute between the District and the party reqarding an issue of material fact. A petition for formal hearing must comply with the requirements set forth in Rule 28-106.201, Florida Administrative Code.
- 4. A substantially interested person has the right to an informal hearing pursuant to Sections 120.569 and 120.57(2), Florida Statutes, where no material facts are in dispute. A petition for an informal hearing must comply with the requirements set forth in Rule 28-106.301, Florida Administrative Code.
- 5. A petition for an administrative hearing is deemed filed upon delivery of the petition to the District Clerk at the District headquarters in Palatka, Florida.
- 6. Failure to file a petition for an administrative hearing, within the requisite time frame shall constitute a waiver of the right to an administrative hearing (Section 28-106.111, Florida Administrative Code).
- 7. The right to an administrative hearing and the relevant procedures to be followed are governed by Chapter 120, Florida Statutes, and Chapter 28-106, Florida Administrative Code and Section 40C-1.1007, Florida Administrative Code.

Notice Of Rights

- 8. An applicant with a legal or equitable interest in real property who believes that a District permitting action is unreasonable or will unfairly burden the use of his property, has the right to, within 30 days of receipt of notice of the District's written desision regarding a permit application, apply for a special master proceeding under Section 70.51, Florida Statutes, by filing a written request for relief at the office of the District Clerk located at District headquarters, P. O. Box 1429, Palatka, FL 32178-1429 (4049 Reid St., Palatka, Florida 32177). A request for relief must contain the information listed in Subsection 70.51(6), Florida Statutes.
- 9. A timely filed request for relief under Section 70.51, Florida Statutes, tolls the time to request an administrative hearing under paragraph no. 1 or 2 above (Paragraph 70.51(10)(b), Florida Statutes). However, the filing of a request for an administrative hearing under paragraph no. 1 or 2 above waives the right to a special master proceeding (Subsection 70.51(10)(b), Florida Statutes).
- 10. Failure to file a request for relief within the requisite time frame shall constitute a waiver of the right to a special master proceeding (Subsection 70.51(3), Florida Statutes).
- 11. Any substantially affected person who claims that final action of the District constitutes an unconstitutional taking of property without just compensation may seek review of the action in circuit court pursuant to Section 373.617, Florida Statutes, and the Florida Rules of Civil Procedures, by filing an action in circuit court within 90 days of the rendering of the final District action, (Section 373.617, Florida Statutes).
- 12. Pursuant to Section 120.68, Florida Statutes, a person who is adversely affected by final District action may seek review of the action in the District Court of Appeal by filing a notice of appeal pursuant to the Florida Rules of Appellate Procedure within 30 days of the rendering of the final District action.
- 13. A party to the proceeding before the District who claims that a District order is inconsistent with the provisions and purposes of Chapter 373, Florida Statutes, may seek review of the order pursuant to Section 373.114, Florida Statutes, by the Florida Land and Water Adjudicatory Commission, by filing a request for review with the Commission and serving a copy on the Department of Environmental Protection and any person named in the order within 20 days of adoption of a rule or the rendering of the District order.
- 14. For appeals to the District Court of Appeal, a District action is considered rendered after it is signed on behalf of the District, and is filed by the District Clerk.
- 15. Failure to observe the relevant time frames for filing a petition for judicial review described in paragraphs #11 and #12, or for Commission review as described in paragraph #13, will result in waiver of that right to review.

Notice Of Rights

Certificate of Service

I HEREBY CERTIFY that a copy of the foregoing Notice of Rights has been sent by U.S. Mail to:

Utilities Inc of Florida 200 Weathersfield Ave Altamonte Springs, FL 32714

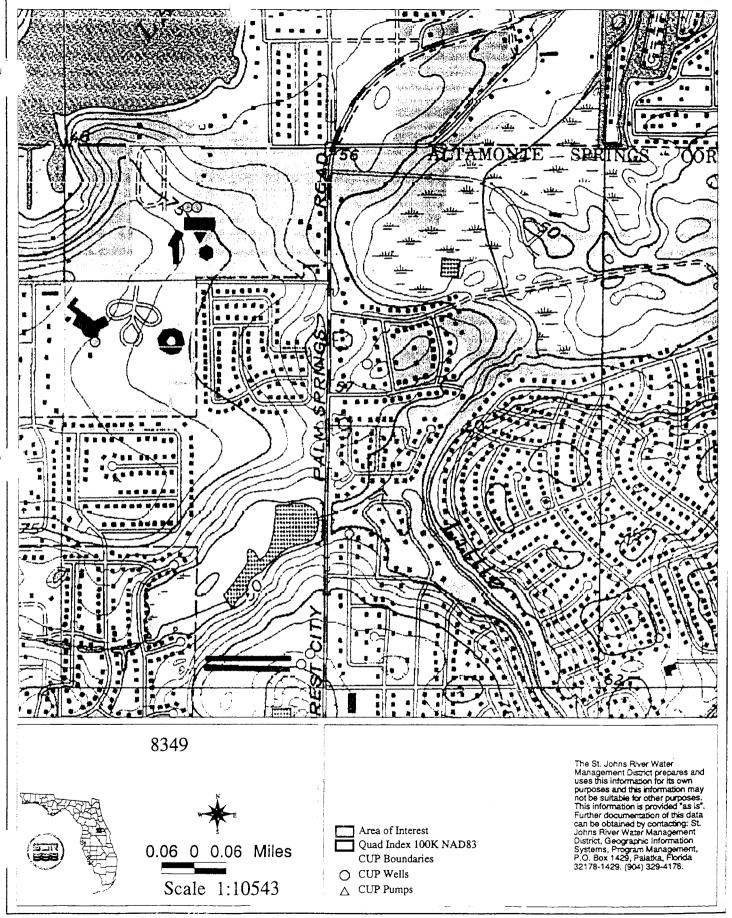
at 4:00 p.m. this 13th day of November, 2000.

Division of Permit Data Services Gloria Lewis, Director

St. Johns River Water Management District Post Office Box 1429 Palatka, FL 32178-1429 (904) 329-4152

Permit Number: 8349

FLORIDA I TOPIDA FLORIDA POLICIA DE LOS PEDENTOS PEDENTOS DE LOS PEDENTOS DE LOS PEDENTOS DE LOS PEDENTOS PE



Source: /home/jeri/cupwork.apr 08/23/1999

FLOW METER WATER CALIBRATION RECORD - EN51

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT Post Office Box 1429

Palatka, Florida 32178-1429

Permittee Name: Utilities Inc of Florida	
Date of Permit Issuance: November 15, 2000 Station Name: 1	
Pump Capacity: 65 GPM	
Serial Number on Meter:	
Meter Model:	
Discharge Pipe Diameter:	
Date of Last Meter Calibration:/	
Date of This Calibration:/	
Name of Person Performing Calibration:	
Method or Equipment Used for Calibration:	
Initial Meter Reading at Start of Calibration:	
Final Meter Reading at End of Calibration:	
Readings on Equipment Used for Calibration:	
Start: End:	
(Attach Formulas Used to Make Calculations)	
Percent of Error Between Meter Reading and Calibration Equipment:	_%
Name of Person Completing Form (Please Print):	
Company Name:	
Address:	
Ci+··/State/Zip:	
Daytime Telephone: ()	

Please Retain a Copy for Your Records





St. Johns River Water Management Distric P. O. Box 142\$ Palatka, Florida 32178-142

WATER USE RECORD

FORM EN - 50

CUP# 8349

PERMIT ISSUE DATE 15-nov-2000

DISTRICT ID

OWNERS ID

PERMITTEE Utilities Inc of Florida

PROJECT Little Wekiva

WELL NAME 1

PUMP NAME

COMPLETE THE FORM BY PRINTING EACH "NUMBER" WITHOUT TOUCHING THE SIDES OF THE BOX

Step 1.	MADIC AL								
O(Op		L L THAT DUSE THIS				0	WELL	. CAPF	PED
	O WE	ELL ABANI	DONE) (40C-	3, FAC	;) ₀	PROF	PERTY	SOLD
	\circ cc	OMMENTS	: (PLEA	ASE PF	RINT): _				

Step 2. REPORT MONTHLY WATER USE BELOW. RECORD EITHER FLOW METER READINGS OR GALLONS USED (NOT BOTH).

GALLONS

OR METER READINGS

JAN	01	
FEB	01	
MAR	01	
APR	01	
MAY	01	
JUN	01	
Step 3	•	ONTACT NAME



15591





St. Johns River Water Management Distric P. O. Box 1429 Palatka, Florida 32178-1429

WATER USE RECORD

FORM EN - 50

CUP# 8349

PERMIT ISSUE DATE 15-nov-2000

DISTRICT ID

OWNERS ID

PERMITTEE Utilities Inc of Florida

PROJECT Little Wekiva

WELL NAME 1

PUMP NAME

COMPLETE THE FORM BY PRINTING EACH "NUMBER" WITHOUT TOUCHING THE SIDES OF THE BOX

	0	•	2	3	4	5	6	7	8	9
Step 1.	MARK	ALL	THAT	APPL	Υ.					
	0	NO US	SE THIS	PERI	OD		0	WELL	CAP	PED
	0	WELL	ABAND	ONED	(40C-	3, FAC) ₍	PROF	PERTY	SOLD
	0	COMN	MENTS:	(PLEA	SE PF	RINT):				

Step 2. REPORT MONTHLY WATER USE BELOW. RECORD EITHER FLOW METER READINGS OR GALLONS USED (NOT BOTH).

GALLONS

OR METER READINGS

JUL	00										
AUG	00										
SEP	00										
ОСТ	00										
NOV	00										
DEC	00										

Step 3.	CONTACT NAME	
	PHONE NUMBER	



25.30-440(7) Notices

NOTICES

None

25.30-440(8) Field Employees

Employees Involved in Utilities, Inc. of Florida Operations During Test Year 2005:

Patrick Flynn, Regional Director: Oversees all operations and employees in Florida.

Bryan Gongre, Regional Manager: Manages operations and employees for all Central Florida systems.

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.

Bill Coates, Project Manager: Lake and Marion County systems.

Tony Wierzbicki, Project Manager: Manages capital projects and developer activity within the West Coast and South Florida Operations areas

[Open], Project Manager: Seminole and Orange County systems.

Kathy Sillitoe, Area Manager: Seminole and Orange County Plants.

John Marinelli, Area Manager: Seminole and Orange County Field Maintenance.

Chuck Schwades, Area Manager: Lake and Marion County Field Maintenance.

Michael T. Dunn, Regional Manager

Scotty Lee Haws, Regional Manager

John G Holdman, Area Manager

Gaary Wade Musselwhite Jr., Area Manager

Field Employees:

Pasco and Pinelles Counties:

Steve Habery, Lead Operator ("C" Water License and "C" Wastewater License) Jack Adkins, Operator ("C" Water License)

Marion County:

Daniel Anderson, Operator ("A" Water License and "A" Wastewater License)

Seminole and Orange Counties:

Allan Finch, Operator ("C" Water License)

Chris Phillips, Meter Reader Terry Sillitoe, Operator, Part Time ("A" Water License and "A" Wastewater License)

Thomas W Abendroth, Field tech James Roger Adlay, Operator Robert K Cooper, Field Tech Robb Douglas Crow, Operator Michael John Gavaletz, Operator Jimmie H. Hollister, Field Tech Alexander Lorenzo, Operator Roy Mericle, Operator Raymond Alan Parrish, Operator Jeffrey Pinder, Field Supervisor Frederick E Quinlan II, Field Tech Roberto Remigio, Meter Reader Mickey A Shue, Field Tech Ronald D. White, Field Supervisor William B Willingham, Field Tech James Dennis Yingling, PT Field Tech James Howard Pendarvis, Field Tech Preston S Boardway, PT Field Tech James Edward Carroll, Operator Leonard E Ledwell, Operator David Ryniak, Operator

Facilities:

The minimum staffing requirement at all Utilities, Inc. of Florida water systems is 6 visits per week provided by a minimum class "C" operator. The minimum staffing requirement at the Crownwood wastewater treatment plant in Marion County is ½ hour per day, 6 days per week.

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.

25.30-440(9) Vehicles

FL Vehicles as of 5-5-06

Veh. # Yr/Make/Model	VIN	Driver Assigned	Cost Company Name
9934 99 DODGE DAKOTA	1B7FL26X6XS261957	CORY SUDOL	\$15,678.58 Alafaya Utilities, Inc.
9932 99 DODGE DAKOTA	1B7FL26XXXS277898	NO DRIVER YET	\$15,467.19 Alafaya Utilities, Inc.
636 06 CHEV COLORADO	1GCCS146568234592	JEROME HAMPTON	\$16,622.26 Alafaya Utilities, Inc.
221 02 CHEVY S-10	1GCCS14W428209130	ROGER GRAY	\$13,356.21 Alafaya Utilities, Inc.
19 00 CHEV CS10803	1GCCS14W9YK196208	CARL ZUBEK	\$15,363.17 Alafaya Utilities, Inc.
610 06 CHEV C15 V-8	1GCEC14V86Z103857	MICHAEL OVERTON	\$18,681.44 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	\$15,099.10 Bayside Utility Services, Inc.
638 06 CHEV C15	1GCEC14V86E197990	ALVIN BISHOP	\$18,923.65 Bayside Utility Services, Inc.
8691 86 INTERNATIONAL	1HTLDTVN2GHA45725	VACUUM TRŲCK	\$11,026.85 Bayside Utility Services, Inc.
223 02 CHEVY S-10	1GCCS14W628209453	WILLIAM NEAL	\$13,356.21 Cypress Lakes, Utilities, Inc.
608 06 CHEV C15 V-8	1GCEC14V26Z102011	DAVID SHOFFSTALL	\$18,681.44 Cypress Lakes, Utilities, Inc.
16 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	\$24,607.70 Mid-County
103 01 CHEV \$10	1GCCS14W01K129325	MATTHEW GUNTHER	\$15,053.85 Mid-County
9833 98 CHEV S-10	1GCCS14X2WK245013		\$16,047.78 Mid-County
111 01 CHEV 1500	1GCEC14W81Z185977	SPARE	\$16,965.92 Mid-County
461 04 CHEV C15	1GCEC14X24Z336714	ROBERT BUONO	\$16,588.04 Mid-County
9928 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.
9931 99 DODGE DAKOTA	1B7FL26X6XS261956	RAY HOGUE	\$15,493.25 Sanlando Utilities, Inc.
9927 99 DODGE DAKOTA	1B7FL26XXXS261958	JIM SWEGHEIMER	\$15,792.00 Sanlando Utilities, Inc.
9602 96 FORD RANGER REGULAR	1FTCR10X1TUB67972	SPARE	\$16,085.99 Sanlando Utilities, Inc.
516 05 CHEV COLORADO	1GCCS146358238591	DOUG GOODWIN	\$18,484.14 Sanlando Utilities, Inc.
101 01 CHEV \$10	1GCCS14W01K129261	ROBERTO REMIGIO	\$15,053.85 Sanlando Utilities, Inc.
220 02 CHEVY S-10	1GCCS14W128209201	ROY MERICLE	\$13,356.21 Sanlando Utilities, Inc.
14 00 CHEV CS10803	1GCCS14W1YK195845		\$15,363.17 Sanlando Utilities, Inc.
102 01 CHEV \$10	1GCCS14W71K129239	ELISA STEGER	\$15,516.86 Sanlando Utilities, Inc.
9835 98 CHEV S-10	1GCCS14X0WK247116 1GCCS14X6WK246309		\$16,290.61 Sanlando Utilities, Inc. \$16,143.89 Sanlando Utilities, Inc.
9834 98 CHEV 5-10	1GCEC14V11E249162	KEVIN COOPER	\$18,690.29 Sanlando Utilities, Inc.
110 01 CHEV 1500 109 01 CHEV 1500	1GCEC14V11E249102	JEFF PINDER	\$19,066.93 Sanlando Utilities, Inc.
217 02 CHEVY C15 FULL	1GCEC14V31Z2313941	DALE WHITE	\$17,238.08 Sanlando Utilities, Inc.
18 00 CHEV 1500	1GCEC14V6YE249071	THOMAS ABENDROTH	\$19,049.81 Sanlando Utilities, Inc.
108 01 CHEV 1500	1GCEC14V91E265755	MATTHEW MORRELL	\$18,735.55 Sanlando Utilities, Inc.
113 01 CHEV 1500	1GCEC14W21Z187837	JIMMIE HOLLISTER	\$17,472.60 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	\$19,053.10 Sanlando Utilities, Inc.
305 03 CHEV C15 FULL	1GCEC14X63Z115177	FRED QUINLAN	\$22,478.87 Sanlando Utilities, Inc.
433 04 FORD F-750	3FRXF75424V600407	SANLANDO DUMP TRUCK	\$63,896.30 Sanlando Utilities, Inc.
304 03 CHEV C15 FULL	1GCEC14X23Z115810	JERRY HAHN	\$19,372.92 Tierre Verde
8926 89 FORD F-350	1FDKF37G5KNA56982	DUMP TRUCK	\$31,061.22 Utilities, Inc. of Florida
9765 97 PONTIAC GRAND AM	1G2WP5216WF270000	NO DRIVER YET	\$15,000.00 Utilities, Inc, of Florida
35 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
637 06 CHEV C15	1GCEC14V96E197609	JEFF FINEHIRSH	\$18,923.65 Utilities, Inc, of Florida
222 02 CHEVY C15 FULL	1GCEC14W12Z314210	CHARLES SCHWADES	\$16,461.98 Utilities, Inc, of Florida
424 03 CHEV C15 FULL	1GCEC14X04Z274231	ALLEN FINCH	\$17,763.05 Utilities, Inc, of Florida
436 04 CHEV C15 FULL	1GCEC14X24Z201474	JACK ADKINS	\$17,503.53 Utilities, Inc, of Florida
301 03 CHEV C15 FULL	1GCEC14X63Z115146	STEVE HABERY	\$19,053.10 Utilities, Inc, of Florida
422 04 CHEV C15 EXT CAB	1GCEC19VX4Z270758	RICHARD RETZ	\$21,654.48 Utilities, Inc, of Florida
509 05 CHEV C15 4X4 EXT	1GCEK19T35E230984	JOHN MARINELLI	\$28,037.52 Utilities, Inc, of Florida
639 06 CHEV C15 4X4 EXT	1GCEK19Z26Z225726	BILL COATES	\$24,891.62 Utilities, Inc. of Florida
428 04 CHEV S10 TRAILBLAZER	1GNDT13S442340667	BRYAN GONGRE	\$27,109.73 Utilities, Inc, of Florida
512 05 CHEV TAHOE	1GNEC13T85R199267	PATRICK FLYNN	\$37,478.51 Utilities, Inc. of Florida
650 06 CHEV TAHOE 4X4	1GNEK13TX6R148941	JOHN HOY	\$32,505.83 Utilities, Inc, of Florida
9250 92 DODGE	2B7GB11X5NK163811	SEWER VIDEO EQUIP VAN	\$0.00 Utilities, Inc, of Florida
242 02 CHEVY IMPALA	2G1WF55E329381533	SCOTTY HAWS	\$19,351.00 Utilities, Inc, of Florida
9925 99 CHEV LUMINA	2G1WL52M1X9177423	KATHY SILLITOE	\$17,132.82 Utilities, Inc, of Florida
453 04 CHEV C15 EXT CAB	2GCEC19T341374628	TONY WIERZBICKI	\$22,987.16 Utilities, Inc, of Florida
609 06 CHEV C25	2GCEC19VX61115736	SCOTT STEWART	\$22,387.19 Utilities, Inc, of Florida
129 01 CHEV FULL 1500 4WD	2GCEK19T111381348	WILLIAM NEAL	\$24,967.07 Utilities, Inc, of Florida
33 00 DODGE DAKOTA	1B7GG22X7YS753556	SPARE	\$20,427.35 Utilities, Inc. of Pennbrooke

105 01 CHEV S10 314 03 CHEV C15 FULL 511 05 CHEV C15 REG CAB 1GCCS14WX18159350 JAMES YINGLING 1GCEC14X43Z114271 STEVEN PFOUTS 1GCEC14X75Z230180 DAN ANDERSON

\$15,998.46 Utilities, Inc. of Pennbrooke \$19,053.10 Utilities, Inc. of Pennbrooke \$18,064.18 Utilities, Inc. of Pennbrooke

25.30-440(10) Customer Complaints

CUSTOMER COMPLAINTS

Please refer to the CD provided to the Commission Clerk with the filing.