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 Utility

**VOLUME III** 



FOR THE

Test Year Ended: 12/31/05

FORM PSC/WAW 20 ( / )

BINDER 11 of 11

System(s):

Weathersfield

DOCUMENT NUMBER-DATE

a ray

## Weathersfield

Docket No.: 060253-WS

Seminole County

Test Year Ended December 31, 2005

## Weathersfield

Docket No. 060253-WS

Seminole County

25.30.440 (1) Detailed Map

## Test Year Ended December 31, 2005

## MAPS

# SUBMITTED TO COMMISSION SEPARATELY

## Weathersfield

Docket No. 060253-WS

Seminole County

25.30.440 (2) Chemicals Used

Test Year Ended December 31, 2005

# CHEMICALS USED

# To Be Provided

PAGE 02/05

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

		Chemical	Water	Unit
County	System Name	Used	Treatment	Price
County	- Of Stell Hall			
Seminole	Weathersfield	Chlorine	40-45 gpd	\$ 1.15/gal
			1	
		Chemical	Water	Unit
County	System Name	Used	Treatment	Price
				0 1 15/201
Seminole	Oakland Shores	Chlorine	20-25 gpd	<b>\$ 1.15/gal</b>
		Chemical	Water	Unit
County	System Name	Used	Treatment	Price
County	System Name	Useq	Heatment	
Seminole	Little Wekiva	Chlorine	3-4 gpd	\$ 1.15/gal
the second s				
and a help officially first to many of the providence of the provi		Chemical	Water	Unit
County	System Name	Used	Treatment	Price
Seminole	Park Ridge	Chlorine	3-4 gpd	\$ 1.15/gai
		Polyphosphate	1-2 gpd	\$14.00/ gal
			Mater	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
Constitution of the				
		Chemical	Water	Unit
County	System Name	Used	Treatment	Price
Seminole	Crystal Lake	Chlorine	3-4 gpd	\$ 1.15/gal
and the second		Polyphosphate	1-2 gpd	\$14.00/ gal
		Chemical	Water	Unit
		Used	Treatment	Price
County	System Name	USed	freatment	FILE
Seminole	Ravenna	Chlorine	8-12 gpd	\$ 1.15/gal
				and the second
7/@+\$######\$f1#f14f7#f3f3################################	⋺⋺⋽⋓⋺⋫⋺⋣⋕⋪⋬⋻⋻⋳⋹⋳⋳⋽⋠⋭⋰⋫⋫⋴⋐⋸⋪⋴⋴⋜⋽⋶⋴⋎⋠⋇⋇⋽⋑∊⋳⋛⋢⋐⋕⋹⋎⋏ ⋺⋺⋽⋓⋺⋫⋺⋣⋕⋪⋨⋤⋳⋹⋳⋳⋽⋠⋭⋰⋫⋫⋴⋐⋸⋪⋴⋴⋜⋽⋶⋴⋎⋠⋇⋇⋽⋑∊⋳⋛⋢⋐⋕⋹⋎⋏	Chemical	Water	Unit_
County	System Name	Used	Treatment	Price
Seminole	Bear Lake	Chlorine	7-10 gpd	\$ 1.15/gal
	<del> </del>	Chemical	Water	Unit
County	System Name	Used	Treatment	Price
Cominala		Chloring	10-1Eand	\$ 1.15/gal
Seminole	Jansen	Chlorine	12-15gpd	\$14.00/ gal
	1	Polyphosphate	_2-3 gpd	914.00/ yai

~~···

## UTILITIES, INC. OF FLORIDA 2006 CHEMICAL USE DATA

County	System Name	Chemical Used	Water Treatment	Wastewater Treatment	Annual Amount	Quantity	Unit Pric	Feed e Rate
PINNELLAS COUNT	Y							
	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	Gais	\$ 0.87	4.8 gal/day
								+
							<u> </u>	

09/25/2005

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	2006 C	HEMICAL US	e da'la		
stem Name	Chemical Used	Water Treatment	Wastewater Treatmont	Annual Amount	Qu
				· · · ·	ι

UTILITIES, INC. OF FLORIDA

County	System Name	Chemical Used	Water Treatment	Wastewater Treatment	Annual Amount	Quantity	Unit Price	Feed Rate
					· · · ·		<b>├</b>	
MARION COUNTY					1		<u></u>	
	GOLDEN HILLS	Liquid Chloring	(Yes) No	Yes / No	1,325 6.4	GALS	0.95/GAL	4.9 gals/day
		Ammonia	-Yes/No-	Yes / No-				
							<u></u>	
	CROWNWOOD	En Chi a	Yes/No	Vice/No	50 485	LBS	2.16/18	0.2 185/ day
	CROWNWOOD	Stick Chlorda			1,945 64			7.2 gals / clay
		Liquid Chlorine	the second se	Yes No	11,775 640	1011-2	TUND JOAN	1-2 yais / may
	\$	-Gas Chlorina	-Yes/No-	- Yes/No	1			
		Liquid Chlorine	Yes/No	Yest No-				
		Granular Chlora		Yas INa	100 185	LBS	5 1.48/LB	0.4 LBS/day
					·}			<b>↓</b>
L	<u> </u>		<u>ا</u>	L	1	<u>}</u>	<u></u>	

(So far)

(269 days sofar)

GOLDEN HILLS

UTILITIES INC OF FL

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UTILITIES INC OF FL

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09/26/2006 89:28

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PAGE 02 PAGE 04/05

## Weathersfield

Docket No. 060253-WS

Seminole County

## 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: Second Quarter Herbicides Synthetic Organic Contaminants Weathersfield Utilities, Inc. PWS ID# 3591451

Dear Mr. Morrison:

Enclosed please find the results for samples taken on July 25, 2005 for the above referenced analysis and system. The Herbicides were resampled due to incorrect preservative causing matrix interference.

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

Sincerely,

WEDGEFIELD UTILITIES INC.

1 5:00, TD

Kathy Sillitoe Area Manager

EC: Patrick Flynn, Regional Director, UIOF Scotty L. Haws, Assistant Operations Manager



## 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: Weathersfield	PWSID.#3591451
System Type (check one): Community Address:	□Nontransient Noncommunity □Transient Noncommunity IERSFIELD_AUE.
	UGSState: FLA, ZIP Code: 32714
Phone #: 407-869-1919	Fax #: 407-869-6961
E-Mail Address: 5, C. HAWS (a	DUTILITIES INC USA, COM
SAMPLE INFORMATION (to be completed	by sampler)
	Location Code (if known): POE
Sample Date: 7/25/05	Sample Time: AM PM (Circle One)
Sample Location (be specific):	
	results for trihalomethanes and haloacetic acids): mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
	Routine Compliance (with 62-550)
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**
Raw (at well or intake)	Clearance (permitting)
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 attach a results page for each site.
Sampler's Name: <u>ALEXANDER</u>	CORENZO
Sampler's Phone #: 407-948-4	-207 Sampler's Fax #: <u>407-869-6961</u>
Sampler's E-Mail Address:N	
CERTIFICATION (to be completed by s	ampler)
ALEXANDER (OREN)	20 OPERATOR
I. <u>ALEXANDER LOREN</u> (Print Name)	(Print Title)
do HEREBY CERTIFY that the abov complete and correct.	e public water system and sample collection information is
Signature:	Tourso Date: 8/30/05

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

			Reporting			na an a
	ORY CERTIFICATIO		to be complete	ed by lab - Please typ	be or pri	nt legibly)
LabName:	Advanced Environn	nental Labs - Orland	0	F	lorida C	ertification #: E53076
Address				Certifica	ation Exp	piration Date: 6/30/2006
	Altamonte Springs,	FL 32701				Telephone #: (407) 937-15
ANALYSIS	S INFORMATION (to	be completed by lat	0			
PWS ID (fi	rom page 1):			Date Sa	ample(s	) Received: 7/25/2005 12:
	ned Report Number of	or Job ID A052554		Sample Num	nber (Fr	om page 1)
	Analyzed Results att		e with chapter	62-550, F.A.C. (che	ck all tha	at apply):
ł	Inorganics	Synthetic Organ	nics	Volatile Organics		Disinfection Byproducts
[	All 17	All 30		🗌 All 21		Trihalomethanes
[	Partial	All Except D	ioxin	Partial		Haloacetic Acids
[	Nitrate	Partial		Radionuclides		Bromate Chlorite
L	Nitrite	🔲 Díoxín Only		Single Sample		Secondaries
L	Abbalos only			Qtrly Composite		
						Partial
If yes, plea	analyses subcontrac ase provide DOH cer DOH ANALYTE SHE	tification number E8		D LAB		_
If yes, plea	ase provide DOH cer	tification number E8	32574			_
If yes, plea ATTACH I	ase provide DOH cer DOH ANALYTE SHE Santiago (Print Name)	tification number E	32574 BCONTRACTE CERTIFI Hager	CATION	,	_
If yes, plea ATTACH I I, Myrna S	ase provide DOH cer DOH ANALYTE SHE Santiago	tification number E8 ET FOR EACH SUE , Laboratory Man attached analytical o	32574 BCONTRACTE CERTIFI hager data are correct	CATION	., neet all i	requirements of the
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6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.
Project Name:	Weathersfield
Project Number:	
PWS ID#:	
Attention:	Kathy Sillitoe
Phone Number:	8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

 Report No.:
 A052554

 Date Sampled:
 7/25/2005

 Date Received:
 7/25/05 12:40

 Date Reported:
 8/19/2005

#### **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: Weathersfield

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 =

## Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.

Project Name: Weathersfield

Matrix: Drinking Water

#### PWS ID#:

Client Sample ID: 1

Site: POE

Sample Number: A052554-01

 Report No.:
 A052554

 Date/Time Sampled:
 07/25/05
 9:25

 Date/Time Received:
 7/25/05
 12:40

Sampled By: Alexander Lorenz

Shipping Method: Client drop off

Synthetic Organics

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	RDL	Analysis Date	Analysis Time	DOH Lab Cert. #
2031	Dalapon	200	ug/L	0.86	U	E515.3	0.86	1.0	8/2/2005	11:56	E82574
2040	Picloram	500	ug/L	0.47	U	E515.3	0.47	0.10	8/2/2005	11:56	E82574
2041	Dinoseb	7.0	ug/L	0.64	U	E515.3	0.64	0.20	8/2/2005	11:56	E82574
2105	2, <b>4-D</b>	70	ug/L	1.7	U	E515.3	1.7	0.10	8/2/2005	11:56	E82574
2110	2,4,5-TP (Silvex)	50	ug/L	0.080	U	E515.3	0.080	0.20	8/2/2005	11:56	E82574
2326	Pentachlorophenol	1.0	ug/L	0.24	U	E515.3	0.24	0.040	8/2/2005	11:56	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 Inc

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

#### Client: UTILITIES, INC. (UTL-A) Pr

Project name: WEATHERSFIELD

Completed by: RPG

Date/Time Rcvd: 7/25/05 12.40 Log-In request number: A052554

Received 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)	2				
Temp taken from	□ Temp blank ⊠ Cooler	□ Temp blank □ Cooler	Temp blank Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank     Cooler
Temp measured with	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):

### Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?			
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?			
7.	Were correct bottles used for the tests indicated?			l
8.	Were proper sample preservation techniques indicated on the label?			
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?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE	1		
13.	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			
15.	Were the sample containers provided by AEL?	1		
16.	Were samples accepted into the laboratory?	1		
17.	Was it necessary to split samples into other bottles?		1	

Kit ID

Comments:

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando	AEL Jax
528 South North Lake Blvd, S	6601 Southpoint Parkway
Altamonte Springs FL 32701	Jacksonville, FI 32216
	904-363-9350 Fax 904-363-9354
Contact Person: Myrna Santiago	Contact Person: Sean Hyde
Project #: A052554	Check if Rush
CustomerName: Utilities, Inc.	
Collector: Alexander Lorenzo	

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)
A052554-01	1	62-550 Herbicides (J)-515.3	Drinking Water	7/25/2005	9:25	7/25/05 12:40	8/8/2005		40mL Vial

Date/Time:  $\frac{7/26/05}{7/66/05}$ Orlando Relinquisher: Shipping Receiver: AEL Courier Annah Shipping Relinquisher: AEL Courier Jacksonville Receiver:

Page 1 of 1

													L		n.			
Ð	6601 Sol	Il Laboratories, uthpoint Pkwy. • Jac ncess Palm Ave. • V 67th Place, Ste. 7 lorth Lake Blvd., St	cksonville, FL 3221 Tampa, FL 33619	010.000.00	7.1500 • F 2701 • 40	ax 352.367.0 7.937.1594	0050 • E826 Fax 407.93		53076	BOTTLE			_	<b>A</b> 0	525	554	•	
LIENT NAME:		es Inc.	PROJECT NAME:		V	NEATH	ERSFI	ELD		SIZE & TYPE	1-L AMBER		,	(		I	۰ ۱	
	0 Weathe	rsfield Ave	P.O. NUMBER/PR	OJECT NUMBER							-4-							
	te Springs,	and the second	PROJECT LOCAT	ION: P	0,E													
HONE		48-1715	FAX							REQUIRED						1		ł
ONTACT	Kathy	Sillitoe	SAMPLED BY:	ALEXAL	DER	<u>LOR</u>	LENZ	0		5				i				15
	TURN AROUND TI			REMA	RKS/SPEC	CIAL INSTRUC	TIONS:			U U U U								σ
X STANDARD			_							ANALYSIS F	5							NUMBER
						OIL /	∖≕air S	SO=soil	SL=sludge	A	51			ļ			+	
WW=waste wate	ter SW=su	urface water GW≍gro	und water DW=drinki	ng water	Grab	SAMP			NO.	Preserv			and the second secon				7000	
SAMPLE ID		SAMPLE DES	SCRIPTION		Comp	DATE	TIME	MATRIX	COUNT		ingenetic Weblink			(Arthorney)				
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l-lce	H=(HCI)	5=(H2SO4 N=(H	HNO3) T=(Sodium	Thiosulfate)				1000		kelinquish by		7/25/05	5/240	-pi	$\square$	7/	25/15	1240
Shipment	1	thod	Sample Kit	Cooler #			2	Jacop	ran	n 1000	MD						<u> </u>	┼
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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 7, 2005

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

Re: Resample of Odor Synthetic Organic Contaminants Weathersfield Utilities, Inc. PWS ID# 3591451

Dear Mr. Morrison:

Enclosed please find the results for samples taken on July 25, July 26 and July 27, 2005 for the above referenced analysis and system. The odor was resampled due to the first sample taken was above the MCL

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

## 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: WEATHERSFIELD	PWS I.(	0.#:3591451
System Type (check one): 🛛 🖾 Community	Nontransient Noncommunit	y Transient Noncommunity
Address: 196 WEATHE	RSFIELD AVE.	
City: ALT, SPRINGS	State: _ <i>FLA</i>	ZIP Code: <u>32714</u>
Phone #: 407-869-1919	Fax #:4	07-869-6961
E-Mail Address: 5, C, HAWS		
SAMPLE INFORMATION (to be completed	by sampler)	
Sample Number: <u>A052553-01</u>	Location Code (if k	nown):
Sample Date: 7/25/05	Sample Time:	9:20 AM PM (Circle One)
Sample Location (be specific):POE		
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids)	: mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sa	ample (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	Sother:OPOR_TEST	10F 3
Ave Residence Time	Sampling Procedure Used or Other Co	omments:
Near First Customer		
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for ad for nitrate or nitrite MCL e	Iditional requirements attach	2-550.550(4) for requirements and a results page for each site.
Sampler's Name: <u>ALEXANDER</u>	LORENZO	
Sampler's Phone #:	207 Sampler's Fax #:	407-869-6961
Sampler's E-Mail Address:		
CERTIFICATION (to be completed by s	sampler)	
I, <u>ALEXANDER</u> LORENZO (Print Name)	2	OPERATOR.
(Print Name)		<u>OPERATOR</u> , (Print Title)
do HEREBY CERTIFY that the abov complete and correct.	e public water system and samp	le collection information is
Signature:	Turys	

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

Fiorida Department		tection Safe Drinking W rting Format	Ater Program Laboratory
LABORATORY CERTIFICATIO	ON INFORMATION (to be con	npleted by lab - Please type or	print legibly)
ATTACH CURRENT DOH ANA	ALYTE SHEET*		
LabName: Advanced Environn	nental Labs - Orlando	Florida	a 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 iab		
PWS ID (from page 1):		Date Sample	e(s) Received: 7/25/2005 12:40:00
Lab Assigned Report Number of	or Job ID A052553		(From page 1) A052553-01
Group(s) Analyzed Results atta	ached for compliance with cha		
Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts
<ul> <li>All 17</li> <li>Partial</li> <li>Nitrate</li> <li>Nitrite</li> <li>Asbestos Only</li> </ul>	All 30 All Except Dioxin Partial Dioxin Only	All 21 Partial Radionuclides Single Sample Qtrly Composite**	Trihalomethanes Haloacetic Acids Bromate Chlorite Secondaries
Were any analyses subcontract If ves, please provide DOH certi			<ul> <li>☐ All 14</li> <li>✓ Partial</li> </ul>
ATTACH DOH ANALYTE SHEE			
ATTACH DON ANALTTE SHE			
	CERT	<b>FIFICATION</b>	
I, Myrna Santiago (Print Name)	, Laboratory Manager	·,	
do HEREBY CERTIFY that all a National Environmental Laborate	ttached analytical data are co	rrect and unless noted meet al (NELAC).	I requirements of the
Signature:	Santiago	Date:	7-28-05
<ul> <li>Failure to provide a valid and of analysis results will result in reje and may result in notification of t</li> </ul>	ction of the report, possible er	nforcement against the public v	nalyte Sheet for the attached water system for failure to sample,
** Please provide radiological sa	mple dates and locations for	each quarter.	
COMPLIANCE DETERMINATIO	(to be completed by DE	P or DOH)	
Sample Collection Info Satisfacto	ory 🗃 Yes 🏾 No	Sample Analysis Info Sa	atisfactory: 👔 Yes 🏼 No
Replacement Sample(s) Requeste	ed (circle or highlight group(s) abov	ve) 🛛 🗿 Revised Report Reque	ested (circle or highlight group(s) above)
Additional Monitoring Require	d (circle or highlight group(s)		
Reason(s): 🔳 MCL(s) Exceede		tion(s) ion Unsatisfactory	<ul> <li>Incomplete Report</li> <li>Analysis Unsatisfactory</li> </ul>
I Other:		· · · · · · · · · · · · · · · · · · ·	
Person Notified:		Date N	Notified:
Comments			
ate Reviewed:		H Reviewing Official:	

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



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

Client: Utilities, Inc. Project Name: Weathersfield Project Number: PWS ID#:

Attention:Kathy SillitoePhone Number:8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

 Report No.:
 A052553

 Date Sampled:
 7/25/2005

 Date Received:
 7/25/05 12:40

 Date Reported:
 7/28/2005

#### **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: Weathersfield

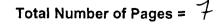
Approved By:

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.



## Advanced Environmental Laboratories, Inc.

Analytical Report

	Client: Utilities, Inc.							Report N	lo.: A05	2553		
Proje	ct Name: Weathersfield		Date/Time Sampled: 07/25/05									
	Matrix: Drinking Water							Date/Time Received: 7/25/05 12:40				
P	WS ID#:											
<b>Client Sa</b>	mple ID: 1											
	Site: POE							Sampled B	•	nder Lorenz		
Sample	Number: A052553-01							Shipping Meth	od: Client	drop off		
Seconda	ary Contaminants											
Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis <u>Time</u>	DOH Lab Cert. #		
1920	Odor	3.0	TON	2.0		E140.1	1.0	7/26/2005	8:30	E53076		

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



Advanced Environmental Labs Inc

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

#### Client: UTILITIES, INC. (UTL-A)

Project name: WEATHERSFIELD

Date/Time Rcvd: 7/25/05 12.40 Log-In request number: A052553

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)	2				
Temp taken from	□ Temp blank ⊠ Cooler	□ Temp blank □ Cooler	Temp blank Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank Cooler
Temp measured with	IR gun Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):

#### Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?	1		
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?	1		
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?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE			
13.	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			~
15.	Were the sample containers provided by AEL?	1		
16.	Were samples accepted into the laboratory?	1		
17.	Was it necessary to split samples into other bottles?		$\checkmark$	

#### <u>Kit ID</u>

Comments:

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	🛛 Tampa:	6601 Southpo 9610 Princes 2106 NW 67tl	<b>BS, INC.</b> oint Parkway, Jacks s Palm Avenue, Tan h Place, Suite 7, Ga Lake Blvd., Suite 10	onville, FL 32 npa, FL 33619 inesville, FL 3 116, Altamont	216 • (904 9 • (813) 63 32606 • (35 ie Springs,	80-9616 Fax (813 2) 367-1500 Fax FL 32701 • (407)	904) 363-9354 ) 630-4327 (352) 367-0050			BOTTLE		A	052	255	53	
CLIENT NAME:				PROJEC						SIZE &	!	1		1	1	
UTICI	TIES IN DO WEATH	<u>JC.</u>				THERS		)		TYPE						
ADDRESS:	OO WEATH	IERSF	TELD	P.O. NU	MBER / F	PROJECT NU	JMBER:			AR						- L
				PROJEC	CT LOCA	TION:				N E A Q L U						A B
PHONE: 407-	-869-1919	FAX:			P.O.E					Y I S R I E						N U M
1 ( 1/ 1/ 1/ 1/ 1/ 1/ 1/	ATHY SIL		-	SAMPLI	ED BY:	CEXANI	DER L	OREN	120	SD						B E B
TURN AROUND	D TIME:	RE	EMARKS / SPEC								D D					
STANDARD											R					
<b>WW</b> =waste water	SW≕surface wat	er GW-	=ground water	<b>DW</b> ⇒drinkinç	) water	OIL A-	=air <b>SO</b> ≃s	ioil SL	=sludge	Preserv						
SAMPLE ID	SA	MPLE DES	SCRIPTION		Grab Composite	SAMI DATE	PLING TIME	MATRIX	NO. CONT.							
1	PÖIN	JT O	FENTR	Y	6	7/25/05	0920	DW	1		Х					1
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										and and an						_
	$S = (H_2SO_4)$	) N = (HI	$NO_3$ ) T = (Soc	lium Thiosu	lfate)		quished by:		Date	Time			zeived by:		Date	Time
	ia:   RB_	iple Kit			1	allicand	n Low	200	175/05	1240	17	79			1/25/05	1240
	· · · · ·	BI	D/T		3							4				
Ret: / / V	ia: <sup>Irip</sup>	ы. С	D		4											
Received on ice: 14 y	/es □ no □ QC	🗅 sent		eceived	l				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	ł			revised 8	101		·

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Jeb Bush Governor





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

Secretary

Laboratory Scope of Accreditation

Page 1 of 2

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

State Laboratory ID: E53076

EPA Lab Code: FL01220

(407) 869-1919

E53076

Advanced Environmental Laboratories, Inc Orlando
528 South Northlake Blvd., Suite 1016
Altamonte Springs, FL 32701

Matrix, Drinking Water

Matrix: Drinking water	Method/Tech	Category	Certification Type	Effective Date
Color	EPA 110.2	Secondary Inorganic Contaminants	NELAP	3/16/2005
Ddor	EPA 140.1	Secondary Inorganic Contaminants	NELAP	3/16/2005
н	EPA 150.1	Secondary Inorganic Contaminants	NELAP	1/21/2005
fotal coliforms	SM 9222 B	Microbiology	NELAP	1/21/2005
Fotal coliforms & E. coli	SM 9223 B	Microbiology	NELAP	1/21/2005

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

NON-TRANSFERABLE 06/29/2005-E53076

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

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by samp	oler – Please ty	pe or print legibly)						
System Name: WEATHERSFIELD		PWS I.[	0.#:350	71	4	51			
System Type (check one): 🛛 🖾 Community	Nontransient N	Noncommuniț	y 🗌 Trans	ient Nor	ncomn	nunity			
Address: 196 WEAT	HERSFIELD AVE.	/							
			~ <u></u>						
City: <u>ALT, SPRINGS</u>		State: FLA	<u>/.</u> ZIP Code	: 37	2714	<u>+</u>			
Phone #: 407-869-1919	l 	Fax #:	407-869-	6961					
E-Mail Address: <u>5, C, HAWS</u>	@ UTILITIES	INC,							
SAMPLE INFORMATION (to be completed	by sampler)								
Sample Number: <u>A052575-01</u>	Loca	tion Code (if ki	nown):						
Sample Date:7/26/05	Sam	ple Time:	7:10	AM	PM	(Circle One)			
Sample Location (be specific):POE									
Disinfectant Residual (Required when reporting	results for trihalomethanes and	haloacetic acids)	: mg/L	Fie	eld pH	:			
Sample Type (Check Only One)	Re	ason(s) for Sa	mple (Check all tha	it apply)					
Distribution	Routine Compliance (	with 62-550)	Quarterly (w	hich Quar	ter?	······			
Entry Point (to Distribution)	Confirmation of MCL	Exceedance*	Special (not for	or complia	ince witi	with 62-550)			
Plant Tap (not for compliance with 62-550)	Composite of Multiple	mposite of Multiple Sites**							
Raw (at well or intake)	Clearance (permitting)	Clearance (permitting)							
Max Residence Time	⊠Other: <u>000R</u> 7	ODOR TEST ZOF 3							
Ave Residence Time	Sampling Procedure Use	ed or Other Co	mments:						
Near First Customer	·····								
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for ac for nitrate or nitrite MCL o	Iditional requirements		2-550.550(4) for re a results page for			i			
Sampler's Name:ALEXANDE	R LORENZO		_						
Sampler's Phone #: 407-948-4	1207 Samp	oler's Fax #:	407-869-	-6961					
Sampler's E-Mail Address:N [A	·								
<b>CERTIFICATION</b> (to be completed by a	sampler)								
ALEVANOTO LEREN	20		OPENATO	· 0					
I, <u>ALEXANDER LOREN</u> (Print Name)	,		<u>OPERATC</u> (Print Title)	1.5					
do HEREBY CERTIFY that the above complete and correct.									
	1			, 1					
Signature: Net Kandle	Torento		Date:	8/9/	05				

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

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

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LabName: Advanced Environmental Labs - Orlando Florida Certification #: E53076 Address: 528 S. North Lake Blvd., Suite 1016 Attamonte 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 A052575 Sample Number (From page 1) A052575-01 Group(s) Analyzed Results attached for compliance with chapter 82-550, FA.C. (check all that apply): Inorganics Synthetic Organics Volatile Organics Disinfection Byproducts All 17 All 30 All 21 Trihalomethanes Partial All 17 All 30 Crow and the completed by Composite** Secondaries Chointe Disinfection Only Single Sample Chointe Single Sample (Chointe Composite) Chointe Composite** Secondaries Chointe Composite** Secondaries Certification number Attach DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB CERTIFICATION I, Myma Samtago (Print Name) Chef Beb Cretification number and a current Analyte Sheet for the attached analysis earlied and current Florids DOH lab certification number and a current Analyte Sheet for the attached analysis earlied on of the DOH Bureau of Laboratory Services. ** Place provide radiological sample dates and locations for each quarter. COMPLIANCE DETERMINATION (to be completed by DEP or DOH) Sample Collection Info Satisfactory I vs I No Resion(s) All strate and locations for each quarter. COMPLIANCE DETERMINATION (to be completed by DEP or DOH) Sample Collection Info Satisfactory I vs I No Resion(s) Analyte Sheet(circle or highlight group(s) above) Reason(s) Addition Analyte Sheet(circle or highlight group(s) above) Reason(s) Analyse Sheet(s) Location Unsatisfactory Additional Monitoring Requested (circle or highlight group(s) above) Reason(s) Analyse Sheet(s) Location Unsatisfactory Additional Monitoring Requested (circle or highlight group(s) above) Reason(s) Additional Monitoring Requeste	LABORATORY CERTIFICATION INFO		leted by lab - Please type	or print legibly)			
Address:       528 S. North Lake Bvd., Suite 1016       Certification Expiration Date: 6/30/2006         Atlamonte Springs, FL 32701       Telephone #: (407) 937-1594         ANALYSIS INFORMATION (to be completed by lab       Date Sample(s) Raceived: 7/28/2005 12:00:00         Lab Assigned Report Number or Job ID A052575       Sample Number (From page 1) A052575-01         Group(s) Analyzed Results attached for compliance with chapter 52-550, F.A.C. (check all that apply):       Inorganica         Inorganica       Synthetic Organics       Volatile Organics         Partial       All 21       Trihalomethanes         Nitrate       Partial       Haloscetic Acids         Nitrate       Partial       Certification number         Asbestos Only       Disinfection Byroducts       Chlorite         Vere any analyses subcontracted?       Yes       No         If yes, please provide DOH certification number       CERTIFICATION       All 14         Were any analyses subcontracted?       Yes       No       Scondaries         If yes, please provide DOH certification number       Certification number and a current Analyte Sheet for the attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accerditation Conference (NELAC).       Signature:       Partial         * Failure to provide a salid and current Floride DOH lab certification number and a current							
Attamonte Springs, FL 32701       Telephone #: (407) 937-1594         ANALYSIS INFORMATION (to be completed by lab       PWS ID (from page 1):       Date Sample(s) Received: 7/26/2005 12:00:00         Lab Assigned Report Number or Job ID A052575       Sample Number (From page 1) A052575-01       Group(s) Analyzed Results attached for compliance with chapter 62-550, F.A.C. (check all that apply):         Inorganics       Optimize (Compliance with chapter 62-550, F.A.C. (check all that apply):         Inorganics       Optimize (Compliance with chapter 62-550, F.A.C. (check all that apply):         Inorganics       Optimize (Compliance with chapter 62-550, F.A.C. (check all that apply):         Inorganics       Optimize (Compliance with chapter 62-550, F.A.C. (check all that apply):         Inorganics       Optimize (Compliance with chapter 62-550, F.A.C. (check all that apply):         Inorganics       Optimize (Compliance with chapter 62-550, F.A.C. (check all that apply):         Inorganics       Optimize (Compliance with chapter 62-550, F.A.C. (check all that apply):         Inorganics       Optimize (Compliance with chapter 62-550, F.A.C. (check all that apply):         Inorganics       Optimize (Compliance with chapter 62-550, F.A.C. (check all that apply):         Inorganics       Optimize (Compliance with chapter 62-550, F.A.C. (check all that apply):         Inorganics       Optimize (Compliance with chapter 62-550, F.A.C. (check all that apply):         Intract <td< td=""><td></td><td></td><td colspan="5"></td></td<>							
ANALYSIS INFORMATION (to be completed by lab PWS ID (from page 1): Date Sample(s) Received: 7/26/2005 12:00:00 Lab Assigned Report Number or Job ID A052575 Sample Number (From page 1) A052575O1 Group(s) Analyzed Results attached for compliance with chapter 62-550, F.A.C. (check all that apply): Inorganics Synthetic Organics Volatile Organics Synthetic O	·····		Cerimcatio				
PWS ID (from page 1):       Date Sample(s) Received: 7/26/2005 12:00:00         Lab Assigned Report Number or Job ID A052575       Sample Number (From page 1) A052575-01         Group(s) Analyzed Results attached for compliance with chapter 62-550, F.A.C. (check all that apply):       Inorganics       Synthetic Organics       Disinfection Byproducts         All 17       All 30       All 21       Trihalomethanes       Haison         Partial       All Except Dioxin       Partial       Haisonetic Acids         Nitrate       Partial       Radionuclides       Bromate         Nitrate       Partial       Radionuclides       Bromate         Nitrate       Dioxin Only       Single Sample       Secondaries         Assestos Only       Opartial       Radionuclides       All 14         Were any analyses subcontracted?       Yes No       No       Partial         It yes, please provide DOH certification number       CERTIFICATION       Partial         I, Myrma Santlago       , Laboratory Manager       .         (Print Name)       , Laboratory Manager       .         Indicate the provide a Valid and current Florids DOH lab certification number and a current Analyte Sheet for the attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).         Signature: <td>Artamonte Springs, FL 3270</td> <td>J1</td> <td></td> <td>Telephone #: (407) 937-1594</td>	Artamonte Springs, FL 3270	J1		Telephone #: (407) 937-1594			
Lab Assigned Report Number or Job ID A052575       Sample Number (From page 1) A052575-01         Group(s) Analyzed Results attached for compliance with chapter 62-550, F.A.C. (check all that apply):       Inorganics       Synthetic Organics       Disinfection Byproducts         All 17       All 30       All 21       Trihalomethanes       Byrratial       Halioacetic Acids         Partial       All Except Dioxin       Partial       Bromate       Bromate         Nitrate       Partial       Radionucides       Chlorite       Secondaries         Asbestos Only       Oixin Only       Single Sample       Chlorite       Secondaries         Asbestos Only       Qtriy Composite**       Secondaries       All 14         Were any analyses subcontracted?       Yes       No       Yes       Partial         It yes, please provide DOH certification number       CERTIFICATION       Yes       Partial       All 14         Were any analyses subcontracted?       Yes       No       Date:       *         (Print Name)       CERTIFICATION       Laboratory Manager       *       *         (Print Name)       Dete:       *       Partial       all 14       *         Mational Environmental Laboratory Accreditation Conference (NELAC).       Date:       *       *       Paiter en	ANALYSIS INFORMATION (to be comp	leted by lab					
Group(s) Analyzed Results attached for compliance with chapter 62-550, F.A.C. (check all that apply):           Inorganics         Synthetic Organics         Volatile Organics         Isinfection Byproducts           All 17         All 30         All 21         Trihalomethanes           Partial         All 20         Partial         Haloscetic Acids           Nitrate         Partial         Radionuclides         Bromate           Nitrate         Doixin Only         Signed Sample         Chorite           Asbestos Only         Dioxin Only         Signed Sample         Chorite           Asbestos Only         Qitrly Composite**         Secondaries           Uver any analyses subcontracted?         Yes         No           If yes, please provide DOH certification number         ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB           CERTIFICATION         I, Myrma Santiago         , Laboratory Manager           (Print Name)         CeRTIFICATION           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:	PWS ID (from page 1):		Date Sam	ple(s) Received: 7/26/2005 12:00:00			
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         Nitrate       Dioxin Only       Single Sample       Chorite         Asbestos Only       Griny Composite**       Secondaries         All 14       Were any analyses subcontracted?       Yes       No         If yes, please provide DOH certification number       All 14       Partial         Attrach DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB       CERTIFICATION         It yes, please provide a valid and current Floride DOH lab certification number and a current Analyte Sheet for the attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Manager         (Print Name)       Date:	Lab Assigned Report Number or Job ID	A052575	Sample Numbe	er (From page 1) A052575-01			
All 17       All 30       All 21       Trihalomethanes         Partial       All Except Dioxin       Partial       Haloacetic Acids         Nitrate       Partial       Radionuclides       Bromate         Nitrate       Dioxin Only       Single Sample       Chiorite         Asbestos Only       Griny Composite**       Secondaries         All 14       Were any analyses subcontracted?       Yes       No         If yes, please provide DOH certification number       All 14       Partial         Attrach DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB       CERTIFICATION         It yes, please provide a valid and current Florde DOH lab certification number and a current Analyte Sheet for the attached analytical data are correct and unless noted meet all requirements of the National Environimental Laboratory Manager         * Failure to provide a valid and current Florde DOH lab certification number and a current Analyte Sheet for the attached analysis infor Satisfactory         * Failure to provide a valid and current Florde DOH lab certification number and a current Analyte Sheet 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         Revised Report Requested (circle or highlight grou	Group(s) Analyzed Results attached for	compliance with chap	ter 62-550, F.A.C. (check	all that apply):			
Partial   Partial All Except Dioxin Partial Haloacetic Acids   Nitrate Partial Bromate   Nitrate Dioxin Only Single Sample   Asbestos Only Single Sample   Asbestos Only Qtrly Composite**   Asbestos Only Qtrly Composite**   Partial   Haloacetic Acids   Nitrite Dioxin Only   Single Sample Secondaries Centration   Qtrly Composite** Secondaries   Partial Were any analyses subcontracted? Yes No If yes, please provide DOH certification number 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 Environ/partial Laboratory Accreditation Conference (NELAC). Signature: Failure to provide a valid and current Floride DOH lab certification number and a current Analyte Sheet for the attached analysis results wilk explicit 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 Resonone Sample(s) Requested (circle or highlight group(s) above) Resononing Required (circle	Inorganics Synt	hetic Organics	Volatile Organics	Disinfection Byproducts			
Nitrate       Partial       Radionuclides       Bromate         Nitrite       Dioxin Only       Single Sample       Chorite         Asbestos Only       Gtrly Composite**       Secondaries         All 14       Partial         Were any analyses subcontracted?       Yes       No         It yes, please provide DOH certification number       All 14         ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB       CERTIFICATION         I, Myrna Santiago       , Laboratory Manager       ''         (Print Name)       CERTIFICATION       Date:			🗌 All 21	Trihalomethanes			
Nitrite       Dioxin Only       Native Single Sample       Chorite         Asbestos Only       Single Sample       Recondaries         Attributer       All 14         Year any analyses subcontracted?       Yes       No         If yes, please provide DOH certification number			Partial	Haloacetic Acids			
Asbestos Only       Single Sample       Secondaries         Qtrly Composite**       Secondaries         Qtrly Composite**       Secondaries         All 14         Were any analyses subcontracted?       Yes       No         If yes, please provide DOH certification number			Radionuclides				
☐ Qtriy Composite**       Secondaries         ☐ All 14         Were any analyses subcontracted?       Yes         Yes, please provide DOH certification number         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:		ioxin Only	Single Sample	Chlorite			
Were any analyses subcontracted?       Yes       No         If yes, please provide DOH certification number	Aspestos Only		Qtrly Composite**	Secondaries			
Were any analyses subcontracted? Yes No If yes, please provide DOH certification number 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 a valid and current Floride DOH lab certification number and a current Analyte Sheet for the attached analysis results will regult 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 Reason(s): Additional Monitoring Required (circle or highlight group(s) above) Reason(s): Additional Monitoring Required (circle or highlight group(s) above) Reason(s): Additional Monitoring Required (circle or highlight group(s) above) Reason(s): Additional Monitoring Required (circle or highlight group(s) above) Reason(s): Additional Monitoring Required (circle or highlight group(s) above) Reason(s): Additional Monitoring Required (circle or highlight group(s) above) Reason(s): Additional Monitoring Required (circle or highlight group(s) above) Reason(s): Additional Monitoring Required (circle or highlight group(s) above) Reason(s): Additional Monitoring Required (circle or highlight group(s) above) Reason(s): Analysis Unsatisfactory Analysis Unsatisfa				All 14			
If yes, please provide DOH certification number ATACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB CERTIFICATION I, Myma 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 aboratory Accreditation Conference (NELAC). Signature:  * Failure to provide a Valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in notification of the report, possible enforcement against the public water system for failure to sample, and may results will 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 ③ Yes ④ No Sample Analysis Info Satisfactory: Additional Monitoring Required (circle or highlight group(s) above) Reason(s): ④ MCL(s) Exceeded ④ Detection(s) ④ Incomplete Report ④ Missing Analyte Sheet(s) ④ Location Unsatisfactory ④ Analysis Unsatisfactory ④ Cher: Person Notified: Comments	Were any analyses subcontracted?	Yes Vo		🗹 Partial			
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 a 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 I Yes I No Replacement Sample(s) Requested (circle or highlight group(s) above) Additional Monitoring Required (circle or highlight group(s) above) Add	, , ,						
I.       Myrna Santiago       , Laboratory Manager         (Print Name)       , Laboratory Manager       ,         do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).       Date:         Signature:	• • • •						
I, Myrna Santiago (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:							
(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:		CERTI	FICATION				
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:	I, Myrna Santiago , Labo	ratory Manager	,				
National Environmental Laboratory Accreditation Conference (NELAC).         Signature:	(Print Name)						
<ul> <li>Failure to provide a valid and current Floride DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the provide advalid and current Floride DOH Bureau of Laboratory Services.</li> <li>** Please provide radiological sample dates and locations for each quarter.</li> <li>COMPLIANCE DETERMINATION (to be completed by DEP or DOH)</li> <li>Sample Collection Info Satisfactory I Yes I No Sample Analysis Info Satisfactory: Yes I No</li> <li>Replacement Sample(s) Requested (circle or highlight group(s) above)</li> <li>Additional Monitoring Required (circle or highlight group(s) above)</li> <li>Reason(s): MCL(s) Exceeded Detection (s) Incomplete Report Action Unsatisfactory I Location Unsatisfactory I Location Unsatisfactory Analysis Unsatisfactory</li> <li>Person Notified: Date Notified:</li> </ul>				all requirements of the			
<ul> <li>Failure to provide a valid and current Floride DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the provide advalid and current Floride DOH Bureau of Laboratory Services.</li> <li>** Please provide radiological sample dates and locations for each quarter.</li> <li>COMPLIANCE DETERMINATION (to be completed by DEP or DOH)</li> <li>Sample Collection Info Satisfactory I Yes I No Sample Analysis Info Satisfactory: Yes I No</li> <li>Replacement Sample(s) Requested (circle or highlight group(s) above)</li> <li>Additional Monitoring Required (circle or highlight group(s) above)</li> <li>Reason(s): MCL(s) Exceeded Detection (s) Incomplete Report Action Unsatisfactory I Location Unsatisfactory I Location Unsatisfactory Analysis Unsatisfactory</li> <li>Person Notified: Date Notified:</li> </ul>	(Ima Mant	(1) Pan					
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COMPLIANCE DETERMINATION       (to be completed by DEP or DOH)         Sample Collection Info Satisfactory       If Yes         Image: Strength Sample (s) Requested (circle or highlight group(s) above)       Image: Strength Sample (s) Requested (circle or highlight group(s) above)         Image: Strength Sample (s) Requested (circle or highlight group(s) above)       Image: Strength Sample (s) Requested (circle or highlight group(s) above)         Image: Strength Sample (s) Requested (circle or highlight group(s) above)       Image: Strength Sample Sample (s) above)         Reason(s):       Image: MCL(s) Exceeded       Image: Detection(s)         Image: Strength Sample Sheet(s)       Image: Location Unsatisfactory       Image: Analysis Unsatisfactory         Image: Other:	analysis results will result in rejection of the	he report, possible enfo	preement against the publ	t Analyte Sheet for the attached ic water system for failure to sample,			
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<ul> <li>Replacement Sample(s) Requested (circle or highlight group(s) above)</li> <li>Additional Monitoring Required (circle or highlight group(s) above)</li> <li>Additional Monitoring Required (circle or highlight group(s) above)</li> <li>Reason(s): MCL(s) Exceeded</li> <li>Detection(s)</li> <li>Incomplete Report</li> <li>Missing Analyte Sheet(s)</li> <li>Location Unsatisfactory</li> <li>Analysis Unsatisfactory</li> <li>Other:</li> </ul>	COMPLIANCE DETERMINATION (to be completed by DEP or DOH)						
<ul> <li>Additional Monitoring Required (circle or highlight group(s) above)</li> <li>Reason(s): AMCL(s) Exceeded</li> <li>Detection(s)</li> <li>Incomplete Report</li> <li>Missing Analyte Sheet(s)</li> <li>Location Unsatisfactory</li> <li>Analysis Unsatisfactory</li> <li>Other:</li> </ul> Person Notified: Comments	Sample Collection Info Satisfactory	Yes 📓 No	Sample Analysis Info	Satisfactory: 🗿 Yes 🗿 No			
Reason(s):       MCL(s) Exceeded       Detection(s)       Incomplete Report         Image: Strain St	Beplacement Sample(s) Requested (circle c	r highlight group(s) above	) 3 Revised Report Re	quested (circle or highlight group(s) above)			
Missing Analyte Sheet(s)     I Location Unsatisfactory     Analysis Unsatisfactory     Other: Person Notified: Comments	Additional Monitoring Required (circle	or highlight group(s) al	oove)				
Missing Analyte Sheet(s)     I Location Unsatisfactory     Analysis Unsatisfactory     Other:     Derson Notified: Comments	Reason(s): 👔 MCL(s) Exceeded	Detectio	on(s)	Incomplete Report			
Comments							
Comments	Person Notified:			e Notified:			
	Comments						
			Reviewing Official:				



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

Client:	Utilities, Inc.
Project Name:	Weathersfield
Project Number:	
PWS ID#:	
Attention:	Kathy Sillitoe

Phone Number: 8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

 Report No.:
 A052575

 Date Sampled:
 7/26/2005

 Date Received:
 7/26/05 12:00

 Date Reported:
 7/28/2005

#### **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: Weathersfield

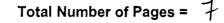
Approved By:

while Myina 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.



## Advanced Environmental Laboratories, Inc.

Analytical Report

Contam ID Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method L	ab MDL		ilysis DOH Lab ime Cert. #
Secondary Contaminants							····	<u> </u>
Sample Number: A052575-01							Shipping Method:	Client drop off
Site: POE							Sampled By:	Alexander Lorenz
Client Sample ID: 1								
PWS ID#:								120100 12000
Matrix: Drinking Water							Date/Time Received:	7/26/05 12:00
Project Name: Weathersfield							Date/Time Sampled:	07/26/05 7:10
Client: Utilities, Inc.							Report No.:	A052575

E140.1

1.0

7/26/2005

16:50

E53076

Odor

1920

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

3.0 TON

2.0

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Advanced Environmental Labs Inc

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

Client: UTILITIES, INC. (UTL-A)

Project name: WEATHERSFIELD

Date/Time Rcvd: 7/26/05 12.00

Log-In request number: A052575 Completed by: RPG

Received by: RPG

## Cooler/Shipping Information:

Courier:

Type: ⊠ Cooler □ Box □ Other (describe) \_\_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2				
Temp taken from	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank Cooler	Temp blank Cooler
Temp measured with	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):

#### Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?	1		
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?	1		
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?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE			ĺ
13.	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			1
	NOTE: VOA samples are checked by laboratory analysts.			
15.	Were the sample containers provided by AEL?	1		
16.	Were samples accepted into the laboratory?	<ul> <li>✓</li> </ul>		
17.	Was it necessary to split samples into other bottles?		<ul> <li>Image: A set of the set of the</li></ul>	

Kit ID

Comments:

2.5

	Environmental Lab	ioratories Inc	CHAI	N OF CUS	STODY R	ECORE	0		LAT	• • • • • •			• ,	
	Jacksonville: 660	1 Southpoint Parkway, Jacks 0 Princess Palm Avenue, Tar 6 NW 67th Place, Suite 7, Ga	mpa, FL 33619 • (813) (	630-9616 Fax (81	3) 630-4327	0			L					· .
CLIENT NAME:	A Orlando: 528	S. North Lake Blvd., Suite 1	016, Altamonte Springs	, FL 32701 • (40	7) 937-1594 Fax	(407) 937-1	597	BOTTLE		A	052	257	5	-
UTILI	TIES INC.			THERSF	ELEID			SIZE &		I		1 1	I	I
ADDRESS	ATHERSFIEL		P.O. NUMBER /	PROJECT N	UMBER:	·····	<u> </u>	TYPE						
			PROJECT LOC	ATION:				A R N E A Q						L A B
PHONE: 407-	869-1919 F	FAX:	P.O.E					LU YI SR						N
CONTACT:	ATHY SILLIT	TOE	SAMPLED BY:					I E S D						U M B
TURN AROUND	D TIME:	REMARKS / SPEC		X <u>ANDEK</u> DNS:	<u>COKE</u>	PZO								E R
STANDARD									0					
									000					
		-							0 R					
WW=waste water	SW=surface water	GW=ground water	DW = drinking water	OIL A	=air SO=	soil S	L=sludge	Preserv						
SAMPLE ID	SAMPL	E DESCRIPTION	Grab		PLING	MATRI	NO.							
2	POINT	DE ENTRY	6	DATE	TIME		CONT.		$\overline{\mathbf{v}}$			+		
		PEPIN		7/26/05	0110	DW			X					
	· · · · · · · · · · · · · · · · · · ·													
= Ice H = (HCI	$S = (H_2SO_4)$ N	V = (HNO <sub>3</sub> ) T = (Sodi	um Thiosulfata)											
Shipment I	Method Sample K	Kit Cooler #		Relin	quished by:		Date 7/26/05	Time	I		celved by:		Date	Time 1203
Out: / / Via	a: RB AB	D/T D/T	2	mann	- va	mgo !	n web	1200		5			1/0405	1000
Ret: / / Via	a: Trip Bl.	 D	3										<b></b>	
Received on ice: Ve			4											

Heceived on ice: d yes a no	QC	🗅 sent
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received

Jeb Bush Governor





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

Secretary

Page 1 of 2

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

Laboratory Scope of Accreditation

State Laboratory ID: E53076

EPA Lab Code: FL01220

(407) 869-1919

#### E53076

Advanced Environmental Laboratories, Inc	· Orlando
528 South Northlake Blvd., Suite 1016	
Altamonte Springs, FL 32701	

Motrix: Drinking Water

Matrix: Drinking water Analyte	Method/Tech	Category	Certification Type	Effective Date
Color	EPA 110.2	Secondary Inorganic Contaminants	NELAP	3/16/2005
Odor	EPA 140.1	Secondary Inorganic Contaminants	NELAP	3/16/2005
pH	EPA 150.1	Secondary Inorganic Contaminants	NELAP	1/21/2005
Total coliforms	SM 9222 B	Microbiology	NELAP	i/21/2005
Total coliforms & E. coli	SM 9223 B	Microbiology	NELAP	1/21/2005

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards. NON-TRANSFERABLE 06/29/2005-E53076

R.Y

AEL ORLANDO

### 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: Weathersfield	PWS I.D. # 3 5 9 1 4 5 1					
System Name. <u>Weatheroneic</u>						
System Type (check one): Community INontransient Noncommunity ITransient Noncommunity						
Address: 196 WEATHERS	field					
City: <u>Alt. Springs</u>	State: <u>41</u> ZIP Code: <u>32714</u>					
	Fax #: 407-869-6961					
E-Mail Address: S.L. HAWS@L	Hilitics Inc-usa.com					
SAMPLE INFORMATION (to be completed	by sampler)					
Sample Number: A052598	Location Code (if known): POE					
Sample Date: 7/27/05	Sample Time: 1025 AM PM (Circle One)					
Sample Location (be specific): POE						
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)					
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)					
Max Residence Time	XOther: ODOR TEST 3 of 3					
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	dditional requirements attach a results page for each site.					
Sampler's Name:	R LORENZO					
Sampler's Phone #: 407-948-0						
Sampler's E-Mail Address:						

**CERTIFICATION** (to be completed by sampler)

EXANDER CORENZO

(Print Name)

OPERATOR (Print Title)

do HEREBY CERTIFY that the above public water system and sample collection information is complete and correct.

alexander Toreno Signature:

Date: 9/6/05

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

Flor	rida Department	of Environm		tion Safe Drinking ng Format	Water Program Laboratory
	TORY CERTIFICATIO		N (to be compl	eted by lab - Please type	e or print legibly)
LabName	Advanced Environn	nental Labs - Orl	ando	Fio	rida Certification #: E53076
Address:	528 S. North Lake I	Blvd., Suite 1016		Certificati	on Expiration Date: 6/30/2006
	Altamonte Springs,	FL 32701			Telephone #: (407) 937-1594
ANALYSI	S INFORMATION (to	be completed by	lab		
PWS ID (f	from page 1):			Date San	nple(s) Received: 7/27/2005 10:50:00
Lab Assig	ned Report Number o	or Job ID A05259	8	Sample Numb	er (From page 1) A052598
Group(s)	Analyzed Results atta	ached for complia	ance with chapt	er 62-550, F.A.C. (check	all that apply):
	Inorganics	Synthetic Or	ganics	Volatile Organics	Disinfection Byproducts
[	📋 All 17	🔲 All 30		🗋 All 21	Trihalomethanes
[	🖌 Partisl	All Excep	t Dioxin	🛄 Partial	Haloacetic Acids
Ĺ	Nitrate	Partial		Radionuclides	. Bromate
i. I	Asbestos Only	Dioxin Or	iry	🔲 Single Sample	
I.				Qtrly Composite**	Secondaries
					□ All 14
Were any	analyses subcontract	ed? 🗌 Yes	No No		🔄 Partial
-	ase provide DOH certi	_			
• • • •	OOH ANALYTE SHE		UBCONTRACT	ED LAB	
			CERTIF	ICATION	
I, Myrna S	lantiago	, Laboratory M	anager	······································	
	(Print Name)				
do HEREB National E	BY CERTIFY that all a nvironmental Laborati	ttached/andlytics ory Accreditation	I data are corre Conference (N	ict and unless noted mee ELAC).	et all requirements of the
Signature	: VUAT	W Aln	Rago	Date:	8/30/05
analysis re	o provide a valid and sults will result in reje esult in notification of	ction of the repo	rt, possible enfo	proment against the pub	nt Analyte Sheet for the attached blic water system for failure to sample,
	provide radiological sa		locations for ea	sch quarter.	
	NCE DETERMINATIO		pleted by DEP	or DOH)	
Sample Co	ellection info Satisfact	ory 🔠 Yes	M No	Sample Analysis Inf	o Satisfactory: 🖾 Yes 🌆 No
🕾 Replacer	ment Sample(s) Request	ed (circle or highligi	nt group(s) above)	Revised Report R	equested (dircle or highlight group(s) above)
Addition	nal Monitoring Require	ed (circle or high	ight group(s) at	oove)	
Reason(s):	MCL(s) Exceede	d	Detection	in(s)	Incomplete Report
	Missing Analyte		=	n Unsatisfactory	Analysis Unsatisfactory
Person Not	ified;			n	ate Notified;
Comments				D	ale Homed,
Date Revie	wed		DEP/DOH	Reviewing Official:	



Client:Utilities, Inc.Project Name:WeathersfieldProject Number:PWS ID#:Attention:Kathy SillitoePhone Number:8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

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

Report No.:	A052598
Date Sampled:	7/27/2005
Date Received:	7/27/05 10:50
Date Reported:	8/2/2005

#### **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: Weathersfield

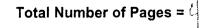
Approved By: 0

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.



Analytical Report

Client:	Utilities, Inc.	Report No.:	A052598	
Project Name:	Weathersfield	Date/Time Sampled:	07/27/05	10:25
Matrix:	Drinking Water	Date/Time Received:	7/27/05 10:5/	С
PWS ID#:				
Client Sample ID:	3			
Site:	POE	Sampled By:	Alexander Lorenz	
Sample Number:	A052598-01	Shipping Method:	Client drop of	f
Secondary Cont	aminants			

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis <u>Time</u>	DOH Lab Cert. #
1920	Odor	3.0	TON	2.0		E140.1	1.0	7/27/2005	16:20	E53076

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



Advanced Environmental Labs Inc

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

#### Client: UTILITIES, INC. (UTL-A)

Project name: WEATHERSFIELD

Date/Time Rcvd: 7/27/2005 10.50 Log-in request number: A052598

Completed by: BDM

#### **Cooler/Shipping Information:**

Received by: BDM

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 taken from	□ Temp blank ⊠ Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank     Cooler	Temp blank Cooler	Temp blank Cooler
Temp measured with	IR gun Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):

#### Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			/
2.	Were custody papers properly included with samples?	1		
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	/		
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?	1		
8.	Were proper sample preservation techniques indicated on the label?			
9.	Were samples received within holding times?	1		
10.	Were all VOA vials checked for the presence of air bubbles?			/
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE	/		
13.	Was the cooler temperature less than 6°C?	1		
14.	Were sample pHs checked and recorded by Sample control?	1		1
	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>Kit ID</u>

Comments:

GD		ntal Labor Nitle: 6601 S 9610 F Nitle: 2106 N	rincess Palm Avenue, Ta IW 67th Place, Suite 7, G	CHAIN sonville, FL 32216 • (904 impa, FL 33619 • (813) 6 sainesville, FL 32606 • (3 1016, Altamonte Springs,	30-9616 Fax (813 52) 367-1500 Fax	904) 363-9354 3) 630-4327 ¢ (352) 367-0050				LABN		105	259	8
CLIENT NAME:	LITIE			PROJECT NAM	Ξ:				BOTTLE SIZE & TYPE					
ADDRESS:	WEATH	ERSFI	ECD AVE.			JMBER:			ARNE					L
PHONE: 407-4	369 - 19	FA 19			. 0.E				A Q L U Y I S R I E S D					B N U M B
CONTACT: K/	TIME:	516617		SAMPLED BY: AC	<u>CEXANDE</u> DNS:	ER_CO	RENZ	0	50	ODOR				ER
RUSH WW=waste water	S₩=surfa	ce water	GW=ground water	<b>DW</b> =drinking water		=air <b>SO</b> =s	soil S	L≖sludge	Preserv					
SAMPLE ID		SAMPLE	DESCRIPTION	Grab Composite	SAM DATE	PLING TIME	MATRI	CONT.						
3	P01,	UT OF	ENTRY	6	1/27/05	1025	pw	1		X				
			$= (HNO_3)  T = (So$			quished by:		Date	Time			ved by:	Date	
		Sample Ki RB AB	t Cooler # D/T D/T	2	alexan	de Tou	Mo	זאבזאס	1050	Buin	D. Me	lton	712.71	05 1050
Ret: / / Vi	a:	Trip Bl.		3								<del></del>		

Received on ice: D yes D no QC □ sent C received 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 Weathersfield Utilities, Inc. PWS ID# 3591451

Dear Mr. Morrison:

Enclosed please find the results of samples taken July 13, 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

00, La

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

		YEAR: 2005
	QUARTERLY REPORTING PERIOD: July 2005 thur June 2006	
SYSTEM INFORMATION		
PWS NAME: Weathersfield		
PWS ID NUMBER: 3591451	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	

an a	OMPLIANCI	·			ARTERLY OR MORE FREQUENT BASIS HAA5 COMPLIANCE SUMMARY						
Last Four Quarters	QTR 1	QTR 2	QTR 3	QTR 4	Last Four Quarters	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 guarter 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	62.3	Calculate the arithmetic average all HAA5s samples taken over the last year	32.9				
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)	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
794 Hillview Drive	MRT	7/13/05	0.8	Alexander Lorenzo	7/14/05	E502.2	Advanced Enviromental Laboratories # E82574	62.3

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)
794 Hillview Drive	MRT	7/28/05	1.0	Alexander Lorenzo	8/5/05	EPA552.2	Advanced Environmental Laboratories E 82574	32.9
	· · · · · · · · · · · · · · · · · · ·							

## 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:WEATHERSFIELD	PWS I.D. # 3591451
System Type (check one):       XCommunity         Address:       196	□Nontransient Noncommunity □Transient Noncommunity HERSFIECD_AUE,
city: <u>ACT, SPRINGS</u>	State: <u>FLA</u> , ZIP Code: <u>32714</u>
Phone #:407-869-1910	Fax #: 407-869-6961
E-Mail Address:	SQUTILITIES INC,
SAMPLE INFORMATION (to be completed	by sampler)
Sample Number:	
Sample Date:7/13/05	
Sample Location (be specific):794 HILLV	IEW DR
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids): <u>0.8</u> mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
	Routine Compliance (with 62-550)
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**
Raw (at well or intake)	Clearance (permitting)  Replacement (of Invalidated Sample)
Max Residence Time	Other:
	Sampling Procedure Used or Other Comments:
Near First Customer	
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for at for nitrate or nitrite MCL	dditional requirements attach a results page for each site.
Sampler's Name:	IER LORENZO
Sampler's Phone #: 407-948	-4207 Sampler's Fax #: 407-869-6961
Sampler's E-Mail Address:	NIA
<b>CERTIFICATION</b> (to be completed by	
1 ALEXANDER (O	RENZO, OPERATOR, (Print Title)
(Print Name)	(Print Title)
do HEREBY CERTIFY that the abo complete and correct.	ve public water system and sample collection information is
Signature:	nder Torenno Date: 8/15/05
	_

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

Florida	Department of	i Environmental	Protection	Safe	Drinking	Water	Program	Laboratory
		R	eporting Fo	ormat	-		-	-

LABORATORY CERTIFICATION ATTACH CURRENT DOH ANAL		I (to be completed by lab - Ple	ease type or print legibly)
LabName: Advanced Environme	ntal Labs - Orlan	ndo	Florida Certification #: E53076
Address: 528 S. North Lake Bh	/d., Suite 1016		Certification Expiration Date: 6/30/2006
Altamonte Springs, Fl	32701		Telephone #: (407) 937-1594
ANALYSIS INFORMATION (to be	completed by la	ар	
PWS ID (from page 1):		t	Date Sample(s) Received: 7/13/2005 4:15:24
Lab Assigned Report Number or	Job ID A052416	Samp	ble Number (From page 1) A052416-01
Group(s) Analyzed Results attack	ned for complian	ce with chapter 62-550, F.A.C	C. (check all that apply):
Inorganics	Synthetic Orga	nics Volatile Orga	anics Disinfection Byproducts
All 17	All 30	All 21	✓ Trihalomethanes
Partial	All Except D	Dioxin 🗌 Partial	Haloacetic Acids
Nitrate	Partial	Radionuclide	es 🔲 Bromate
Nitrite	Dioxin Only	Single Sa	ample Chlorite
Asbestos Only		Qtrly Com	
			All 14
		7.0	Partial
Were any analyses subcontracted			
If yes, please provide DOH certific	_		
ATTACH DOH ANALYTE SHEET	FOR EACH SUE	BCONTRACTED LAB	
		CERTIFICATION	
I, Myrna Santiago ,	Laboratory Man	nager	
(Print Name)			
do HEREBY CERTIFY that all atta National Environmental Laboratory			oted meet all requirements of the
Signature: MANDESC	mbago		Date: 7-22-05
<ul> <li>Failure to provide a valid and cur analysis results will result in rejection and may result in notification of the</li> </ul>	on of the report,	possible enforcement against	a current Analyte Sheet for the attached t the public water system for failure to sample,
** Please provide radiological samp		•	
COMPLIANCE DETERMINATION	(to be comple	eted by DEP or DOH)	
Sample Collection Info Satisfactory	📓 Yes 🖪	No Sample Ana	alysis Info Satisfactory: 🛛 🖼 Yes 🖉 No
Replacement Sample(s) Requested	(circle or highlight g	roup(s) above) 🛛 🕱 Revised	Report Requested (circle or highlight group(s) above)
Additional Monitoring Required (	circle or highligh	nt group(s) above)	
		Detection(s)	Incomplete Report
Reason(s): 🙍 MCL(s) Exceeded			Analysis Unsatisfactory
Reason(s): 🔳 MCL(s) Exceeded 😰 Missing Analyte Shi	eet(s)	Location Unsatistactory	S Allaysis Unsatisfactory
	eet(s)	Location Unsatisfactory	Analysis Unsatisfactory
Missing Analyte Sho     Dther:		· · ·	Data Natified
Missing Analyte Sho     Dther:	eet(s)	· · ·	Date Notified:

 $\sim \mathcal{N}$ 



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

Client:	Utilities, Inc.
Project Name:	Weathersfield
Project Number:	
PWS ID#:	
Attention:	Kathy Sillitoe
Phone Number:	8002721919
Address:	200 Weathersfield Ave.

Altamonte Springs, FL 32714

A052416 **Report No.:** 7/13/2005 **Date Sampled: Date Received:** 7/13/05 16:15 7/21/2005 **Date Reported:** 

#### **Project Description**

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

> Weathersfield Project Name:

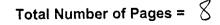
Approved By:

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.



Analytical Report

Client: Utilities, Inc.

Project Name: Weathersfield

Matrix: Drinking Water

PWS ID#:

Client Sample ID: 1

.

Site: 794 Hillview Dr

Sample Number: A052416-01

 Report No.:
 A052416

 Date/Time Sampled:
 07/13/05
 8:35

 Date/Time Received:
 7/13/05
 16:15

Sampled By: Alexander Lorenz
Shipping Method: Client drop off

~.4

#### **Disinfection Byproducts**

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
2941	Chloroform		ug/L	39		E502.2	0.31	7/14/2005	16:12	E82574
2942	Bromoform		ug/L	0.36	U	E502.2	0.36	7/14/2005	16:12	E82574
2943	Bromodichloromethane		ug/L	16		E502.2	0.38	7/14/2005	16:12	E82574
2944	Dibromochloromethane		ug/L	7.3	.2.3	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 Inc

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

#### Client: UTILITIES, INC. (UTL-A)

Project name: WEATHERSFIELD

Date/Time Rcvd: 7/13/05 16.15 Log-In request number: A052416

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)	2				
Temp taken from	Temp blank Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank Cooler	Temp blank Cooler	Temp blank Cooler
Temp measured with	IR gun Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):

#### Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?	1		
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?	1		
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
	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE	1		
	Was the cooler temperature less than 6°C?	1		
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			~
<u> </u>	Were the sample containers provided by AEL?	1		
_	Were samples accepted into the laboratory?	1		
17.	Was it necessary to split samples into other bottles?		1	

Kit ID

Comments:

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando	AEL Jax
528 South North Lake Blvd, S	6601 Southpoint Parkway
Altamonte Springs FL 32701	Jacksonville, FI 32216
	904-363-9350 Fax 904-363-9354
Contact Person: Myrna Santiago	Contact Person: Sean Hyde
Project #: A052416	Check if Rush
CustomerName: Utilities, Inc.	
Collector: Alexander Lorenzo	

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)
A052416-01	1	THMs (DW)	Drinking Water	7/13/2005	8:35	7/13/05 16:15	7/27/2005		40mL VOC vial

Date/Time: <u>1/13/05</u>/12 Date/Time: <u>7/14/05</u>0915 Orlando Relinquisher: Shipping Receiver: AEL Courier Shipping Relinquisher: AEL<sup>V</sup>Courier Jacksonville Receiver:







	9610 Princess Palm Ave. • 2106 NW 67th Place, Ste.	<b>, Inc.</b> acksonville, FL 32216 • 904.36 Tampa, FL 33619 • 813.630.9 7 • Gainesville, FL 32606 • 352 te. 1016 • Altamonte Springs, f	616 • Fax 8	813.630.432 • Fax 352.3	7 • E84589 67.0050 • E	82620	• E53076					Δ	052	116	•	
CLIENT NAME:	Utilities Inc.	PROJECT NAME:	PROJECT NAME: Weathersfield									Γ	054	<b>T</b> U		
DDRESS: 2	200 Weathersfield Ave	P.O. NUMBER/PROJECT NUME	BER:					& TYPE	40mL Vials			1	1			1
Altamor	nte Springs, FL 32714	PROJECT LOCATION:														1
HONE: 40	7-869-1919	FAX:														
ONTACT		SAMPLED BY: ALEX	ANDE	ERLO	REN?	20		IR								
	TURN AROUND TIME:			ECIAL INSTRU												
🗙 <sub>STANDARD</sub>								REQUIRED			Į					B
RUSH																Z
		-						ANALYSIS	THM'S							LAB NUMBER
								AL	Ĩ							BE
WW=waste wat	er SW=surface water GW=grou	nd water DW≈drinking water	1	OIL	A=air	SO=soil	Si.=sludge	4	· · · · · · · · · · · · · · · · · · ·							7
SAMPLE ID	SAMPLE DES	CRIPTION	Grab Comp		PLING	MATRIX	NO. COUNT	Preserv	<u> </u>							
				DATE	TIME										- Containe	<u>alassa</u>
1	294 HILLVIEL	N DR.	G	9/13/05	0835	JAW DW	3		Х							
						TOW.					<u> </u>	+				<u>                                     </u>
		······································														
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				ļ												<u> </u>
				1						+	<b> </b>					}
l	H=(HCI) S=(H2SO4 N=(HNO	3) T=(Sodium Thiosulfate)	<u>I</u>	<u> </u>	l		l Relin	quish by:		Date	Time		eceived by:	Date	ті	me
Shipment		ample Kit Cooler #			1	Alexa		ouna	~	2/13/05	14.15	THE	<u> </u>	1/13/05	5 161	5
out	Via:R	ВD/Т			2	- new	<u>1~~ ~ / / / / / / / / / / / / / / / / / </u>	2 array		11.510 5		11				
lot		.BD/T			3											
et	Via:T	rip Bl.			4						I	1				

Received on Ice TY Yes No QC Sent received

revised 8/01



John (

FL00949

Laboratory Scope of Accreditation

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

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:

(904) 363-9350

E82574 Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216 Matrix: Drinking Water

Matrix: Drinking Water	Method/Tech	Category	Certification 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
odium	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
ulfate	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
ans-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
arbidity	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

"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

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## 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: Weathersfield	PWS1.D. #: 3 5 9 1 4 5 1
System Type (check one): 🛛 🖾 Community	Nontransient Noncommunity
Address: 196 WEAthERSiela	TAVE
City: AltAMONTE Springs	State: <u>41</u> ZIP Code: <u>32714</u>
	Fax #: 407-869-6961
E-Mail Address: <u>S.L. HAWS</u>	Utilities INC-USA.com
SAMPLE INFORMATION (to be completed	by sampler)
Sample Number: <u>A052633</u>	Location Code (if known): <u>MRT</u>
Sample Date: <u>7-28-05</u>	Sample Time:O_&_35 (M) PM (Circle One)
Sample Location (be specific): 794	tilluiew Drive
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids): <u>I.O</u> mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
Distribution	Routine Compliance (with 62-550)
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**
Raw (at well or intake)	Clearance (permitting)
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 attach a results page for each site.
Sampler's Name: <u>ALEXAND</u>	ER LORENZO
Sampler's Phone #:	-207 Sampler's Fax #: <u>407-869-6961</u>
Sampler's E-Mail Address:	
<b>CERTIFICATION</b> (to be completed by s	
I, <u>ALEXANDER LORE</u> (Print Name)	UZO, OPERATOR, (Print Title),
do HEREBY CERTIFY that the above complete and correct.	e public water system and sample collection information is
Signature: <u>Allfardu</u>	horenzo Date: 8/30/05

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

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		orting Format		
LABORATORY CERTIFICATIO ATTACH CURRENT DOH ANA		mpleted by lab - Please type or	print legibly)	
LabName: Advanced Environm	nental Labs - Oriando	Florida	a Certification #: E53076	
Address: 528 S. North Lake B	Blvd., Suite 1016	Certification	Expiration Date: 6/30/2006	
Altamonte Springs,	FL 32701		Telephone #: (407) 937-1594	
ANALYSIS INFORMATION (to b	be completed by lab			
PWS ID (from page 1):		Date Sample	e(s) Received: 7/28/2005 2:35:00	
Lab Assigned Report Number or	r Job ID A052633		From page 1) A052633	
Group(s) Analyzed Results atta	iched for compliance with ch			
Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts	
All 17			Trihalomethanes	
Partial	All Except Dioxin	Partial	Haloacetic Acids	
Nitrate	Partial	Radionuclides	Bromate	
Nitrite	Dioxin Only	Single Sample	Chlorite	
Asbestos Only		Qtrly Composite**	Secondaries	
			🛄 All 14	
Were any analyses subcontracte	ed? 🗸 Yes 🗍 No		Partial	
were any analyses subcontracte				
Kunn, planne provide DOU contif	Eastian number EDOE74			
•		· · · · · · · · · · · · · · · · · · ·		
•		ACTED LAB		
•	T FOR EACH SUBCONTRA	ACTED LAB		
ATTACH DOH ANALYTE SHEE	T FOR EACH SUBCONTR			
ATTACH DOH ANALYTE SHEE	T FOR EACH SUBCONTRA			
ATTACH DOH ANALYTE SHEE Myrna Santiago (Print Name) do HEREBY CERTIFY that all att	T FOR EACH SUBCONTRACE CER , Laboratory Manager	TIFICATION	Il requirements of the	
If yes, please provide DOH certif ATTACH DOH ANALYTE SHEE I, Myrna Santiago (Print Name) do HEREBY CERTIFY that all att National Environmental Laborato Signature:	T FOR EACH SUBCONTRACE CER , Laboratory Manager	TIFICATION	Il requirements of the	
ATTACH DOH ANALYTE SHEE Myrna Santiago (Print Name) do HEREBY CERTIFY that all att National Environmental Laborato Signature:	TFOR EACH SUBCONTRACE CER , Laboratory Manager tached analytical data are c my Accreditation Conference MAGGU current Florida DOH lab certic tion of the report, possible of	TIFICATION  orrect and unless noted meet al  (NELAC).  Date:  fication number and a current A enforcement against the public of	S/21/05	
ATTACH DOH ANALYTE SHEE , Myrna Santiago (Print Name) to HEREBY CERTIFY that all att National Environmental Laborato Signature: Manual Construction Failure to provide a valid and construction Failure to provide a valid and construction inalysis results will result in rejection and may result in notification of the	TFOR EACH SUBCONTRACE CER Laboratory Manager tached analytical data are c by Accreditation Conference MAGO surrent Florida DOH lab certi tion of the report, possible of the DOH Bureau of Laborato	TIFICATION  orrect and unless noted meet al (NELAC).  Date:  fication number and a current A enforcement against the public of ry Services.	SIZIOT	
ATTACH DOH ANALYTE SHEE Myrna Santiago (Print Name) do HEREBY CERTIFY that all att National Environmental Laborato Signature: Failure to provide a valid and cl analysis results will result in reject and may result in notification of th Please provide radiological sar	TFOR EACH SUBCONTRACE CER Laboratory Manager tached analytical data are c my Accreditation Conference MAAGU surrent Florida DOH lab certi tion of the report, possible of the DOH Bureau of Laborato mple dates and locations for	TIFICATION  orrect and unless noted meet al (NELAC).  Date:  fication number and a current A enforcement against the public of ry Services.  r each quarter.	SIZIOT	
ATTACH DOH ANALYTE SHEE A Myrna Santiago (Print Name) do HEREBY CERTIFY that all att National Environmental Laborato Signature: Failure to provide a valid and cl analysis results will result in reject and may result in notification of th Please provide radiological sar COMPLIANCE DETERMINATION	TFOR EACH SUBCONTRACE CER Laboratory Manager tached analytical data are c by Accreditation Conference MAGG current Florida DOH lab certic tion of the report, possible of the DOH Bureau of Laborato mple dates and locations fo N (to be completed by Di	TIFICATION  orrect and unless noted meet al (NELAC).  Date:  fication number and a current A enforcement against the public of ry Services. r each quarter.  EP or DOH)	SIU OF nalyte Sheet for the attached water system for failure to sample	
ATTACH DOH ANALYTE SHEE , Myrna Santiago (Print Name) to HEREBY CERTIFY that all att vational Environmental Laborato Signature: P Failure to provide a valid and c inalysis results will result in reject and may result in notification of th * Please provide radiological sar COMPLIANCE DETERMINATION Sample Collection Info Satisfacto	TFOR EACH SUBCONTRACER , Laboratory Manager Tached analytical data are contracted analytical data are contracted that are contracted analytical data are co	TIFICATION  orrect and unless noted meet al (NELAC).  Date:  fication number and a current A enforcement against the public of ry Services.  re each quarter.  EP or DOH)  Sample Analysis Info Sample	S/2/of nalyte Sheet for the attached water system for failure to sample attisfactory: R Yes R No	
ATTACH DOH ANALYTE SHEE , Myrna Santiago (Print Name) to HEREBY CERTIFY that all att National Environmental Laborato Signature: P Failure to provide a valid and c inalysis results will result in reject and may result in notification of th * Please provide radiological sar COMPLIANCE DETERMINATION Sample Collection Info Satisfacto Replacement Sample(s) Requested	TFOR EACH SUBCONTRACE CER , Laboratory Manager tached analytical data are c my Accreditation Conference MAGGO surrent Florida DOH lab certi tiction of the report, possible of the DOH Bureau of Laborato mple dates and locations fo N (to be completed by DI ory Pres No ed (circle or highlight group(s) abo	TIFICATION orrect and unless noted meet al (NELAC). Date: fication number and a current A enforcement against the public or ry Services. r each quarter. EP or DOH) Sample Analysis Info Sa ove) T Revised Report Reque	S/2/of nalyte Sheet for the attached water system for failure to sample attisfactory: R Yes R No	
ATTACH DOH ANALYTE SHEE , Myrna Santiago (Print Name) to HEREBY CERTIFY that all att National Environmental Laborato Signature: P Failure to provide a valid and cl innalysis results will result in reject and may result in notification of th * Please provide radiological san COMPLIANCE DETERMINATION Sample Collection Info Satisfacto Replacement Sample(s) Requested Additional Monitoring Required	TFOR EACH SUBCONTRA CER , Laboratory Manager Tached analytical data are c my Accreditation Conference MAGO surrent Florida DOH lab certi tition of the report, possible of the DOH Bureau of Laborato mple dates and locations fo N (to be completed by DI ory I Yes I No d (circle or highlight group(s) abd d (circle or highlight group(s) abd	TIFICATION  orrect and unless noted meet al (NELAC).  Date:  fication number and a current A enforcement against the public of ry Services.  r each quarter.  EP or DOH)  Sample Analysis Info Sa ove)  E Revised Report Reque against	S/Q/of nalyte Sheet for the attached water system for failure to sample atisfactory: R Yes R No ested (circle or highlight group(s) above	
ATTACH DOH ANALYTE SHEE , Myrna Santiago (Print Name) to HEREBY CERTIFY that all att National Environmental Laborato Signature: Pailure to provide a valid and co inalysis results will result in reject and may result in notification of the * Please provide radiological sar COMPLIANCE DETERMINATION Sample Collection Info Satisfacto Replacement Sample(s) Requested Additional Monitoring Required Reason(s): MCL(s) Exceeded	TFOR EACH SUBCONTRA CER , Laboratory Manager Tached analytical data are c my Accreditation Conference MAGO surrent Florida DOH lab certi totion of the report, possible of the DOH Bureau of Laborato mple dates and locations fo N (to be completed by DI ory Yes No d (circle or highlight group(s) abo d (circle or highlight group(s) abo	TIFICATION  orrect and unless noted meet al (NELAC).  Date:  fication number and a current A enforcement against the public of ry Services.  r each quarter.  EP or DOH)  Sample Analysis Info Sa ove)  E Revised Report Reque addition of the section	SUL OF analyte Sheet for the attached water system for failure to sample attisfactory: Types I No ested (circle or highlight group(s) above Incomplete Report	
ATTACH DOH ANALYTE SHEE , Myrna Santiago (Print Name) to HEREBY CERTIFY that all stit National Environmental Laborato Signature: P Failure to provide a valid and cl innalysis results will result in reject and may result in notification of th * Please provide radiological sar COMPLIANCE DETERMINATION Sample Collection Info Satisfacto Replacement Sample(s) Requested Additional Monitoring Required Reason(s): MCL(s) Exceeded Missing Analyte S	TFOR EACH SUBCONTRA CER Laboratory Manager tached analytical data are c by Accreditation Conference Maga burrent Florida DOH lab certi tation of the report, possible of the DOH Bureau of Laborato mple dates and locations fo N (to be completed by DI ory PYes No d (circle or highlight group(s) abo d (circle or highlight group(s) abo	TIFICATION  orrect and unless noted meet all (NELAC).  Date:  fication number and a current A enforcement against the public of ry Services.  r each quarter.  EP or DOH)  Sample Analysis Info Sa ove)  EXTERNAL SALE Report Reque action(s)  action(s)  action Unsatisfactory	SILU OF analyte Sheet for the attached water system for failure to sample atisfactory: R Yes R No ested (circle or highlight group(s) above	
ATTACH DOH ANALYTE SHEE Myrna Santiago (Print Name) do HEREBY CERTIFY that all aft National Environmental Laborato Signature: Failure to provide a valid and ci analysis results will result in reject and may result in notification of the Please provide radiological sar COMPLIANCE DETERMINATION Sample Collection Info Satisfacto Replacement Sample(s) Requested Additional Monitoring Required Reason(s): MCL(s) Exceeded Missing Analyte S Cother: Parcen Notified	TFOR EACH SUBCONTRA CER , Laboratory Manager Tached analytical data are c my Accreditation Conference MAGO surrent Florida DOH lab certi totion of the report, possible of the DOH Bureau of Laborato mple dates and locations fo N (to be completed by DI ory Yes No d (circle or highlight group(s) abo d (circle or highlight group(s) abo	TIFICATION  Tripication number and a current A  Tripication number	SUL OF analyte Sheet for the attached water system for failure to sample atisfactory: R Yes R No ested (circle or highlight group(s) above Incomplete Report	

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Client:Utilities, Inc.Project Name:WeathersfieldProject Number:Kathy SillitoePWS ID#:Kathy SillitoePhone Number:8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

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

Report No.:	A052633
Date Sampled:	7/28/2005
Date Received:	7/28/05 14:35
Date Reported:	8/23/2005

#### **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: Weathersfield

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.

Project Name: Weathersfield

Matrix: Drinking Water PWS ID#:

Client Sample ID: 1

Site: 794 Hillview Dr

Sample Number: A052633-01

Report No.: A052633 Date/Time Sampled: 07/28/05 8:35 Date/Time Received: 7/28/05 14:35 Sampled By: Alexander Lorenz

Shipping Method: Client drop off

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	14		E552.2	0.56	8/5/2005	14:21	E82574
2452	Trichioroacetic Acid		ug/L	15		E552.2	0.60	8/5/2005	14:21	E82574
2453	Bromoacetic Acid		ug/L	1.2	i	E552.2	0.34	8/5/2005	14:21	E82574
2454	Dibromoacetic Acid		ug/L	2.7	132.9	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.

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U The compound was analyzed for but not detected.

MDL Method Reporting Limit

i

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



Advanced Environmental Labs Inc

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

#### Client: UTILITIES, INC. (UTL-A)

Project name: WEATHERSFIELD

Date/Time Rcvd: 7/28/05 14.35 Log-In request number: A052633

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)	2				
Temp taken from	Temp blank Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>			
Temp measured with	IR gun Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):

#### **Other Information:**

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?	1		
3.	Were custody papers properly filled out (ink, signed, match labels)?			
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?	1		
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?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE	1		
13.	Was the cooler temperature less than 6°C?	1		
14.	Were sample pHs checked and recorded by Sample control?			,
	NOTE: VOA samples are checked by laboratory analysts.			· •
15.	Were the sample containers provided by AEL?	1		
16.	Were samples accepted into the laboratory?	1		
17.	Was it necessary to split samples into other bottles?		1	

#### Kit ID

Comments:

05

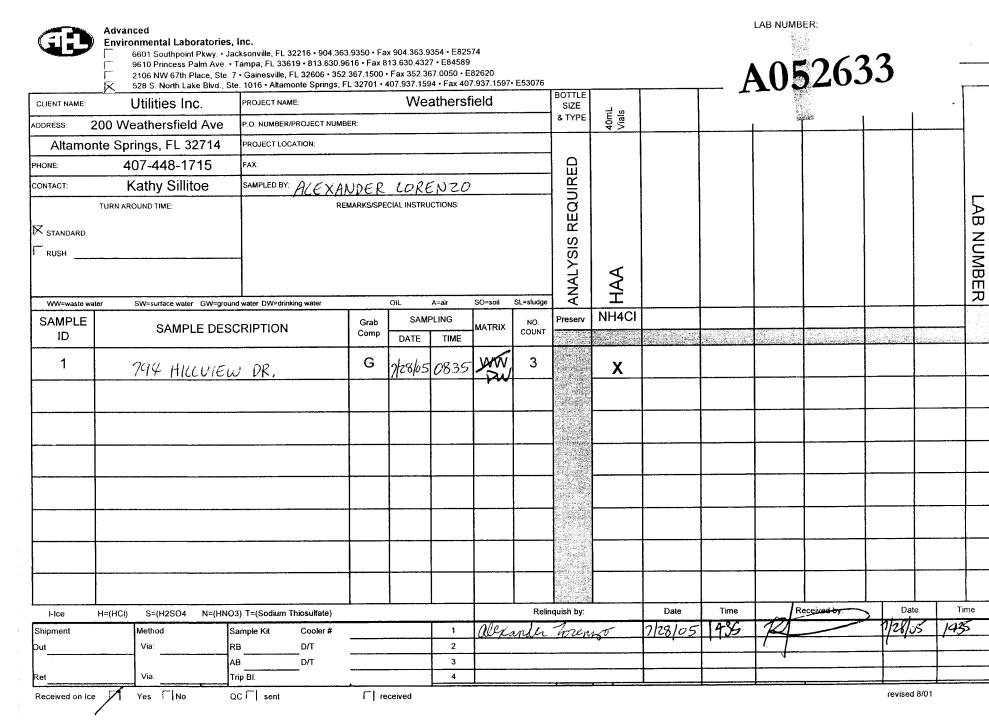
	AEL Jax 6601 Southpoint Parkway Jacksonville, FI 32216 904-363-9350 Fax 904-363-9354	Contact Person: Sean Hyde	Check if Rush	# Bottles Bottle Type (Pres.)	40mL Vial Amber			Date/Time: 7/24/05 950
				Due Date	8/11/2005			Date
Chain-of-Custody for AEL Orlando to AEL Jax				Collect Date / Time Receive Date	8:35 7/28/05 14:35			AEL COURIER
AEL Orlai				Collect Date	7/28/2005			,. I
-Custody for				Matrix	Drinking Water			Shipping Receiver: Jacksonville Receiver:
Chain-of				Test	550 Haloacetic Acids (J)-55		$\int$	
	ke Blvd, S ⁼L 32701	yrna Santiago	Project #: A052633 merName: Utilities, Inc. Collector: Alexander Lorenzo	Client Sample ID	←		A	Orlando Relinquisher:
	AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701	Contact Person: Myrna Santiago	Project #: A052633 CustomerName: Utilities, Inc. Collector: Alexander Lo	Lab Code	A052633-01			Orlando R Shipping F

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Page 1 of 1



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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
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, I-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
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
,2-Dichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
1,2-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
Alachlor	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
Intimony	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
ntimony	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
enzo(a)pyrene	EPA 525.2	Synthetic Organic Contaminants	NELAP	1/21/2005
eryilium	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
romoacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
romochloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
3romodichloro <b>methane</b>	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

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

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

State Laboratory ID: E82574

EPA Lab Code: FL00949

Laboratory Scope of Accreditation

(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
Bromodichloromethane	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
romoform	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
admium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
alcium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
arbofuran (Furaden)	EPA 531.1	Synthetic Organic Contaminants	NELAP	4/19/2005
arbon tetrachloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
arbon tetrachloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
hlordane (tech.)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
hloride	EPA 325.3	Secondary Inorganic Contaminants	NELAP	1/21/2005
hloride	SM 4500 CI- E	Secondary Inorganic Contaminants	NELAP	2/13/2003
hloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
hlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
hiorobenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
hloroform	EPA 502.2	Other Regulated Contaminants,Group II Unregulated Contaminants	NELAP	4/4/2002
hloroform	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
nromium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
s-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
s-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
olor	EPA 110.2	Secondary Inorganic Contaminants	NELAP	2/13/2003
opper	EPA 200.7	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	NELAP	4/4/2002
alapon	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
(2-ethylhexyl)adipa <b>t</b>	EPA 525.2	Synthetic Organic Contaminants	NELAP	1/21/2005
bromoacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
jbromochlorome <b>thane</b>	EPA 502.2	Other Regulated Contaminants,Group II Unregulated Contaminants	NELAP	4/4/2002
bromochloromethane	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
camba	EPA 515.3	Group I Unregulated Contaminants	NELAP	1/21/2005
chloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	3/24/2005
chloromethane (DCM, Methylene chloride)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
chloromethane (DCM, Methylene chloride)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
noseb (2-sec-butyl-4,6-dinitrophenol, DNBP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
iquat	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

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

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

State Laboratory ID: E82574

EPA Lab Code: FL00949

Laboratory Scope of Accreditation

(904) 363-9350

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

Drinking Water Matrix: Certification Method/Tech Effective Date Category Analyte Type Endothall EPA 548.1 Synthetic Organic Contaminants NELAP 1/21/2005 EPA 508 Endrin Synthetic Organic Contaminants NELAP 3/24/2005 EPA 502.2 Ethylbenzene Other Regulated Contaminants NELAP 4/4/2002 EPA 524.2 Ethylbenzene Other Regulated Contaminants NELAP 1/21/2005 gamma-BHC (Lindane, EPA 508 Synthetic Organic Contaminants 3/24/2005 NELAP gamma-Hexachlorocyclohexane) EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 Heptachlor EPA 508 NELAP Synthetic Organic Contaminants Heptachlor epoxide 3/24/2005 SM 9215 B Heterotrophic plate count 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 EPA 200.7 Secondary Inorganic Contaminants NELAP 4/4/2002 Iron EPA 200.9 Primary Inorganic Contaminants NELAP 4/4/2002 Lead Lead SM 3113 B Primary Inorganic Contaminants NELAP 4/4/2002 EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Magnesium Manganese EPA 200.7 Secondary Inorganic Contaminants NELAP 4/4/2002 EPA 245.1 Mercury Primary Inorganic Contaminants NELAP 4/4/2002 SM 3112 B Mercurv Primary Inorganic Contaminants NEL AP 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 EPA 531.1 Oxamyl Synthetic Organic Contaminants NELAP 4/19/2005 PCBs EPA 508 Synthetic Organic Contaminants NELAP 3/24/2005 EPA 515.3 Pentachlorophenol Synthetic Organic Contaminants NELAP 1/21/2005 pН EPA 150.1 Primary Inorganic NELAP 4/4/2002 Contaminants, Secondary Inorganic Contaminants Picloram EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 EPA 200.7 Potassium 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 SM 3113 B Selenium 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

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

> 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

Laboratory Scope of Accreditation

(904) 363-9350

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

latrix: Drinking Water	Method/Tech	Category	Certification Type	Effective Date
ilica as SiO2	EPA 200.7	Primary Inorganic Contaminants	NELAP	1/21/2005
ilver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
ilvex (2,4,5-TP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
imazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
odium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
yrene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
yrene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
lfate	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
trachloroethylene (Perchloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
nallium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
bluene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
bluene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
atal coliforms	SM 9222 B	Microbiology	NELAP	4/4/2002
otal coliforms & E. coli	SM 9223 B	Microbiology	NELAP	9/5/2002
tal 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
nns-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
ans-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
ichtoroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
ichloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
ichloroethene (Trichloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
ırbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	7/17/2002
nyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
nyl chloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
/lene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
lene (total)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
nc	EPA 200.7	Secondary 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

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UTILITIES, INC. OF FLORIDA

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

# FILE COPY

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

May 5, 2005

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

Re: Annual Nitrate and Nitrite Analysis, 2005 Tri Annual Sampling, SOCs, VOCs, Primary and Secondary Inorganic Weathersfield Utilities, Inc. PWS ID# 3591451

Dear Mr. Morrison:

Enclosed please find the results of samples taken March 15, 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

Dortol

Kathy Sillitoe Area Manager

EC: Patrick Flynn, Regional Director, UIOF Scotty L. Haws, Assistant Operations Manager

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

PUBLIC WATER SYSTEM INFORMATION	N (to be completed by sampler - Please type	e or print legibly)				
¢						
System Name: Weathorsfield	PWS I.D	. #: 5591451				
System Type (check one):	Nontransient Noncommunity	Transient Noncommunity				
Address: Weathersfield	d Aris.					
	prinas, EC					
City: Altamonte Spi	state: Fo	ZIP Code: 32714				
Phone #: 407-869-1919	Fax #: 40	7-869-6961				
E-Mail Address:	<i>_</i>					
SAMPLE INFORMATION (to be completed	hy sampler)					
Sample Number: A050871	Location Code (if kn	own).				
Sample Number: <u>A050871</u> Sample Date: <u>3/15/05</u>	Sample Time:					
Sample Location (be specific):						
Disinfectant Residual (Required when reporting		mg/L Field pH:				
Sample Type (Check Only One)	Reason(s) for Sa	mple (Check all that apply)				
	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		ocedure Used or Other Comments:				
Near First Customer						
_						
Sampler's Name: Roy Mer	iclo					
	4219 Sampler's Eax #:					
Sampler's Phone #: <u>407-448-4219</u> Sampler's Fax #:						
Sampler's E-Mail Address:						
CERTIFICATION (to be completed by	sampler)					
D = 1	1 1 0	1				
1, 1Coy J. Meri	cle Ope	er Ater				
		(Print Title)				
do HEREBY CERTIFY that the above	ve public water system and samp	le collection information is				
complete and correct.						

Signature: 100 Ma

Reporting Format 62-550.730 Effective January 1995, Revised January 2004 Date: <u>5-3-05</u>

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format					
	ORY CERTIFICATION		eted by lab - Please type or p	rint legibly)	
LabName:	Advanced Environme	ntal Labs - Orlando	Florida	Certification #: E53076	
Address:	528 S. North Lake Blv	vd., Suite 1016	Certification E	piration 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: 3/15/2005 8:38:00	
Lab Assigr	ned Report Number or .	Job ID A050871	Sample Number (F	rom page 1) A050871-01	
Group(s) A	analyzed Results attack	hed for compliance with chapt	er 62-550, F.A.C. (check all th	at apply):	
1	Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts	
Ē	All 17	All 30	All 21	Trihalomethanes	
0	Partial	All Except Dioxin	Partial	Haloacetic Acids	
	Nitrate	Partial	Radionuclides	Bromate	
Ļ	Nitrite	Dioxin Only	Single Sample	Chlorite	
L	Asbestos Only		Qtrly Composite**	Secondaries	
				☑ All 14 ☐ Partial	
Were any a	analyses subcontracted	? 🖌 Yes 🗌 No			
lf yes, plea	ise provide DOH certific	ation number E82574	E84589 E84129	_	
ATTACH D	OH ANALYTE SHEET	FOR EACH SUBCONTRACT	ED LAB		
		CERTIF	CATION		
I, Myrna S (	antiago Print Name)	, Laboratory Manager	'		
do HEREB National Er	Y CERTIFY that all atta nvironmental Laborator	ched analytical data are corre Accreditation Conference (N	ect and unless noted meet all ELAC).	requirements of the	
Signature:	lyna	Ontrago	Date:	1/20/05	
analysis re	suits will lesuit in rejecti	rrent Florida DOH lab certifica ion of the report, possible enfo e DOH Bureau of Laboratory S	tion number and a current An proement against the public was Services.	alyte Sheet for the attached ater system for failure to sample,	
** Please p	rovide radiological sam	ple dates and locations for ea	ach quarter.		
COMPLIAN	NCE DETERMINATION	(to be completed by DEP	or DOH)		
Sample Collection Info Satisfactory 🔄 Yes 📋 No Sample Analysis Info Satisfactory: 📑 Yes 📄 No					
Replacement Sample(s) Requested (circle or highlight group(s) above)					
Additional Monitoring Required (circle or highlight group(s) above)					
Reason(s):	MCL(s) Exceeded	Detection	n(s) n Unsatisfactory	<ul> <li>Incomplete Report</li> <li>Analysis Unsatisfactory</li> </ul>	
_	Other:				
Person Noti			_ Date N	otified:	
Comments				- Manager Ray Low Manager and Manag	
Date Review	Date Reviewed: DEP/DOH Reviewing Official:				

.



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

Client:	Utilities, Inc.
Project Name:	Weathersfield
Project Number:	

PWS ID#:

Attention: Kathy Sillitoe

Phone Number: 8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

Report No.:	A050871
Date Sampled:	3/15/2005
Date Received:	3/15/05 8:38
Date Reported:	4/20/2005

#### **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: Weathersfield

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.



Analytical Report

Client: Utilities, Inc.

Project Name: Weathersfield

Matrix: Drinking Water

PWS ID#:

Client Sample ID: 1

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Site: Point of Entry Sample Number: A050871-01 
 Report No.:
 A050871

 Date/Time Sampled:
 03/15/05
 8:15

Date/Time Received: 3/15/05 8:38

Sampled By: Roy Mericle Shipping Method: Client drop off

Inorgani	c Contaminants									
Contam ID	Contam Name			Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
	Nitrate + Nitrite (as N)	10	mg/L	0.027	U	SM4500NO3-F	0.027	3/16/2005	17:42	E82574
1005	Arsenic	0.010	mg/L	0.0070	U	E200.7	0.0070	3/18/2005	10:31	E82574
1010	Barium	2.0	mg/L	0.0058	ł	E200.7	0.0025	3/18/2005	10:31	E82574
1015	Cadmium	0.0050	mg/L	0.00021	U	E200.7	0.00021	3/18/2005	10:31	E82574
1020	Chromium	0.10	mg/L	0.00016	U	E200.7	0.00016	3/18/2005	10:31	E82574
1024	Cyanide	0.20	mg/L	0.0049	U	SM4500CN-E	0.0049	3/22/2005	9:30	E84589
1025	Fluoride	4.0	mg/L	0.20	i	SM4500F-C	0.061	3/17/2005	13:00	E84589
1030	Lead	0.015	mg/L	0,0013	U	SM3113B	0.0013	3/18/2005	14:08	E82574
1035	Mercury	0.0020	mg/L	0.000020	U	E245.1	0.000020	3/17/2005	12:37	E82574
1036	Nickel	0.10	mg/L	0.0026	υ	E200.7	0.0026	3/18/2005	10:31	E82574
1040	Nitrate (as N)	10	mg/L	0.014	ບ	SM4500NO3-F	0.014	3/16/2005	17:42	E82574
1040	Nitrate (as N)	10	mg/L	0.027	U	SM4500NO3-F	0.027	3/17/2005	8:40	E84589
1041	Nitrite (as N)	1.0	mg/L	0.034	U	SM4500NO3-F	0.034	3/17/2005	8:40	E84589
1041	Nitrite (as N)	1.0	mg/L	0.013	i	SM4500NO3-F	0.013	3/16/2005	17:42	E82574
1045	Selenium	0.050	mg/L	0.0016	U	SM3113B	0.0016	3/16/2005	11:15	E82574
1052	Sodium	160	mg/L	13		E200.7	0.0084	3/18/2005	10:31	E82574
1074	Antimony	0.0060	mg/L	0.0025	U	SM3113B	0.0025	3/17/2005	13:50	E82574
1075	Beryllium	0.0040	mg/L	0.000027	U	E200.7	0.000027	3/18/2005	10:31	E82574
1085	Thailium	0.0020	mg/L	0.0016	U	E200.9	0.0016	3/18/2005	16:43	E82574

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

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

Analytical Report

Client: Utilities, Inc.

Project Name: Weathersfield

Matrix: Drinking Water

PWS ID#:

Client Sample ID: 1

Site: Point of Entry

Sample Number: A050871-01

Secondary Contaminants

Report No.: A050871 Date/Time Sampled: 03/15/05 8:15 Date/Time Received: 3/15/05 8:38

Sampled By: Roy Mericle Shipping Method: Client drop off

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Contam ID	Contaminants	MCL Units		Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
								2/4.0/2005	10:21	E82574
1002	Aluminum	0.20	mg/L	0.025	1	E200.7	0.017	3/18/2005	10:31	
017	Total Chlorides	250	mg/L	21		E325.3	1.3	3/21/2005	11:16	E84589
1022	Copper	1.0	mg/L	0.0046		E200.7	0.00096	3/18/2005	10:31	E82574
1025	Fluoride	2.0	mg/L	0.20	i	SM4500F-C	0.061	3/17/2005	13:00	E84589
1028	Iron	0.30	mg/L	0.016	U	E200.7	0.016	3/18/2005	10:31	E82574
1032	Manganese	0.050	mg/L	0.0020		E200.7	0.00022	3/18/2005	10:31	E82574
1050	Silver	0.10	mg/L	0.0019	U	E200.7	0.0019	3/18/2005	10:31	E82574
1055	Sulfate (as SO4)	250	mg/L	5.2	i	E375.4	1.4	3/29/2005	9:10	E84589
1095	Zinc	5.0	mg/L	0.0077	i.	E200.7	0.0072	3/18/2005	10:31	E82574
1905	* Color	150	olor Uni	5.0	U	SM2120B	5.0	3/16/2005	16:30	E84589
1925	pH	6.5-8.5	oH Unite	7.95	, Q	E150.1	1.0	3/16/2005	16:45	E84589
1930	Total Dissolved Solids	500	mg/L	200		E160.1	10	3/17/2005	16:00	E84589
2905	MBAS, as LAS, mol. wt. 340	0.50	mg/L	0.035	U	E425.1	0.035	3/16/2005	15:30	E84589

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

Sample held beyond the acceptable hold time, ٥

The compound was analyzed for but not detected. υ

MDL Method Reporting Limit

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

Analytical Report

Client: Utilities, Inc.

Project Name: Weathersfield

Matrix: Drinking Water

PWS ID#:

Client Sample ID: 1

Site: Point of Entry

Report No.: A050871

Date/Time Sampled: 03/15/05 8:15 Date/Time Received: 3/15/05 8:38

Sampled By: Roy Mericle Shipping Method: Client drop off

#### Sample Number: A050871-01 Volatile Organics

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	RDL	Analysis Date	Analysis Time	DOH Lab Cert. #
2378	1,2,4-Trichlorobenzene	70	ug/L	0.20	U	E502.2	0.20	1.0	3/16/2005	19:26	E82574
2380	Cis-1,2-dichloroethene	70	ug/L	0.20	U	E502.2	0.20	1.0	3/16/2005	19:26	E82574
2955	Xylenes (Total)	10000	ug/L	0.50	U	E502.2	0.50	1.0	3/16/2005	19:26	E82574
2964	Methylene Chloride	5.0	ug/L	0.44	U	E502.2	0.44	1.0	3/16/2005	19:26	E82574
2968	1,2-Dichlorobenzene	600	ug/L	0.26	U	E502.2	0.26	1.0	3/16/2005	19:26	E82574
2969	1,4-Dichlorobenzene	75	ug/L	0.11	U	E502.2	0.11	1.0	3/16/2005	19:26	E82574
2976	Vinyi Chloride	1.0	ug/L	0.29	U	E502.2	0.29	1.0	3/16/2005	19:26	E82574
977	1,1-Dichloroethene	7.0	ug/L	0.21	U	E502.2	0.21	1.0	3/16/2005	19:26	E82574
979	Trans-1,2-dichloroethene	100	ug/L	0.27	U	E502.2	0.27	1.0	3/16/2005	19:26	E82574
980	1,2-Dichloroethane	3.0	ug/L	0.22	U	E502.2	0.22	1.0	3/16/2005	19:26	E82574
981	1,1,1-Trichloroethane	200	ug/L	0.33	U	E502.2	0.33	1.0	3/16/2005	19:26	E82574
982	Carbon Tetrachioride	3.0	ug/L	0.31	U	E502.2	0.31	1.0	3/16/2005	19:26	E82574
983	1,2-Dichloropropane	5.0	ug/L	0.22	U	E502.2	0.22	1.0	3/16/2005	19:26	E82574
984	Trichloroethene	3.0	ug/L	0.28	U	E502.2	0.28	1.0	3/16/2005	19:26	E82574
985	1,1,2-Trichloroethane	5.0	ug/L	0.32	U	E502.2	0.32	1.0	3/16/2005	19:26	E82574
987	Tetrachloroethene	3.0	ug/L	0.31	U	E502.2	0.31	1.0	3/16/2005	19:26	E82574
98 <b>9</b>	Chlorobenzene	100	ug/L	0.18	U	E502.2	0.18	1.0	3/16/2005	19:26	E82574
990	Benzene	1.0	ug/L	0.21	U	E502.2	0.21	1.0	3/16/2005	19:26	E82574
991	Toluene	1000	ug/L	0.10	U	E502.2	0.10	1.0	3/16/2005	19:26	E82574
992	Ethylbenzene	700	ug/L	0.15	U	E502.2	0.15	1.0	3/16/2005	19:26	E82574
996	Styrene	100	ug/L	0.14	U	E502.2	0.14	1.0	3/16/2005	19:26	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

## SOUTHERN ANALYTICAL LABORATORIES, INC.

110 BAMAEW BOLLEVARD, OLDSMAR, P. 31877 B13 855-1844 for 313-855-9910

Advanced Environmental Laboratories, Inc. 528 S. North Lake Blvd. Suite 1016 Altamonte Springs, FL 32701March 25, 2005 Project No: 49354

## Laboratory Report

FDEP Report form attached for the following samples:

Client Project Description: A050871

Sample Number 49354.01 Sample Description A050871-01 Date & Time Collected 03/15/05. 08:15 
 Date & Time Received

 03/18/05
 09:50

Test results presented in this report meet all the requirements of the NELAC standards.

FDOH Laboratory No. E84129 NELAP Accredited Approved By: Francis I. Daniels, Laboratory Director Leslle C. Boardman, Q.A. Manager

»7

## SOUTHERN ANALYTICAL LABORATORIES, INC.



March 25, 2005

PWS ID:

Sample No.: 49354.01

#### Advanced Environmental Laboratories, Inc.

#### A050871

Sample ID: A050871-01

#### Synthetic Organics 62-550.310(4)(b)

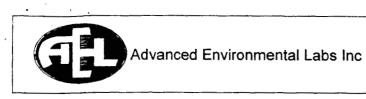
Contaminant	Contaminant			Analysis		Analytical		RDL	Extraction		Analysis	DOH Lab
ID	Name	MCL	Units	Result	Qualifier*	Method	Lab MDL	**	Date	Analysis Date	Time	Certification#
2005	Endrin	2	µg/L	0.1	U	EPA 525.2	0.1	0.01	03/22/05	03/23/05	04:23	E84129
2010	Lindane	0.2	µg/L	0.06	U	EPA 525.2	0.06	0.02	03/22/05	03/23/05	04:23	E84129
2015	Methoxychlor	40	µg/L	0.05	U	EPA 525.2	0.05	0.1	03/22/05	03/23/05	04:23	E84129
2020	Toxaphene	3	µg/L	0.5	U	EPA 508.1	0.5	1	03/22/05	03/24/05	12:45	E84129
2031	Dalapon	200	µg/L	1	υ	EPA 515.3	1	1	03/22/05	03/23/05	10:46	E84129
2032	Diquat	20	µg/L	1	u	EPA 549.2	1	0.4	03/21/05	03/22/05	17:26	E84129
2033	Endothall	100	µg/L	20	U	EPA 548.1	20	9	03/22/05	03/23/05	18:00	E84129
2034	Glyphosate	700	µg/L	10		EPA 547	10	6		03/22/05	19:54	E84129
2035	Di(2-ethylhexyl)adipate	400	µg/L	0.3	U	EPA 525.2	0.3	0.6	03/22/05	03/23/05	04:23	E84129
2036	Oxamyl (Vydate)	200	µg/L	0.5		EPA 531.1	0.5	2		03/21/05	18:21	E84129
2037	Simazine	4	µg/L	0.07	U	EPA 525.2	0.07	0.07	03/22/05	03/23/05	04:23	E84129
2039	Di(2-ethylhexyl)phthalate	6	µg/L	1.0	U	EPA 525.2	1.0	0.6	03/22/05	03/23/05	04:23	E84129
2040	Picloram	500	µg/L	0.75	U	EPA 515.3	0.75	0.1	03/22/05	03/23/05	10:46	E84129
2041	Dinoseb	7	µg/L	0.5		EPA 515.3	0.5	0.2	03/22/05	03/23/05	10:46	E84129
2042	Hexachlorocyclopentadiene	50		0.2	υ	EPA 525.2	0.2	0.1	03/22/05	03/23/05	04:23	E84129
2046	Carbofuran	40	• . =	0.5		EPA 531.1	0.5	0.9		03/21/05	18:21	E84129
2050	Atrazine	3		0.06	U	EPA 525.2	0.06	0.1	03/22/05	03/23/05	04:23	E84129
2051	Alachlor	2	µg/L	0.2		EPA 525.2	0.2	0.2	03/22/05	03/23/05	04:23	E84129
2065	Heptachlor	0.4	• •	0.08		EPA 525.2		0.04	03/22/05	03/23/05	04:23	E84129
2067	Heptachlor Epoxide	0.2		0.1	Ű	EPA 525.2	0.1	0.02		03/23/05	04:23	E84129
2105	2,4-D	70		1	Ū	EPA 515.3		0.1		03/23/05	10:46	E84129
2110	2,4,5-TP (Silvex)	50		0.25		EPA 515.3		0.2	03/22/05	03/23/05	10:46	E84129
2274	Hexachlorobenzene	1	µg/L	0.05		EPA 525.2				03/23/05	04:23	E84129
2306	Benzo(a)pyrene	0.2		0.1		EPA 525.2			2 03/22/05	03/23/05	04:23	E84129
2326	Pentachlorophenol	1	µg/L	0.1		EPA 515.3				03/23/05	10:46	E84129
2383	(PCBs)	0.5		0.2		EPA 508.1			03/22/05	03/24/05	12:45	E84129
2931	Dibromochloropropane	0.2	. –	0.005		EPA 504.1				03/22/05	03:45	E84129
2946	Ethylene Dibromide (EDB)	0.02	• •	0.005		EPA 504.1					03:45	E84129
2959	Chlordane	2		0.05		EPA 508.1					12:45	E84129
* Ounlifierer					and the second second			A.A. 1. 65	ender an broken in der		11 11 11 12	EEL 330/430-3

\* Qualifiers:

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Analyte was undetected. Indicated concentration is method detection limit.

\*\* Non-detects with a reported lab MDL <50% of the MCL are acceptable for compliance with 62-550.310(4)(b)



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

Client: UTILITIES, INC. (UTL-A)			Project name: WEATHERSFIELD				
Date/Time Rcvd:	3/15/05	08.38	Log-In request number:	A05087	Ι,		
Received by:		V	Completed by:	ł	/		

## **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)	2				
Temp taken from	□ Temp blank ☑ Cooler	Temp blank     Cooler	Temp blank     Cooler	Temp blank     Cooler	Temp blank Cooler
Temp measured with	IR gun Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):			

## **Other Information:**

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?	1		
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?	1		
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?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE	1		
	Was the cooler temperature less than 6°C?	1		
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			~
15.	Were the sample containers provided by AEL?	1		
16.	Were samples accepted into the laboratory?	1		
17.	Was it necessary to split samples into other bottles?		1	

## Kit ID

Comments:





John O. Agwunobl, M.D.,M.B.A. Secretary

Page 1 of 32

## Laboratory Scope of Accreditation

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

State Laboratory ID: E84129

EPA Lab Code: FL00237

(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677 Matrix: Drinking Water

Matrix: Drinking Water Analyte	Method/Tech	Category	Certification Type	Effective Date
1,1,1,2-Tetrachloroethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1,1,1-Trichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,1,2,2-Tetrachloroethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1,1,2-Trichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,1-Dichloroethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1,1-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,1-Dichloropropene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1,2,3-Trichlorobenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003
1,2,3-Trichloropropane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1,2,4-Trichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,2,4-Trimethylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003
1,2-Dibromo-3-chloropropane (DBCP)	EPA 504.1	Synthetic Organic Contaminants	NELAP	3/22/2002
1,2-Dibromoethane (EDB, Ethylene dibromide)	EPA 504.1	Synthetic Organic Contaminants	NELAP	3/22/2002
1,2-Dichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,2-Dichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,2-Dichloropropane	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,3,5-Trimethylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003
1,3-Dichlorobenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1,3-Dichloropropane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1,4-Dichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
2,2-Dichloropropane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
2,4,6-Trichlorophenol	EPA 604	Group III Unregulated Contaminants	NELAP	3/22/2002
2,4,6-Trichlorophenol	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
2,4-D	EPA 515.1	Synthetic Organic Contaminants	NELAP	3/22/2002
2,4-D	EPA 515.3	Synthetic Organic Contaminants	NELAP	3/22/2002
2,4-Dinitrotoluene (2,4-DNT)	EPA 525.2	Group III Unregulated Contaminants	NELAP	3/6/2003
2,4-Dinitrotoluene (2,4-DNT)	EPA 609	Group III Unregulated Contaminants	NELAP	3/22/2002
2,4-Dinitrotoluene (2,4-DNT)	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
2,6-Dinitrotoluene (2,6-DNT)	EPA 525.2	Group III Unregulated Contaminants	NELAP	3/6/2003
2,6-Dinitrotoluene (2,6-DNT)	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
2-Chlorophenol	EPA 604	Group III Unregulated Contaminants	NELAP	3/22/2002
2-Chlorophenol	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
2-Chlorotoluene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
2-Methyl-4,6-dinitrophenol	EPA 604	Group III Unregulated Contaminants	NELAP	3/22/2002
2-Methyl-4,6-dinitrophenol	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
3-Hydroxycarbofuran	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/22/2002

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





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

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## Laboratory Scope of Accreditation

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

State Laboratory ID: E84129

Jeb Bush Governor

EPA Lab Code: FL00237

(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677 Matrix: Drinking Water

Aatrix: Drinking Water	Method/Tech	Category	Certification Type	Effective Date
,4'-DDD	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
,4'-DDD	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
,4'-DDE	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
,4'-DDE	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
,4'-DDT	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
,4'-DDT	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
-Chlorotoluene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
-Isopropyltoluene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003
cetochlor	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/6/2003
cifluorfen	EPA 515.3	Group I Unregulated Contaminants	NELAP	3/22/2002
lachlor	EPA 507	Synthetic Organic Contaminants	NELAP	3/22/2002
lachlor	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002
lachlor	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
ldicarb (Temik)	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/22/2002
ldicarb sulfone	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/22/2002
ldicarb sulfoxide	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/22/2002
ldrin	EPA 508	Group I Unregulated Contaminants	NELAP	3/22/2002
ldrin	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
ldrin	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
lkalinity as CaCO3	SM 2320 B	Primary Inorganic Contaminants	NELAP	3/22/2002
pha-BHC (alpha-Hexachlorocyclohexane)	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
luminum	EPA 200.7	Secondary Inorganic Contaminants	NELAP	3/22/2002
metryn	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/6/2003
ntimony	SM 3113 B	Primary Inorganic Contaminants	NELAP	3/22/2002
rsenic	SM 3113 B	Primary Inorganic Contaminants	NELAP	3/22/2002
trazine	EPA 507	Synthetic Organic Contaminants	NELAP	3/22/2002
trazine	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002
trazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
arium	EPA 200.7	Primary Inorganic Contaminants	NELAP	3/22/2002
enzene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
enzo(a)pyrene	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
enzo(a)pyrene	EPA 550.1	Synthetic Organic Contaminants	NELAP	3/22/2002
eryllium	EPA 200.7	Primary Inorganic Contaminants	NELAP	3/22/2002
eryllium	SM 3113 B	Primary Inorganic Contaminants	NELAP	3/22/2002
ta-BHC (beta-Hexachlorocyclohexane)	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
s(2-Ethylhexyl) phthalate (DEHP)	EPA 506	Synthetic Organic Contaminants	NELAP	3/22/2002

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





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Matrix:         Drinking Water           Analyte         Method/Tech         Category           bis(2-Ethylhexyl) phthalate (DEHP)         EPA 525.2         Synthetic Organic Contaminant		hod/Tech Category		Effective Date	
		Synthetic Organic Contaminants	NELAP	3/22/2002	
Bromacil	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/6/2003	
Bromate	EPA 300.0	Primary Inorganic Contaminants	NELAP	3/22/2002	
Bromide	EPA 300.0	Primary Inorganic Contaminants	NELAP	3/22/2002	
Bromoacetic acid	EPA 552.2	Synthetic Organic Contaminants,Group I Unregulated Contaminants	NELAP	3/22/2002	
Bromobenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002	
Bromochloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	7/2/2002	
Bromochloromethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003	
Bromodichloromethane	EPA 502.2	Group II Unregulated Contaminants,Other Regulated Contaminants	NELAP	3/22/2002	
Bromoform	EPA 502.2	Other Regulated Contaminants,Group II Unregulated Contaminants	NELAP	3/22/2002	
Butachlor	EPA 507	Group I Unregulated Contaminants	NELAP	3/22/2002	
Butachlor	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002	
Butyl benzyl phthalate	EPA 606	Group III Unregulated Contaminants	NELAP	3/22/2002	
Butyl benzyl phthalate	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002	
Cadmium	EPA 200.7	Primary Inorganic Contaminants	NELAP	3/22/2002	
Cadmium	SM 3113 B	Primary Inorganic Contaminants	NELAP	3/22/2002	
Carbaryl (Sevin)	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/22/2002	
Carbofuran (Furaden)	EPA 531.1	Synthetic Organic Contaminants	NELAP	3/22/2002	
Carbon tetrachloride	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002	
Chlordane (tech.)	EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002	
Chlordane (tech.)	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002	
Chloride	EPA 300.0	Secondary Inorganic Contaminants	NELAP	3/22/2002	
Chloride	EPA 325.2	Secondary Inorganic Contaminants	NELAP	3/22/2002	
Chlorine	SM 4500-Cl G	Primary Inorganic Contaminants	NELAP	3/22/2002	
Chlorite	EPA 300.0	Primary Inorganic Contaminants	NELAP	3/22/2002	
Chloroacetic acid	EPA 552.2	Synthetic Organic Contaminants,Group I Unregulated Contaminants	NELAP	3/22/2002	
Chlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002	
Chloroethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002	
Chloroform	EPA 502.2	Group II Unregulated Contaminants,Other Regulated Contaminants	NELAP	3/22/2002	
Chromium	EPA 200.7	Primary Inorganic Contaminants	NELAP	3/22/2002	
is-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002	

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





John O. Agwunobl, M.D.,M.B.A. Secretary

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## Laboratory Scope of Accreditation

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Jeb Bush Governor

EPA Lab Code: FL00237

(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677

Matrix: Drinking Water	Method/Tech	Category	Certification Type	Effective Date
cis-1,3-Dichloropropene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
Color	SM 2120 B	Secondary Inorganic Contaminants	NELAP	3/22/2002
Conductivity	SM 2510 B	Primary Inorganic Contaminants	NELAP	3/22/2002
Copper	EPA 200.7	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	NELAP	3/22/2002
Cyanide	SM 4500-CN E	Primary Inorganic Contaminants	NELAP	3/22/2002
Dacthal (DCPA)	EPA 515.1	Group I Unregulated Contaminants	NELAP	3/22/2002
Dacthal (DCPA)	EPA 515.3	Group I Unregulated Contaminants	NELAP	3/22/2002
Dalapon	EPA 515.1	Synthetic Organic Contaminants	NELAP	3/22/2002
Jalapon	EPA 515.3	Synthetic Organic Contaminants	NELAP	3/22/2002
DCPA di acid degradate	EPA 515.3	Group I Unregulated Contaminants	NELAP	3/22/2002
OCPA mono-acid	EPA 515.3	Group I Unregulated Contaminants	NELAP	3/22/2002
delta-BHC	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
Di(2-ethylhexyl)adipate	EPA 506	Synthetic Organic Contaminants	NELAP	3/22/2002
Di(2-ethylhexyl)adipate	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
Dibromoacetic acid	EPA 552.2	Group I Unregulated Contaminants, Synthetic Organic Contaminants	NELAP	3/22/2002
Dibromochloromethane	EPA 502.2	Other Regulated Contaminants,Group II Unregulated Contaminants	NELAP	3/22/2002
Dibromomethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
Dicamba	EPA 515.1	Group I Unregulated Contaminants	NELAP	3/22/2002
Dicamba	EPA 515.3	Group I Unregulated Contaminants	NELAP	3/22/2002
Dichloroacetic acid	EPA 552.2	Group I Unregulated Contaminants,Synthetic Organic Contaminants	NELAP	3/22/2002
Dichlorodifluoromethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
Dichloromethane (DCM, Methylene chloride)	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
Dieldrin	EPA 508	Group I Unregulated Contaminants	NELAP	3/22/2002
Dieldrin	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
Dieldrin	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
Diethyl phthalate	EPA 606	Group III Unregulated Contaminants	NELAP	3/22/2002
Diethyl phthalate	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
Dimethyl phthalate	EPA 606	Group III Unregulated Contaminants	NELAP	3/22/2002
Dimethyl phthalate	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
Di-n-butyl phthalate	EPA 606	Group III Unregulated Contaminants	NELAP	3/22/2002
Di-n-butyl phthalate	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
Di-n-octyl phthalate	EPA 606	Group III Unregulated Contaminants	NELAP	3/22/2002

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







John O. Agwunobl, M.D.,M.B.A. Secretary

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## Laboratory Scope of Accreditation

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

#### State Laboratory ID: E84129

EPA Lab Code: FL00237

(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677 Matrix: Drinking Water

AnalyteMethod/TechCategoryTypeEffective DateDin-scell (2-sec-buly) 4.6-disitrophenol, DNBP)EPA 625Group III Unregulated ContaminantsNELAP3/22/2002Dinoseb (2-sec-buly) 4.6-disitrophenol, DNBP)EPA 515.1Synthetic Organic ContaminantsNELAP3/22/2002Dinoseb (2-sec-buly) 4.6-disitrophenol, DNBP)EPA 515.3Synthetic Organic ContaminantsNELAP3/22/2002DiquatEPA 508.1Group I Unregulated ContaminantsNELAP7/19/2002Endosulfan IIEPA 508.1Group I Unregulated ContaminantsNELAP7/19/2002Endosulfan StrateEPA 508.1Synthetic Organic ContaminantsNELAP7/19/2002EndrinEPA 508.1Synthetic Organic ContaminantsNELAP7/19/2002EndrinEPA 508.1Synthetic Organic ContaminantsNELAP7/19/2002EndrinEPA 508.1Synthetic Organic ContaminantsNELAP7/19/2002EndrinEPA 508.1Group I Unregulated ContaminantsNELAP <th>Matrix: Drinking Water</th> <th></th> <th></th> <th>Certification</th> <th></th>	Matrix: Drinking Water			Certification		
Drocyl phthalate         EPA 625         Group III Unregulated Contaminants         NELAP         3/22/2002           Dinoseb (2-sec-buty)-4,6-dinitrophenol, DNBP)         EPA 515.1         Synthetic Organic Contaminants         NELAP         3/22/2002           Dinaseb (2-sec-buty)-4,6-dinitrophenol, DNBP)         EPA 515.3         Synthetic Organic Contaminants         NELAP         3/22/2002           Diquat         EPA 508.1         Group II Unregulated Contaminants         NELAP         3/22/2002           Endosulfan I         EPA 508.1         Group II Unregulated Contaminants         NELAP         7/19/2002           Endosulfan II         EPA 508.1         Group II Unregulated Contaminants         NELAP         7/19/2002           Endonulfan         EPA 508.1         Group II Unregulated Contaminants         NELAP         7/19/2002           Endrin         EPA 508         Synthetic Organic Contaminants         NELAP         7/19/2002           Endrin         EPA 508.1         Group II Unregulated Contaminants         NELAP         7/19/2002           Endrin         EPA 508.1         Group II Unregulated Contaminants         NELAP         7/19/2002           Endrin         EPA 502.2         Other Regulated Contaminants         NELAP         3/22/2002           Endrin         EPA 502.2         O	Analyte	Method/Tech Category			Effective Date	
Dinoseb (2-sec-buy) 4,6-dinitrophenol, DNBP)         EPA 515.1         Synthetic Organic Contaminants         NELAP         3/22/2002           Dinoseb (2-sec-buy) 4,6-dinitrophenol, DNBP)         EPA 515.3         Synthetic Organic Contaminants         NELAP         3/22/2002           Diquat         EPA 508.1         Group I Unregulated Contaminants         NELAP         7/19/2002           Endosulfan II         EPA 508.1         Group I Unregulated Contaminants         NELAP         7/19/2002           Endosulfan sulfate         EPA 508.1         Group I Unregulated Contaminants         NELAP         7/19/2002           Endosulfan sulfate         EPA 508.1         Group I Unregulated Contaminants         NELAP         7/19/2002           Endothall         EPA 508.1         Synthetic Organic Contaminants         NELAP         7/19/2002           Endrin         EPA 508.1         Group I Unregulated Contaminants         NELAP         7/19/2002           Endrin         EPA 508.1         Group I Unregulated Contaminants         NELAP         7/19/2002           Endrin aldehyde         EPA 502.2         Group I Unregulated Contaminants         NELAP         3/22/2002           Edrin aldehyde         EPA 502.2         Other Regulated Contaminants         NELAP         3/22/2002           Edrin aldehyde         EPA		EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002	
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gamma-Breachlorocyclohexane) gamma-Hexachlorocyclohexane)EPA 508.1Synthetic Organic ContaminantsNELAP7/19/2002gamma-Hexachlorocyclohexane) gamma-Hexachlorocyclohexane)EPA 525.2Synthetic Organic ContaminantsNELAP3/22/2002GlyphosateEPA 547Synthetic Organic ContaminantsNELAP3/22/2002Gross-alphaEPA 00- 02RadiochemistryNELAP4/1/2004Gross-alphaEPA 900RadiochemistryNELAP4/1/2004Gross-alphaEPA 900RadiochemistryNELAP4/1/2004Gross-betaEPA 508Synthetic Organic ContaminantsNELAP3/22/2002HeptachlorEPA 508Synthetic Organic ContaminantsNELAP3/22/2002HeptachlorEPA 508Synthetic Organic ContaminantsNELAP3/22/2002HeptachlorEPA 508.1Synthetic Organic ContaminantsNELAP3/22/2002HeptachlorEPA 508.1Synthetic Organic ContaminantsNELAP3/22/2002Heptachlor epoxideEPA 508Synthetic Organic ContaminantsNELAP3/22/2002Heptachlor epoxideEPA 508.1Synthetic Organic Contaminants </td <td>Fluoride</td> <td>SM 4500 F-C</td> <td>Contaminants, Primary Inorganic</td> <td>NELAP</td> <td>3/22/2002</td>	Fluoride	SM 4500 F-C	Contaminants, Primary Inorganic	NELAP	3/22/2002	
gamma-BHC (Lindane, gamma-Hexachlorocyclohexane)EPA 508.1Synthetic Organic ContaminantsNELAP7/19/2002gamma-Hexachlorocyclohexane)EPA 525.2Synthetic Organic ContaminantsNELAP3/22/2002GlyphosateEPA 547Synthetic Organic ContaminantsNELAP3/22/2002Gross-alphaEPA 00- 02RadiochemistryNELAP4/1/2004Gross-alphaEPA 900RadiochemistryNELAP4/1/2004Gross-alphaEPA 900RadiochemistryNELAP4/1/2004Gross-betaEPA 900RadiochemistryNELAP4/1/2004HeptachlorEPA 508.1Synthetic Organic ContaminantsNELAP3/22/2002HeptachlorEPA 508.1Synthetic Organic ContaminantsNELAP3/22/2002Heptachlor epoxideEPA 508.1Synthetic Organic ContaminantsNELAP3/22/2002 </td <td></td> <td>EPA 508</td> <td>Synthetic Organic Contaminants</td> <td>NELAP</td> <td>3/22/2002</td>		EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002	
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HexachlorobenzeneEPA 508Synthetic Organic ContaminantsNELAP3/22/2002HexachlorobenzeneEPA 508.1Synthetic Organic ContaminantsNELAP7/19/2002HexachlorobenzeneEPA 525.2Synthetic Organic ContaminantsNELAP3/22/2002	Heptachlor epoxide	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002	
Hexachlorobenzene         EPA 525.2         Synthetic Organic Contaminants         NELAP         3/22/2002           NELAP         3/22/2002         3/22/2002         3/22/2002         3/22/2002         3/22/2002         3/22/2002	• •	EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002	
	Hexachlorobenzene	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002	
	Hexachlorobenzene	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002	
		EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003	

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





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

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### Laboratory Scope of Accreditation

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

State Laboratory ID: E84129

EPA Lab Code: FL00237

(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677 Matrix: Drinking Water

Matrix: Drinking Water	Method/Tech	Category	Certification Type	Effective Date	
	EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002	
Iexachlorocyclopentadiene	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002	
lexachlorocyclopentadiene	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002	
lexazinone (Velpar)	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/6/2003	
ron	EPA 200.7	Secondary Inorganic Contaminants	NELAP	3/22/2002	
sophorone	EPA 525.2	Group III Unregulated Contaminants	NELAP	3/6/2003	
sophorone	EPA 609	Group III Unregulated Contaminants	NELAP	3/22/2002	
sophorone	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002	
sopropylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003	
Lead	SM 3113 B	Primary Inorganic Contaminants	NELAP	3/22/2002	
Manganese	EPA 200.7	Secondary Inorganic Contaminants	NELAP	3/22/2002	
Aercury	EPA 245.1	Primary Inorganic Contaminants	NELAP	3/22/2002	
Methomyl (Lannate)	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/22/2002	
Methoxychlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002	
Methoxychlor	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002	
Methoxychlor	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002	
Methyl bromide (Bromomethane)	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002	
Methyl chloride (Chloromethane)	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002	
Methyl tert-butyl ether (MTBE)	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002	
Metolachlor	EPA 507	Group I Unregulated Contaminants	NELAP	3/22/2002	
Metolachior	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002	
Metribuzin	EPA 507	Group I Unregulated Contaminants	NELAP	3/22/2002	
Metribuzin	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002	
Molinate	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002	
Naphthalene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003	
Natural uranium	EPA 908	Radiochemistry	NELAP	4/1/2004	
n-Butylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003	
Nickel	EPA 200.7	Primary Inorganic Contaminants	NELAP	3/22/2002	
Nitrate	EPA 300.0	Primary Inorganic Contaminants	NELAP	3/22/2002	
Nitrate	EPA 353.2	Primary Inorganic Contaminants	NELAP	3/22/2002	
Nitrite	EPA 300.0	Primary Inorganic Contaminants	NELAP	3/22/2002	
Nitrite	EPA 353.2	Primary Inorganic Contaminants	NELAP	3/22/2002	
Nitrite	SM 4500-NO2 B	Primary Inorganic Contaminants	NELAP	3/22/2002	
Norflurazon	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/6/2003	
n-Propylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003	
Odor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	3/22/2002	

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Laboratory Scope of Accreditation

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

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

State Laboratory ID: E84129

.

Jeb Bush

Governor

EPA Lab Code: FL00237

(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677 Matrix: Drinking Water

Matrix: Drinking Water			Certification		
Analyte	Method/Tech	Category	Туре	Effective Date	
Orthophosphate as P	EPA 300.0	Primary Inorganic Contaminants	NELAP	3/22/2002	
Oxamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	3/22/2002	
PCBs	EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002	
PCBs	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002	
Pentachlorophenol	EPA 515.1	Synthetic Organic Contaminants	NELAP	3/22/2002	
Pentachlorophenol	EPA 515.3	Synthetic Organic Contaminants	NELAP	3/22/2002	
Pentachlorophenol	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002	
рН	EPA 150.1	Secondary Inorganic Contaminants	NELAP	3/22/2002	
Phenol	EPA 604	Group III Unregulated Contaminants	NELAP	3/22/2002	
Phenol	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002	
Picloram	EPA 515.1	Synthetic Organic Contaminants	NELAP	3/22/2002	
Picloram	EPA 515.3	Synthetic Organic Contaminants	NELAP	3/22/2002	
Propachlor (Ramrod)	EPA 508	Group I Unregulated Contaminants	NELAP	3/22/2002	
Propachlor (Ramrod)	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002	
Propachlor (Ramrod)	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002	
Radium-226	EPA 903.1	Radiochemistry	NELAP	4/1/2004	
Radium-228	EPA Ra-05	Radiochemistry	NELAP	4/1/2004	
sec-Butylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003	
Selenium	EPA 200.7	Primary Inorganic Contaminants	NELAP	3/22/2002	
Selenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	3/22/2002	
Silver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	3/22/2002	
Silver	SM 3113 B	Secondary Inorganic Contaminants	NELAP	3/22/2002	
Silvex (2,4,5-TP)	EPA 515.1	Synthetic Organic Contaminants	NELAP	3/22/2002	
Silvex (2,4,5-TP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	3/22/2002	
Simazine	EPA 507	Synthetic Organic Contaminants	NELAP	3/22/2002	
Simazine	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002	
Simazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002	
Sodium	EPA 200.7	Primary Inorganic Contaminants	NELAP	3/22/2002	
Styrene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002	
Sulfate	EPA 300.0	Secondary Inorganic Contaminants	NELAP	3/22/2002	
Surfactants - MBAS	SM 5540 C	Secondary Inorganic Contaminants	NELAP	3/22/2002	
Terbacil	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002	
tert-Butylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003	
•	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002	
Tetrachloroethylene (Perchloroethylene)	EPA 200.9	Primary Inorganic Contaminants	NELAP	3/22/2002	
Thallium	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002	
Toluene	EFA JUZ.Z	Other Regulated Comanimality			

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards. NON-TRANSFERABLE 07/19/2004-E84129

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

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## Laboratory Scope of Accreditation

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

#### State Laboratory ID: E84129

EPA Lab Code: FL00237

(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677

Aatrix: Drinking Water			Certification		
Analyte	Method/Tech Category		Туре	Effective Date	
otal coliforms	SM 9222 B	Microbiology	NELAP	3/22/2002	
fotal coliforms & E. coli	SM 9223 B	Microbiology	NELAP	3/22/2002	
otal dissolved solids	SM 2540 C	Secondary Inorganic Contaminants	NELAP	3/22/2002	
otal haloacetic acids	EPA 552.2	Synthetic Organic Contaminants	NELAP	3/22/2002	
otal nitrate-nitrite	EPA 300.0	Primary Inorganic Contaminants	NELAP	3/22/2002	
otal nitrate-nitrite	EPA 353.2	Primary Inorganic Contaminants	NELAP	3/22/2002	
otal trihalomethanes	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002	
oxaphene (Chlorinated camphene)	EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002	
oxaphene (Chlorinated camphene)	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002	
rans-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002	
rans-1,3-Dichloropropylene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002	
richloroacetic acid	EPA 552.2	Synthetic Organic Contaminants,Group I Unregulated Contaminants	NELAP	3/22/2002	
Frichloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002	
richlorofluoromethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002	
urbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	3/22/2002	
JV 254	SM 5910 B	Primary Inorganic Contaminants	NELAP	3/6/2003	
/inyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002	
(ylene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002	
Zinc	EPA 200.7	Secondary Inorganic Contaminants	NELAP	3/22/2002	

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

47557

THE NATER SPILOT Chain-of-Custody for AEL Olando to Southern Analytical

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

Contact Person: Myrna Santiago

Project #: A050871

Southern Analytical THE WATCH SP 1605 110 Bayview Blvd. 5804 E. HWY 22 Oldsmar. FL 34677 PANAMA CITY, FC 3240 813-855-1844 850-871-1900 Gontact Person: Sample Receiving-SAMple receiving

Department: SA

**Check if Rush** 

-	Lab Code	Client Sample ID	Test	Matrix	<b>Collect</b> Date	/ Time	<b>Receive Date</b>	Due Date	# Bottles Bottle Type (Pres.)
	A050871-01	1	62-550 549.2	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/22/2005	3×ILG,ST
$\lambda$	A050871-01	1	62-550 548	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/22/2005	IXILAP, ST
ΰV	A050871-01	1	62-550 547	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/22/2005	3x YOML AV ST
	A050871-01	1	62-550 531.1	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005	IXYOMLV, MUMA, ST
1	A050871-01	1	62-550 525.2	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005	1x Yomle, NHYCI
Ì	A050871-01	1	62-550 515.1	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005	- 4x yane V, ST
	A050871-01	1	62-550 508.1	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/22/2005	
	A050871-01	1	62-550 504.1	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005	

Orlando Relinquisher: 4PS Date/Time: Shipping Receiver: 3/15/2005 3:00:30 PM Date/Time: 3/18/05, 0452 UPS Shipping Relinquisher: X/va Southern Analytical Receiver: JPage 1 of 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 #: A050871 CustomerName: Utilities, Inc. **Collector:** Roy Mericle

AEL Jax 6601 Southpoint Parkway Jacksonville, FI 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	<b>Receive Date</b>	Due Date	# Bottles	Bottle Type (Pres.)
A050871-01	1	-550 Metals ICP (Primary) C	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		1L Poly
A050871-01	1	i50 Metals ICP (Secondary)	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		1L Poly
A050871-01	1	62-550 VOCs DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		40mL VOC Vial
A050871-01	1	Hg (DW)	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		500mL Poly (HNO3)
A050871-01	1	Nitrate (J)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/17/2005		250mL Poly
A050871-01	1	Nitrate + Nitrite (J)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		250mL Poly
A050871-01	1	Nitrite (J)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/17/2005	<u></u>	250mL Poly
A050871-01	1	Pb (DW)	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		500mL Poly (HNO3)
A050871-01	1	Sb (DW)	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		500mL Poly (HNO3)
A050871-01	1	Se (DW)	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		500mL Poly (HNO3)
A050871-01	1	TI (DW)	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		500mL Poly (HNO3)

Date/Time: 3/15/05 17W Date/Time: 3/16/05 1700 Asz Casser Orlando Relinguisher: Shipping Receiver: Da canta Shipping Relinquisher: Jacksonville Receiver:

Page 1 of 1

## Chain-of-Custody for AEL Orlando to AEL Tampa

AEL Orlando 528 South North Lake Blvd, Suite 1016 Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A050871 CustomerName: Utilities, Inc. Collector: Roy Mericle AEL Tampa 5810-D Breckinridge Parkway Tampa, FL 33610 813-630-9616 Fax 813-630-4327 Contact Person: Michael Cammarata

l Ch

**Check if Rush** 

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type	(Pres.)
A050871-01	1	Chlorides (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		250mL Poly	
A050871-01	1	Color (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/17/2005		250mL Poly	
A050871-01	1	Cyanide (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		500mL Poly	
A050871-01	1	Fluoride (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		250mL Poly	
A050871-01	1	Fluorides (T)-DW Secondary	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		250mL Poly	
A050871-01	1	MBAS (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/17/2005		500mL Poly	
A050871-01	1	Nitrate (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/17/2005		250mL Poly	
A050871-01	1	Nitrite (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/17/2005		250mL Poly	
A050871-01	-4-	Odor (T)-DW	<b>Drinking Water</b>	<del>3/15/2005-</del>	8:15	3 <del>/15/05-8.38</del>	-3/15/2005		~2 <del>ez. Class da</del> r	
A050871-01	1	pH (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/15/2005	·	250mL Poly	
A050871-01	1	Sulfate (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		250mL Poly	
A050871-01	1	TDS (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/22/2005		500mL Poly	

WS Shipping Receiver: **Orlando Relinquisher:** ups Shipping Relinquisher: Tampa Receiver:

Date/Time: 31505 1700 120 Date/Time: 3/16

Page 1 of 1

	 T	LAB NUMBER		101
871	-+		3/15/05	revised 8/01
A050871	20( 20(	xoN (Ibunna) XoV, XoX,		
A	40 i Via	sOOs	×	
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	slei/ חש 0 <sup>.</sup>			
	snons	ישפרץ וחסרטפחיכב אראפוג גבסטוגבם	× ×	
E53076	BOTTLE SIZE & TYPE		SL=siludgo COUNT	
· E82574 84589 6.0 • E82620	2106 NW 5/11 Place, Sie 1016 - Attamonte Springs, FL 32701 - 407.937.1594 - Fax 401.937.1594 - Fax 401.957.1594 - Fax 400.957.1594 - Fax 401.957.1594 - Fax 400.957.1594 - Fax 400.957.1	Aielch Meruchons r 15 resampling As	A=air SO=601 PLING MATRIX TIME 0815 DW 1 1 2	m <b>7</b>
x 904.363.9354 113.630.4327 • El • Fax 352.367.00	Weath	KMGOAW Therskielck S. Meric Kaspecial INSTRUCTIONS: ClEWY IS FRAM	OIL SAMP BATE DATE	L received
)4.363.9350 • Fa 630.9616 • Fax 8	ngs, FL 32701 •	NUMBER. XMG	ator Grab Bratel osuffate)	
Iced onmental Laboratories, Inc. 6601 Southpoint Pkwy - Jacksmoville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574 9610 Princess Paint Ave. • Tampaville, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589 9610 Princess Paint Ave. • Tampaville, FL 33660 • 352.367.1500 • Fax 352.367.0050	1016 • Altamonte Spr PROJECT NAME:	P.O. NUMBERPROJECT NUMBER: XYNG PROJECT LOCATTON: WCATTHEY'S FAX: SAMPLED BY: XOY J. N SAMPLED BY: REMARKSSEECAL ODAR 15 6M1796D CIENTY NYM PRJOCH	u Tr	s Bl.
atories, Inc. kwy Jacksonv m Ave Tampa	Bivd. Ste 1016	ALC-	Tace water GW=ground water DW=din Tace water DW=din POC POC S=(H2SO4 N=(HNO3) T=(Sodiu thod Sample Kit	
Advanced Environmental Laboratories, Inc. 6601 Southpoint Pkwy Jank 9610 Princess Pain Ave Tamk	2106 NW 5/m Page 528 S. North Lake Utilities Inc.		SW-surface water SAMPL SAMPL PR SAMPL SAMPL SAMPL SAMPL	Via: Via: Yes L1No
Advanced Environme 9610	N	DDRESS 200 WEATHERS HERE Althorner Sprives . HONE 407-948-4219 DONTACT: By NECICC JURN AROUND TIME: TURN AROUND TIME: RUSH	MW/=waste water Si AMPLE	but Ret Received on Ice
H	CLIENT NAME:	NDRESS. 200 HANGER - 407 PHONE: 407 PHONE: 407 CONTACT: AB	AMVwaste v SAMPLE ID ID	Out Ret Receiv

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## Florida Department of Environmental Protection RELEASE Safe Drinking Water Program Laboratory Reporting Format MAR 2.8 2005

PUBLIC WATER SYSTEM INFORMATIC	<b>DN</b> (to be completed by sampler – Please type or print legibly)
System Name: Weathersfi	eld PWSID. #: 3591451
System Type (check one): XCommunit Address: XOO WCATHEYSE	
city: Altamonte Spring.	State: <u>FL</u> ZIP Code: <u>32714</u>
	9 Fax #: 407-869-6961
E-Mail Address:	
SAMPLE INFORMATION (to be completed	l by sampler)
Sample Number: <u>A050879-</u>	01 Location Code (if known): POE
Sample Date:3/15/05	Sample Time:45 AM (Circle One)
Sample Location (be specific): POE	
Disinfectant Residual (Required when reporting	g results for trihalomethanes and haloacetic acids): mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
	Routine Compliance (with 62-550)
	Confirmation of MCL Exceedance* Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**
Raw (at well or intake)	Clearance (permitting)
Max Residence Time	Other:
Ave Residence Time	Sampling Procedure Used or Other Comments:
Near First Customer	
*See 62-550.500(6) for requirer NOTE: See 62-550.512(3) for a for nitrate or nitrite MCL	attach a results page for each site.
Sampler's Name: <u>Roy Mer</u>	ricle
Sampler's Phone #: 407-948-	4219 Sampler's Fax #:
Sampler's E-Mail Address:	
CERTIFICATION (to be completed by	sampler)
$P = T M_{P}$	aida and a
$ , \underline{\qquad} (Print Name)$	ricle, Operator, (Print Title)
	ve public water system and sample collection information is
Signature:	Nu Date: 4-5-05

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

Flori	ida Department (		ection Safe Drinking W rting Format	ater Program Laborator			
	ORY CERTIFICATIO	N INFORMATION (to be con	npleted by lab - Please type or	print legibly)			
LabName:	Advanced Environmental Labs - Orlando		Labs - Orlando Florida Certification #: E530				
	528 S. North Lake E		Certification	Expiration Date: 6/30/2005			
-	Altamonte Springs,			Telephone #: (407) 937-1594			
ANALYSIS	INFORMATION (to						
PWS ID (fr	rom page 1):		Date Sample	(s) Received: 3/15/2005 2:50:0			
	ned Report Number o	r Job ID A050879		From page 1) A050879-01			
-			apter 62-550, F.A.C. (check all				
• • •							
1	norganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts			
	_ All 17		All 21	Trihalomethanes			
	Partial	All Except Dioxin	Partial	Haloacetic Acids			
Ļ		Partial	Radionuclides	Bromate Chlorite			
	Nitrite	Dioxin Only	Single Sample				
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ATTACH C	OCH ANALYTE SHEE antiago (Print Name) IY CERTIFY that all a	ET FOR EACH SUBCONTRA CER , Laboratory Manager	TIFICATION	Il requirements of the $\frac{1}{24}$			
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6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.
Project Name:	Weathersfield
Project Number:	
PWS ID#:	
Attention:	Kathy Sillitoe

Phone Number: 8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

 Report No.:
 A050879

 Date Sampled:
 3/15/2005

 Date Received:
 3/15/05 14:50

 Date Reported:
 3/24/2005

#### **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: Weathersfield

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

1920	Odor	3.0	TON	4.0		SM2150B	1.0	3/16/2005	13:15	E82574
Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL		nalysis Time	DOH Lab Cert. #
Seconda	ary Contaminants									
Sample I	Number: A050879-01							Shipping method.	Giletit	
	Site: Point of Entry							Shipping Method:		
Client Sa	mple ID: 1							Sampled By:	Roy M	ericle
P	WS ID#:									
	Matrix: Drinking Water							Date/Time Received	3/15/0	5 14:50
Proje	ct Name: Weathersfield							Date/Time Sampled	03/15	/05 14:45
	Client: Utilities, Inc.							Report No.	: A050	)879

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



Advanced Environmental Labs Inc

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

R:-

Client:	UTILITIES, INC. (UTL-A)	Project name: WEATHERSFIELD
Date/Time Rcvd:	3/15/05 14.50	Log-In request number: A050871
Received by:	V	Completed by:

## **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)	2				
Temp taken from	□ Temp blank ☑ Cooler	Temp blank     Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank     Cooler
Temp measured with	IR gun Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):

## **Other Information:**

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
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)?			
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?			
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?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: □ NO ICE □ BLUE ICE	1		
13.	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			/
	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?		1	

## Kit ID

Comments:

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<b>k</b>	
AEL Orlando	
528 South North Lake	Bivd, S
Altamonte Springs FL	32701
Contact Person: Myrr	a Santiago
Project #:	A050879
CustomerName:	Utilities, Inc
	Roy Mericle

Lab Code

**Client Sample ID** 

Shipping Relinquisher:

## Chain-of-Custody for AEL Orlando to AEL Jax

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

Check if Rush

Bottle Type (Pres.)

Due Date # Bottles

Lab Code	Client Sample ID	1850	Mauia	Conoct Date	1 14114	10000110 2000		
A050879-01	1	Odor (J)-DW	Drinking Water	3/15/2005	14:45	3/15/05 14:50	3/15/2005	250mL Poly
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						÷	,	
						•		
1								
AH	$\mathcal{O}$		Chinaion	; Receiver:	AR	Duil	Date/T	imo: 3/15/05 1700
1 7 y Unando	Relinquisher:		amphud		4. <del>0</del> 4	The former		

Matrix

Test

Shipping Receiver: <u> 341) (\*</u> Date/Time: 3/14/05 (100 An cum Jacksonville Receiver:

Collect Date / Time Receive Date

Page 1 of 1

Ð	U Jack U Tamp U Gain	mental Laborat sonville: 6601 Sou pa: 5810-D B esville: 2106 NW	DTIES, INC. thpoint Parkway, Jacks reckenridge Parkway, T 67th Place, Suite 7, Gi	onville, FL 32216 • (90 ampa, FL 33610 • (813	4) 363-9350 Fax ) 630-9616 Fax	(813) 630-4327				L	A	050	879	
CLIENT NAM				PROJECT NAM	E:				BOTTLE	2				
	utilities.			We	athers Fie	eld			SIZE & TYPE	Dec				
ADDRESS:	200 Weat	hersfield A	1e	P.O. NUMBER /	PROJECT N	UMBER: FN	A GOZW	AR	20					
Altamont	te Springs	IFL 3270, FAX:	1	PROJECT LOC					N E A Q L U					AB
PHONE: 40-	1-948 - 4	LI9 FAX:							Y I S R					N U
000	Poy Mer			SAMPLED BY:	Roy Me	eriele			I E S D					M B E
TURN AROU	IND TIME:	1	REMARKS / SPEC											R
STANDAR	D									2				
🗅 RUSH										0 D O				
WW≈ waste wa	ater SW=su	rface water G	W=ground water	DW=drinking water	OIL A	=air SO=	soil <b>S</b> L	=sludge	Preserv	Ŧ				
SAMPLE ID	)	SAMPLE D	ESCRIPTION	Grab Composit	SAN DATE	IPLING TIME	MATRIX	NO. CONT.						
l		POE		6		1445	DW	1		X				
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							+							
			110 ) T (0.1						ALC: NO.					
Shipment	Method		HNO <sub>3</sub> ) $T = (Sodi$	um iniosultate)	Rel	inquished by:		Date	Time		Becetv	ed by:	Date	Time
Out: / /	Via:	Sample Kit RB AB	Cooler # D/T D/T	2	1aC	<i>Z.W</i>	he	2/15/05	1450	/2	4 <u>·</u>	<u>ر</u>		1150
Ret: / /	Via:	Trip Bl.	0	3								· · · · · · · · · · · · · · · · · · ·		

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Jeb Bush GOVERNOT





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

Page 2 of 26

Laboratory Scope of Accreditation

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

State Laboratory ID: E82574

FL00949 ÉPA Lab Code:

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc.

6601 Southpoint Parkway

## Jacksonville, FL 32216

Matrix: Drinking Water		Cotogory	Certification Type	Effective Dat
Analyte	Method/Tech	Category Other Regulated Contaminants	NELAP	4/4/2002
Sthylbenzene	EPA 502.2	Other Regulated Contaminants Secondary Inorganic Contaminants	NELAP	4/4/2002
ron	EPA 200.7		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
· ·	SM 3112 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Mercury	EPA 200.7	Primary Inorganic Contaminants	• · <u> </u>	2/13/2003
Nickel	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Nitrate Nitrate-nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Niuite	SM 2150 B	Secondary Inorganic Contaminants	NELAP	2/13/2003
Odor Orthophosphate as P	EPA 365.1	Primary Inorganic Contaminants	NELAP	4/4/2002
pH	EPA 150.1	Primary Inorganic Contaminants, Secondary Inorganic Contaminants	NELAP	*•
· · · · · · · · · · · · · · · · · · ·	EPA 160.1	Secondary Inorganic Contaminants	NELAP	4/4/2002
Residue-filterable (TDS)	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/17/2002
Selenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Selenium	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Silver	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Sodium	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Styrene	• •	Secondary Inorganic Contaminants	NELAP	2/13/2003
Sulfate	EPA 375.4	Other Regulated Contaminants	NELAP	4/4/2002
Tetrachloroethylene (Perchloroethylene)	EPA 502.2	Primary Inorganic Contaminants	NELAP	4/4/2002
Thallium	EPA 200.9	Other Regulated Contaminants	NELAP	4/4/2002
Toluene	EPA 502.2	Microbiology	NELAP	4/4/2002
Total coliforms	SM 9222 B	Microbiology	NELAP	9/5/2002
Total coliforms & E. coli	SM 9223 B	Microbiology Other Regulated Contaminants	NELAP	4/4/2002
Total trihalomethanes	EPA 502.2		NELAP	4/4/2002
trans-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Trichloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	7/17/2002
Turbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	4/4/2002
Vinyl chloride	EPA 502.2	Other Regulated Contaminants		4/4/2002
Xylene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	
Zinc	EPA 200.7	Secondary 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 06/30/2004-E82574

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

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by sampler – Please typ	e or print legibly)				
System Name: Weathors field	PWS I.D	# 3591451				
System Type (check one):	Nontransient Noncommunity	Transient Noncommunity				
Address: Weathersfield	d Are.					
Altamonte 9	prings, EC					
City: Altamonte Sp.	state: Fo	ZIP Code: 32714				
Phone #: 407-869-19/	Fax #: 40	7-869-696/				
E-Mail Address:						
SAMPLE INFORMATION (to be completed	by sampler)					
Sample Number:	Location Code (if kn	own):				
Sample Number: <u>4050871</u> Sample Date: <u>3/15/05</u>	Sample Time:	8:15 AM PM (Circle One)				
Sample Location (be specific):						
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids):	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						
Sampler's Name: Koy Mer	icle					
Sampler's Phone #: 467-948-	219 Sampler's Fax #: _					
Sampler's E-Mail Address:	······					
<b>CERTIFICATION</b> (to be completed by	sampler)					
1 Ray J. Mor,	de m	or stor				
(Print Name)		(Print Title)				

do HEREBY CERTIFY that the above public water system and sample collection information is complete and correct.

2her Signature:

Reporting Format 62-550.730 Effective January 1995, Revised January 2004 Date: 5-3-05

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

LABORATORY CERTIFICATION ATTACH CURRENT DOH ANALY		eted by lab - Please type or	print legibly)
LabName: Advanced Environmen	ital Labs - Orlando	Florida	Certification #: E53076
Address: 528 S. North Lake Blv	d., Suite 1016	Certification E	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: <u>3/15/2005 8:38:00</u>
Lab Assigned Report Number or J	ob ID A050871	Sample Number (I	From page 1) A050871-01
Group(s) Analyzed Results attach	ed for compliance with chapte	er 62-550, F.A.C. (check all f	that apply):
Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts
✓ All 17	🗌 All 30	✔ All 21	Trihalomethanes
Partial	All Except Dioxin	Partial	Haloacetic Acids
	Partial	Radionuclides	Bromate
	Dioxin Only	Single Sample	Chlorite
Asbestos Only		Qtrly Composite**	Secondaries
			🗹 All 14
Were any analyses subcontracted	? 🔽 Yes 🗔 No		Partial
If yes, please provide DOH certifica		E84589 E84129	
ATTACH DOH ANALYTE SHEET			
	CERTIF	ICATION	
I, <u>Myrna Santiago</u> , (Print Name)	Laboratory Manager	,	
do HEREBY CERTIFY that all atta National Environmental Laboratory			requirements of the
Signature:	antigo	Date:	4/20/05
* Failure to provide a valid and cur analysis results will result in rejection	on of the report, possible enfo	preement against the public v	nalyte Sheet for the attached vater system for failure to sample,
and may result in notification of the			
** Please provide radiological samp	ble dates and locations for ea	ich quarter.	·····
COMPLIANCE DETERMINATION	(to be completed by DEP of	pr DOH)	
Sample Collection Info Satisfactory	🔄 Yes 📑 No	Sample Analysis Info Sa	tisfactory: 📑 Yes 🗌 No
Replacement Sample(s) Requested (	circle or highlight group(s) above)	Revised Report Reque	sted (circle or highlight group(s) above)
Additional Monitoring Required (	circle or highlight group(s) ab	ove)	
Reason(s): MCL(s) Exceeded	Detectio	n(s)	Incomplete Report
Missing Analyte She Other:		Unsatisfactory	Analysis Unsatisfactory
Person Notified:		Date N	lotified:
Commonte			iumeu.
Date Reviewed:		Reviewing Official:	

L



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

Client: Utilities, Inc.

Project Name:

Project Number:

PWS ID#:

Attention: Kathy Sillitoe

Phone Number: 8002721919

Address: 200 Weathersfield Ave.

Weathersfield

Altamonte Springs, FL 32714

 Report No.:
 A050871

 Date Sampled:
 3/15/2005

 Date Received:
 3/15/05 8:38

 Date Reported:
 4/20/2005

### **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: Weathersfield

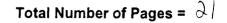
Approved By:

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.



Analytical Report

Client: Utilities, Inc.

Project Name: Weathersfield

Matrix: Drinking Water

PWS ID#:

Client Sample ID: 1

Site: Point of Entry

Sample Number: A050871-01

#### Inorganic Contaminants

 Report No.:
 A050871

 Date/Time Sampled:
 03/15/05
 8:15

 Date/Time Received:
 3/15/05
 8:38

Sampled By: Roy Mericle

Shipping Method: Client drop off

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Anaiysis Date	Analysis Time	DOH Lat Cert. #
	Nitrate + Nitrite (as N)	10	mg/L	0.027	U	SM4500NO3-F	0.027	3/16/2005	17:42	E82574
1005	Arsenic	0.010	mg/L	0.0070	U	E200.7	0.0070	3/18/2005	10:31	E82574
1010	Barium	2.0	mg/L	0.0058	i	E200.7	0.0025	3/18/2005	10:31	E82574
1015	Cadmium	0.0050	mg/L	0.00021	U	E200.7	0.00021	3/18/2005	10:31	E82574
1020	Chromium	0.10	mg/L	0.00016	U	E200.7	0.00016	3/18/2005	10:31	E82574
1024	Cyanide	0.20	mg/L	0.0049	U	SM4500CN-E	0.0049	3/22/2005	9:30	E84589
1025	Fluoride	4.0	mg/L	0.20	I	SM4500F-C	0.061	3/17/2005	13:00	E84589
1030	Lead	0.015	mg/L	0.0013	U	SM3113B	0.0013	3/18/2005	14:08	E82574
1035	Mercury	0.0020	mg/L	0.000020	U	E245.1	0.000020	3/17/2005	12:37	E82574
1036	Nickel	0.10	mg/L	0.0026	U	E200.7	0.0026	3/18/2005	10:31	E82574
1040	Nitrate (as N)	10	mg/L	0.014	U	SM4500NO3-F	0.014	3/16/2005	17:42	E82574
1040	Nitrate (as N)	10	mg/L	0.027	U	SM4500NO3-F	0.027	3/17/2005	8:40	E84589
1041	Nitrite (as N)	1.0	mg/L	0.034	U	SM4500NO3-F	0.034	3/17/2005	8:40	E84589
1041	Nitrite (as N)	1.0	mg/L	0.013	i	SM4500NO3-F	0.013	3/16/2005	17:42	E82574
1045	Selenium	0.050	mg/L	0.0016	U	SM3113B	0.0016	3/16/2005	11:15	E82574
1052	Sodium	160	mg/L	13		E200.7	0.0084	3/18/2005	10:31	E82574
1074	Antimony	0.0060	mg/L	0.0025	U	SM3113B	0.0025	3/17/2005	13:50	E82574
1075	Beryllium	0.0040	mg/L	0.000027	U	E200.7	0.000027	3/18/2005	10:31	E82574
1085	Thallium	0.0020	mg/L	0.0016	U	E200.9	0.0016	3/18/2005	16:43	E82574

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

U The compound was analyzed for but not detected.

MDL Method Reporting Limit

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

Analytical Report

Client: Utilities, Inc.

Project Name: Weathersfield

Matrix: Drinking Water

#### PWS ID#:

Client Sample ID: 1

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Site: Point of Entry Sample Number: A050871-01

# Report No.: A050871 Date/Time Sampled: 03/15/05 8:15 Date/Time Received: 3/15/05 8:38

Sampled By: Roy Mericle Shipping Method: Client drop off

#### Secondary Contaminants

Seconda	ary containinants			Analysis			_	Analysis	Analysis	DOH Lab
Contam ID	Contam Name	MCL	Units	Results	Qualifier	Analytical Method	Lab MDL	Date	Time	Cert. #
1002	Aluminum	0.20	mg/L	0.025	ł	E200.7	0.017	3/18/2005	10:31	E82574
1017	Total Chlorides	250	mg/L	21		E325.3	1.3	3/21/2005	11:16	E84589
1022	Copper	1.0	mg/L	0.0046		E200.7	0.00096	3/18/2005	10:31	E82574
1025	Fluoride	2.0	mg/L	0.20	i	SM4500F-C	0.061	3/17/2005	13:00	E84589
1028	Iron	0.30	mg/L	0.016	U	E200.7	0.016	3/18/2005	10:31	E82574
032	Manganese	0.050	mg/L	0.0020		E200.7	0.00022	3/18/2005	10:31	E82574
050	Silver	0.10	mg/L	0.0019	บ	E200.7	0.0019	3/18/2005	10:31	E82574
055	Sulfate (as SO4)	250	mg/L	5.2	i	E375.4	1.4	3/29/2005	9:10	E84589
095	Zinc	5.0	mg/L	0.0077	i	E200.7	0.0072	3/18/2005	10:31	E82574
905	* Color	150	olor Uni	5.0	U	SM2120B	5.0	3/16/2005	16:30	E84589
925	pH	6.5 <b>-8</b> .5 p	oH Units	7.95	, Q	E150.1	1.0	3/16/2005	16:45	E84589
930	Total Dissolved Solids	500	mg/L	200		E160.1	10	3/17/2005	16:00	E84589
2905	MBAS, as LAS, mol. wt. 340	0.50	mg/L	0.035	U	E425.1	0.035	3/16/2005	15:30	E84589

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

Q Sample held beyond the acceptable hold time.

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

Analytical Report

Client: Utilities, Inc.

Project Name: Weathersfield

Matrix: Drinking Water

PWS ID#:

Client Sample ID: 1

Site: Point of Entry

Sample Number: A050871-01

Report No.: A050871

Date/Time Sampled: 03/15/05 8:15 Date/Time Received: 3/15/05 8:38

Sampled By: Roy Mericle Shipping Method: Client drop off

#### Volatile Organics

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	RDL	Analysis Date	Analysis Time	DOH Lab Cert. #
2378	1,2,4-Trichlorobenzene	70	ug/L	0.20	U	E502.2	0.20	1.0	3/16/2005	19:26	E82574
2380	Cis-1,2-dichloroethene	70	ug/L	0.20	U	E502.2	0.20	1.0	3/16/2005	19:2 <b>6</b>	E82574
2955	Xylenes (Total)	10000	ug/L	0.50	U	E502.2	0.50	1.0	3/16/2005	19:26	E82574
2964	Methylene Chloride	5.0	ug/L	0.44	U	E502.2	0.44	1.0	3/16/2005	19:26	E82574
2968	1,2-Dichlorobenzene	600	ug/L	0.26	U	E502.2	0.26	1.0	3/16/2005	19:26	E82574
2969	1,4-Dichlorobenzene	75	ug/L	0.11	U	E502.2	0.11	1.0	3/16/2005	19:26	E82574
2976	Vinyl Chloride	1.0	ug/L	0.29	U	E502.2	0.29	1.0	3/16/2005	19:26	E82574
2977	1,1-Dichloroethene	7.0	ug/L	0.21	U	E502.2	0.21	1.0	3/16/2005	19:2 <b>6</b>	E82574
2979	Trans-1,2-dichloroethene	100	ug/L	0.27	U	E502.2	0.27	1.0	3/16/2005	19:26	E82574
2980	1,2-Dichloroethane	3.0	ug/L	0.22	U	E502.2	0.22	1.0	3/16/2005	19:26	E82574
2981	1,1,1-Trichloroethane	200	ug/L	0.33	U	E502.2	0.33	1.0	3/16/2005	19:26	E82574
2982	Carbon Tetrachloride	3.0	ug/L	0.31	U	E502.2	0.31	1.0	3/16/2005	19:26	E82574
2983	1,2-Dichloropropane	5.0	ug/L	0.22	U	E502.2	0.22	1.0	3/16/2005	19:26	E82574
2984	Trichloroethene	3.0	ug/L	0.28	U	E502.2	0.28	1.0	3/16/2005	19:26	E82574
2985	1,1,2-Trichloroethane	5.0	ug/L	0.32	U	E502.2	0.32	1.0	3/16/2005	19:26	E82574
2987	Tetrachloroethene	3.0	ug/L	0.31	υ	E502.2	0.31	1.0	3/16/2005	19:26	E82574
2989	Chlorobenzene	100	ug/L	0.18	U	E502.2	0.18	1.0	3/16/2005	19:26	E82574
2990	Benzene	1.0	ug/L	0.21	U	E502.2	0.21	1.0	3/16/2005	19:26	E82574
2991	Toluene	1000	ug/L	0.10	U	£502.2	0.10	1.0	3/16/2005	19:26	E82574
2992	Ethylbenzene	700	ug/L	0.15	U	E502.2	0.15	1.0	3/16/2005	19:2 <b>6</b>	E82574
2996	Styrene	100	ug/L	0.14	U	E502.2	0.14	1.0	3/16/2005	19:2 <b>6</b>	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

## SOUTHERN ANALYTICAL LABORATORIES, INC.

110 BA MAEW BOULEVARD, OLDSMAR, FL 34877 B13-855-1844 FA 213-855-8110

Advanced Environmental Laboratories, Inc. 528 S. North Lake Blvd. Suite 1016 Altamonte Springs, FL 32701March 25, 2005 Project No: 49354

## Laboratory Report

FDEP Report form attached for the following samples:

Client Project Description: A050871

Sample Number 49354.01 Sample Description A050871-01 Date & Time Collected

03/15/05 08:15

 Date & Time Received

 03/18/05
 09:50

Test results presented in this report meet all the requirements of the NELAC standards.

FDOH Laboratory No. E84129 NELAP Accredited

Approved By: Francis I. Daniels, Laboratory Director Leslie C. Boardman, Q.A. Manager

## SOUTHERN ANALYTICAL LABORATORIES, INC.

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March 25, 2005

PWS ID:

Sample No.: 49354.01

Advanced Environmental Laboratories, Inc.

## A050871

Sample ID: A050871-01

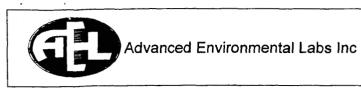
## Synthetic Organics 62-550.310(4)(b)

· · ·												
Contaminant	Contaminant			Analysis		Analytical		RDL	Extraction		Analysis	DOH Lab
ID	Name	· · · · · · · · · · · · · · · · · · ·	Units	Result	Qualifier*	Method	Lab MDL	**	Date	Analysis Date	Time	Certification#
2005	Endrin	2	µg/L	0.1	Û	EPA 525.2	0.1	0.01	03/22/05	03/23/05	04:23	E84129
2010	Lindane	0.2	µg/L	0.06	U	EPA 525.2	0.06	0.02	03/22/05	03/23/05	04:23	E84129
2015	Methoxychlor	40	hð\r	0.05	U	EPA 525.2	0.05	0.1	03/22/05	03/23/05	04:23	E84129
2020	Toxaphene	3	µg/L	0.5	U	EPA 508.1	0.5	1	03/22/05	03/24/05	12:45	E84129
2031	Dalapon	200	µg/L	1	U	EPA 515.3	1	1	03/22/05	03/23/05	10:46	E84129
2032	Diquat	20	µg/L	1	U	EPA 549.2	1	0.4	03/21/05	03/22/05	17:26	E84129
2033	Endothail	100	µg/L	20	U	EPA 548.1	20	9	03/22/05	03/23/05	18:00	E84129
2034	Glyphosate	700	µg/L	10	U	EPA 547	10	6		03/22/05	19:54	E84129
2035	Di(2-ethylhexyl)adipate	400	µg/L	0.3	U	EPA 525,2	0.3	0.6	03/22/05	03/23/05	04:23	E84129
2036	Oxamyl (Vydate)	200	µg/L	0.5	U	EPA 531.1	0.5	2		03/21/05	18:21	E84129
2037	Simazine	4	µg/L	0.07	U	EPA 525.2	0.07	0.07	03/22/05	03/23/05	04:23	E84129
2039	Di(2-ethylhexyl)phthalate	6	µg/L	1.0	U	EPA 525.2	1.0	0.6	03/22/05	03/23/05	04:23	E84129
2040	Picloram	500	µg/L	0.75	U	EPA 515.3	0.75	0.1	03/22/05	03/23/05	10:46	E84129
2041	Dinoseb	7	µg/L	0.5	U	EPA 515.3	0,5	0.2		03/23/05	10:46	E84129
2042	Hexachlorocyclopentadiene	50	µg/L	0.2	Ú	EPA 525.2	0.2	0.1	03/22/05	03/23/05	04:23	E84129
2046	Carbofuran	40	µg/L	0.5	U	EPA 531.1	0.5	0.9		03/21/05	18:21	E84129
2050	Atrazine	3	µg/L	0.06	U	EPA 525.2	0.06	0.1	03/22/05	03/23/05	04:23	E84129
2051	Alachlor	2	μ <b>g</b> /L	0.2	U	EPA 525.2	0.2	0.2		03/23/05	04:23	E84129
2065	Heptachlor	0.4	µg/L	0.08	Ŭ	EPA 525.2	0.08	0.04		03/23/05	04:23	E84129
2067	Heptachlor Epoxide	0.2	µg/L	0.1	Ŭ	EPA 525.2	0.1	0.02		03/23/05	04:23	E84129
2105	2,4-D	70	µg/L	1	Ū	EPA 515.3	1	0.1		03/23/05	10:46	E84129
2110	2,4,5-TP (Silvex)	50	µg/L	0.25		EPA 515.3	0.25	0.2		03/23/05	10:46	E84129
2274	Hexachiorobenzene	1	µg/L	0.05		EPA 525.2	0.05	0.1		03/23/05	04:23	E84129
2306	Benzo(a)pyrene	0.2	µg/L	0.1	Ŭ	EPA 525.2	0.03	0.02		03/23/05	04:23	E84129
2326	Pentachlorophenol	1	µg/L	0.1	ŭ	EPA 515.3	0.1	0.02		03/23/05	10:46	E84129
2383	(PCBs)	0.5	µg/L	0.2		EPA 508.1	0.1	0.04		03/24/05	10.40	E84129
2931	Dibromochloropropane	0.0	µg/L	0.2	-	EPA 506.1	0.2	0.02		03/22/05	03:45	E84129
2946	Ethylene Dibromide (EDB)	0.02	μg/L	0.005		EPA 504.1						E84129
2959	Chlordane	2		0.005		EPA 504.1 EPA 508.1	0.005 0.05	0.01 0.2		03/22/05 03/24/05	03:45 12:45	E84129
• Au-66		. 4	L9	0.00	<b>.</b> .	LFA 000, 1	0.05	U.2	00122100	03/24/03	14.90	

\* Qualifiers:

\*\* Non-detects with a reported lab MDL <50% of the MCL are acceptable for compliance with 62-550.310(4)(b).

U Analyte was undetected. Indicated concentration is method detection limit.



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

Client:	UTILITIES, INC.	(UTL-A)	Project name:	WEATH	ERSFIELD
Date/Time Rcvd:	3/15/05	08.38	Log-In request number:	A050871	1
Received by:		$\mathbf{V}_{}$	Completed by:	Y	

## **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)	2				
Temp taken from	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank     Cooler	Temp blank     Cooler	Temp blank     Cooler	Cooler
Temp measured with	IR gun Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	<ul> <li>IR gun</li> <li>Thermometer (enter ID):</li> </ul>

## Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
	re custody seals on shipping container(s) intact?			1
2. Wer	e custody papers properly included with samples?			
	re custody papers properly filled out (ink, signed, match labels)?	<		
4. Did	all bottles arrive in good condition (unbroken)?	<ul> <li>✓</li> </ul>		
	re all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
	the sample labels agree with the chain of custody?	1		
7. Wei	re correct bottles used for the tests indicated?	1		
	re proper sample preservation techniques indicated on the label?	1		
9. Wei	re samples received within holding times?			
10. Wer	re all VOA vials checked for the presence of air bubbles?			
11. Wer	re there air bubbles present in the VOA vials?			1
12. Wer	re samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE			
13. Was	s the cooler temperature less than 6°C?			
14. Wer	re sample pHs checked and recorded by Sample control?			/
NO	TE: VOA samples are checked by laboratory analysts.			•
	re the sample containers provided by AEL?			
	re samples accepted into the laboratory?			
17. Was	s it necessary to split samples into other bottles?			

## Kit ID

Comments:

.





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

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## Laboratory Scope of Accreditation

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State Laboratory ID: E84129

,

EPA Lab Code: FL00237

(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677 Matrix: Drinking Water

Matrix: Drinking Water Analyte	Method/Tech	Category	Certification Type	Effective Date
1,1,1,2-Tetrachloroethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1,1,1-Trichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,1,2,2-Tetrachloroethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1,1,2-Trichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,1-Dichloroethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1.1-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,1-Dichloropropene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1,2,3-Trichlorobenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003
1,2,3-Trichloropropane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1,2,4-Trichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,2,4-Trimethylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003
1,2-Dibromo-3-chloropropane (DBCP)	EPA 504.1	Synthetic Organic Contaminants	NELAP	3/22/2002
1,2-Dibromoethane (EDB, Ethylene dibromide)	EPA 504.1	Synthetic Organic Contaminants	NELAP	3/22/2002
1,2-Dichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,2-Dichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,2-Dichloropropane	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
1,3,5-Trimethylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003
1,3-Dichlorobenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1,3-Dichloropropane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
1,4-Dichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
2,2-Dichloropropane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
2,4,6-Trichlorophenol	EPA 604	Group III Unregulated Contaminants	NELAP	3/22/2002
2,4,6-Trichlorophenol	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
2,4-D	EPA 515.1	Synthetic Organic Contaminants	NELAP	3/22/2002
2,4-D	EPA 515.3	Synthetic Organic Contaminants	NELAP	3/22/2002
2,4-Dinitrotoluene (2,4-DNT)	EPA 525.2	Group III Unregulated Contaminants	NELAP	3/6/2003
2,4-Dinitrotoluene (2,4-DNT)	EPA 609	Group III Unregulated Contaminants	NELAP	3/22/2002
2,4-Dinitrotoluene (2,4-DNT)	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
2,6-Dinitrotoluene (2,6-DNT)	EPA 525.2	Group III Unregulated Contaminants	NELAP	3/6/2003
2,6-Dinitrotoluene (2,6-DNT)	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
2-Chlorophenol	EPA 604	Group III Unregulated Contaminants	NELAP	3/22/2002
2-Chlorophenol	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
2-Chlorotoluene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
2-Methyl-4,6-dinitrophenol	EPA 604	Group III Unregulated Contaminants	NELAP	3/22/2002
2-Methyl-4,6-dinitrophenol	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
3-Hydroxycarbofuran	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/22/2002

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

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# Laboratory Scope of Accreditation

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State Laboratory ID: E84129

EPA Lab Code: FL00237

(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677 Matrix: Drinking Water

Matrix: Drinking Water Analyte	Method/Tech	Category	Certification Type	Effective Date
4,4'-DDD	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
1,4'-DDD	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
4,4'-DDE	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
I,4'-DDE	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
I,4'-DDT	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
I,4'-DDT	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
-Chlorotoluene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
Isopropyltoluene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003
Acetochlor	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/6/2003
Acifluorfen	EPA 515.3	Group I Unregulated Contaminants	NELAP	3/22/2002
Machlor	EPA 507	Synthetic Organic Contaminants	NELAP	3/22/2002
lachlor	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002
lachior	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
Aldicarb (Temik)	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/22/2002
Idicarb sulfone	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/22/2002
Idicarb sulfoxide	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/22/2002
Aldrin	EPA 508	Group I Unregulated Contaminants	NELAP	3/22/2002
Idrin	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
ldrin	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
lkalinity as CaCO3	SM 2320 B	Primary Inorganic Contaminants	NELAP	3/22/2002
lpha-BHC (alpha-Hexachlorocyclohexane)	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
Aluminum	EPA 200.7	Secondary Inorganic Contaminants	NELAP	3/22/2002
Inetryn	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/6/2003
ntimony	SM 3113 B	Primary Inorganic Contaminants	NELAP	3/22/2002
rsenic	SM 3113 B	Primary Inorganic Contaminants	NELAP	3/22/2002
trazine	EPA 507	Synthetic Organic Contaminants	NELAP	3/22/2002
trazine	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002
trazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
arium	EPA 200.7	Primary Inorganic Contaminants	NELAP	3/22/2002
enzene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
enzo(a)pyrene	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
enzo(a)pyrene	EPA 550.1	Synthetic Organic Contaminants	NELAP	3/22/2002
eryllium	EPA 200.7	Primary Inorganic Contaminants	NELAP	3/22/2002
eryllium	SM 3113 B	Primary Inorganic Contaminants	NELAP	3/22/2002
eta-BHC (beta-Hexachlorocyclohexane)	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
is(2-Ethylhexyl) phthalate (DEHP)	EPA 506	Synthetic Organic Contaminants	NELAP	3/22/2002

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EPA Lab Code: FL00237

(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677 Matrix: Drinking Water

Matrix: Drinking Water	Method/Tech	Category	Certification Type	Effective Date
his(2-Ethylhexyl) phthalate (DEHP)	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
Bromacil	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/6/2003
Bromate	EPA 300.0	Primary Inorganic Contaminants	NELAI	3/22/2002
Bromide	EPA 300.0	Primary Inorganic Contaminants	NELAP	3/22/2002
Bromoacetic acid	EPA 552.2	Synthetic Organic Contaminants, Group I Unregulated Contaminants	NELAP	3/22/2002
Bromobenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
Bromochloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	7/2/2002
Bromochloromethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003
Bromodichloromethane	EPA 502.2	Group II Unregulated Contaminants,Other Regulated Contaminants	NELAP	3/22/2002
Bromoform	EPA 502.2	Other Regulated Contaminants,Group II Unregulated Contaminants	NELAP	3/22/2002
Butachlor	EPA 507	Group I Unregulated Contaminants	NELAP	3/22/2002
Butachlor	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
Butyl benzyl phthalate	EPA 606	Group III Unregulated Contaminants	NELAP	3/22/2002
Butyl benzyl phthalate	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
Cadmium	EPA 200.7	Primary Inorganic Contaminants	NELAP	3/22/2002
Cadmium	SM 3113 B	Primary Inorganic Contaminants	NELAP	3/22/2002
Carbaryl (Sevin)	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/22/2002
Carbofuran (Furaden)	EPA 531.1	Synthetic Organic Contaminants	NELAP	3/22/2002
Carbon tetrachloride	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
Chlordane (tech.)	EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002
Chlordane (tech.)	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002
Chloride	EPA 300.0	Secondary Inorganic Contaminants	NELAP	3/22/2002
Chloride	EPA 325.2	Secondary Inorganic Contaminants	NELAP	3/22/2002
Chlorine	SM 4500-Cl G	Primary Inorganic Contaminants	NELAP	3/22/2002
Chlorite	EPA 300.0	Primary Inorganic Contaminants	NELAP	3/22/2002
Chloroacetic acid	EPA 552.2	Synthetic Organic Contaminants,Group I Unregulated Contaminants	NELAP	3/22/2002
Chlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
Chloroethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
Thloroform	EPA 502.2	Group II Unregulated Contaminants,Other Regulated Contaminants	NELAP	3/22/2002
Chromium	EPA 200.7	Primary Inorganic Contaminants	NELAP	3/22/2002
is-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002

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NON-TRANSFERABLE 07/19/2004-E84129

~ 1





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

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Laboratory Scope of Accreditation

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EPA Lab Code: FL00237

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E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677

Matrix: Drinking Water Analyte	Method/Tech	Category	Certification Type	Effective Date
cis-1,3-Dichloropropene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
Color	SM 2120 B	Secondary Inorganic Contaminants	NELAP	3/22/2002
Conductivity	SM 2510 B	Primary Inorganic Contaminants	NELAP	3/22/2002
Copper	EPA 200.7	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	NELAP	3/22/2002
Cyanide	SM 4500-CN E	Primary Inorganic Contaminants	NELAP	3/22/2002
Daethal (DCPA)	EPA 515.1	Group I Unregulated Contaminants	NELAP	3/22/2002
Dacthal (DCPA)	EPA 515.3	Group I Unregulated Contaminants	NELAP	3/22/2002
Dalapon	EPA 515.1	Synthetic Organic Contaminants	NELAP	3/22/2002
Dalapon	EPA 515.3	Synthetic Organic Contaminants	NELAP	3/22/2002
DCPA di acid degradate	EPA 515.3	Group I Unregulated Contaminants	NELAP	3/22/2002
DCPA mono-acid	EPA 515.3	Group I Unregulated Contaminants	NELAP	3/22/2002
delta-BHC	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
Di(2-ethylhexyl)adipate	EPA 506	Synthetic Organic Contaminants	NELAP	3/22/2002
Di(2-ethylhexyl)adipate	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
Dibromoacetic acid	EPA 552.2	Group I Unregulated Contaminants,Synthetic Organic Contaminants	NELAP	3/22/2002
Dibromochloromethane	EPA 502.2	Other Regulated Contaminants,Group II Unregulated Contaminants	NELAP	3/22/2002
Dibromomethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
Dicamba	EPA 515.1	Group I Unregulated Contaminants	NELAP	3/22/2002
Dicamba	EPA 515.3	Group I Unregulated Contaminants	NELAP	3/22/2002
Dichloroacetic acid	EPA 552.2	Group I Unregulated Contaminants,Synthetic Organic Contaminants	NELAP	3/22/2002
Dichlorodifluoromethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
Dichloromethane (DCM, Methylene chloride)	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
Dieldrin	EPA 508	Group I Unregulated Contaminants	NELAP	3/22/2002
Dieldrin	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
Dieldrin	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
Diethyl phthalate	EPA 606	Group III Unregulated Contaminants	NELAP	3/22/2002
Diethyl phthalate	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
Dimethyl phthalate	EPA 606	Group III Unregulated Contaminants	NELAP	3/22/2002
Dimethyl phthalate	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
Di-n-butyl phthalate	EPA 606	Group III Unregulated Contaminants	NELAP	3/22/2002
Di-n-butyl phthalate	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
· ·	EPA 606	Group III Unregulated Contaminants	NELAP	3/22/2002

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

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State Laboratory ID: E84129

EPA Lab Code: FL00237

(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677 Matrix: Drinking Water

Analyte	Method/Tech	Category	Certification Type	Effective Date
Di-n-octyl phthalate	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
Dinoseb (2-sec-butyl-4,6-dinitrophenol, DNBP)	EPA 515.1	Synthetic Organic Contaminants	NELAP	3/22/2002
Dinoseb (2-sec-butyl-4,6-dinitrophenol, DNBP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	3/22/2002
Diquat	EPA 549.2	Synthetic Organic Contaminants	NELAP	3/22/2002
Endosulfan I	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
Endosulfan II	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
Endosulfan sulfate	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
Endothall	EPA 548.1	Synthetic Organic Contaminants	NELAP	3/22/2002
Endrin	EPA 508	Synthetic Organic Contaminants	NELAP	7/19/2002
Endrin	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002
Endrin	EPA 525.2	Synthetic Organic Contaminants	NELAP	7/19/2002
Endrin aldehyde	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
EPTC (Eptam, s-ethyl-dipropyl thio carbamate)	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
Ethylbenzene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
Fecal coliforms	SM 9221 E	Microbiology	NELAP	3/22/2002
Fluoride	EPA 300.0	Primary Inorganic Contaminants	NELAP	3/22/2002
Fluoride	SM 4500 F-C	Secondary Inorganic Contaminants,Primary Inorganic Contaminants	NELAP	3/22/2002
gamma-BHC (Lindane, gamma-Hexachlorocyclohexane)	EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002
gamma-BHC (Lindane, gamma-Hexachlorocyclohexane)	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002
gamma-BHC (Lindane, gamma-Hexachlorocyclohexane)	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
Jlyphosate	EPA 547	Synthetic Organic Contaminants	NELAP	3/22/2002
Gross-alpha	EPA 00- 02	Radiochemistry	NELAP	4/1/2004
Gross-alpha	EPA 900	Radiochemistry	NELAP	4/1/2004
Gross-beta	EPA 900	Radiochemistry	NELAP	4/1/2004
Heptachlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002
Heptachlor	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002
Heptachlor	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
leptachlor epoxide	EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002
feptachlor epoxide	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002
leptachlor epoxide	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
lexachlorobenzene	EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002
Hexachlorobenzene	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002
lexachlorobenzene	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002

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(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677

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Nitrite     EPA 353.2     Primary Inorganic Contaminants     NELAP     3/22/2002       Nitrite     SM 4500-NO2 B     Primary Inorganic Contaminants     NELAP     3/22/2002       Norflurazon     EPA 525.2     Synthetic Organic Contaminants     NELAP     3/6/2003       n-Propylbenzene     EPA 502.2     Group II Unregulated Contaminants     NELAP     3/6/2003			Primary Inorganic Contaminants	NELAP	3/22/2002
Nitrite     SM 4500-NO2 B     Primary Inorganic Contaminants     NELAP     3/22/2002       Norflurazon     EPA 525.2     Synthetic Organic Contaminants     NELAP     3/6/2003       n-Propylbenzene     EPA 502.2     Group II Unregulated Contaminants     NELAP     3/6/2003				NELAP	3/22/2002
Norflurazon     EPA 525.2     Synthetic Organic Contaminants     NELAP     3/6/2003       h-Propylbenzene     EPA 502.2     Group II Unregulated Contaminants     NELAP     3/6/2003			, -	NELAP	3/22/2002
n-Propylbenzene EPA 502.2 Group II Unregulated Contaminants NELAP 3/6/2003				NELAP	3/6/2003
					3/6/2003
	Odor	SM 2150 B	Secondary Inorganic Contaminants		

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards. NON-TRANSFERABLE 07/19/2004-E84129

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Jeb Bush Governor





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

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### Laboratory Scope of Accreditation

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

State Laboratory ID: E84129

EPA Lab Code: FL00237

(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677 Matrix: Drinking Water

Matrix: Drinking water Analyte	Method/Tech	Category	Certification Type	Effective Date
Orthophosphate as P	EPA 300.0	Primary Inorganic Contaminants	NELAP	3/22/2002
Oxamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	3/22/2002
PCBs	EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002
PCBs	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002
Pentachlorophenol	EPA 515.1	Synthetic Organic Contaminants	NELAP	3/22/2002
Pentachlorophenol	EPA 515.3	Synthetic Organic Contaminants	NELAP	3/22/2002
Pentachlorophenol	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
pH	EPA 150.1	Secondary Inorganic Contaminants	NELAP	3/22/2002
Phenol	EPA 604	Group III Unregulated Contaminants	NELAP	3/22/2002
Phenol	EPA 625	Group III Unregulated Contaminants	NELAP	3/22/2002
Picloram	EPA 515.1	Synthetic Organic Contaminants	NELAP	3/22/2002
Picloram	EPA 515.3	Synthetic Organic Contaminants	NELAP	3/22/2002
Propachlor (Ramrod)	EPA 508	Group I Unregulated Contaminants	NELAP	3/22/2002
Propachlor (Ramrod)	EPA 508.1	Group I Unregulated Contaminants	NELAP	7/19/2002
Propachlor (Ramrod)	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
Radium-226	EPA 903.1	Radiochemistry	NELAP	4/1/2004
Radium-228	EPA Ra-05	Radiochemistry	NELAP	4/1/2004
sec-Butylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003
Selenium	EPA 200.7	Primary Inorganic Contaminants	NELAP	3/22/2002
Selenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	3/22/2002
Silver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	3/22/2002
Silver	SM 3113 B	Secondary Inorganic Contaminants	NELAP	3/22/2002
Silvex (2,4,5-TP)	EPA 515.1	Synthetic Organic Contaminants	NELAP	3/22/2002
Silvex (2,4,5-TP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	3/22/2002
Simazine	EPA 507	Synthetic Organic Contaminants	NELAP	3/22/2002
Simazine	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002
Simazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/22/2002
Sodium	EPA 200.7	Primary Inorganic Contaminants	NELAP	3/22/2002
Styrene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
Sulfate	EPA 300.0	Secondary Inorganic Contaminants	NELAP	3/22/2002
Surfactants - MBAS	SM 5540 C	Secondary Inorganic Contaminants	NELAP	3/22/2002
Ferbacil	EPA 525.2	Group I Unregulated Contaminants	NELAP	3/22/2002
ert-Butylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/6/2003
Tetrachloroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
Thallium	EPA 200.9	Primary Inorganic Contaminants	NELAP	3/22/2002
Toluene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002

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John O. Agwunobl, M.D.,M.B.A. Secretary

Page 8 of 32

### Laboratory Scope of Accreditation

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

State Laboratory ID: E84129

EPA Lab Code: FL00237

(813) 855-1844

E84129 Southern Analytical Laboratories, Inc. 110 Bayview Blvd Oldsmar, FL 34677 Matrix: Drinking Water

Matrix: Drinking Water Analyte	Method/Tech	Category	Certification Type	Effective Date
Total coliforms	SM 9222 B	Microbiology	NELAP	3/22/2002
Total coliforms & E. coli	SM 9223 B	Microbiology	NELAP	3/22/2002
Total dissolved solids	SM 2540 C	Secondary Inorganic Contaminants	NELAP	3/22/2002
Total haloacetic acids	EPA 552.2	Synthetic Organic Contaminants	NELAP	3/22/2002
Fotal nitrate-nitrite	EPA 300.0	Primary Inorganic Contaminants	NELAP	3/22/2002
Fotal nitrate-nitrite	EPA 353.2	Primary Inorganic Contaminants	NELAP	3/22/2002
Fotal trihalomethanes	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
Toxaphene (Chlorinated camphene)	EPA 508	Synthetic Organic Contaminants	NELAP	3/22/2002
Foxaphene (Chlorinated camphene)	EPA 508.1	Synthetic Organic Contaminants	NELAP	7/19/2002
rans-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
rans-1,3-Dichloropropylene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
Frichloroacetic acid	EPA 552.2	Synthetic Organic Contaminants,Group I Unregulated Contaminants	NELAP	3/22/2002
Frichloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
Frichlorofluoromethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/22/2002
Furbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	3/22/2002
JV 254	SM 5910 B	Primary Inorganic Contaminants	NELAP	3/6/2003
/inyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
(ylene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	3/22/2002
Linc	EPA 200.7	Secondary Inorganic Contaminants	NELAP	3/22/2002

473:37

THE NATER SPILOT Chain-of-Custody for AEL Olando to Southern Analytical

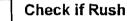
AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A050871

THEN ADER 581605 Southern Analytical STOLE. HWYZZ PANAMACITY, FC 3240 \_110 Bayview-Bivd. Oldsmar, FL 34677 850-871-1900 813-855-1844 Gontact Person: Sample Receiving SAmple receiving

Department: SA



_	Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles Bottle Type (Pres.)
	A050871-01	1	62-550 549.2	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/22/2005	3×ILG,ST
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ΰY	A050871-01	1	62-550 547	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/22/2005	3x YomL TV ST
/	A050871-01	1	62-550 531.1	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005	IXYUMEN, MEMA, ST
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Ì	A050871-01	1	62-550 515.1	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005	- 4x yane V, ST
	A050871-01	1	62-550 508.1	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/22/2005	
	A050871-01	1	62-550 504.1	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005	

Orlando Relinguisher: YPS 3/15/2005 3:00:30 PM **Shipping Receiver:** Date/Time: 0152 Date/Time: 3/18/05 UPS Harl Shipping Relinquisher: Southern Analytical Receiver: Page 1 of 1

## Chain-of-Custody for AEL Orlando to AEL Jax

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

Check if Rush

Bottle Type (Pres.) **Receive Date** Due Date **# Bottles** Matrix Collect Date / Time Lab Code **Client Sample ID** Test 1L Poly 3/29/2005 -550 Metals ICP (Primary) C **Drinking Water** 3/15/2005 8:15 3/15/05 8:38 A050871-01 1 1L Poly 3/29/2005 3/15/05 8:38 i50 Metals ICP (Secondary) **Drinking Water** 3/15/2005 8:15 A050871-01 1 40mL VOC Vial 3/15/05 8:38 3/29/2005 **Drinking Water** 3/15/2005 8:15 A050871-01 1 62-550 VOCs DW 500mL Poly (HNO3) 3/29/2005 3/15/2005 8:15 3/15/05 8:38 A050871-01 1 Hg (DW) **Drinking Water** 250mL Poly 3/17/2005 Drinking Water 3/15/2005 8:15 3/15/05 8:38 A050871-01 Nitrate (J)-DW 1 250mL Poly 3/29/2005 3/15/05 8:38 A050871-01 Nitrate + Nitrite (J)-DW **Drinking Water** 3/15/2005 8:15 1 250mL Poly 3/15/05 8:38 3/17/2005 3/15/2005 8:15 A050871-01 1 Nitrite (J)-DW Drinking Water 500mL Poly (HNO3) 3/15/2005 3/15/05 8:38 3/29/2005 A050871-01 1 Pb (DW) **Drinking Water** 8:15 3/29/2005 500mL Poly (HNO3) 3/15/2005 8:15 3/15/05 8:38 Sb (DW) **Drinking Water** A050871-01 1 500mL Poly (HNO3) 3/29/2005 A050871-01 1 Se (DW) **Drinking Water** 3/15/2005 8:15 3/15/05 8:38 500mL Poly (HNO3) 3/29/2005 3/15/05 8:38 A050871-01 1 TI (DW) **Drinking Water** 3/15/2005 8:15

Date/Time: 3/15/05 11W Date/Time: 3/16/05 1100 **Shipping Receiver:** Orlando Relinguisher: pa coul Shipping Relinquisher: Jacksonville Receiver:

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

Contact Person: Myrna Santiago

Project #: A050871 CustomerName: Utilities, Inc. Collector: Roy Mericle

Page 1 of 1

## Chain-of-Custody for AEL Orlando to AEL Tampa

AEL Orlando 528 South North Lake Blvd, Suite 1016 Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A050871 CustomerName: Utilities, Inc. Collector: Roy Mericle AEL Tampa 5810-D Breckinridge Parkway Tampa, FL 33610 813-630-9616 Fax 813-630-4327 Contact Person: Michael Cammarata

C

Check if Rush

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type	(Pres.)
A050871-01	1	Chlorides (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005	<u></u>	250mL Poly	
A050871-01	1	Color (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/17/2005		250mL Poly	
A050871-01	1	Cyanide (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		500mL Poly	
A050871-01	1	Fluoride (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		250mL Poly	
A050871-01	1	Fluorides (T)-DW Secondary	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		250mL Poly	
A050871-01	1	MBAS (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/17/2005		500mL Poly	
A050871-01	1	Nitrate (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/17/2005		250mL Poly	
A050871-01	1	Nitrite (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/17/2005		250mL Poly	
A050871-01	-1-	Odor (T)-DW	Drinking Water	<del>2/15/2005</del> -	8:15	<del>3/15/05-8.9</del> 8	-3/15/2005		-2 <del>02. Glass dar</del>	
A050871-01	1	pH (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/15/2005		250mL Poly	
A050871-01	1	Sulfate (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/29/2005		250mL Poly	
A050871-01	1	TDS (T)-DW	Drinking Water	3/15/2005	8:15	3/15/05 8:38	3/22/2005		500mL Poly	
A Ordenste B		$\sim$	Shinning	Pacaiver:	1485	<i>A</i> .	Dat	e/Time: 3	15/05 1700	

WS **Shipping Receiver: Orlando Relinquisher:** ups **Shipping Relinquisher:** Tampa Receiver:

Date/Time: 31505 1700 DO Date/Time: 🗳

Page 1 of 1

	9610 Princess Palm Ave. •1	cksonville, FL 32216 • 904.363 Tampa, FL 33619 • 813.630.9 • Gainesville, FL 32606 • 352 •. 1016 • Altamonte Springs, F	316 • Fax 8	13.630.4327 Fax 352.367	• E84569 7.0050 • E8	2620	E53076			<u></u>		A	<b>05</b>	19 /	l	_
LIENT NAME:	Utlities Inc.	PROJECT NAME:			thersfi		{1}*	SIZE	Various	느ㅋ	Various					
DRESS: 200	Weathershield Ave	P.O. NUMBER/PROJECT NUM	BER: R1	M602	2W			& TYPE	Vari	40 mL Vials		40. Via	20			
Hamon	te Springs, FL 948-4219 1 Mericle	PROJECT LOCATION:	athe	rsfie	ld				Ş			1				
ONE: 407-	948-4219	FAX:							ji	· ł						
	Mericle	SAMPLED BY: Roy	J.	Mer	<u>i'e le</u>	<u>.</u>		HE	Jai				NoX			
	TURN AROUND TIME:	SAMPLED BY: ROY DDSA 1> 6M17 NVW pibject	MARKS/SPE	ECIAL INSTRUC	стіоня: / <b>С5АМР</b>	ling 15		ANALYSIS REQUIRED	Primary Inorganics	Secondaries	VOCs	socs	NO2,NO3, N (annual)			AB NUMBER
WW≈waste wat	er SW≈surface water GW≈grour	nd water DW=drinking water		1	A≠air	SO≈soil	SL≈sludge		<u> </u>	S S	>	0	2	├ <b>†</b>		-6
SAMPLE	SAMPLE DES	CRIPTION	Grab Comp	SAMP	TIME	MATRIX	NO. COUNT	Preserv			16 23.4		. Dan Ingilia			
ID			+	DATE 3/	0815					X	X	X	X			
1	POE		Grab	15/		DW	25		X	<b>^</b>	<u> </u>			┟╂		-+-
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l-lce		O3) T=(Sodium Thiosulfate)			1		Relig	ouish by:	ä	Date	Time	al	Repetived by:	Dat		Time
		Sample Kit Cooler #			1	12	1×	n	la	3/15/05	838	1A		3/15/	25	838
Shipment		RB D/T			2							LIV				
Shipment	Via:	RBD/T ABD/T			3	+								1		

# Florida Department of Environmental Protection

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by sampler – Please typ	be or print legibly)			
System Name: Weathersfie	eld PWSI.D	.#3591451			
System Type (check one): XCommunity Address: 200 Weathersf		Transient Noncommunity			
/ dd/ 0001					
city: <u>Altamonto Spring</u>	State: FC	ZIP Code: <u>32714</u>			
Phone #: <u>407 - 869 - 1979</u>		7-869-6961			
E-Mail Address:		t			
SAMPLE INFORMATION (to be completed	hy sampler)				
Sample Number: <u>A050879-</u>		nown: PDE			
Sample Date:3/15/05		$\sim$			
Sample Location (be specific): <u>POE</u>		: mg/L Field pH:			
Disinfectant Residual (Required when reporting	results for trinaiomethanes and naioacetic acios)				
	Papagan(a) for Sc	ample (Check all that apply)			
Sample Type (Check Only One)					
	Routine Compliance (with 62-550)				
	Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)			
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**				
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)			
Max Residence Time	Other:				
Ave Residence Time	Sampling Procedure Used or Other Co	omments:			
Near First Customer					
*See 62-550.500(6) for requiren NOTE: See 62-550.512(3) for a for nitrate or nitrite MCL	dditional requirements attact exceedances.	62-550.550(4) for requirements and h a results page for each site.			
Sampler's Name: Koy Mer	icle				
Sampler's Phone #:					
Sampler's E-Mail Address:					
<b>CERTIFICATION</b> (to be completed by	sampler)				
1 Print Mar	ricke, Op	oration			
(Print Name)		(Print Title)			
do HEREBY CERTIFY that the abc complete and correct.	ve public water system and same	ble collection information is			
Signature:	Mun	Date: <u>4-5-05</u>			
		,			

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

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Flor	ida Department (	of Environm	ental Protec Reportir	tion Safe Drinking W Ig Format	Vater Program Laboratory					
	ORY CERTIFICATIO		N (to be comple	eted by lab - Please type or	print legibly)					
LabName:	Advanced Environm	ental Labs - Oria	ando	Florid	a Certification #: E53076					
Address:	528 S. North Lake B	llvd., Suite 1016	a day mana kata kata yang sama mang yang pang	Certification Expiration Date: 6/30/2005						
	Altamonte Springs,	FL 32701			Telephone #: (407) 937-1594					
ANALYSIS	S INFORMATION (to I	be completed by	lab							
PWS ID (f	rom page 1):			Date Sample	e(s) Received: 3/15/2005 2:50:00					
Lab Assigi	ned Report Number of	Job ID A05087	9		(From page 1) A050879-01					
Group(s) A	Analyzed Results atta	ched for complia	ince with chapte	- r 62-550, F.A.C. (check all						
	Inorganics	Synthetic Org		Volatile Organics						
ŗ					Disinfection Byproducts					
Ē	Partial	All Except	Dioxin	Partial	Trihalomethanes     Haloacetic Acids					
	Nitrate	Partial		Radionuclides						
[	Nitrite	🔲 Dioxin On	iy	Single Sample	Chlorite					
L	Asbestos Only			Qtrly Composite**	Secondaries					
					All 14					
Were any a	analyses subcontracte	ed? ✓ Yes	No		Partial					
-	ise provide DOH certif		· •							
	OH ANALYTE SHEE	-								
ATTACH	ON ANAL TE SHEE	I FUR EACH SI	JECONTRACT							
			CERTIFI	CATION						
I, <u>Myrna S</u> (	antiago Print Name)	, Laboratory Ma	anager	······································						
do HEREB National Er	Y CERTIFY that all att ivironmental Laborato	ached analytical Accreditation	l data are correc Conference (NE	t and unless noted meet al LAC).	I requirements of the					
Signature:	MARQUSC	white	0	Date:	124/05					
analysis res	provide a valid and country will result in reject suits will result in reject suit in notification of the	tion of the report	t, possible enfor	cement against the public v	nalyte Sheet for the attached water system for failure to sample,					
** Please p	rovide radiological san	nple dates and 1	ocations for eac	ch quarter.						
COMPLIAN	ICE DETERMINATIO	N (to be comp	leted by DEP or	DOH)						
Sample Col	lection Info Satisfacto	ry 🔄 Yes 🔽	No	Sample Analysis Info Sa	atisfactory: 🗍 Yes 🗍 No					
Replacen	nent Sample(s) Requested				ested (circle or highlight group(s) above)					
	al Monitoring Required									
	MCL(s) Exceeded		Detection							
	Missing Analyte S	heet(s)	Location I	Unsatisfactory	Incomplete Report Analysis Unsatisfactory					
Darean Mati	Edi				a an an ann ann ann an an an an ann an a					
Person Noti: Commonte	neu.			Date	Notified:					
Comments				n den no mensen in sur sur sur sur						
Date Review	ved:	~	DEP/DOH R	eviewing Official:						

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AV

Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.
Project Name:	Weathersfield
Project Number:	
PWS ID#:	
Attention:	Kathy Sillitoe
Phone Number:	8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

Report No.:	A050879
Date Sampled:	3/15/2005
Date Received:	3/15/05 14:50
Date Reported:	3/24/2005

#### **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: Weathersfield

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 =

R.3

## Advanced Environmental Laboratories, Inc.

Analytical Report

	Client: Utilities, Inc.							Report N	lo.: A050	0879
Proje	ect Name: Weathersfield							Date/Time Samp	led: 03/15	/05 14:45
	Matrix: Drinking Water							Date/Time Receiv	ved: 3/15/0	)5 14:50
F	PWS ID#:									
Client Sa	ample ID: 1									
	Site: Point of Entry							Sampled E		
Sample	Number: A050879-01							Shipping Meth	od: Client	drop off
Second	lary Contaminants									
Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
1920	Odor	3.0	TON	4.0		SM2150B	1.0	3/16/2005	13:15	E82574

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

p.4



Advanced Environmental Labs Inc

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

Client:	UTILITIES, IN	IC. (UTL-A)	Project name: WEATHERSFIELD	
Date/Time Rcvd:	3/15/05	14.50	Log-In request number: A050871	
Received by:		V	Completed by:	

## **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)	2				
Temp taken from	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank Cooler	Temp blank Cooler
Temp measured with	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):

### **Other Information:**

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?	1		
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?	1		
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?			1
12.	Were samples in direct contact with wet ice? If "No," check one: D NO ICE D BLUE ICE			
13.	Was the cooler temperature less than 6°C?	1		
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			
15.	Were the sample containers provided by AEL?	1		
16.	Were samples accepted into the laboratory?	1		
	Was it necessary to split samples into other bottles?		1	

## Kit ID Comments:

Lab Code

A050879-01

Project #: A050879

Collector: Roy Mericle

**Client Sample ID** 

1

Test

Odor (J)-DW

03/24/2005 12:01 #159 P.002/002

9354

904 363

	. "	
Shipping Relinquisher: Atl Clum		Date/Time: 3/15/05 1700 Date/Time: 3/16/05 (100

Matrix

**Drinking Water** 

Chain-of-Custody for AEL Orlando to AEL Jax

Collect Date / Time Receive Date

3/15/05 14:50

14:45

3/15/2005

AEL Jax

Due Date

3/15/2005

# Bottles

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

**Check if Rush** 

Bottle Type (Pres.)

250mL Poly

Page 1 of 1

CLIENT NAME:	* Grando	6 NW 67th Place, Suite	PROJE	CT NA	(352) 367-15	Fax (904) 363-9 Fax (813) 630-43 00 Fax (352) 367	-0050				~	A	05	<b>UO</b>	ノフ	1
ADDRESS	lites Inc			IN.	1 - Haras	Field			BOTT	LE E	) S I	t	- I.		I	
200	o Weathersfield	Are	P.O. NU	JMBER ,	PROJECT	NUMBER:	M( m7			13000	20044					
Hltamonte S PHONE: 407-9	MITICS INC O Neathersfield prings, FL 32: 48-4219 FI	701 AX:	PROJE	CT LOC	CATION: W	eathers fie	6	~W	A R N E A Q L U							
CONTACT: Joy	Mericle		SAMPLE	ED BY:			·	·····	Y I S R							
TURN AROUND T	TIME:	REMARKS / SP	PECIAL INST	BUCTIC	Koy M	levile			SD							
STANDARD				100110	202:											
													[			
										2						
🗆 RUSH										Doc						
RUSH	SW≔surface water	GW≔ground water	<b>DW</b> =drinking v	Water	011					DOR						
© RUSH			DW=drinking v	Grab		<sup>l</sup> =air SO≓ 4PLING	soil S	SL=sludge	Prøserv	0 7 0						
RUSH WW= waste water		GW=ground water DESCRIPTION		Grab composite		APLING	soil S		0.8 9.8	0 7 0						
RUSH WW= waste water	SAMPLE			Grab composite		APLING		NO.	0.8 9.8	0 7 0						
RUSH WW= waste water	SAMPLE			Grab composite		APLING	MATRI	NO.		odd H						
RUSH WW= waste water	SAMPLE			Grab composite		APLING	MATRI	NO.		odd H						
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D RUSH WW= waste water SAMPLE ID {	SAMPLE	DESCRIPTION		Grab composite		APLING	MATRI	NO.		odd H						

Jeb Bush Governor





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

Page 2 of 26

Laboratory Scope of Accreditation

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

State Laboratory ID: E82574

ÉPA Lab Code: FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc.

6601 Southpoint Parkway Jacksonville, FL 32216

Metrix: Drinking Water

Matrix: Drinking Water	Method/Tech	Category	Certification Type	Effective Date
Ethylbenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
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
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
Nirrite	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
рН	EPA 150.1	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	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
Selenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Silver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Sodium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Styrene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Sulfate	EPA 375.4	Secondary Inorganic Contaminants	NELAP	2/13/2003
Tetrachloroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Thailium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
Toluene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Total coliforms	SM 9222 B	Microbiology	NELAP	4/4/2002
Total coliforms & E. coli	SM 9223 B	Microbiology	NELAP	9/5/2002
Total trihalomethanes	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
trans-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Trichloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Turbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	7/17/2002
Vinyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Xylene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Zinc	EPA 200.7	Secondary 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 06/30/2004-E82574

R

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

July 13, 2005

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

Re: Synthetic Organic Contaminants June 2005 Weathersfield Utilities, Inc. PWS ID# 3591451

Dear Mr. Morrison:

Enclosed please find the results of samples taken June 14, 2005 for the above referenced analysis and system. This report excludes Herbicides due to incorrect preservative causing matrix interference. This parameter will be resampled the week of July 25, 2005

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

elite

Kathy Sillitoe Area Manager

EC: Patrick Flynn, Regional Director, UIOF Scotty L. Haws, Assistant Operations Manager

## Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATION	to be completed by sampler – Please type	e or print legibly)
System Name:	FIELD PWSID	# 3 5 9 1 4 5 1
System Type (check one): Community	Nontransient Noncommunity	Transient Noncommunity
	THERSFIELD AVE.	
///////////////////////////////////////		· ·
City: ACT. SPRINGS	State: FLA	ZIP Code: <u></u>
Phone #: 407-869-1919	Fax #:	
E-Mail Address:		
SAMPLE INFORMATION (to be completed b	by sampler)	
	Location Code (if kn	own):
Sample Date: 6/14/05	Sample Time:	AM PM (Circle One)
Sample Location (be specific): <u>SAMP</u>	LE TAP AT WATER PLAN	<u>2</u> T
Disinfectant Residual (Required when reporting	esults for trihalomethanes and haloacetic acids):	mg/L Field pH:
<i>,</i>	•	
Sample Type (Check Only One)	Reason(s) for Sa	mple (Check all that apply)
	Routine Compliance (with 62-550)	Quarterly (Which Quarter?
Sentry 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 requireme NOTE: See 62-550.512(3) for ad 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: <u>ALEXADDER</u>	LORENZO	
Sampler's Phone #:	207 Sampler's Fax #:	
Sampler's E-Mail Address:		
<b>CERTIFICATION</b> (to be completed by s	sampler)	
I. ALEXANDER LOREN	120, WATER	CPERATOR,
(		(
do HEREBY CERTIFY that the above complete and correct.	e public water system and samp	le collection information is
Signature: <u>aliquade</u> Z	nenzo	Date:

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

Page 1 of \$15



528 S. North Lake Blvd. • Suite 1016 Altamonte Springs, Florida 32701 407.937.1594 Fax: 407.937.1597

Client/Project: A052032

#### I. RECEIPT

All acceptance criteria were met.

#### II. HOLDING TIMES

- A. Sample Preparation: All holding times were met.
- B. Sample Analysis: All holding times were met.

#### III. METHOD

Analysis: 515.3

#### IV. PREPARATION

Sample preparation proceeded normally.

#### V. ANALYSIS

- A. Calibration: All acceptance criteria were met.
- B. Blanks: All acceptance criteria were met.
- C. Spikes: All acceptance criteria were met.

Other: For this project, it was requested that sample A052032-01 be analyzed for herbicides by EPA method 515.3. AEL utilized containers for that parameter that were pre-preserved by the container supplier with Sodium Thiosulfate as per the method requirements. However the amount of preservative contained in the pre-preserved bottle caused a matrix interference that resulted in unacceptable detection levels. Therefore AEL has rejected the data and requested the client to re-sample for that parameter."

I certify that this data package is in compliance with the terms and conditions agreed to by Advanced Environmental Laboratories, Inc. and by the client, both technically and for completeness, except for the conditions detailed above. The Laboratory Manager or his designee, as verified by the following signature, has authorized release of the data contained in this hard copy data package and in the computer-readable data submitted on diskette:

Mypa Dentrage Date: 7-11-05 Signed:

Myrna Santiago, Laboratory Manager

Florida Department of Environmental Protect Reportin	tion Safe Drinking Wa g Format	ter Program Laboratory				
LABORATORY CERTIFICATION INFORMATION (to be comple ATTACH CURRENT DOH ANALYTE SHEET*	ted by lab - Please type or p	rint 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):	Date Sample(	s) Received: 6/14/2005 8:20:00				
Lab Assigned Report Number or Job ID A052032	Sample Number (F	rom page 1)				
Group(s) Analyzed Results attached for compliance with chapte	r 62-550, F.A.C. (check all th	nat apply):				
Inorganics Synthetic Organics	Volatile Organics	Disinfection Byproducts				
☐ All 17	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				
Were any analyses subcontracted? 🔽 Yes 🔲 No		Partial				
If yes, please provide DOH certification number E82574	E86515					
ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACT	ED LAB					
CERTIF	ICATION					
I, Myrna Santiago , Laboratory Manager (Print Name)	,					
do HEREBY CERTIFY that all attached analytical data are corre National Environmental Laboratory Accreditation Conference (NI		requirements of the				
Signature: MANA Lutrag	Date:	-1-05				
* Failure to provide a valid and current Florida DOH lab certificat analysis results will result in rejection of the report, possible enfo and may result in notification of the DOH Bureau of Laboratory S	tion number and a current Ar rcement against the public w	nalyte Sheet for the attached				
** Please provide radiological sample dates and locations for ea	ch quarter.					
COMPLIANCE DETERMINATION (to be completed by DEP of	or DOH)					
Sample Collection Info Satisfactory 📑 Yes 📑 No	Sample Analysis Info Sa	itisfactory: 🗔 Yes 🗔 No				
Replacement Sample(s) Requested (circle or highlight group(s) above)	Revised Report Reque	ested (circle or highlight group(s) above)				
Additional Monitoring Required (circle or highlight group(s) at	oove)					
Reason(s): MCL(s) Exceeded	on(s)	Incomplete Report				
	Unsatisfactory	Analysis Unsatisfactory				
Person Notified:		Notified:				
Comments	·····	· · · · · · · · · · · · · · · · · · ·				
Date Reviewed: DEP/DOH	Reviewing Official:					

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

Client:	Utilities, Inc.
Project Name:	Weathersfield
Project Number:	
PWS ID#:	
Attention:	Kathy Sillitoe
Phone Number:	8002721919
Address:	200 Weathersfield Ave.

. . . . . . . .

Altamonte Springs, FL 32714

Report No.:	A052032
Date Sampled:	6/14/2005
Date Received:	6/14/05 8:20
Date Reported:	7/11/2005

#### **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: Weathersfield

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 =

## Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.

Project Name: Weathersfield

,

Matrix: Drinking Water

PWS ID#:

Client Sample ID:

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**v** 

Site: Point of Entry

Sample Number: A052032-01

#### Report No.: A052032

 Date/Time Sampled:
 06/14/05
 7:25

 Date/Time Received:
 6/14/05
 8:20

## Sampled By: Alexander Lorenz Shipping Method: Client drop off

Synthetic	Organics
<b>Oy</b> maneae	Of guinou

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	RDL	Analysis <u>Da</u> te	Analysis Time	DOH Lab Cert. #
2274	Hexachlorbenzene	1,0	ug/L	0.0027	U	E508	0.0027	0.10	6/22/2005	13:51	E82574
2005	Endrin	2.0	ug/L	0.0016	U	E508	0.0016	0.010	6/22/2005	13:51	E82574
2010	Lindane	0.20	ug/L	0.0033	U	E508	0.0033	0.020	6/22/2005	13:51	E82574
2015	Methoxychlor	40	ug/L	0.011	U	E508	0.011	0.10	6/22/2005	13:51	E82574
2020	Toxaphene	3.0	ug/L	0.091	U	E508	0.091	1.0	6/22/2005	13:51	E82574
2032	Diquat	20	ug/L	2.5	U	E549.2	2.5	0	6/16/2005	10:00	E82574
2033	Endothall	100	ug/L	7.2	U , <b>J</b> 4	E548.1	7.2	9.0	6/20/2005	10:38	E82574
2035	Bis(2-ethylhexyl) Adipate	400	ug/L	0.27	U	E525.2	0.27	0.60	6/16/2005	17:23	E82574
2036	Oxamyl (Vydate)	200	ug/L	0.61	U	E531.1	0.61	0	6/20/2005	13:27	E82574
2037	Simazine	4.0	ug/L	0.19	U	E525.2	0.19	0.070	6/16/2005	17:23	E82574
2039	Bis(2-ethylhexyl)phthalate	6.0	ug/L	0.77	U	E525.2	0.77	0.60	6/16/2005	17:23	E82574
2042	Hexachlorocyclopentadiene	50	ug/L	0.015	U	E508	0.015	0.10	6/22/2005	13:51	E82574
2046	Carbofuran	40	ug/L	1.1	U	E531.1	1.1	0	6/20/2005	13:27	E82574
2050	Atrazine	3.0	ug/L	0.16	U	E525.2	0.16	0.10	6/16/2005	17:23	E82574
2051	Alachlor	2.0	ug/L	0.26	U	E525.2	0.26	0.20	6/16/2005	17:23	E82574
2065	Heptachlor	0.40	ug/L	0.0063	υ	E508	0.0063	0.040	6/22/2005	13:51	E82574
2067	Heptachlor Epoxide	0.20	ug/L	0.0028	U	E508	0.0028	0.020	6/22/2005	13:51	E82574
2306	Benzo(a)pyrene	0.20	ug/L	0.16	U	E525.2	0.16	0.020	6/16/2005	17:23	E82574
2383	PCB screen as Arochlors	0.50	ug/L	0.31	U	E508	0.31	0.10	6/22/2005	13:51	E82574
2931	1,2-Dibromo-3-chloropropan	0.20	ug/L	0.0034	U	E504.1	0.0034	0	6/17/2005	17:04	E82574
2946	Ethylene Dibromide	0.020	ug/L	0.0069	U	E504.1	0.0069	0	6/17/2005	17:04	E82574
2959	Chlordane	2.0	ug/L	0.048	U	E508	0.048	0.20	6/22/2005	13:51	E82574

- J4 The sample matrix interfered with the ability to make an accurate determination.

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

06/29/2005 13:12 3055921224

KAPPA LABORATORIES

PAGE 01



## KAPPA LABORATORIES, INC.

2577 N.W. 74th Avanue, Miami, Florida 33122 Phone (305) 599-0199 • Fax (305) 592-1224

## LABORATORY REPORT

CLIENT:	Advanced Environmental Labs,Inc 528 S Northlake Blvd Altamonte Springs, Fl. 32701	REPORT DATE:	6/27/2005
SOURCE: SAMPLE DATE: SAMPLE RECEIVED: SAMPLE BY:	Drinking Water 0725 06/14/2005 1030 06/16/2005 Client		
JOB#: SAMPLE LOG #: SAMPLE I.D.	220037-8 F960 A052032		

PARAMETER	RESULT	UNITS	METHOD	DETECTION LIMIT	DATE EXT.	DATE ANALY.	ANALYST
Glyphosate	U	hð\l	547	40	08/16/05	06/16/05	IF

#### U: Undetected

Kappa Laboratories has been inspected and is currently certified by the U.S. Department of Agriculture (USDA Microbiology#0093); The Florida Dept of Health, Drinking Water, including Microbiology, Pesticides and PCB's;

Environmental certification as Basic Environmental Laboratory (DOH #B86515) (FDEP CompQAP #940109); Registered with the U.S. Food and Drug Administration (FDA-#1039389) and is an FDA Accepted Laboratory for Import Testing. Kappa Laboratory is currently a Contract Laboratory to the U.S. Centers for Disease Control (CDC), Atlanta, Georgia; Vessel Sanitation Program. Test results meet all requirements of NBLAC requirements.

signed:

Denisc Knieck Manager, Kappa Laboratories, Inc.

Page 1 of 9

	dvanced nvironmental Laboratories, Inc.	6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354
aboratory Project No./SI	DG#: A052032	Analytical Batch ID: SV061605L
Client N	ame: Utilities, Inc.	
Projec	t ID: Weathersfield	
RECEIPT		
	No Exceptions were encountered.	
I. HOLDING TIMES		
Preparation:	All holding times were met.	
Analysis:	All holding times were met.	
II. METHOD		
Analysis:	E525.2	
Preparation:	METHOD	
V. PREPARATION		
	Sample preparation proceeded normally.	
. ANALYSIS		
A. Calibration:	All acceptance criteria were met.	
B. Blanks:	All acceptance criteria were met.	
	The control criteria were exceeded for both surrogates in the LCS control spike recoveries of target compounds were in control, ind outlier is flagged accordingly. No further corrective action was refor p-Terphenyl-d14. The surrogate will be qualified with a J1.	licating the analysis was in control. The surrogate
D. Spikes:	The matrix spike duplicate recoveries of Bis(2-ethylhexyl)adipate control criteria. Recovery in the Laboratory Control Sample (LC3 analytical batch was in control. No qualifier is needed	a and Benzo(a)pyrene for J053955-03 were outside S) and MS were acceptable, which indicates the
E. Internal Standard:	All acceptance criteria were met.	
F. Samples:	Sample analyses proceeded normally.	

G. Other:

.

I certify that this data package is in compliance with the terms and conditions agreed to by Advanced Environmental Laboratories, Inc. and by the client, both technically and for completeness, except for the conditions detailed above. The Quality Assurance Officer, or designee, as verified by the following signature, has authorized release of the data contained in this data package:

Myrna Santjago, Laboratory Manager



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

Laboratory Project No./SDG#: A052032 Analytical Batch ID: SV062005L Client Name: Utilities, Inc. Project ID: Weathersfield RECEIPT No Exceptions were encountered. **II. HOLDING TIMES** All holding times were met. Preparation: All holding times were met. Analysis: III. METHOD E548.1 Analysis: METHOD Preparation: IV. PREPARATION Sample preparation proceeded normally. V. ANALYSIS All acceptance criteria were met. A. Calibration: B. Blanks: All acceptance criteria were met. NA C. Surrogates: The matrix spike recovery for A052032-01 was outside control criteria because of matrix interference. The D. Spikes: chromatogram indicated the presence of non-target background components that prevented adequate resolution of the target analytes. As a result, accurate quantitation was not possible. The results are qualified to indicate matrix interference. E. Internal Standard: All acceptance criteria were met. F. Samples: Sample analyses proceeded normally.

G. Other:

I.

I certify that this data package is in compliance with the terms and conditions agreed to by Advanced Environmental Laboratories, Inc. and by the client, both technically and for completeness, except for the conditions detailed above. The Quality Assurance Officer, or designee, as verified by the following signature, has authorized release of the data contained in this data package:

Myrna Santiago, Laboratory Manager



Advanced Environmental Labs Inc

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

#### Client: UTILITIES, INC. (UTL-A)

Project name: WEATHERSFIELD

Date/Time Rcvd: 6/14/2005 8.20 Log-In request number: A052032

Received 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 (°C)	3				
Temp taken from	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	□ Temp blank □ Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank Cooler
Temp measured with	IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):

## **Other Information:**

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?	1		
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?	1		
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?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE	1		
13.	Was the cooler temperature less than 6°C?	1		
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			1
15.	Were the sample containers provided by AEL?	1		
16.	Were samples accepted into the laboratory?	1		
17.	Was it necessary to split samples into other bottles?		1	

## <u>Kit ID</u>

Comments:

	<b>m</b>	nmental Laborato	<ul> <li>Jacksnoville, FL</li> </ul>	32216 - 904.363	1.9350 • Fax	(904.363.93	54 • E8257	4		•				Page	١	of		
	F	1610 Princess Palm A 2106 NW 67th Place, 528 S. North Lake Bly	lve. • Tampa, FL 33	619 • 613.630.96 EL 32606 • 352	316 + Fax 8* 367 1500 •	13.630.4327 Fax 352.36	* E84589 7.0050 • E8	2620	E53076						-			·
CLIENT NAME:		EL - Orlando					phosa			BOTTLE	`						-	
DDRESS:	528 S.	Northlake Blvd	P,O. NUMBE	R/PROJECT NUMB	ER:					& TYPE	40 mL Vials							<b>_</b>
Altamo	nle Spr	ings, FL 3270	1 PROJECT LO	CATION:														
HONE:	4	07-937-1594	FAX		4	07-937	-1597			] <u></u>						1		
ONTACT:	My	rna Santiago	O SAMPLED B	SAMPLED BY.				_								ł		
Latti	TURN ARC	DUND TIME:		RE	MARKS/SPE	CIAL INSTRU	CTIONS:			EQUIRED								AB
STANDARD										Ľ					1			
RUSH										SIS	547				1		1	NOMBER
														1		1		
····										ANALYSIS	L L L							<u> </u> ;
SAMPLE	aler	S'N=surface watar GW	Ferround water DW/edu	inking water		1	Anala PLING	SO=soil	SL=slude	Preserv	I,T						Γ	
ID		SAMPLE I	DESCRIPTION	1	Grab Comp	DATE	TIME	MATRIX	COUNT						LONG S			劉璧
1		AO	52032		G	6/14/05	7:25	DW	1		X							
2		AO	52035		G	6/14/05	9:02	DW	1		X					T		
					┨────	ļ							<u> </u>	+			1	
3		A0	52036		G	8/14/05	9:38	DW	1	-	X				+		+	
4		AO	52008		G	6/10/05	7:40	DW	- 1		X	ļ	ļ	<u> </u>		<u> </u>		
5		AO	52009		G	6/10/05	6:55	DW	1		Х						<u> </u>	
6		AO	)52042		G	8/14/05	8:30	DW	1		X		-					
7	+	AQ	052043		G	6/14/05	8:45	DW	1		X							
8		TO	)55635		G	6/9/05	7:45	DW	1		X							
Hice	H≠(HC)	S=(H2SO4 N	=(HNO3) T≖(Sodiu	n Thiosulfata)	1	}	<u> </u>		Re	inquish by:	<u> </u>	Dale	Time	10	Received by:	0	Date	Tima
Shipment		Method	Sample Kil	Cooler #			1	Rion	p.m.	etten		6/14/05	1700	$\not \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \!$	hu	· (e/	160	50
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<b></b>		Via:	AB	0/		·····	3						+	-				
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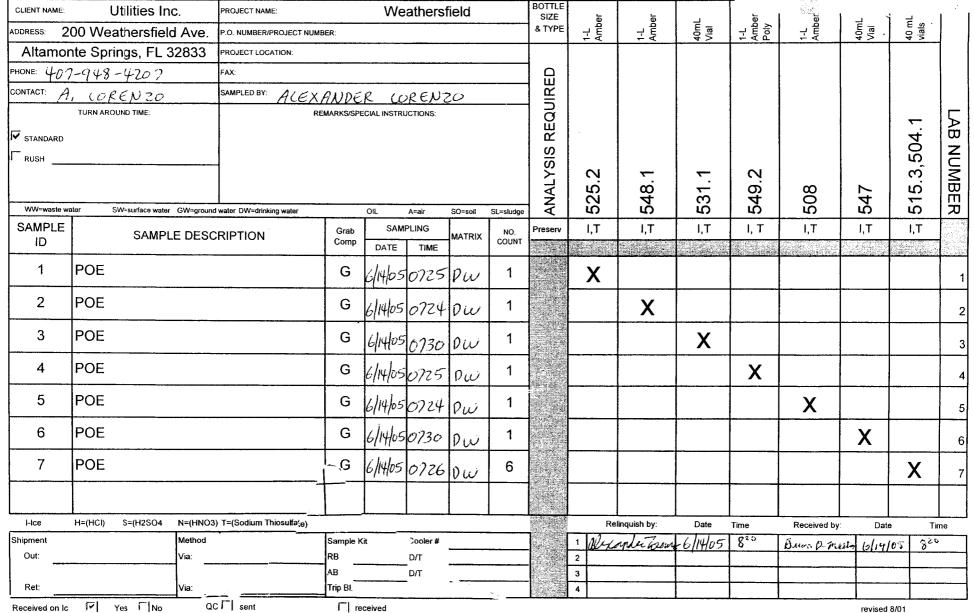
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#### Advanced Environmental Laboratories, Inc.

- 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 r
  - 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



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A052032

KAPPA LABORATORIES

Jeb Bush Governor





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

Page 1 of 2

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

State Laboratory ID: E86515

EPA Lab Code: FL00229

Laboratory Scope of Accreditation

(305) 535-6125

E\$6515 Kappa Laboratories 4300 Alton Road Miami, FL 33140 Matrix: Drinking Water

Analyte	Method/Tech	Category	Certification Type	Effective Date
3-Hydroxycarbofuran	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/28/2002
Aldicarb (Temik)	EPA 531.1	Group I Unregulated Contaminants	NELAP	7/15/2002
Aldicarb sulfone	EPA 531.1	Group [ Unregulated Contaminants	NELAP	7/15/2002
Aldicarb sulfoxide	EPA 531.1	Group I Unregulated Contaminants	NELAP	7/15/2002
Carbaryl (Sevin)	EPA 531.1	Group I Unregulated Contaminants	NELAP	7/15/2002
Carbofuran (Furaden)	EPA 531.1	Synthetic Organic Contaminants	NELAP	7/15/2002
Diguat	EPA 549.2	Synthetic Organic Contaminants	NELAP	9/15/2004
Endothail	EPA 548.1	Synthetic Organic Contaminants	NELAP	3/27/200
ecal coliforms	SM 9221 E	Microbiology	NELAP	3/27/2012
Fecal coliforms	SM 9222 D	Microbiology	NELAP	3/28/2002
Glyphosate	EPA 547	Synthetic Organic Contaminants	NELAP	3/27:2002
leterotrophic plate count	SM 9215 B	Microbiology	NELAP	7/15/2002
Acthomyl (Lannate)	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/23/2002
Dxamyi	EPA 531.1	Synthetic Organic Contaminants	NELAP	7/15/2002
Total coliforms	SM 9221 B	Microbiology	NELAP	3/27/2002
lotal coliforms	SM 9222 B	Microbiology	NELAP	3/27/2002

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

NON-TRANSFERABLE 06/22/2005-E86515

Jeb Bush Governor





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
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
l, l-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
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
2,4-D	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Alachlor	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
Bromodichloromethane	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

 $\sim 2$ 

Jeb Bush Governor





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

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
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E82574

Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216 Matrix: Drinking Water

Analyte	Method/Tech	Category	Certification Type	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
arbon tetrachloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Carbon tetrachloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
hlordane (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
hlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
hlorobenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
hloroform	EPA 502.2	Other Regulated Contaminants,Group II Unregulated Contaminants	NELAP	4/4/2002
hloroform	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
hromium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
is-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
is-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
Palapon	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
i(2-ethylhexyl)adipate	EPA 525.2	Synthetic Organic Contaminants	NELAP	1/21/2005
ibromoacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
ibromochloromethane	EPA 502.2	Other Regulated Contaminants,Group II Unregulated Contaminants	NELAP	4/4/2002
ibromochloromethane	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
icamba	EPA 515.3	Group I Unregulated Contaminants	NELAP	1/21/2005
ichloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	3/24/2005
ichloromethane (DCM, Methylene chloride)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
ichloromethane (DCM, Methylene chloride)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
inoseb (2-sec-butyl-4,6-dinitrophenol, DNBP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Piquat	EPA 549.2	Synthetic Organic Contaminants	NELAP	4/19/2005

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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

Jeb Bush Governor

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
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
Ieptachlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
leptachlor epoxide	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
leterotrophic plate count	SM 9215 B	Microbiology	NELAP	1/21/2005
Iexachlorobenzene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Iexachlorocyclopentadiene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
ron	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
ead	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
ead	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
lagnesium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
langanese	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
fercury	EPA 245.1	Primary Inorganic Contaminants	NELAP	4/4/2002
fercury	SM 3112 B	Primary Inorganic Contaminants	NELAP	4/4/2002
fethoxychlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
lickel	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
litrate	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
litrate-nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
litrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
litrite as N	SM 4500-NO2 B	Primary Inorganic Contaminants	NELAP	1/21/2005
dor	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
CBs	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
icloram	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
otassium	EPA 200.7	Secondary Inorganic Contaminants	NELAP	1/21/2005
esidue-filterable (TDS)	EPA 160.1	Secondary Inorganic Contaminants	NELAP	4/4/2002
clenium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/17/2002
elenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002

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NON-TRANSFERABLE 06/29/2005-E82574

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

Analyte	Method/Tech	Category	Certification 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
Tetrachioroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Tetrachioroethylene (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

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## Advanced Environmental Laboratories, Inc.

AMENDED

REPORT

Analytical Report

Client: Utilities, Inc.

Project Name: Weathersfield

Matrix: Drinking Water

- PWS ID#:
- Client Sample ID:

Synthetic Organics

Site: Point of Entry

Sample Number: A052032-01 ....

Report No.:	A052032	
Date/Time Sampled:	6/14/2005	7:25

### Date/Time Received: 6/14/05 8:20

Sampled By: Alexander Lorenz Shipping Method: Client drop off

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Contam iD	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Leb MDL	RDL	Analysis Date	Analysis Time	DOH Lab Cert. #
2005	Endrin	2.0	սց/Ն	0.0016	U	£508	0.0016	0.010	6/22/2005	13:51	E82574
2010	Lindane	0.20	ug/L	0.0033	Ų	E508	0.0033	0.020	6/22/2005	13:51	E82574
2015	Methoxychlor	40	μg/1	0.011	U	E508	0.011	D.10	6/22/2005	13:51	E82574
2020	Toxaphene	3.0	ug/L	0.091	U	E508	0.091	1.0	6/22/2005	13:51	E82574
2032	Diquat	20	ug/L	2.5	U	E549.2	2.5	0.40	6/16/2005	10:00	E82574
2033	Endothall	100	ug/L	7.2	U , JA	E548.1	7.2	9.0	6/20/2005	10:38	E82574
2035	Bis(2-ethylhexyl) Adipate	400	ug/L	0.27	U	E525.2	0.27	0.60	6/16/2005	17:23	E82574
2036	Oxamyl (Vydate)	200	ug/L	0.61	U	E531.1	0.61	2.0	6/20/2005	13:27	E82574
2037	Simazine	4,0	ug/L	0.19	Ų	E525.2	0.19	0.070	6/16/2005	17:23	E82574
2039	Bis(2-ethylhexyi)phthalate	6.0	ug/L	0.77	υ	E525.2	0.77	0,60	6/16/2005	17:23	E82574
2042	Hexachlorocyclopentacione	50	ug/L	0.015	Ų	E508	0.015	0.10	6/22/2005	13:51	E82574
2045	Carbofuran	40	ug/L	1.1	U	E531.1	1.1	0.90	6/20/2005	13:27	E82574
2050	Atrazine	3.0	ug/L	0.16	u	E525.2	0.16	0.10	6/18/2005	17:23	E82574
2051	Alachior	2.0	ug/L	0,26	U	E525.2	0,26	0.20	6/16/2005	17:23	E82574
2065	Heptachlor	0.40	ug/L	0.0063	U	E508	0.0063	0.040	6/22/2005	13:51	E82574
2067	Neptachior Epoxide	0,20	ug/L	0.0028	U	<b>5</b> 08	0.0028	0.020	6/22/2005	13:51	E82574
2274	Hexachlorobenzene	1.0	ug/L	0.0027	U	E508	0.0027	0.10	6/22/2005	13:51	E82574
2306	Benzo(a)pyrene	0.20	ug/L	0.16	Ų	E525.2	0.16	0.020	6/16/2005	17:23	E82574
2383	PCB screen as Arochiors	0.50	ug/L	0.31	U	E508	0.31	0,10	6/22/2005	13:51	<b>E82</b> 574
2931	1,2-Dibromo-3-chloropropan	0.20	ug/L	0.0034	υ	E504.1	0.0034	0.020	6/17/2005	17:04	E82574
2946	Ethylene Dibromide	0.020	ug/L	0.0069	U	<b>岩</b> 504.1	0.0069	0.010	6/17/2005	17:04	E82574
2959	Chlordane	2.0	ug/L	0.048	υ	E508	0.048	0.20	6/22/2005	13:51	E82574

J4 The sample matrix interfered with the ability to make an ecourate determination.

U The compound was analyzed for but not detected.

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

PAGE 02/03

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

SYNTHETIC ORGANICS 62-550.310(4)(b)

Report Number / Job ID: A052032

PWS ID (From Page 1): Contam Analysis Analytical Lab Extration Analysis Analysis DOH Lab Contam Name MCL Units Qualifier\* RDL 1D Result Method MDL Date Date Time Certification # 2005 Endrin 2 µg/L 0.01 Е 2010 Lindane 0.2 µg/L 0.02 E 2015 Methoxychior 40 µg/L 0.1 E 2020 Toxaphene 3 µg/L 1 E 2031 Dalapon 200 µg/L 1 E 2032 Diquat 20 µg/L 0.4 Ē Endothall 2033 100 E ug/L 9 2034 Glyphosate 700 µg/L 40 IJ 547 40 6 6/16/05 6/16/05 E86515 2035 Di(2-ethylhexyl)adipate 400 ug/L 0.6 Е 2036 Oxamyl (Vydate) 200 µg/L 2 E Simazine 2037 4 µg/L 0.07 E 2039 Di(2-ethylhexyl)phthalate 6 μg/L 0.6 Ε 2040 Picloram 500 µg/L E 0.1 2041 Dinoseb 7 µg/L 0.2 Ē 2042 Hexachlorocyclopentadinene 50 µg/L 0.1 Е 2046 Carbofuran 40 µg/L 0.9 E 2050 Atrazine 3 µg/L 0.1 Ē 2051 Alachior 2 µg/L 0.2 E 2063 2,3,7,8-TCDD (Dioxin) 0.03 ng/L 0.005 Е 2065 Heptachlor 0.4 µg/L 0.04 Ε 2067 Heptachlor Epoxide 0.2 µg/L 0.02 E 2105 2.4-D 70 µg/L 0.1 E 2110 2,4,5-TP (Silvex) 50 µg/L 0.2 Ε 2274 Hexachlorobenzene 1 µg/L 0.1 E 2306 Benzo(a)pyrene 0.2 µg/L 0.02 E 2326 Pentachlorophenol 1 µg/L 0.04 Ε 2383 Polychlorinated biphenyls (PCBs) 0.5 µg/L 0.1 E 2931 Dibromochloropropane 0.2 µg/L 0.02 E 2946 Ethylene Dibromide (EDB) 0.02 µg/L 0.01 E 2959 Chlordane 2 µg/L 0.2 E

NOTE: Effective January 1, 2004, results indicating non-detection with a reported lab MDL > 50% of the MCL will not be accepted for compliance with 62-

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

Page

\*Results must be reported with appropriate qualifiers in accordance with Florida Administrative Code Rule 62-160, Table 1. Results gualified with A, F, H, N, O, T, Z, ?, \*, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

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## Kathy Sillitoe

ومعرفين الكامين ومحمر فمجانين أأبر المهيهين	
From: Sent: To: Cc: Subject:	Karen Grim [kgrim@aellab.com] Friday, November 11, 2005 2:09 PM k.sillitoe@utilitiesinc-usa.com Myrna Santiago DEP Drinking Water corrections
Attachments:	A052032 UTL.doc; A052035 UTL.doc; A052036 UTL.doc; A052042 UTL.doc; A052043 UTL.doc; A052032 UTL amended.pdf; A052035 UTL amended.pdf; A052036 UTL amended.pdf; A052042 UTL amended.pdf; A052043 UTL amended.pdf
A052032 UTL.doc A052035 UT (71 KB) (71 KB	Image: Constraint of the second se
A052036 UTL A052042 I nended.pdf (111 K.mended.pdf (	
Attached are the dri Below is a list of t	nking water corrections that I sent to Barb at DEP. The sites and their corresponding report number:
Weathersfield - A052 Despinar - A052035 Knollwood - A052036 Wekiva - A052042 Wedgefield - A052043	
	) was subcontracted so it appears on a separate page. orts were faxed to your office on 10/26. Please let me know if you Thanks.
Take care,	
Karen Grim	
528 S. Northlake Blv Altamonte Springs, F (407) 937-1594	
	ttachments are for the specific purposes of the addressed recipient(s) eceived this transmission in error, please return it to the sender and



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

Client:	Utilities, Inc.	Report No.:	A052032
Project Name:	Weathersfield	Date Sampled:	6/14/2005
Project Number:		Date Received:	6/14/05 8:20
		Date Reported:	07/11/05
Attention:	Kathy Sillitoe	Date Amended	10/26/2005
Phone Number:	8002721919		
Address:	200 Weathersfield Ave.	AMENDED REF	PORT

200 Weathersfield Ave.

Altamonte Springs, FL 32714

AMENDED REPORT

#### **Project Decription**

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

Project Name: Weathersfield

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 =

## Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.

Project Name: Weathersfield

Matrix: Drinking Water

PWS ID#:

Client Sample ID:

Site: Point of Entry Sample Number: A052032-01

## AMENDED REPORT

Report No.: A052032 Date/Time Sampled: 6/14/2005 7:25

Date/Time Received: 6/14/05 8:20

Sampled By:Alexander LorenzShipping Method:Client drop off

#### Synthetic Organics

Contam ID	Contam Name	MCL	Units	Analysís Results	Qualifier	Analytical Method	Lab MDL	RDL	Analysis Date	Analysis Time	DOH Lab Cert. #
2005	Endrin	2.0	ug/L	0.0016	U	E508	0.0016	0.010	6/22/2005	13:51	E82574
2010	Lindane	0.20	ug/L	0.0033	U	E508	0.0033	0.020	6/22/2005	13:51	E82574
2015	Methoxychlor	40	ug/L	0.011	U	E508	0.011	0.10	6/22/2005	13:51	E82574
2020	Toxaphene	3.0	ug/L	0.091	U	E508	0.091	1.0	6/22/2005	13:51	E82574
2032	Diquat	20	ug/L	2.5	U	E549.2	2.5	0.40	6/16/2005	10:00	E82574
2033	Endothall	100	ug/L	7.2	U , J4	E548.1	7.2	9.0	6/20/2005	10:38	E82574
2035	Bis(2-ethylhexyl) Adipate	400	ug/L	0.27	U	Ē525.2	0.27	0.60	6/16/2005	17;23	E82574
2036	Oxamyi (Vydate)	200	ug/L	0.61	U	E531.1	0.61	2.0	6/20/2005	13:27	E82574
2037	Simazine	4.0	ug/L	0.19	U	E525.2	0.19	0.070	6/16/2005	17:23	E82574
2039	Bis(2-ethylhexyl)phthalate	6.0	ug/L	0.77	U	E525.2	0.77	0.60	6/16/2005	17:23	E82574
2042	Hexachlorocyclopentadiene	50	ug/L	0.015	U	E508	0.015	0.10	6/22/2005	13:51	E82574
2046	Carbofuran	40	ug/L	1.1	U	E531.1	1.1	0.90	6/20/2005	13:27	E82574
2050	Atrazine	3.0	ug/L	0.16	U	E525.2	0.16	0.10	6/16/2005	17:23	E82574
2051	Alachior	2.0	ug/L	0.26	U	E525.2	0.26	0.20	6/16/2005	17:23	E82574
2065	Heptachlor	0.40	ug/L	0.0063	U	E508	0.0063	0.040	6/22/2005	13:51	E82574
2067	Heptachlor Epoxide	0.20	ug/L	0.0028	U	E508	0.0028	0.020	6/22/2005	13:51	E82574
2274	Hexachlorobenzene	1.0	ug/L	0.0027	U	E508	0.0027	0.10	6/22/2005	13:51	E82574
2306	Вепzo(a)pyrene	0.20	ug/L	0.16	U	E525.2	0.16	0.020	6/16/2005	17:23	E82574
2383	PCB screen as Arochiors	0.50	ug/L	0.31	U	E508	0.31	0.10	6/22/2005	13:51	E82574
2931	1,2-Dibromo-3-chloropropan	0.20	ug/L	0.0034	U	E504.1	0.0034	0.020	6/17/2005	17:04	E82574
2946	Ethylene Dibromide	0.020	ug/L	0.0069	U	E504.1	0.0069	0.010	6/17/2005	17:04	E82574
2959	Chiordane	2.0	ug/L	0.048	U	E508	0.048	0.20	6/22/2005	13:51	E82574

J4 The sample matrix interfered with the ability to make an accurate determination.

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

and the second second

## Weathersfield

Docket No. 060253-WS

Seminole County

25.30.440 (4) Operations Reports

Test Year Ended December 31, 2005





See page 4 for instructions.

			Year of: January 2004									
Α.	Public Water System (P	WS) Informati	on			1		·····				
	PWS Name: Weatherst	field					<b>PWS Identification Num</b>	mber: 3591451				
	PWS Type: 🛛 🛛 C	Community	Non-Transient Non-Community	Transier	t Non-Community		secutive					
	Number of Service Con	nnections at Er	d of Month: 1,206		Total Population Ser	rved at En	nd of Month: 4,2-2					
	PWS Owner: Utilities,	Inc. of Florida	.7									
	Contact Person: Patricl	k Flynn			Contact Person's Tit							
	Contact Person's Maili	ng Address: 20	0 Weathersfield Ave.		City: Altamonte Spr		State: Fl	Zip Code: 32714				
	Contact Person's Telep				Contact Person's Far	<u>x Number</u>	r: 407-869-6961					
			.flynn@utilitiesinc-usa.com									
В.	Water Treatment Plant											
	Plant Name: Utilites, In						Plant Telephone Numb					
	Plant Address: 200 We				City: Altamonte Spi	rings	State: Fl	Zip Code: 32714				
	Type of Water Treated	the second s		ased Finished V	Vater							
			Capacity of Plant, gallons per day: 1.	12 MGD								
	Plant Category (per su	bsection 62-69				section 62	2-699.310(4), F.A.C.): (					
	Licensed Operators		Name	License Class	License Number		Day(s)/Shift(					
	Lead/Chief Operator:	Mike Gavaletz		С	5642		Mon - Fri 8 a.m					
	Other Operators:	Terry Sillitoe		С	12749		Sat. 8 A.M 4	4:30 P.M.				
								· · · · · · · · · · · · · · · · · · ·				
				ļ								
		1										

#### II. Certification by Lead/Chief Operator

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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.

2/3/04 minala Michael J. Gavaletz Signature and Date

Printed or Typed Name

C5642

License Number

Dama

PWS Identification Number: 3591451

Plant Name: Utilites, Inc. of Florida - WERTHEASFILLD

Means	of Achi raviolet	eving Four-L Radiation	og Virus In	of: January 20 activation/Rem (Describe):	oval: *	Free Ch			hlorine D	Dioxide	O2	zone	Combined Chlorine (Chloramines)
Type of	of Disinf	ectant Residu	ual Maintair	ed in Distribut	ion System:	$\square$ F	ree Ch	lorine		bined Ch	lorine (C	hloramines)	Chlorine Dioxide
			Ċ	Calculations, or l	IV Dose, to De CT Calou	ations	$p \in \mathbb{Z}^{n}$	Virus Inactiv	ation, if Ap		Dose		
		Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or st First Customer During Peak Flow, mg/L	Dislificetant 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.	pH of Water, if Applicable	CT Required, mg-	Lowest Operating UV Dose, mW- sec/cm <sup>2</sup>	UV Dosc Required, mW-	af 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	24	242,000		{				·			ļ	0.9	
3	24	26,000		<b>{</b>							ļ	<u> </u>	
4	24	357,000									<b>{</b>	10	
5	24	358,000	· · · · · · · · · · · · · · · · · · ·									1.0	
6	24	278,000								<u> </u>	<u> </u>	1.5	
7	24	281,000										0,9	
8	24	255,000		1							h	0,9	······································
9	24	281,000		1								1.0	
10	24	184:000										1.2	
11	24	334,000											
12	24	3341000		L								1.0	
13	24	284,000			L							1.1	
<u>14</u> 15	24	282,000				ļ		ļ			ļ	0,9	
15	-24	301,000									ļ	0,8	
10	24 24	280,000							<b></b>	ļ			
18	27	3431000			l			<u> </u>		<u> </u>	<b> </b>	<u></u>	······································
19	24	343,000			<u> </u>						<u> </u>	7.0	
20	24	244,000				<u>├</u> ────		<u> </u>		<u> </u>	┼────	1 1:3	
21	्रभ	246,000		1	h	t		<u> </u>		1	+	1.0	······································
22	-24	260,000				1	l			1		1.2	
23	24	2780,000									Γ	1.3	
24	24	181,000											
25	-24	324,000				ļ		Į			1		
26 27	24 24	325,000		·	<b> </b>	<b> </b>	<u> </u>			<b></b>	ļ	1.3	
27	24	266,00		<u> </u>	ł	<u> </u>		┝───	<u> </u>	<u> </u>	<u> </u>	10	ļ
28	-21 -24	250,000			<u>}</u>	<u> </u>	}	<u> </u>	<u> </u>	<b>}</b>	╂	1.8	
30	- 17	273,000		+	<u> </u>	<u> </u>		<del> </del>	┼	<u> </u>	<b></b>	<u>  {;</u> }	
31	24	204,000		<u> </u>	t	<u> </u>	<b> </b>	<u>↓</u>	<u>├</u> ───	<del> </del>	+	018	
Total		8706,000		· · · · · · · · · · · · · · · · · · ·	.1	L	L		L	1	1		I
Averag Maxim		284,000	1										

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

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60%

See page 4 for instructions.

1.	<b>General Information</b>	for the Month/Year of: February 2004			<u></u>									
Α.	Public Water System (F													
	PWS Name: Oakland (	Shores WEATHERSFIELD NO			PWS I	dentification Nu	mber: 3590912 3591451 2							
	PWS Type: 🛛 🔿 C	Community Non-Transient Non-Community	/ Transier	nt Non-Community	Consecutiv	e	/							
		nnections at End of Month: 1,206		Total Population Served	l at End of M	onth:	4221 MD							
	PWS Owner: Utilities,													
	Contact Person: Patric	k Flynn		Contact Person's Title: I	Regional Dire	ctor								
i i		ing Address: 200 Weathersfield Ave.		City: Altamonte Springs	5	State: Fl	Zip Code: 32714							
		phone Number: 407-869-1919		Contact Person's Fax Nu	umber: 407-8	69-6961								
	Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com													
В.	3. Water Treatment Plant Information													
	Plant Name: Utilites, Inc. of Florida Plant Telephone Number: 407-869-1919													
	Plant Address: 200 We			City: Altamonte Springs State: Fl Zip Code: 32714										
	Type of Water Treated		hased Finished V	Vater										
		Day Operating Capacity of Plant, gallons per day: 30	60,000											
		bsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsect	ion 62-699.3									
	Licensed Operators	Name	License Class			Day(s)/Shift(								
			С	5642		Mon - Fri 8 a.m								
	Other Operators:	Terry Sillitoe	С	12749		Sat. 8 A.M	4:30 P.M.							
		·····												
		· · · · · · · · · · · · · · · · · · ·												
			}											
			I											

### II. Certification by Lead/Chief Operator

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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.

1) Gavat 214/04 Michael J. Gavaletz C5642 Signature and Date UPrinted or Typed Name License Number

n--- 1

PWS I	/S Identification Number: 3590912 3591451 Plant Name: Utilites, Inc. of Florida													
Ш. В	II. Daily Data for the Month/Year of: February 2004 Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)													
Means	of Achi	eving Four-L Radiation	.og Virus In	activation/Rem (Describe):	ioval: *	Free Cl	nlorine		Chlorine E	Dioxide	Oz	zone 🗌 (	Combined Chlorine (Chloramines)	
				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*				
			A North A		CI Calcul	ations	2017 V	an gan g		UV	Dose			
Day of the	Hours Plant in	Net Quantity of Finished Water	Pcak Flow	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak		Lowest CT Provided Before or at First Customer During Peak Flow,	Temp. of Water,	pH of Water, if	mg-	Operating UV Dose, mW-	mW-	Distribution	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water	
Month 1	ン ショク	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	System Components Out of Operation	
2	14	310,000		· · · · · · · · · · · · · · · · · · ·			ł					1.0		
3	24	260,000								<b>w=</b> -		0.7		
4	24	271,000										1.2		
5	24	266,000		1			( · · · · ·			·······		1.0		
б	24	277,000					1					0.8		
7	24	187,000										1.0		
8	<i>4</i> 4	338.000												
9	24	539 000										(.0		
10	24	279,000		<u> </u>								L L		
11	24	267,000					ļ							
12 13	24	258,000					<b> </b>	ļ			1	1.0		
14	24	271,000					<b> </b>	<u> </u>				1.0		
15	16	292,000		<u> </u>			<u> </u>			<b> </b>		0.8		
16	24	299,000	·····					<b> </b>				j.0		
17	24	242,000										0.8		
18	24	262,000		1			1				<u> </u>	1.0		
19	24	239,000					<b> </b>					1.0		
20	24	278,000		1				T		İ		0,8		
21	24	216 000										0.9		
22	24	320,000												
23	24	351 000										1.3		
24	24	257,000					ļ	L	<b> </b>		ļ			
25 26	24 24	233,000			<b> </b>		<u> </u>					(.3		
20	24	2511000		+			<b> </b>	<b> </b>			<u> </u>	<u><u><u> </u></u></u>		
28	54	187,000			<b> </b>		<del> </del>		+	<u> </u>	<b>├</b> ───	1.0		
29		316,000		1		<u> </u>		<u> </u>	<del> </del>	<u> </u>	<del> </del>	0,9		
30			1	1	1			<del> </del>				l		
31				1	<b> </b>				1	t	†	1		
Total		1,791,000	Ι	······	<b>.</b>	•						E	<b>I</b>	
Average		269,000	1											
Maxim	im	251,000	1											

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

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See page 4 for instructions.

I. General Information	for the Month/Year of: March 2004					
A. Public Water System (P	PWS) Information					
PWS Name: Weathers	field				<b>PWS Identification Nu</b>	mber: 3591451
	Community Non-Transient Non-Community	Transier	nt Non-Community		isecutive	<u></u>
Number of Service Co	nnections at End of Month: 1, 205		Total Population S	erved at Er	nd of Month: 4, 218	
PWS Owner: Utilities,					·	
Contact Person: Patric	k Flynn		Contact Person's T			
Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte S		State: Fl	Zip Code: 32714
Contact Person's Teler	phone Number: 407-869-1919		Contact Person's F	ax Number	<u>:: 407-869-6961</u>	
	il Address: p.c.flynn@utilitiesinc-usa.com					
B. Water Treatment Plant						
Plant Name: Utilites, I			••••••••••••••••••••••••••••••••••••••		Plant Telephone Num	
Plant Address: 200 We			City: Altamonte S	prings	State: Fl	Zip Code: 32714
Type of Water Treated		hased Finished V	Water	······		
	Day Operating Capacity of Plant, gallons per day: 1.	.12 MGD				
	bsection 62-699.310(4), F.A.C.): IV			and the second	2-699.310(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	n 4:30 p.m.
Other Operators:	Terry Sillitoe	С	12749		Sat. 8 A.M	4:30 P.M.
						······································
		<u> </u>				

#### 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.

1) Grunds 4/sloy Signature and Date

Michael J. Gavaletz Printed or Typed Name C5642

License Number

Dama 1

PWS Identification Number: 3591451

Plant Name: Utilites, Inc. of Florida

III. D	I. Daily Data for the Month/Year of: March 2004 leans of Achieving Four-Log Virus Inactivation/Removal: *  Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)												
						Free Cl	lorine		hlorine F	lioxide		one 🗌	Combined Chlorine (Chloramines)
	raviolet	Radiation	Other	(Describe):	iovai.		norme			IOAIde			combined emorate (emoralities)
				ned in Distribut	ion System:	⊠ F	ree Ch	lorine		hined Ch	lorine (C	hloramines)	Chlorine Dioxide
			C	T Calculations, or I	JV Dose, to De	monstrate Fo	ur-Log	Virus Inactiv	ation, if Ap	plicable*			
					CT Calcul					UV	Dose	Content of	
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,	Lowest CT Provided Before or at First Customer During Peak Flow.	Temp. of Water,	pH of Water, if	Minimum CT Required,	Operating	Minimum UV Dose Required, mW-	Lowest Residual Disinfectant Concentration at Remote Point in	Emergency or Abnormal Operating Conditions; Repair
		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	mg- min/L	sec/cm <sup>2</sup>		Distribution System, mg/L	or Maintenance Work that Involves Taking Water System Components Out of Operation
1.5	24	317,000				1116 11110.15				300/011	Scorona	/ /	System components out of operation
2	24	246,000										1.3	
3	24	273,000										10	
4	24	282,000										(.0	
5	24	285,000										0.9	
6	24	207,000										0.9	
7 8	E F	358,000											
9	24	358.000 330,000										1.0	
10	24	290,000	·····					<u> </u>				1.0	-
11	24	138,000										0.8	
12	24	273,000										0.7	
13	24	213,000										(.0	
14	24	366,000										0.0	
15	24	366,000										1.0	
16	24	233,000										0.8	
17	14	284,000										6.9	
18	24	225 000										0.8	
19	24	319,000										1.0	
20	24	284,000										0.8	
21 22	34	336,000											
22	24	357,000										(.0	
24	24	324,000										0.8	
25	JY	384,000										1.5	
26	24	263,000										1.2	
27	24	201,000										1.0	
28	24	103,000										0.9	
29	24	403,000										1.0	
30	24	269,000										1.0	
31	્રપ	333,000										0.9	
Total		1245,000											
Average		298,000											

Maximum 403, 000

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



See page 4 for instructions.

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

1. General Information for the Month/Year of: April 2004 A. Public Water System (PWS) Information PWS Name: Weathersfield PWS Identification Number: 3591451 Community Non-Transient Non-Community Transient Non-Community Consecutive PWS Type: Total Population Served at End of Month: 4.121 Number of Service Connections at End of Month: 1, 206 PWS Owner: Utilities, Inc. of Florida Contact Person: Patrick Flynn Contact Person's Title: Regional Director **City: Altamonte Springs** State: Fl 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 Name: Utilites, Inc. of Florida Plant Telephone Number: 407-869-1919 Plant Address: 200 Weathersfield Ave. **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: 1.12 MGD Plant Category (per subsection 62-699.310(4), F.A.C.): IV Plant Class (per subsection 62-699.310(4), F.A.C.): C Name License Class License Number Day(s)/Shift(s) Worked Licensed Operators A CARLEN AND A CARLEN Lead/Chief Operator: Mon - Fri 8 a.m. - 4:30 p.m. Mike Gavaletz С 5642 С Sat. 8 A.M. - 4:30 P.M. 12749 Terry Sillitoe Other Operators:

#### 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.

SISLOY Michael J. Gavaletz Printed or Typed Name Signature and Date

C5642 License Number 012

Zip Code: 32714

Zip Code: 32714

Da ~~ 1

PWS Identification Number: 3591451

\*\*\*

Plant Name: Utilites, Inc. of Florida

<u>III. D</u>	. Daily Data for the Month/Year of: April 2004													
Means	eans of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe): pe of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*													
				<u> </u>	on System:	X F	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide	
ि		0.960 (CS.S				monstrate Fo	ur-Log	Virus Inactiv						
					CT Calcul	ations	0-201	No. 22 - 24	N. 24 - 5 - 5		Dose			
Day of the	Hours Plant in	Net Quantity of Finished Water	Peak Flow	Lowest Residual Disinfectant Concentration (C) Before or st First Customer	Contact Time (T) at C Measurement Point During	During	Temp. of	pHof	Required,	Operating UV Dose,	UV Dose Required	Lowest Residual Disinfectant Concentration at Remote Point In	Emergency or Abnormal Operating Conditions; Repair	
		Produced, gal	Rate, gpd	During Peak Flow, mg/L	Peak Flow, minutes	Peak Flow, mg-min/L	water,	Water, if Applicable	mg- min/L	mW- sec/cm <sup>2</sup>	mW- sec/cm <sup>2</sup>	Distribution System, mg/L	or Maintenance Work that Involves Taking Water System Components Out of Operation	
	24	347,000				Need Doctors and a					JUG VILL		A state of the second stat	
2	24	298,000	-									1.0		
3	24	735,000										0.8		
4	24	405,000												
5	2Y	406,000	L	ļ					L			1.0		
6	<u>24</u> 24	358,000										(.0		
7 8		332,000						<b> </b>			<b>├</b> ───┤	1.0		
9	24	340,000							L		<b> </b>	<u>[.]</u>		
10	34	151,000						<b>├</b> ────		<u> </u>	<b>├</b> ────	1.0		
	24	470,000					<u> </u>	<u> </u>	<b> </b>	<u>├</u>	<u> </u>	<u> </u>		
12	24	470,000	İ	†	··· · ·	<b></b>	<b> </b>	<b> </b>	<del> </del>	<u> </u>	<b> </b>	0.8		
13	24	274,000		1			t	<b> </b>	t	t		0.7	and the second second second second second second second second second second second second second second second	
14	24	274,000		1			t	<b>†</b>	<u> </u>	†	<u> </u>	1.0		
15	24	264,000							<u> </u>			1.0		
16	24	308'000										1.0		
17	24	192,000										0.0		
18	24	329,000	L				ļ							
19	24	390,000		ļ		l	ļ	<u></u>	L		L	0.7		
20	24	349,000		<u> </u>		ļ	I	<b> </b>	L	I	<b></b>	1.0		
21	2Y	344,000	<b> </b>			<b> </b>	<u> </u>	<u> </u>	L	<b> </b>	<b> </b>	i.g		
22 23	24	305,000	{		<b>↓</b> −−−−−		<b> </b>	╂────	<b>{</b>	╂────	<b></b>	1.9	L	
23	24	237,000	t	<u> </u>	<u> </u>	<b> </b> _	<del> </del>	╂────	<del> </del>	<b></b>	+	1.0 0,9		
25	24	465,000	<u> </u>	1	<u>├</u>		┢───		┼	╉─────	╂────			
26	24	466.000	1	1	t	t	t	t	┼────	+	+	1.0		
27	24	280,000	1	1	1	<u> </u>	<u>†                                    </u>	1	<u>† – – – – – – – – – – – – – – – – – – –</u>	1	<u>†</u>	0.9		
28	24	321,000		1	1			1	<u>†                                    </u>	1	<u>† – – – – – – – – – – – – – – – – – – –</u>	1,0		
29	24	363,000										1.0		
30	ΞŲ	256,000										0.9		
31					1			L						
Total		8950,000	4											
Averag		333,000	4											
Maxim	um	470,000	1											

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



See page 4 for instructions.

1.	<b>General Information</b>	for the Month/Year of: May 2004										
	Public Water System (P											
	PWS Name: Weathers	field			PWS Identification N	umber: 3591451						
	PWS Type: 🛛 🗘 C	Community Non-Transient Non-Communi	ty Transie	nt Non-Community CO	nsecutive							
		nnections at End of Month: 1,206		Total Population Served at E	ind of Month: 4,221							
	PWS Owner: Utilities,											
	Contact Person: Patric	k Flynn		Contact Person's Title: Regio	onal Director							
	Contact Person's Maili	ing 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 Number	er: 407-869-6961							
	Contact Person's E-Ma	ail Address: p.c.flynn@utilitiesinc-usa.com										
В.	Water Treatment Plant											
	Plant Name: Utilites, I				Plant Telephone Num	ber: 407-869-1919						
	Plant Address: 200 We			City: Altamonte Springs State: Fl Zip Code: 32714								
	Type of Water Treated		chased Finished	Water								
	Permitted Maximum [	Day Operating Capacity of Plant, gallons per day:	1.12 MGD									
		bsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 6								
	Licensed Operators		License Class	License Number	Day(s)/Shift	(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.						
						·····						

### 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.

6/4/04 MARA Michael J. Gavaletz C5642 Signature and Date Printed or Typed Name License Number

D~~~ 1

PWS Identification Number: 3591451

Plant Name: Utilites, Inc. of Florida

III. D	. Daily Data for the Month/Year of: May 2004 ears of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)												
Means	Means of Achieving Four-Log Virus Inactivation/Removal: *       Free Chlorine       Chlorine Dioxide       Ozone       Combined Chlorine (Chloramines)         Ultraviolet Radiation       Other (Describe):												
Type of	f Disinf	ectant Residu	al Maintair	ed in Distribut	ion System:	<b>F</b>	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
		900-90-20	C	Calculations, or l	JV Dose, to De	monstrate Po	ur-Log	Virus Inactiv	ation, if Ap	plicable*	CALLS IN	10	
			R. S. W. S.	and the second second second second second second second second second second second second second second second	CT Calcul	ations	1. 1999 <u>(</u>		March 1997	- UV	Dose		
			a a			Lowest CT Provided					244 - 144 - 14 14 - 14 - 14 14 - 14 - 14	Lowest	
				Lowest Residual Disinfectant	Disinfectant Contact Time	Provided Before or				tere rev	an an an an an an an an an an an an an a	Residual Disinfectant	
				Concentration	(T) at C	at First		Contraction of the	Minimum	No. 32 6 14 8 9 9 9 9	Minimum	Concentration	
		Net Quantity		(C) Before or at	Measurement	Customer	Temp.		ст с	Operating	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 Month	Plant in	Water Produced, gal	Peak Flow Rate, and	During Peak Flow, mg/L	Pcak Flow,	Peak Flow, mg-min/L	Water,	Water, if Applicable	mg- min/L	mW- sec/cm <sup>2</sup>	mW-	Distribution System, mg/L	or Maintenance Work that Involves Taking Water System Components Out of Operation
1	29	265,000	PAIC, MAA	FIOW HINKS	- unitrat			A philesole			804-06-00 A	L 2	Synch Schipping of Strong Care
2	24	365,000		†									
3	24	366,000										1.0	
4	24	220,000										0.9	
5	24	341,000										1.0	
6	27	323,000										0.7	
7	24	303,000										1.0	
8	24 24	262,000		ļ				ļ				1.1	
	24	430,600				ļ					I		
	24	283,000		<u> </u>								1.0	······································
$\frac{11}{12}$	29	320,000										1.0	
13	24	367,000										1.0	
14	24	327,000		1				i —				1.0	
15	ay	263,000				[		<u> </u>					
16	24	372,000						l					
17	24	372,000										6	
<u>18</u> 19	24	293,000						ļ				0,8	
20	24-	304,000	· · · · · · · · · · · · · · · · · · ·			ļ						61	
21	24	297,000		l		<u> </u>		[	<b> </b>		<b> </b>	1.0	
22	24	247,000		t	<u> </u>	+			<b> </b>	<b> </b>		0.8	L
23	24	476,000		1				<u> </u>			1		
24	24	476,000		1							1	1.0	
25	24	325,000										1.3	
26	24	412,000			I			<b></b>	<u> </u>		1	1.0	
27	24	373,000										1.2	
28 29	34	418,000		ļ	L							1.0	
30	24-	259,000			l	ļ	L	<u> </u>	ļ	L		1-1	
31	<del>2</del> ý	482,000			<b> </b>	<b> </b>							
Total		10.800,000		L	L	1		L	L	I	1	1.0	<u>i</u>
Average		348,000											
Maxim	IM	482,000											

482,000

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



See page 4 for instructions.

# FILE COPY

Ι.	<b>General Information</b>	for the Month/Year of: June 04											
	Public Water System (P						· · · · · · · · · · · · · · · · · · ·						
[	PWS Name: Weatherst	field				<b>PWS</b> Identification Nu	mber: 3591451						
	PWS Type: 🛛 🗘 C	Community Non-Transient Non-Community	Transie	nt Non-Community		secutive							
	Number of Service Con	nnections at End of Month: 4206		Total Population Serve			······································						
	PWS Owner: Utilities,					······································							
	Contact Person: Patricl	k Flynn		Contact Person's Title:	: Region	al Director							
	Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte Sprin	gs	State: Fl	Zip Code: 32714						
	Contact Person's Telep	phone Number: 407-869-1919		Contact Person's Fax N	Number:	407-869-6961							
	Contact Person's E-Ma	uil Address: p.c.flynn@utilitiesinc-usa.com											
в.	Water Treatment Plant												
	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		hased Finished V	Vater									
		Day Operating Capacity of Plant, gallons per day: 1.	12 MGD										
		bsection 62-699.310(4), F.A.C.): IV			ction 62	-699.310(4), F.A.C.): (	2						
	Licensed Operators	Name	License Class	License Number		Day(s)/Shift(	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			L										
						· · · · · · · · · · · · · · · · · · ·							

### 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.

Garrater 7/1/04 Michael J. Gavaletz C5642 Signature and Date Printed or Typed Name License Number

D .... 1

PWS Identification Number: 3591451

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Plant Name: Utilites, Inc. of Florida

		a for the Mo											
	traviolet	Radiation	Other	nactivation/Rem (Describe):		Free C	hlorine		Chlorine I	Dioxide	02	zone	Combined Chlorine (Chloramines)
Type	of Disinf	ectant Residu	ial Maintai	ned in Distribut	ion System:	[] F	ree Ch	lorine	Com	bined Cl	lorine (C	hloramines)	Chlorine Dioxide
			C	T Calculations, or	UV Dose, to De	monstrate F	our-Log	Virus Inactiv	ation, if A	oplicable*		See and	
					CT Calcu		2	S. 4. 20 28		UV	Dose	and the second second	
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 Peak Flow, mg-min/L	Temp, of Water, °C	pH of Water, if Applicable	CT Required, mg-	Operating	mW-	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency of Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1		41600										1.0	
2	24	396,000										1.0	
3	44	378,000										1.2	
5	24	352,000										1.0	
6	21	150,000					L						
7	74	320,000					L						
8	24	326,000					ļ					0.7	
9	24	202.00							ļ	ļ		0.8	
10	24	253,00	·····									<u>1.0</u>	
- ii	24	217,000							<b> </b>			1.0	
12	24	212,000	······									1.0	
13	ध	3103,000					<b></b>			L		1.0	
14	24	364,004							<b> </b>				
15	24	249 00										0.7	
16	24	258,000						·				1.0	
17	24	294,000		1								<u> </u>	
18	24	323,000										1.0	
19	24	181,000										1.2	
20	24	394,00										1.2	
21	24	394,00						T				1.0	
22	24	274,000								·		1.0	
23	24	291.000										<u> 1.0</u>	
24	24	337,000										0.8	
25	24	299.00										1.0	
26	24	267,000										1.0	
27	24	387,000											
28 29	뀞	261,000										0.8	
30	24	LUN										1.0	
30	4	265,000										1.1	
Total		9,200,00		I	l		L						
Average		309,000											
Maxim		410.000											

\* 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: July 2004

A. 1	Public Water System (P	WS) Information									
- [	PWS Name: Weathersf	field					PWS Identification 1	Number: 3591451			
[	PWS Type: 🛛 🕅 C	Community	Non-Transient Non-Comm		t Non-Community		nsecutive				
[	Number of Service Con	nnections at End o	f Month: 1, 206		Total Population Se	erved at E	nd of Month: 422				
	PWS Owner: Utilities,	Inc. of Florida									
	Contact Person: Patrick	k Flynn	·····		Contact Person's Ti						
	Contact Person's Mailin	ng Address: 200 W	Veathersfield Ave.		City: Altamonte Sp	rings	State: Fl	Zip Code: 32714			
	Contact Person's Telep	hone Number: 407	7-869-1919		Contact Person's Fa	<u>ix Numbe</u>	r: 407-869-6961				
			nn@utilitiesinc-usa.com								
B. ]	Water Treatment Plant	Information		·			· ······				
	Plant Name: Utilities, I	and the second se	· · · · · · · · · · · · · · · · · · ·					mber: 407-869-1919			
	Plant Address: 200 We	and the second second second second second second second second second second second second second second secon			City: Altamonte Sp	orings	State: Fl	Zip Code: 32714			
	Type of Water Treated	and the second second second second second second second second second second second second second second second		Purchased Finished V	/ater						
	Permitted Maximum D	Day Operating Cap	acity of Plant, gallons per d	ay: 1.12 MGD							
	Plant Category (per su						52-699.310(4), F.A.C.				
	Licensed Operators		Name	License Class	License Number			ft(s) Worked			
	Lead/Chief Operator:	Mike Gavaletz	······	С	5642	,,		A.M 4:30 P.M.			
	Other Operators:	Terry Sillitoe		С	12749		San. 8 A.N	И 4:30 Р.М.			
		RAYMONIC	A PARRISH	C	12740						
		L						······································			

#### **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 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 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.

Kanish 8-E-2004 Michael J. Gavaletz For Printed or Typed Name C5642 inhature and Date

License Number

Deen 1

PWS Identification Number: 3591451

Plant Name: Utilities, Inc. of Florida - UEANEN FIFLD

111. D:	11. Daily Data for the Month/Year of: July 2004												
Means	Means of Achieving Four-Log Virus Inactivation/Removal: * 🛛 Free Chlorine 🗌 Chlorine Dioxide 📋 Ozone 📋 Combined Chlorine (Chloramines)												
		Radiation	📋 Other (						-			<u> </u>	
Туре о	f Disinfe	ectant Residu	al Maintain	ed in Distributi	ion System:	<u> </u>	ree Chl	orine				hloramines)	Chlorine Dioxide
			Cl	Calculations, or U	IV Dose, to Dei	nonstrate Fo	ur-Log <b>N</b>	Tirus Inactiv	ation, if Ap	plicable*			
				20 C	CT Calcul		275223 1000-000-00		22.762.20 <sup>2</sup>	UVI	LIOSE	Lowest	
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	(T) at C Measurement Point During	Lowest CT Provided Before or at First Customer During Peak Flow,	Temp of Water,	Water, if	CT Required, mg-	Operating UV Dose, mW-	UV Dose Required, mW-	Residual Disinfectant Concentration at Remote Point in Distribution	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water
	Operation	Produced, gal		Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	System Components Out of Operation
1	24	308,000										1,0	
2		254,000										0.9	
3		204,000		ļ						<b></b>		1,0	
4		327,000		l		L			ļ	Į		L	
5		328.000		<b>.</b>	ļ	l		ļ	ļ	<b> </b>	i	1,0	······
6		346.000		<b> </b>			┡───┤	ļ	<b> </b>	<b>{</b>	<b>├</b> ────┤	0.9	L
7		249.00		l	l	ļ	<b> </b>	ļ	<b> </b>	<b> </b>	<b> </b>	1.0	
8		374,000		<b></b>	<b>}</b> i	Ļ		<b> </b>	<b>{</b>	<b></b>	<b> </b>	0,9	l
9		373,000		<u> </u>	<b>↓</b>	<b> </b>	<b>├</b>	ļ	<del> </del>	<b></b>	<b>├</b>	1.0	
10		254.000	1	<u> </u>	<b></b>		<b> </b>				<b> </b>	<u>  110</u>	
11 12		409,000	<b> </b>	<del> </del>	<b> </b>	<b> </b>	<u> </u>	<u> </u>	<del> </del>	<u>+</u>	1	1.0	·····
12	<del>-1,-</del>	304.000			t	<u>├</u> ────	t	t	t	t	1	0,8	
13	<b>-₩</b>	309,000	ļ	+	t	t	1	t	<u>†                                    </u>	<u>†</u>	1	0,8	
15	<u>-</u> ju	364,000	ļ	1	†	t	t	<u>†                                    </u>	1	1	<u> </u>	1.0	
16	<u>~</u>	278.000	·	1	1	<u> </u>	t	t	1	1	1		
17	-+-	216.000		1	1	1	<u> </u>			1		1,2	
18	-+-	409,000	[	1	1		1			L			
19		410,000	<u>├</u>		1								
20		270,000	1	<u> </u>	T	<u> </u>						1.0	
21		300,000			1							0.8	
22		331,00										1.0	
23		348,000					1		1		1	1.0	
24		223,000					L		1	$\square$		$\mu \mu$	
25		486,000			1			ļ		1	1	L	
26		486.000			L	L	1	<u> </u>	<u> </u>		<b></b>	1,0	l
27		224,000	ļ	1		Ļ	<b></b>	<b></b>	4	+	<b></b>	9.8	<u> </u>
28		796,00	ļ		<u></u>	<b>_</b>	<b></b>	<b></b>	+	<b>_</b>	<b></b>	10	
29		156,000	L	4	4	<b></b>	<b></b>	<b></b>	. <u> </u>	4	+	0.8	<u> </u>
30	×	388.000		4	1	+	<b></b>	+	+	+	+	10	
31	Lay	252,000	<b></b>		1	<u> </u>		L	1	<u></u>		0.9	<u></u>
Total	-	9,886000	4										

 Average
 3/9,090

 Maximum
 486,000

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

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See page 4 for instructions.

## I. General Information for the Month/Year of: August 2004

<b>A</b> . 1	Public Water System (P	w S) miormation											
[	<b>PWS Name: Weathersf</b>	ield				PWS Identification Nu	mber: 3591451						
[	PWS Type: 🛛 C	ommunity Non-Transient Non-Community	Transier	t Non-Community		secutive							
		inections at End of Month: 1,206		Total Population Ser	rved at En	d of Month: 4, 221							
	PWS Owner: Utilities,			·····									
	Contact Person: Patrick Flynn Contact Person's Title: Regional Director City: Altemente Spring: IState: El IZin Code: 32714												
	Contact Person's Mailing Address: 200 Weathersfield Ave. City: Altamonte Springs State: FI Zip Code: 32714												
1	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. 1	Water Treatment Plant					Dia A Talanhama Mami	407 860 1010						
	Plant Name: Utilities, I				the second second second second second second second second second second second second second second second se	Plant Telephone Num							
	Plant Address: 200 We			City: Altamonte Spi	rings	State: Fl	Zip Code: 32714						
	Type of Water Treated by Plant: 🛛 Raw Ground Water 🗌 Purchased Finished Water												
	Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.12 MGD												
		osection 62-699.310(4), F.A.C.): IV			osection 62	2-699.310(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.	M 4:30 P.M.						
	Other Operators:	Terry Sillitoe	С	12749		San. 8 A.M.	- 4:30 P.M.						
	198		<u> </u>										

#### 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.

Gavate F/3/04 Michael J. Gavaletz C5642 Printed or Typed Name License Number Signature and Date

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PWS	Identification Number:	3591451	

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Plant Name: Utilities, Inc. of Florida

111. Daily Data for the Month/Year of: August 2004													
Means of Achieving Four-Log Virus Inactivation/Removal: * 🛛 Free Chlorine 🗌 Chlorine Dioxide 🗍 Ozone 🗌 Combined Chlorine (Chloramines)													
🗌 Ult	raviolet	Radiation	🗍 Other (	Describe):				<u> </u>					(entertainties)
Туре с	f Disinf	ectant Residu	ual Maintain	ed in Distribut	ion System:	<b>F</b>	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
			1.2 K & C	COLUMN STREET	A SPACE		1000 4	Man and and		plicable*.		and an an	
	옷관감물						1. 1. 1. 1.	San State State		war IV	Dose		
		1.00		Lowest Residuel	Disinfoctant	Lowest C.I.	* 3.	and the state	Ser.	Sales 75	2 Card To	Lowest	
			Stort Bar	Distributant	Constant And	Before or					San San San San San San San San San San	Residual Disinfectarit	
	Lines			Concentration	mac	Set Pirst	And And	A Destroyer		- Lowest	Minimum	Concentration	
a dha a sang La sangar a		Net Quantity		Concentration (C) Before of at First Clastomer During Peak		Customer	Temp. of	to the	Millimum CT	Operating	UV Dene	at Remote	
Day of		of Finished	Peak Flow	Pirst Customer	Point During	During	of	Wetter, IT.	Required.	UV Doec, mW-	Required,	Point in	<b>Emergency of Abnormal Operating Conditions; Repair</b>
the	Plant in	Water Produced, gal	Peak riow	Flow, mg/L	Tainutes	Peak Flow, mg-min/L	Water, °C	Applicable	min/L	mW.	mW- sec/cm <sup>2</sup>	Distribution	or Maintenance Work that Involves Taking Water
1	24	331,000				SULCHITY M	. Y U	ENERGIC DIG	munyc	sec/cm	sec/cm	System, mg/L	System Components Out of Operation
2	24	331,000										1.0	
3	24	279,000										1.0	
. 4	24	311000										1.0	
5	24	332,000										1.5	
6	24	314:000										1.1	
7	24	275,000						r	[			1.2	
8	24	322,400											
9	24	323,000										1.0	
10	24	279,000										1.0	
11	24	290,000										1.(	
12	24	298,000										1.0	
13	24	325,000										0.8	
14	24	392,000										0.7	
15	29	230,000			ļ	L		ļ					
16 17	24	263,000						<u> </u>				1.0	
18	24	248,000					ł		<b> </b>			0.8	
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31	24	270,000	ļ						L			1.0	
Total													
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Maxim	un.	375,000	1										

\* 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: 5eot 2024											
Α.	Public Water System (PWS) Information											
	PWS Name: Weathersfield			PWS Identification Nu	mber: 3591451							
	PWS Type: Community Non-Transient Non-Community	/ Transie	nt Non-Community	Consecutive								
	Number of Service Connections at End of Month: 1,206		Total Population Served	at End of Month: 4,22								
	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 Nu	<u>mber: 407-869-6961</u>								
	Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com											
В.	Water Treatment Plant Information		· · · · · · · · · · · · · · · · · · ·		······································							
	Plant Name: Utilities, Inc. of Florida		·	Plant Telephone Numb								
	Plant Address: 200 Weathersfield Ave.		City: Altamonte Spring	s State: Fl	Zip Code: 32714							
		hased Finished	Water									
	Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1	.12 MGD										
	Plant Category (per subsection 62-699.310(4), F.A.C.): IV	and the second second in a second second second second second		ion 62-699.310(4), F.A.C.): (								
	Ciconical Complete States and State											
	Lead/Chief Operator: Mike Gavaletz	C	5642	Mon Fri. 8 A.N								
	Other Operators: 24 Terry Sillitoe	C	12749	San. 8 A.M	4:30 P.M.							
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#### II. Certification by Lead/Chief Operator

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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.

el ( wate 10/5/04 Michael J. Gavaletz C5642 Printed or Typed Name License Number Signature and Date

PWS Identification Number: 3591451

Plant Name: Utilities, Inc. of Florida - Winting Fillo

111. Daily Data for the Month Year of: Sept 2004																
Means of Achieving Four-Log Virus Inactivation/Removal: * 🛛 Free Chlorine 🗌 Chlorine Dioxide 🛄 Ozone 📋 Combined Chlorine (Chloramines)																
Ultraviolet Radiation Other (Describe):																
Type of D	isinfec	tant Residu	al Maintain	ed in Distribut	ion System:	F	ree Chl	orine	Com	bined Ch	lorine (C	hloramines)		Chlorine Di	oxide	
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Maximum 369 022

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

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See page 4 for instructions.

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1.	veneral mornation i												
A. ]	Public Water System (P	WS) Information											
	PWS Name: Weathersf	ield				PWS Identification Nu	umber: 3591451						
	PWS Type: 🛛 🛛 C	community Non-Transient Non-C	ommunity Transie	ent Non-Community		nsecutive							
	Number of Service Cor	nnections at End of Month: 1,206		Total Population S	erved at Er	nd of Month: 4,221							
1	PWS Owner: Utilities,	Inc. of Florida											
	Contact Person: Patrick	c Flynn		Contact Person's T	itle: Regio	nal 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-Ma	il Address: p.c.flynn@utilitiesinc-usa.co	m										
В.	Water Treatment Plant	Information											
	Plant Name: Utilities, I	Inc. of Florida				Plant Telephone Num	ber: 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 Water												
	Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.12 MGD												
	Plant Category (per sul	bsection 62-699.310(4), F.A.C.): IV		Plant Class (per su	bsection 6	2-699.310(4), F.A.C.):	С						
	Licensed Operators	Name	Liconse Clas	S MERCENSON NUMBER		C CONTRACTOR OF THE	(a) Worked						
	Lead/Chief Operator:	Mike Gavaletz	С	5642		Mon Fri. 8 A.	M 4:30 P.M.						
	Other Operators:	Terry Sillitoe	С	12749		San. 8 A.M.	- 4:30 P.M.						
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### II. Certification by Lead/Chief Operator

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11/4/04 TATOLA Michael J. Gavaletz C5642 Signature and Date ( Printed or Typed Name License Number

PWS Identification Number: 3591451

.

Plant Name: Utilities, Inc. of Florida

HI. Daily Data for the Month A car of: Oct 2009 Means of Achieving Four-Log Virus Inactivation/Removal: * S Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)														
Ultraviolet Radiation Other (Describe):														
		ectant Residu	ual Maintain	ed in Distribut	ion System:		ree Chl	orine		bined Ch	lorine (C	hloramines)	Chlorine Dioxide	
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the	Plant in	Water	Peak Flow,	During Beak	Peek Flow,	Peak Flores		Weiter, If	1. mg	,⊂m₩+	n W	Distribution'	or Maintenance Work that Involves Taking Water	
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31	24	228,00	<u> </u>	+		<u> </u>		ļ	1	1	ļ	1.0		
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\* Refer to the instructions for this report to determine which plants must provide this information.

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See page 4 for instructions.

1.	General Information f	or the Month/Year of: Nov2007										
	Public Water System (P											
	PWS Name: Weatherst	ield			PWS Identification Nu	mber: 3591451						
	PWS Type: 🛛 C	ommunity Non-Transient Non-Community	Transie		onsecutive							
	Number of Service Con	nnections at End of Month: 1,206		Total Population Served at	End of Month: 4,231							
	PWS Owner: Utilities,	Inc. of Florida										
	Contact Person's Patrick Flynn       Contact Person's Title: Regional Director         Contact Person's Mailing Address: 200 Weathersfield Ave       City: Altamonte Springs       State: Fl       Zip Code: 32714											
Condet Telson's Walking Address. 200 Weathersheld Area												
	Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961											
		il Address: p.c.flynn@utilitiesinc-usa.com										
В.	Water Treatment Plant		· · · · · · · · · · · · · · · · · · ·	······································		(07.0(0.1010						
	Plant Name: Utilities, I				Plant Telephone Num							
ļ	Plant Address: 200 We			City: Altamonte Springs	State: Fl	Zip Code: 32714						
	Type of Water Treated		hased Finished	Water								
		ay Operating Capacity of Plant, gallons per day: 1.	12 MGD		(0, (00, 210(4), F, A, C, ))							
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): IV	a na ha na hadana iran ' anna	Plant Class (per subsection								
		a and a second second second second second second second second second second second second second second second										
	Lead/Chief Operator:		<u> </u>	5642	Mon Fri. 8 A.M							
	Other Operators:	Terry Sillitoe	C	12749	San. 8 A.M.	4:30 P.M.						
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### H. Certification by Lead/Chief Operator

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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.

1) Garates 12/2/04 Michael J. Gavaletz C5642 Signature and Date  $\mathcal{O}$ License Number Printed or Typed Name

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TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER	SSMA ACH LACAHA NULI VAHOU A IM INUW
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	Section 2	12.01					Deprived a	CONTRACTOR OF	Control House		1. N		
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WATER

See page 4 for instructions.

1.	<b>General Information</b> :	for the Month/Year of: 0 eC - Z004								
A.	Public Water System (F	PWS) Information								
	PWS Name: Weathers	field				<b>PWS Identification Nu</b>	mber: 3591451			
		Community Non-Transient Non-Community	Transier	nt Non-Community		secutive				
		nnections at End of Month: 1, 206		<b>Total Population S</b>	erved at Er	nd of Month: 4221				
	PWS Owner: Utilities,									
	Contact Person: Patric		Contact Person's T	itle: Region						
	Contact Person's Maili	ing Address: 200 Weathersfield Ave.		City: Altamonte S		State: Fl	Zip Code: 32714			
	Contact Person's Telep	phone Number: 407-869-1919	Contact Person's F	ax Number	r: 407-869-6961					
	Contact Person's E-Ma	ail Address: p.c.flynn@utilitiesinc-usa.com		·						
В.	Water Treatment Plant	Information								
Ì	Plant Name: Utilities,	Inc. of Florida				Plant Telephone Num				
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										
		Day Operating Capacity of Plant, gallons per day: 1.1	12 MGD	<u>,</u>						
		bsection 62-699.310(4), F.A.C.): IV		the second second second second second second second second second second second second second second second s	bsection 62	2-699.310(4), F.A.C.):				
	Licensed Operators	Name	License Class	License Number	·	Day(s)/Shift(				
	Lead/Chief.Operator		C	5642		Mon Fri. 8 A.M				
	າວາກກາວກາວການຄາວ	Terry Sillitoe	с	12749		San. 8 A.M	4:30 P.M.			
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l	RECEIPTION					<u></u>				

### II. Certification by Lead/Chief Operator

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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.

1005 nature and Date

RAYMOND ALAN PARRISH Michael J. Gavaletz

Printed or Typed Name

C-12740 C5642

License Number

FILE COPY

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REATING RAW GROUND WATER OR PURCHASED FINISHED WAY SHITARY	

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nc. of Florida	Plant Name: Utilites, I	/

PWS Identification Number: 359145

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or Maintenance Work that Involves Taking Water	Distribution	-мш	ר. אש	-810	Water, if		Peak Plow,	Peak Flow,	During Peak	Peak Flow	Water	ก่าณเจ	្រុះ
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\* Refer to the instructions for this report to determine which plants must provide this information.

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See page 4 for instructions.

1.	General Information	for the Mont	It Year of: January/2005					
<b>A</b> .	Public Water System	(PWS) Informa	ation					
	PWS Name: Weather	sfield					<b>PWS Identification Nu</b>	umber; 3591451
		Community	Non-Transient Non-Commun	nity Transie	nt Non-Community		secutive	
	Number of Service C	onnections at I	End of Month: 1206		Total Population S	erved at Er	nd of Month: <u>H22</u>	1
	PWS Owner: Utilitie	s, Inc. of Florid	da					
	Contact Person: Patri				Contact Person's T			
			200 Weathersfield Ave.		City: Altamonte S		State: Fl	Zip Code: 32714
	Contact Person's Tele				Contact Person's F	ax Number	: 407-869-6961	
			.c.flynn@utilitiesinc-usa.com					· · · · · · · · · · · · · · · · · · ·
В.	Water Treatment Plan							h
	Plant Name: Utilites,						Plant Telephone Num	
	Plant Address: 200 V			hand Triatabad Y	City: Altamonte S	prings	State: Fl	Zip Code: 32714
	Type of Water Treate			urchased Finished	water			
			g Capacity of Plant, gallons per day 599.310(4), F.A.C.): IV	: 804,000	Plant Class (par su	beaction 6	2-699.310(4), F.A.C.):	C
			599.510(4), F.A.C.). IV				Day(O)(Shift)	
	Bendernie a Statement	Roy Mericle		C	13808		Tuc - Fri 8 a.n	
				С	12749		Sat. 8 A.M	4:30 P.M.
	Other Operatoria	Ray Parrish		С	12740		Mon 8 A.M.	- 4:30 P.M.
		5. 6						
		a l						

#### 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

Signature and Date

Roy J. Mericle Printed or Typed Name

License Number

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Plant Name: Utilites, Inc. of Florida

PWS Identification Number: 3591451

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Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water	Point in Distribution System, mg/L	,bənupəX -Wm Sec/cm <sup>2</sup>	<sup>2</sup> mɔ/ɔəɛ -Wm VU Dose,	,bətiupəЯ -am J\nim	pH of Water, if Applicable	of "Stater, "C	Durring Peak Flow, mg-min/L		First Customer During Peak Flow, mg/L	Peak Flow Rate, gpd	Produced, gal	Plant in	ခၾာ
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\* Refer to the instructions for this report to determine which plants must provide this information.

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See page 4 for instructions.

1.	General Information	for the Month Year of: February/2005					· · · · · · · · · · · · · · · · · · ·
Α.	Public Water System (F	PWS) Information					
	<b>PWS Name: Weathers</b>	field			PWS Ider	tification N	umber: 3591451
	PWS Type: 🛛 🖸 C	Community Non-Transient Non-Com	munity Transier	t Non-Community	Consecutive		
	Number of Service Co	nnections at End of Month: 1206		<b>Total Population Set</b>		th: 4,221	
	PWS Owner: Utilities,	Inc. of Florida					
	Contact Person: Patric	k Flynn		Contact Person's Tit	le: Regional Directo	or	
		ing Address: 200 Weathersfield Ave.		City: Altamonte Spr	ings S	State: Fl	Zip Code: 32714
	Contact Person's Teler	phone Number: 407-869-1919		Contact Person's Fa	x Number: 407-869	-6961	
i	Contact Person's E-Ma	ail Address: p.c.flynn@utilitiesinc-usa.com					
В.	Water Treatment Plant						
	Plant Name: Utilites, I				Plant Tel	ephone Nurr	nber: 407-869-1919
	Plant Address: 200 We			City: Altamonte Spi	rings State: Fl		Zip Code: 32714
	Type of Water Treated		Purchased Finished V	Vater			
		Day Operating Capacity of Plant, gallons per	day: 864,000				
		bsection 62-699.310(4), F.A.C.): IV		Plant Class (per sub	section 62-699.310	(4), F.A.C.):	C
	Licensed Operators	Name	License Class	License Number		Day(s)/Shif	t(s) Worked
	Lead/Chief Operator:	Roy Mericle	С	13808		Tue - Fri 8 a.	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.	4:30 P.M.

#### 11. Certification by Lead-Chiel 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.

Man 2-28-05 Printed or Typed Name

Signature and Date

C13808

602

License Number

PWS Identification Number: 3591451 Plant Name: Utilites, Inc. of Florida														
PWS	dentifica	tion Number	r: 3591451		P	lant Name	: Utilit	es, Inc. of	Florida					
	uili Dat	A for the M	with Xoor o	f: February/2	2005									
March 14	of A shi	i line tale off	ag Vinus In	activation/Rem		Free Ch	loring		hlorine D	liovide	Oz	one DC	om	bined Chlorine (Chloramines)
		eving Four-L Radiation	og virus in	Describe):		A rice Ci	norme			IUXIUE			20111	undu emornie (emorumnos)
										1. 1.01				Chlorine Dioxide
Type of	of Disinfe	ectant Residu	al Maintain	ed in Distribut	ion System:	F	ree Ch	lorine		bined Ch	lorine (C	hloramines)		Chlorine Dioxide
		. j	<u> </u>	T Calculations, or			our-Log	Virus Inactiv	ation, IT Ap	UV I	2000	l		
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				Lowest Residual	Disinfectant	Provided						Residual		
				Disinfectant	Contact Time	Before or					Minimu	Disinfectant		
				Concentration	(T) at C	at First			Minimu	Lowest	mUV	Concentration		
		Net Quantity		(C) Before or at	Measurement	Customer	Temp.		m CT	Operating	Dose	at Remote	_	
Day of		of Finished	1. A.	First Customer	Point During	During	of	pH of		UV Dose,	Required,	Point in	Emo	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 System, mg/L	0	r Maintenance Work that Involves Taking Water System Components Out of Operation
Monu	Operation		Rate, gpd	Flow, mg/L	minutes	mg-min/L	<u>°C</u>	Applicable	min/L	sec/cm <sup>2</sup>	sec/cm <sup>2</sup>			System Components Out of Operation
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10	24	275,000		{	1			<u> </u>	<u> </u>	1		2.2		
11	24	280,000		1								1.5		
12	24	229,000		1			1		<u> </u>	1		1.3		
13	24	327,000			1									
14	24	327,000										2.5		
15	24	282,000										1.5		
16	24	339,000										1.5		
17	24	324,000										1.3		
18	24	305,000							<u> </u>			1.5	1	
19	24	298,000	I		ļ				J	<u> </u>	<b></b>	1.3	<b>_</b>	
20	24	337,000	ļ	ļ	ļ			<b></b>	ļ		<b> </b>	<b> </b>	1	
21	24	337,000		ļ	<u> </u>	[	<b>_</b>	<b></b>	<b></b>		<b></b>	1.2	4	
22	24	316,000	<u> </u>	<u> </u>	<b>.</b>	ļ	<b>_</b>		<b>_</b>		<b> </b>	1.0	+	
23	24	305,000	<u> </u>	<b>_</b>	+	ļ	+		·}	·		<u>1.7</u> 1.9	4	
24	24	289,000					<b></b>			- <b> </b>		1.9	+	
25	24	245,000	<b></b>		+				+	+		1.7	+	
26	24	245,000			+	<u> </u>	+				<u> </u>	1.0	+	······································
27	24	288,000 288,000	<u> </u>	+	+		+	+	+	+	+	1.5	+	
28	24	288,000	+	+		<u> </u>	+	+	+	+	+	<u> </u>	+	
30	24	<del>{</del>	{	+		<u>↓</u>	+	+	+	+	+		+	
30	24	+	<u>+</u>	+	· † · · · · · · · · · · · · · · · · · ·	<u> </u>	+	+	1	1	+	+	+	
Total	L	8,026,000	+	. <u>I </u>					- <b>L</b>					
Avera	7C	286,642	1											
Maxin		339,000	1											

DEP Form 62-555.900(3) Effective August 28, 2003

\* 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: March/2005 A. Public Water System (PWS) Information PWS Identification Number: 3591451 PWS Name: Weathersfield Consecutive Community Non-Transient Non-Community Transient Non-Community PWS Type: Number of Service Connections at End of Month: 1206 Total Population Served at End of Month: 4.221 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 Water Treatment Plant Information B. Plant Name: Utilites, Inc. of Florida Plant Telephone Number: 407-869-1919 State: Fl Zip Code: 32714 Plant Address: 200 Weathersfield Ave. 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: 864,000 Plant Category (per subsection 62-699.310(4), F.A.C.): IV Plant Class (per subsection 62-699.310(4), F.A.C.): C Day(s)/Shift(s) Worked Licensed Operators Name License Class License Number Tue - Fri 8 a.m. - 4:30 p.m. Lead/Chief Operator: 13808 Roy Mericle С Sat. 8 A.M. - 4:30 P.M. Terry Sillitoe С 12749 Other Operators: С Mon 8 A.M. - 4:30 P.M. Ray Parrish 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.

3-71-5

Roy J. Mericle

C13808

Signature and Date

Printed or Typed Name

License Number

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D--- 1

1

PWS Identification Number: 3591451

- - - -

.. ... . . .

Plant Name: Utilites, Inc. of Florida

Ш Б	aily Dat	a for the Me	mth/Year o	f: March/200	5								
				activation/Rem		Free Ch	lorine		hlorine D	lioxide	ΠOz	one 🗌 (	Combined Chlorine (Chloramines)
	raviolet l	Radiation		Describe):				<u>ل</u> ا		10/100			
				ed in Distribut	on System.		ree Chl	orine		hined Ch	lorine (C	hloramines)	Chlorine Dioxide
				Calculations, or U									
1					CT Calcul		ur Lob	1 11 (LJ 11110-11)		UV	Dose		
	1.1					Lowest CT			and an and a second second second second second second second second second second second second second second			Lowest	
				Lowest Residual	Disinfectant	Provided						Residual	
				Disinfectant Concentration	Contact Time (T) at C	Before or at First			Minimum	Tennet	Minimum	Disinfectant Concentration	
		Net Quantity		(C) Before or at		Customer	Temp,		СТ	Operating	UV Dose	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,	Water,	Water, if	mg-	mW-	mW-	Distribution System, mg/L	or Maintenance Work that Involves Taking Water
Month	Operation		Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm <sup>2</sup>	sec/cm		System Components Out of Operation
2	24	281,000 288,000							<b> </b>		<u> </u>	1.4	
3	24	250,000							i			1.4	
4	24	298,000		1								1.6	
5	24	207,000				······································				[	1	0.8	
6	24	327,000											
7	24	328,000										1.5	
8	24	247,000							1			1.2	
9	24	275,000		<u> </u>			ļ		ļ			1.6	
10	24	239,000	L	<b> </b>					l			1.7 1.6	
11 12	24 24	267,000 262,000		<b> </b>		<u> </u>		<u> </u>		<b> </b>	<del> </del>	1.6	
12	24	342,000		<u> </u>	l		<u> </u>	<u> </u>	<u> </u>	<b> </b>		1.3	
14	24	343,000		<u> </u>					<u> </u>	<u> -</u>	<u> </u>	1.8	
15	24	250,000		1	1		t	<u> </u>	1	t	1	1.3	
16	24	291,000										1.5	
17	24	256,000		I								1.3	
18	24	220,000										1.6	
19	24	222,000	Į	Į	L			L			<b></b>	1.7	
20	24	318,000	ļ	ļ	<b></b>	I	<b> </b>	1	<u> </u>	ļ		1	
21	24 24	318,000 190,000			<u> </u>	<u> </u>		<b> </b>	+		+	1.2	
23	24	247,000	<b>}</b>		+		ł		+	╂-───	+	1.2	
24	24	235,000	<u> </u>		<u> </u>			1	<del> </del>	<u> </u>	<u>+</u>	1.5	<u> </u>
25	24	244,000	t	1	1	t	<u>†</u>		1	1	1	1.6	
26	24	142,000		1	· · ·	<u> </u>		1			1	1.7	
27	24	274,000		1	1		1						
28	24	274,000		1								1.8	
29	24	278,000	ļ		L					L		1.6	
30	24	155,000	<b> </b>			ļ	ļ	ļ		<b>_</b>		1.3	
31	24	275,000	<b> </b>		<u> </u>	l	L	L	1	L	.l	1.30	L
Total Averag		8,143,000 262,677	-										
Maxin		343,000	4										

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





See	page 4 for instructions.						$\psi \cup \circ$
1.	General Information (	or the Month/Year of: April/2005					
Α.	Public Water System (P	WS) Information					
	PWS Name: Weatherst	ĩeld				<b>PWS Identification N</b>	umber: 3591451
	PWS Type: 🛛 🛛 C	Community Non-Transient Non-Comm	unity 🗌 Transier	t Non-Community		nsecutive	والمراجعة ومسترجع والمنافع المطاور فستنزع المتراج ومسرد مسترجع والمراجع والمراجع والمتحاص
	Number of Service Con	nnections at End of Month: 1206		<b>Total Population S</b>	erved at E	nd of Month: 4.221	
	PWS Owner Utilities.	Inc. of Florida					
i	Contact Person: Patricl	k Flynn		Contact Person's T		onal Director	
		ng Address: 200 Weathersfield Ave.		City: Altamonte Sp	يستجلبني ويتجلب والبار	State: Fl	Zip Code: 32714
	Contact Person's Telep	hone Number: 407-869-1919		Contact Person's F	ax Numbe	er: 407-869-6961	
		il Address: p.c.flynn@utilitiesinc-usa.com				والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع	
<b>B</b> .	Water Treatment Plant	الألة الأجرب بيري بالبائل الرابي ويرتبان ويراقعها فالتناقين وفالت وفالت والنفاذ فنفع والمتعافل ومؤت فنفاك ومراجعها					
	Plant Name: Utilites, I					Plant Telephone Nun	
	Plant Address: 200 We			City: Altamonte S	prings	State: Fl	Zip Code: 32714
	Type of Water Treated		Purchased Finished V	Vater			
		Day Operating Capacity of Plant, gallons per d	ay: 864,000				
		bsection 62-699.310(4), F.A.C.): IV			bsection (	52-699.310(4), F.A.C.):	
	Licensed Operators	Name	Liçense Class	License Number		Day(s)/Shift	
	Lead/Chief Operator:	Roy Mericle	С	13808		Tue - Fri 8 a.	ستبتز تحبيها فتجهر بمتعلة البرني بإراعة ومجاجز فيست بسيسيوفي والدائر وتباغ بالبري بالجهير والبري با
	Other Operators:	Terry Sillitoe	С	12749		Sat. 8 A.M.	والمحمد المراجع والمحف والمحمد المحمول والمحمد والمحمد والمحمد والمحمد والمحمد والمحمد والمحمد والمح
		Ray Parrish	C	12740		Mon 8 A.M.	• 4:30 P.M.
						····	
	t	<u> </u>	L	L	L		

#### 11. 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.

5-3-05

Roy J. Mericle Printed or Typed Name C13808

License Number

Signature and Dale

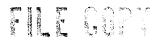
DEP Form 62-555.900(3) Effective August 28, 2003

PWS Identification Number: 3591451

Plant Name: Utilites, Inc. of Florida

111, D	aily Data	a for the Me	mth/Yeav o	6: April/2005									
Means	of Achie	eving Four-L	og Virus In	activation/Rem	ioval: * 🚺	Free Cl	lorine		hlorine D	hioxide	[] Oz	ione 🔲 (	Combined Chlorine (Chloramines)
		Radiation	🗍 Other (	Describe):							ا معد الكام جور يني		
Type	of Disinfe	ectant Residu	al Maintain	ed in Distribut	ion System:		ree Chi	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
			C	r Calculations, or	UV Dose, to De	monstrate Fo	ur-Log	Virus Inactiv	ation, if Ap	plicable*			
					CT Calcul					UV	Dose		
				·		Lowest CT						Lowest Residual	
				Lowest Residual		Provided					Minimu	Disinfectant	
				Evisinfectant Concentration	Contact Time (T) at C	Before or at First			Minimu	Lowest	mUV	Concentration	
		Net Quantity		(C) Before or at		Customer	Temp.		m CT	Operating		at Remote	
Day of	Hours	of Finished		First Customer	Point During	During	of	pHof	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, if	mg-	mW-2	mW-2	Distribution System, mg/L	or Maintenance Work that Involves Taking Water System Components Out of Operation
Month		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-mín/L	°C	Applicable	min/L	sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	0,9	Flow meter out of service
1	24	275,000	<u> </u>	<u> </u>	<u> </u>		<b> </b>		<b> </b>	<u> </u>	<b>ļ</b>	1,3	Flow meter out of service
2	24	275,000	<u> </u>	<u></u>	<u> </u>	<u> </u>		<b>}</b>	<b> </b>	<b> </b>	<b> </b>	1,3	
3	24	275,000		<b></b>	<b></b>	<u> </u>	<b></b>	<b>{</b>	<b></b>	<b> </b>	<u> </u>	1,6	
4	24	275,000				<u> </u>	┟───			<u> </u>	╂	1.5	······································
5	24	275,000	{	<u> </u>	<u> </u>	<u> </u>	<b> </b>	<u> </u>	<u> </u>		<u> </u>	2,1	
6	24 24	275,000	+	<u> </u>		<u> </u>		<u> </u>	<u> </u>		+	2,0	
8	24	275,000	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	1.7	
9	24	275,000	÷			╂	<u>†</u>	1	<u> </u>	<u>+</u>	<u> </u>	2.0	
10	24	275,000	+				1		t	<u>+</u>	1	1	
	24	275,000	+	1		t	1		t	1	1	1,6	
12	24	275,000	1		1	1	1		1			1.8	
13	24	275,000	1		1	†	1	1				1,5	
14	24	275,000				T						1,6	
15	24	275,000	1	1	1							1,5	
15	24	275,000		1							<u></u>	1,7	
17	24	275,000	1						<u> </u>			<u> </u>	
18	24	275,000					<u></u>					1.4	
19	24	275,000										1.3	
20	24	275,000	1		4		<b>_</b>	<u> </u>	+	+	<u>.</u>	1,8	
21	24	275,000			4		┿~~~~			+	-+	2.2	
22	24	275,000					+		+	- <b> </b>		2.5	
23	24	275,000					-{			- <del> </del>		4,5	
24	24	275,000				·	+					1.4	
25	24	275,000	-+		+	+			+			1.5	
25	24	275,000	- <b>h</b>		+	+	+		-			1.6	
27	24	275,000 275,000				-+	+		+			1.6	
28	24	275,000					-+		+		-	1.5	
30	24	275,000	- <u> </u>				+	-1	1	1		1,3	All flows estimated - Flow meter OOS
31	+		-+	-+		1	1	1					
Total		8,250,000	-										
Aver	ge	275,000	7										
1.4		275 000	-										

Maximum 275,000 \* 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: May/2005		· · · · · · · · · · · · · · · · · · ·								
A. Public Water System (P	WS) Information										
PWS Name: Weatherst	field			P	WS Identification Nu	umber: 3591451					
PWS Type: 🛛 🖸 C	Community Non-Transient Non-Community	Transier	nt Non-Community	<u> </u>	cutive						
Number of Service Con	nnections at End of Month: 1206		Total Population S	erved at End	of Month: 4221						
PWS Owner: Utilities,	Inc. of Florida										
Contact Person: Patrick	k Flynn		Contact Person's T	itle: Regiona	I Director	<b></b>					
Contact Person's Maili	ng Address: 200 Weathersfield Ave.		City: Altamonte S	prings	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										
B. Water Treatment Plant	Information										
Plant Name: Utilites, In				P	lant Telephone Num						
Plant Address: 200 We			City: Altamonte S	prings S	tate: Fl	Zip Code: 32714					
Type of Water Treated		nased Finished W	Vater			······································					
Permitted Maximum D	Day Operating Capacity of Plant, gallons per day: 86	54,000									
Plant Category (per su	bsection 62-699.310(4), F.A.C.): IV			ubsection 62-6	699.310(4), F.A.C.):						
Licensed Operators	Name	License Class	License Number		Day(s)/Shift	(s) Worked					
Lead/Chief Operator:	Kathy Sillitoe	С	13094		Mon F	ri Days					
Other Operators:	Terry Sillitoe	В	12749		Thurs. Fri.	Sat.Days					
	Roy Mericle	С	13808		Tues- Fri Days From	1 5/1 Untill 5/17/05					
and the second second second second second second second second second second second second second second second	Alex Lorenzo	С	13756		Mon.We	ed Days					
	Roger Holsapple	C	7436		Tues.	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.

Kathy Sillitoe

<u>C-13094</u> License Number

Signature and Date

.. .....

Printed or Typed Name

6-2-05

PWS Identification Number: 3591451

Plant Name: Utilites, Inc. of Florida

111. 1	Daily Dat	a for the Mc	onth/Year o	f: May/2005									· · · · · · · · · · · · · · · · · · ·
III. Daily Data for the Month/Year of:       May/2005         Means of Achieving Four-Log Virus Inactivation/Removal: *       X         Free Chlorine       Chlorine Dioxide       Ozone         Combined Chlorine (Chloramines)													
Ultraviolet Radiation Other (Describe):													
Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines)													
			C	r Calculations, or l	JV Dose, to De	monstrate Fo	ur-Log	Virus Inactiv	ation, if Ap	plicable*			Name of the second second second second second second second second second second second second second second s
CT Calculations UV Dose								[방법]					
				Lowest Residual	Disinfectant	Lowest CT Provided						Lowest Residual	
				Disinfectant	Contact Time	Before or						Disinfectant	
		$\sim$		Concentration	(T) at C	at First			Minimum		Minimum	Concentration	2013년 1월 2013년 1월 2013년 1월 2013년 1월 2013년 1월 2013년 1월 2013년 1월 2013년 1월 2013년 1월 2013년 1월 2013년 1월 2013년 1월 201 1월 2013년 1월 2
Day of	Hours	Net Quantity of Finished		(C) Before or at First Customer	Point During	Customer	Temp. of	pH of	CT Required,	Operating	UV Dose Required,	at Remote Point in	Emergency or Abnormal Operating Conditions; Repair
the	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,		Water, if	mg-	mW-	mW-	Distribution	or Maintenance Work that Involves Taking Water
Month	Operation		Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L,	sec/cm <sup>1</sup>	sec/cm <sup>2</sup>	System, mg/L	System Components Out of Operation
	24	275,000		ļ									
2	24 24	270,000 275,000		· · · · · · · · · · · · · · · · · · ·				<u> </u>				1.00	
4	24	275,000										1.60 1.80	
5	24	275,000						f				1.80	
.6	24	275,000	·····	· · · · · · · · · · · · · · · · · · ·								1.90	
7	24	275,000										1.60	
8	24	275,000		<u> </u>									
9	24	275,000		<u> </u>								1.40	
10	24 24	275,000 275,000				ļ	ļ	<b> </b>			ļ	1.50	
12	24	275,000		1	<b>}</b>		}		<u> </u>		<u> </u>	1.50 1.40	
13	24	275,000										1.40	
14	24	275,000									<u> </u>	1.30	
15	24	275,000						1	T				
16	24	275,000						1				1.40	
17	24	275,000			ļ							1.80	
18	24 24	275,000 275,000			ļ			<u></u>			<u> </u>	1.80	
20	24	275,000					<b> </b>		<u> </u>	<u> </u>		<u>1.50</u> 1.60	
21	24	275,000			+	<u> </u>	<u>}</u> ───	<u> </u>		┣╼	1	1.60	
22	24	275,000				<u> </u>		1			<u>+</u>	1.00	
23	24	275,000										1.60	
24	24	275,000										1.50	
25	24	275,000			<u> </u>		<b></b>	<u> </u>			<u> </u>	1.20	
26	24	275,000 275,000	<u> </u>		<b> </b>		<u> </u>	╂────	<u> </u>	ļ	ļ	1.40	
28	24	275,000	<u> </u>			<u>├</u> ───	+	+	+		+	1.10 1.40	
29	24	275,000	<u> </u>		<u> </u>	<del> </del>		·   ·····	+	<u> </u>	<u> </u>	1.40	
30	24	275,000		1	1		<u> </u>		1	1		1.60	·
31	24	275,000										1.50	
Total		8,520,000											
Avera		274,838	4										

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

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PWS Identification Number: 3591451

Plant Name: Utilites, Inc. of Florida

### IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: \* May/2005

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						
	llows:							
	Polymer Dose, ppm =	Acrylamide Level, % <sup>†</sup> =						
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:							
		Epichlorohydrin Level, % <sup>†</sup> =						
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	V/L as SiO <sub>2</sub> =						

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.





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See page 4 for instructions.

l.	General Information	for the Month/Year of: June/2005							
Α.	Public Water System (F	WS) Information							
	PWS Name: Weathers	field				<b>PWS Identification N</b>	umber: 3591451		
	PWS Type: 🛛 🔿 C	Community Non-Transient Non-Community	Transien	t Non-Community		secutive			
	Number of Service Co	nnections at End of Month: 1206		<b>Total Population S</b>	erved at En	d of Month: 4221			
	PWS Owner: Utilities,	Inc. of Florida							
	Contact Person: Patricl	k Flynn		Contact Person's T	itle: Regior	nal Director			
i	Contact Person's Maili	ing Address: 200 Weathersfield Ave.		City: Altamonte Sp	orings	State: Fl	Zip Code: 32714		
	Contact Person's Telep	bhone Number: 407-869-1919		Contact Person's Fax Number: 407-869-6961					
		ail Address: p.c.flynn@utilitiesinc-usa.com							
В.	Water Treatment Plant								
	Plant Name: Utilites, I					Plant Telephone Num	ber: 407-869-1919		
	Plant Address: 200 We			City: Altamonte S	Zip Code: 32714				
	Type of Water Treated		nased Finished V	Vater					
		Day Operating Capacity of Plant, gallons per day: 86	64,000			······			
		bsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C					
	Licensed Operators	Name	License Class	License Number		Day(s)/Shift	(s) Worked		
	Lead/Chief Operator:	Kathy Sillitoe	С	13094		MonFr	i. Days		
	Other Operators:	Alexander Lorenzo	С	13756		MonTh	ur. Days		
		Terry Sillitoe	В	12749		Thur. Fri &	Sat. Days		
						·			
		1	L						

#### 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.

00. 10

7-28-05

Kathy Sillitoe

C - 13094

Signature and Date

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Printed or Typed Name

License Number

Dama 1

PWS Identification Number: 3591451

- - - -

Plant Name: Utilites, Inc. of Florida

	H. Daily Data for the Month/Year of: June/2005												
Means	Aeans of Achieving Four-Log Virus Inactivation/Removal: * 🗌 Free Chlorine 🗌 Chlorine Dioxide 🗌 Ozone 🗌 Combined Chlorine (Chloramines)												
	_	Radiation		(Describe):									
Туре	of Disinf	ectant Residu		ned in Distribut		⊠ F	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
			C	T Calculations, or l			our-Log	Virus Inactiv	ation, if Ap				
					CT Calcul		in de la secola de la secola de la secola de la secola de la secola de la secola de la secola de la secola de l La secola de la secol			UΥ	Dose		
				Lowest Residual Disinfectant	Disinfectant	Lowest CT Provided						Lowest Residual	
	1 at 1			Concentration	Contact Time (T) at C	Before or at First			Minimum	Lowest	Minimum	Disinfectant Concentration	
		Net Quantity		(C) Before or at	Measurement	Customer	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		UV Dose,		Point in	Emergency or Abnormal Operating Conditions; Repair
	Operation		Rate, gpd	During Peak Flow, mg/L	Peak Flow, minutes	Peak Flow, mg-min/L	Water, °C	Water, if Applicable	mg <del>.</del> min/L	mW- sec/cm <sup>2</sup>	mW- sec/cm <sup>2</sup>	Distribution System, mg/L	or Maintenance Work that Involves Taking Water System Components Out of Operation
1	24	275,000				ing miles		· ippilouoio		300/0111	secrem	0.60	est. flow
2	24	275,000										1.40	est.flow
3	24	255,000										1.70	
4	24	234,000										1.60	
5	24	340,500					<u> </u>						
<u>6</u> 7	24 24	340,500 · 278,000		<b></b>			ļ		<u> </u>			1.40	
8	24	278,000					<b> </b>					1.20	
9	24	272,000		+					<u> </u>			1.00	Collected bacts
10	24	236,000		ł					<u>├</u>			1.20	
11	24	292,000		+			l	<u> </u>	┠────		<u> </u>	1.40	
12	24	304,500						l					
13	24	304,500										1.00	
14	24	176,000										1.00	
15	24	290,000										1.40	
16	24	270,000				- <u></u>		ļ				1.20	
17	24	284,000	l		<b> </b>				ļ	Ļ	ļ	1.30	
<u>18</u> 19	24 24	280,000 366,500			<b> </b>		<b> </b>		ļ		<b> </b>	1.30	
20	24	366,500						<u> </u>	<u> </u>	<u> </u>		1.00	······
21	24	258,000		+	<u> </u>			<u> </u>				0.80	
22	24	250,000		1	1		1			1	1	0.80	• · · · · · · · · · · · · · · · · · · ·
23	24	204,000			1	1	1		1	†	1	0.80	
24	24	270,000										0.90	
25	24	196,000										1.10	
26	24	355,000		<u> </u>	ļ		<u> </u>	ļ	ļ	ļ	ļ		
27	24 24	355,000					<b> </b>	l	Ļ		<u> </u>	1.00	
28 29	24	202,000			l				<b> </b>			0.80	
30	24	180,000	<u> </u>		<u> </u>	<u> </u>	<del> </del>	<u> </u>	<b> </b>	<b> </b>		0.60	
31	24	180,000	+	+	<u> </u>	<b> </b>	+	<u>├</u> ───	+	+	+	1.30	
Total	L~``	8,214,000				L	I		.L	J	.L	I	I
Averag	e	273,800	1										
Maxim	um	366,500	1										

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



See page 4 for instructions.

General Information for the Month/Year of: Inly/2005

FILE GOPY

Α.	Public Water System (P	PWS) Information				······································			
[	PWS Name: Weatherst	field				PWS Identification Nu	mber: 3591451		
	PWS Type: 🛛 🔿 C	Community Non-Transient Non-Community	Transier	nt Non-Community	Cor	nsecutive			
		nnections at End of Month: 1206		<b>Total Population S</b>					
	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: 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.com							
В.	Water Treatment Plant								
	Plant Name: Utilites, I					Plant Telephone Num			
	Plant Address: 200 We			City: Altamonte S	prings	State: Fl	Zip Code: 32714		
	Type of Water Treated		nased Finished V	Vater					
		Day Operating Capacity of Plant, gallons per day: 86	54,000						
		bsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C					
	Licensed Operators	Name	License Class	License Number		Day(s)/Shift	(s) Worked		
	Lead/Chief Operator:		С	13094		Mon Fr	i. Days		
	Other Operators:	Alexander Lorenzo	С	13756		Mon Th	ur. Days		
		Terry Sillitoe	В	12749		Thur Sa	nt. Days		
			<b></b>			,			
			<b> </b>				•		
		······································							
			1						

#### 11. 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.

00. toe

Kathy Sillitoe
Printed or Typed Name

8-3-05

C-13094 License Number

Signature and Date

Daga 1

PWS	PWS Identification Number: 3591451 Plant Name: Utilites, Inc. of Florida												
III. D	III. Daily Data for the Month/Year of: July/2005												
Means	of Achie	eving Four-L Radiation	og Virus In	activation/Rem Describe):	ioval: * [	Free Cl	lorine		hlorine D	lioxide	Oz	one 🗌 (	Combined Chlorine (Chloramines)
			ual Maintain	ed in Distribut	ion System:	F	ree Chl	orine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
			С	Calculations, or U	JV Dose, to De	monstrate Fo	ur-Log '	virus Inactiv	ation, if Ap	plicable*			
					CT Calcul	ations				UV	Dose		
					Disint	Lowest CT Provided	2001년 1993년 1997년 1997년 1997년					Lowest Residual	
				Lowest Residual Disinfectant	Disinfectant Contact Time	Before or						Disinfectant	
				Concentration	(T) at C	at First			Minimum	Lowest	Minimum	Concentration	
		Net Quantity		(C) Before or at	Measurement		Temp.		CT	Operating	UV Dose	at Remote	and the second second second second second second second second second second second second second second second
Day of	Hours	of Finished	<b>n</b> ., <b>n</b>	First Customer	Point During	During Date Flow	of	pH of Water, if		UV Dose, mW-	Required, mW-	Point in Distribution	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water
the Month	Plant in Operation	Water Produced, gal	Peak Flow Rate, gpd	During Peak Flow, mg/L	Peak Flow, minutes	Peak Flow, mg-min/L	Water, °C	Applicable	mg- min/L	sec/cm <sup>2</sup>		System, mg/L	System Components Out of Operation
1	24	258,000	ivate, gpu	1100, 1100		ing initial	<u> </u>	1.pp				1.0	
2	24	282,000	l	<b>1</b>	1							1.2	
3	24	366,000											
4	24	366,000										1.4	
5	24	358,000		L		[	<b></b> _		ļ			1.2	Hickory Ct boil water bacts
6	24	326,000				<b> </b>	ļ		<u>}</u>		<b> </b>	<u>1.0</u> 1.0	Hickory Ct boil water bacts Bacts
7	24 24	260,000 295,000		<u> </u>		<u> </u>	<u> </u>		<u> </u>		<u>}</u>	0.8	
8	24	293,000			1			<u>                                      </u>	<del> </del>	<u> </u>	<u> </u>	1.1	
10	24	277,000	<u> </u>	+			<u> </u>						
1 ii	24	277,000		1	1					1		0.6	
12	24	286,000	1									0.6	
13	24	269,000			1							0.8	
14	24	340,000			ļ	<u> </u>					<b></b>	1.6	
15	24	190,000	ļ	l	ļ		┣───	<u> </u>		ļ	<u> </u>	1.2	Plant Equipment Malfuction Bacts
16	24	214,000	ļ			╆────	╂────	┼───	+	<u> </u>		1.3	Plant Equipment Malfuction Bacts
17	24 24	328,000 328,000				<u> </u>	╆────	<del> </del>	+			1.4	
19	24	158,000	<u> </u>		<u> </u>		1		+	<u> </u>	+	0.8	
20	24	284,000			+	<u> </u>	1			<u> </u>		1.0	
21	24	267,000		1	1	1						0.9	
22	24	246,000										0.8	
23	24	265,000									<u> </u>	1.1	
24	24	309,000		1			<u> </u>	ļ		Į	<u> </u>	I	
25	24	309,000	<u> </u>	<u> </u>		<u> </u>		ļ			-{	0.8	
26	24	272,000				+	┼	╂	+		+	2.00	
27	24 24	362,000 302,000	. <del>]</del>	+	-}	+	+		+		+	1.00	
29	24	314,000			+	+	+	1			1	0.90	
30	24	298,000			1	+	+	1	1	1	1	0.90	
31	24	1	1	1		1	1	İ.	1				
Total		8,684,000											
Avera													
Maxir		366,000											
* Refe	er to the	instructions j	for this repo	rt to determine	which plant	s must pro	wide th	is informa	ation.				

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See page 4 for instructions.

		for the Month/Year of: August/2005				· · · · · · · · · · · · · · · · · · ·					
A. ]	Public Water System (P	PWS) Information									
	PWS Name: Weathers	field				PWS Identification N	lumber: 3591451				
ļ	PWS Type: 🛛 🛛 C	Community Non-Transient Non-Community	Transier	nt Non-Community	Cor	secutive					
	Number of Service Co	nnections at End of Month: 1206		Total Population S	erved at Er	nd of Month: 4221					
ļ	PWS Owner: Utilities,	Inc. of Florida									
	Contact Person: Patricl			Contact Person's T		nal Director					
		ng Address: 200 Weathersfield Ave.		City: Altamonte Springs State: Fl Zip Code: 32714							
		bhone Number: 407-869-1919		Contact Person's F	ax Number	r: 407-869-6961					
[		nil Address: p.c.flynn@utilitiesinc-usa.com									
В.	Water Treatment Plant										
	Plant Name: Utilites, In					Plant Telephone Nur					
	Plant Address: 200 We			City: Altamonte S	prings	State: Fl	Zip Code: 32714				
	Type of Water Treated		hased Finished V	Water			·				
		Day Operating Capacity of Plant, gallons per day: 86	54,000								
		bsection 62-699.310(4), F.A.C.): IV		Plant Class (per su							
	Licensed Operators	Name	License Class	License Number		Day(s)/Shif	t(s) Worked				
	Lead/Chief Operator:	Kathy Sillitoe	С			Mon	Fri. Days				
	Other Operators:	Alexander Lorenzo	С	13756		Mon T	hur. Days				
		Terry Sillitoe	B	12749		Thur S	Sat. Days				
		Allan Finch	С	7806		Mon	Fri. 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.

00. tol 9-2-05

Kathy Sillitoe

C13094

Signature and Date

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Printed or Typed Name

License Number

Dana 1

PWS Identification Number: 3591451

Plant Name: Utilites, Inc. of Florida

111. D	III. Daily Data for the Month/Year of: August/2005												
	Means of Achieving Four-Log Virus Inactivation/Removal: * 🛛 Free Chlorine 🗌 Chlorine Dioxide 📋 Ozone 🗌 Combined Chlorine (Chloramines)												
		Radiation		(Describe):	•								
			al Maintair	ned in Distribut	ion System:	F	ree Chl	orine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
			C	T Calculations, or	JV Dose, to De		w-Log	Virus Inactiv	ation, if Ap	plicable*		$\mathcal{H}^{\mathcal{O}}_{\mathcal{A}}$	
					CT Calcul					UV	Dose		
						Lowest CT						Lowest	
				Lowest Residual Disinfectant	Disinfectant Contact Time	Provided Before or			and the second			Residual Disinfectant	
				Concentration	(T) at C	at First			Minimum	Lowest	Minimum	Concentration	
		Net Quantity		(C) Before or at		Customer	Temp.		СГ	Operating	UV Dose	at Remote	
Day of	Hours	of Finished		First Customer	Point During	During	of	pHof	Required,	UV Dose,	Required,	Point in	Emergency or Abnormal Operating Conditions; Repair
the	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Pcak 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 <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	System Components Out of Operation
$\frac{1}{2}$	<u>24</u> 24	582,000 306,000		<u></u>			<b> </b>		<u> </u>			0.80	Bacts collected
$\frac{2}{3}$	24	292,000										0.40	
4	24	249,000						h	<u> </u>			0.60	
5	24	232,000										0.80	
6	24	238,000	····	1							<u> </u>	1.20	
7	24	373,500					1						
8	24	373,500		1								0.80	
9	24	284,000										0.80	
10	24	180,000										0.90	
11	24	277,000										0.90	
12	24	266,000					L					1.00	
13	24	326,000			ļ		ļ	ļ				1.4	
14	24	314,500					ļ	ļ			ļ		
15	<u>24</u> 24	314,500 294,000						ļ	<u></u>		Į	1.0	
17	24	302,000		+	<u> </u>		<u> </u>	<u> </u>	<del> </del>	ļ		0.8	
18	24	302,000	·	+	<b> </b>		┨	╂────			<u> </u>	0.8	
19	24	327,000		·	<u> </u>		<u></u>	1	<u> </u>			0.50	
20	24	298,000					1		<u> </u>		1	0.4	
21	24	325,500		1	1	<b>1</b>	1	1	1	·		1	
22	24	325,500						1		t	<u>                                      </u>	0.50	
23_	24	253,000										0.5	
24	24	374,000										1.6	
25	24	340,000			ļ		L					1.40	
26	24	215,000			<u> </u>	ļ	<u> </u>	<b></b>	<u> </u>		<u> </u>	1.0	
27	24	226,000	ļ	+	ł		──	<b> </b>	<u> </u>	ļ	<b> </b>	1.2	
28	24 24	361,000				<b>├</b> ───	<b> </b>	<u> </u>		<u> </u>	<u> </u>		
30	24	247,000			ł	+		<u> </u>	+			0.70.60	······································
31	24	305,000	<u> </u>	+	1	<del> </del>	+	+	+		<u> </u>	0.60	
Total	·	9,489,000	<u> </u>		. <b>I</b>	Ł	4		. L	J	<u> </u>	0.0	L
Averag	je	306,096	1										
Maxim		582,000	1										

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

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See page 4 for instructions.



### I. General Information for the Month/Year of: SEPTEMBER /2005

А. <sub>.</sub>	Public Water System (F	PWS) Information								
	<b>PWS Name: Weathers</b>	field				PWS Identification Nu	mber: 3591451			
	PWS Type: 🕅 🔿	Community Non-Transient Non-Community	/ Transier	<u>nt Non-Community</u>	<u> </u>	nsecutive				
	Number of Service Co	nnections at End of Month: 1206		<b>Total Population S</b>	Served at E	End of Month: 4221				
	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		Contact Person's Fax Number: 407-869-6961						
	Contact Person's E-Ma	il Address: p.c.flynn@utilitiesinc-usa.com								
В.	Water Treatment Plant	Information								
	Plant Name: Utilites, I	nc. of Florida				Plant Telephone Numb	per: 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 🗌 Purcl	hased Finished V	Vater						
	Permitted Maximum D	Day Operating Capacity of Plant, gallons per day: 86	54,000							
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C						
	Licensed Operators	Name	License Class	License Number		Day(s)/Shift(	s) Worked			
	Lead/Chief Operator:	ALLAN FINCH	С	7806		Mon Fri	. Days			
	Other Operators;	Terry Sillitoe	В	12749		Thur Sat	t. Days			
		Roger Holsapple	C	7436		Weekend (	Checks			
		Domenic Gentillucci	C	12562		Weekend (	Checks			
Î	an an an an an an an an an an an an an a									

#### 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.

Allan Finch

0-3-05

<u>C-7808</u>

Signature and Date

.. ......

ł,

Printed or Typed Name

License Number

PWS Identification Number: 3591451

----

Plant Name: Utilites, Inc. of Florida

111. 6	I. Daily Data for the Month/Year of: SEPTEMBER /2005												
Means	of Achi	eving Four-I	.og Virus In	activation/Rem	oval: * [	X Free Cl	lorine	ПС	hlorine D	Dioxide	07	one (	Combined Chlorine (Chloramines)
		Radiation	÷	(Describe): FC									, , , , , ,
Type	of Disinf	ectant Residu		ed in Distribut		F	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
- 7			С	r Calculations, or U	V Dose, to De	monstrate Fo							
				1. N. 1. N. 1. N. 1. N. 1. N. 1. N. 1. N. 1. N. 1. N. 1. N. 1. N. 1. N. 1. N. 1. N. 1. N. 1. N. 1. N. 1. N. 1. N	CT Calcul					UV	Dose		
						Lowest CT						Lowest	
				Lowest Residual Disinfectant	Disinfectant Contact Time	Provided Before or						Residual Disinfectant	
				Concentration	(T) at C	at First			Minimum	Lowest	Minimum	Concentration	
		Net Quantity		(C) Before or at	Measurement	Customer	Temp.		СТ	Operating	UV Dose	at Remote	
Day of		ofFinished	a. <b></b>	First Customer	Point During	During	of	pH of		UV Dose,		Point in	Emergency or Abnormal Operating Conditions; Repair
the Month	Plant in Operation	Water Produced, gal	Peak Flow 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 <sup>2</sup>	mW- sec/cm <sup>2</sup>	Distribution System, mg/L.	or Maintenance Work that Involves Taking Water System Components Out of Operation
1	24	229,000	Itale, Epd	110 <i>m</i> ; mg/13	initiates	mg-man L	a sa Qina a	Applicable	2. IGHUL4 (2)	seach	scoon		System Components Out or Operation
2	24	267,000										0.6	
3	24	263.000										0.6	
4	24	317,000											
5	24	317,000										0.7	
6	24	309,000										<u> </u>	
7	24 24	243,000								·····		- [,]	
8	24	303,000										1.0	
10	24	196.000										1.0	
11	24	317,500											······································
12	24	371,500										1.1	
13	24	266,000		<u> </u>								0.8	
14	24	326,000										<u> </u>	
15	24	288,000										0.7	
<u>16</u> 17	<u>24</u> 24	339,000										0,7	
17	24	424,500										1.3	
19	24	424,500					·					0,8	
20	24	291 000										0.8	
21	24	279.000										0.9	
22	24	253,000										L. I	
23	24	279,000										0,8	
24	24	213,000		ļ								6.6	
25 26	24 24	341,000		<u> </u>								0.8	· · · · · · · · · · · · · · · · · · ·
27	24	341,000										0.8	
28	24	357.000										0.7	and a second second second second second second second second second second second second second second second
29	24	232.000										0,7	
30	24	310,000										0.7	
31	24												
Total		-4	8,851,00	Q									
Averag Maxim		4	273,00	8 424.200									

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



See page 4 for instructions.

١.	<b>General Information</b>	for the Month/Year of: October /2005									
Α.	Public Water System (P	WS) Information									
	PWS Name: Weatherst	field				PWS Identification Nu	umber: 3591451				
		Community Non-Transient Non-Community	Transier	t Non-Community	Cor	nsecutive					
		nnections at End of Month: 1206		Total Population S	erved at Er	nd of Month: 4221					
	PWS Owner: Utilities,										
	Contact Person: Patric			Contact Person's T							
		ng Address: 200 Weathersfield Ave.		City: Altamonte Sp	the second second second second second second second second second second second second second second second 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										
В.	Water Treatment Plant										
	Plant Name: Utilites, I					Plant Telephone Num					
	Plant Address: 200 We		E	City: Altamonte S	prings	State: Fl	Zip Code: 32714				
	Type of Water Treated		ased Finished V	Vater							
		Day Operating Capacity of Plant, gallons per day: 86	4,000								
		bsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C							
	Licensed Operators	Name	License Class			Day(s)/Shift					
	Lead/Chief Operator:		С	7806		Mon Fr					
	Other Operators:	Terry Sillitoe	В	12749		Thur Sa					
		Roger Holsapple	С	7436		Weekend					
		Domenic Gentillucci	С	12562		Weekend	Checks				
					<u> </u>						
						······································					
			L	l							

#### **II.** Certification by Lead/Chief Operator

1, 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. 1 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.

11-1-05

Allan Finch

Signature and Date

.. . . . . . .

Printed or Typed Name

C-7808

License Number

Dena 1

PWS Identification Number: 3591451

-----

Plant Name: Utilites, Inc. of Florida

111. D	aily Dat	a for the Mo	onth/Year o	f: October /2	005								
Means	leans of Achieving Four-Log Virus Inactivation/Removal: * 🛛 Free Chlorine 🗌 Chlorine Dioxide 🗌 Ozone 🗌 Combined Chlorine (Chloramines)												
🗌 ບາ	raviolet	Radiation		(Describe): FC									,
Туре	of Disinf	ectant Residu	al Maintain	ed in Distribut	ion System:	<b>F</b>	ree Ch	lorine	Com	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
			C	r Calculations, or l	JV Dose, to De	monstrate Fo	ur-Log	Virus Inactiv	ation, if Ap	plicable*			
					CT Calcul	ations	s provincia.	and a second	1.1.1.1.1.1.1	UV	Dose		
		Net Quantity		Lowest Residual Disinfectant Concentration (C) Before or at		Lowest CT Provided Before or at First Customer	Temp.		Minimum CT	Operating		Lowest Residual Disinfectant Concentration at Remote	
Day of		of Finished		First Customer	Point During	During	of	pH of		UV Dose,			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		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	System Components Out of Operation
2	24 24 <del>24</del>	232,000		ł				<u> </u>	<b>}</b>	<b> </b>	<u> </u>	1.0	
3	24	282,000									<b> </b>	0.9	
4	24	311,000		ł · · · · · · · · · · · · · · · · · · ·			<u> </u>					0.7	
5	24	242,000					1	<u> </u>	<u> </u>	<u> </u>	·	1,2	
6	24	265.000					t		<u> </u>	<u> </u>		0.9	
7	24	260,000						<u> </u>		t		0,7	
8	24	218,000		1			1	1		1	1	1,0	
9	24 24	295.000		1	1		1	<u> </u>			<u> </u>		
10	24	295,000		1				<u> </u>		1	1	0.8	
11	24	277,000		1			1				1	0.8	
12	24	293.000										0.8	collected 7 Boot's
13	24	277.000										0.7	
14	24	266:000										0.6	
15	24	251 000										017	
16	24 24	368.000						L	ļ		L		
17	24	369,000			ļ			<b></b>			. <u> </u>	6.7	
18	24	262000						ļ			<u> </u>	0.6	
19	24	294,000					<b>_</b>	<u> </u>	<u> </u>			0.6	
20	24	265,000	l		<u> </u>	<u> </u>		<u> </u>	╂		·	0,9	
21	24	272000			<u> </u>		+			+	┿────	0.8	
22	24	276,000			<b></b>	<u> </u>	╂───		<u> </u>	<b>↓</b>	+	0.8	
23	24 24	306,000	+					+		+	+	0.7	
25	24	306,000	l		+		+	+	╂			0.5	
25	24	219,000	l		+		+				+	0.6	
20	24	230,000			+	<u> </u>	+			+	+	0.6	
28	24	272.000	1				+	1	1	1	1	0.6	
29	24	247.000	1		+	t	1		1	+	1	A.6	
30	2424	300,000	1	1	1		1	1	1	1	1		
31	24	300,000	1									6.6	
Total		8632000	1										
Avera	ge	219451	]										

Maximum 36,000 \* 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: November /2005							
	lic Water System (P								
PW	/S Name: Weatherst				PWS Identification	Number: 3591451			
		Community Non-Transient Non-Community	Transie	nt Non-Community	Consecutive				
		nnections at End of Month: 1,203		<b>Total Population Se</b>	rved at End of Month: 4,211				
PW	/S Owner: Utilities,	Inc. of Florida							
	ntact Person: Patrick			Contact Person's Tit	le: Regional Director				
Co	ntact Person's Mailin	ng Address: 200 Weathersfield Ave.		City: Altamonte Spr		Zip Code: 32714			
		hone Number: 407-869-1919		Contact Person's Fa	x Number: 407-869-6961	·····································			
Co	ntact Person's E-Ma	il Address: p.c.flynn@utilitiesinc-usa.com							
B. <u>Wa</u> t	ter Treatment Plant l	Information							
	int Name: Utilites, Ir				Plant Telephone N	umber: 407-869-1919			
Pla	int Address: 196 We	athersfield Ave.		City: Altamonte Spi		Zip Code: 32714			
	pe of Water Treated		hased Finished V						
Per	mitted Maximum D	ay Operating Capacity of Plant, gallons per day: 86	4,000		······································				
Pla	int Category (per sul	bsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C					
	icensed Operators	Name	License Class	License Number		ift(s) Worked			
Le	ad/Chief Operator:	ALLAN FINCH	С	7806		- Fri. Days			
Ot	her Operators:	Terry Sillitoe	В	12749		· Sat. Days			
		Alex Lorenzo	С	13756	Mon.	- Fri. Days			
		Kathy Sillitoe	С	13094	Mon.	- Fri. Days			
·									
					······································				
			1						
			1	†					
				<u> </u>		······································			

### 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.

00. tre 12-1-05

Kathy Sillitoe Printed or Typed Name C-13094

Signature and Date

DEP Form 62-555.900(3) Effective August 28, 2003 License Number

Identifica		

Plant Name: Utilites, Inc. of Florida

III. D	aily Dat	a for the M	onth/Year o	of: November	/2005				- <u> </u>				
Means	of Achi	eving Four-L	.og Virus In	activation/Rem	oval: *	Free C	hlorine		Chlorine I	Dioxide	0	one	Combined Chlorine (Chloramines)
		Radiation	Other (De	escribe): # FO	RMTEXT Г	1							comonied emornie (emorannies)
Type of	of Disinf	ectant Residu	ual Maintain	ed in Distribut	ion System:	ØF	ree Ch	lorine	Com	hined Cl	lorine (C	hloramines)	Chlorine Dioxide
			C	T Calculations, or	UV Dose, to De	monstrate F	our-Log	Virus Inactiv	vation, if Ar	onlicable*		inorannines)	
					CT Calcu	lations					Dose		
				Lowest Residual Disinfectant Concentration	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at First						Lowest Residual Disinfectant Concentration	
		Net Quantity		(C) Before or at	Measurement	Customer	Temp.		Minimum		Minimum	at Remote	
Day of	Hours	of Finished		First Customer	Point During	During	of	pH of	СТ	UV Dose,	Required,	Point in	Emergency or Abnormal Operating Conditions; Repair
the Month	Plant in Operation	Water Produced, gal	Pcak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	Required,	mW-	mW-	Distribution	or Maintenance Work that Involves Taking Water
1	24	240,000	Rate, gpd	Flow, mg/L	minutes	mg-min/L	<u>°C</u>	Applicable	mg-min/L	sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L.	System Components Out of Operation
2	24	265,000		<u> </u>	<u> </u>	<u> </u>	<b> </b>	ļ	<u> </u>	<b> </b>	<b></b>	0.50	
3	24	205,000				}	<u> </u>					0.60	#2 HSP check valve replaced
4	24	264,000		t			·					0.60	Collected 7 bacts
5	24	199,000		1			<u> </u>	<u> </u>		<u>  </u>	<u>}</u>	0.50	
6	24	321,500					·				┨──────	0.80	
7	24	321,500					t	t				0.70	Air compressor maint. completed
8	24	233,000					[	†				0.60	An compressor maint. completed
9	24	288,000						1	1	t		0.70	
10	24	267,000							1			0.70	
11	24	293,000			l							0.60	
13	24	193,000 350,000		f	ļ							0.80	
14	24	350,000			<u> </u>				ļ				
15	24	225,000	}	<u> </u>								0.70	
16	24	296,000	<u>}</u>						ļ			0.60	
17	24	287,000			}			<b>[</b>	<u> </u>			0.70	
18	24	198,000		†			<u> </u>				Į	0.70	Repairing line break est of 200,000g flush and leak
19	24	240,000		<b> </b>	· · · · · · · · · · · · · · · · · · ·			<u> </u>				0.60	
20	24	319,000		1	· · · · · · · · · · · · · · · · · · ·		<u>├──</u>	†	1	<u>├</u>	}	0.80	
21	24	319,000						<u>├──</u> ──	1			0.70	
22	24	177,000						1		<u> </u>		0.70	
23	24	301,000						[	t	t	t	0.80	
24	24	296,000						[			t	1.00	
25 26	24 24	220,000			ļ						1	1.40	
20	24	268,000 276,000										1.00	
28	24	276,000		<u> </u>			}						
29	24	264,000		<u> </u>								0.80	
30	24	268,000		t			ļ	<u> </u>				1.20	
31	24			<u> </u>			<u>├</u> ────	<b> </b>				1.20	
Total		8,020,000				L	I	I	L	l	I		
Average		267 333											

Maximum 350,000

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



# **GENERATION POPERATION POSTAN DUIDAD WAR DUITAERT & 2000 TROPPORTION MONTARED FINISHED**

**AJTAW** 



See page 4 for instructions.

Chect (11)					
Mon - Fri Days	¢60£1	Э.		2011/10 (1999)	
Mon - Fri Days	95251	С		Kathy Sillitoe	이 같은 것이 있는 것이 가장에서 가지 않는다. 이 같은 것이 같은 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있 같은 것이 같은 것이 같은 것이 같은 것이 있는 것이 있는 것이 있는 것이 있는 것이 없는 것이 없는 것이 같은 것이 있는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없는 것
Thur Sat. Days	67/21	B		Alex Lorenzo	an an an an an an an an an an an an an a
Mon Fri. Days	908L	Э		Terry Sillitoe	Other Operators:
Day(s)/Shift(s) Worked	License Number	License Class		ALLAN FINCH	Lead/Chief Operator:
tion 62-699.310(4), F.A.C.): C	Plant Class (per subsec			All States and and	Licensed Operators
			10(d) E V C) IN	psection 62-69.	Plant Category (per su
t1/76 ano dra	Vater	V bənzini 7 bənzin 7 bənzin 7 bənzin 7 bənzin 7 bənzin 7 bənzin 7 bənzin 7 bənzin 7 bə	pacity of Plant, gallons per day: 864	ay Operating Car	Permitted Maximum D
State: Fl         Zip Code: 32714	City: Altamonte Spring	<u> </u>			Type of Water Treated
Plant Telephone Number: 407-869-1919				sathersfield Ave.	Plant Address: 196 Wo
				nc. of Florida	Plant Name: Utilites, I
			Illoo:pen automatication	nomanon	MELT HOURS I LOW
1969-698-207 :anop digit	Contact Person's Fax h		ynn@utilitiesinc-usa.com	ft.o.g :ssərbbA lis	Contact Person's E-Ma
State: FI State: State: State: FI State: State: State: FI State:	City. Augmonte Spring		0101-698-20	ah mada na sa sa sa sa sa sa sa sa sa sa sa sa sa	CONRCT PERSON'S 1 ELE
Regional Director	Contact Person's Title:		Weathersfield Ave	ing Address: 200	Contact Person's Mail
				k Elynn	Contact Person: Patric
ed at End of Month: 4,211	Total Population Serve		C07(1 11110	, Inc. of Florida	PWS Owner: Utilities
	nt Non-Community	Transie	of Month' 1 203	hnections at End	Number of Service Co
PWS Identification Number: 3591451		· <u> </u>	Von-Transient Non-Community	Community	
				bləña	PWS Name: Weathers
			U	oiterriofnl (2W9	Public Water System (
the state where the second second second second second second second second second second second second second			Cear of: December/2005	for the Month/	General Information

# II. Certification by Lead/Chief Operator

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 plant were prepared each day that a licensed operator statted or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed 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 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 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

Signature and Dafe nт

Allan Finch

License Number

908L-D

Printed or Typed Name

90-7-1

l age l

Effective August 28, 2003 DEP Form 62-555.900(3)

PWS Identification Number: 3591451

Plant Name: Utilites, Inc. of Florida

III. L	Daily Dat	a for the Mo	onth/Year o	of: December/	2005						·····		
Mean	Agains of Achieving Four Les Vinn the stirut (D) 1 the Street and C												
🗆 ហ	traviolet	Radiation	Other (De	escribe): # FOI	RMTEYT		morne		morme I	Joxide		ione	Combined Chlorine (Chloramines)
			al Maintain	ed in Distributi	on Sustame								
<u>- 795</u>				Calculations of	ion System.		ree Ch	lorine		bined Ch	lorine (C	hloramines)	Chlorine Dioxide
		10.1		T Calculations, or	CT Calcul	ations ations	our-Log	Virus Inactiv	ation, if Ar	plicable*			
					CICACU	Lowest CT			and the second sec	UV.	Dose		
			5. SP. 2462	Lowest Residual	Disinfectant	Provided						Lowest Residual	
				Disinfectant	Contact Time	Before or					NG NG K	Disinfectant	
				Concentration	(T) at C	at First	an an tradition			Lowest	Minimum	Concentration	
Day of	Hours	Net Quantity of Finished		(C) Before or at	Measurement		Temp.		Minimum	Operating	UV Dose	at Remote	
the	Plant in	Water	Peak Flow	First Customer	Point During	During	of	pHof	СТ	UV Dose,	Required,	Point in	Emergency or Abnormal Operating Conditions; Repair
	54 C C C C C C C C C C C C C C C C C C C	Produced, gal	Rate, gpd	During Peak Flow, mg/L	Peak Flow, minutes	Peak Flow,		Water, if		mW-	m₩-	Distribution	or Maintenance Work that Involves Taking Water
1	24	202,000	ruic, gpu	1. 1. 10W, 11E/12	minutes	mg-min/L	°C	Applicable	mg-min/L,	sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	System Components Out of Operation
2	24	194,000					·					1.3	
3	24	223 000								·		1.4	
4	24	284,500										1,0	
5	24	284,500										10	
6	24	270,000										1.0	
7	24	223 000										0.8	
8	24	218,000										1,0	
9	24	232,000		·····								0.8	
<u>10</u> 11	<u>24</u> 24	172,000										0.9	
11	24	291,000											
12	24	209,000										0.7	
14	24	255,000										0.7	
15	24	234,000										6.8	
16	24	184,000								······································		0.9	
17	24	204,000							····			0.8	
18	24	277,000											
19	24	277,000										0,8	
20	24	175,000										0.8	BACT Samples pulled
21	24	272,000										0,9	BACT Samples Pulled
22	24	220,000					_					0.7	
23	24	209,000										0.7	
24 25		280,000										0.9	
25 26		253,500 253.500											
20		231.000										0,8	
28	24	260,000										0.8	
29	24	208,000										0,9	
30		244,000		<u> </u>								0,9	
31	24	261,000				-						0,8	
Total		7,392000		• • • • • • • • • • • • • • • • • • • •	<b>_</b>						1		

Average 238,450

Maximum 2845000 2410 \* Refer to the instructions for this report to determine which plants must provide this information.

DEP Form 62-555.900(3) Effective August 28, 2003

PWS Identification Number: 3591451

Plant Name: Utilites, Inc. of Florida

A.		hlorohydrin, and Iron or Manganese Sequestrant for the Year: * December/2005
	Polymer Dose, ppm =	Acrylamide Level, % <sup>†</sup> =
	Is any polymer containing the monomer <u>epichlorohydrin</u> used at the water treatment pl polymer are as follows:	ant? 🔀 No 📋 Yes, and the polymer dose and the epichlorohydrin level in the
	Polymer Dose, ppm =	Epichlorohydrin Level, % <sup>†</sup> =
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 silicate, in mg	$L \text{ as } \text{SiO}_2 =$

\* 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.

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

# Weathersfield

Docket No. 060253-WS

Seminole County

# 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	WEATHERSFIELD	County	Seminole	PWS ID # _	3591451
	200 Weathersfield Avenue, Altamonte Spri				
	Utilities, Inc. of Florida	-		Phone	407.869.1919
Owner Address	200 Weathersfield Avenue, Altamonte Spr	rings, FL 3271	4		
Contact Person	Patrick Flynn/Kathy Sillitoe Title Reg. Di	rector/Mgr.	Phone 40	7.869.1919/407	.869.8588 x229
This Survey Dat	te <u>10/27/05</u> Last Survey Date _	10/29/0	<u>5</u> La	st C.I. Date	4/3/03
•					
PWS TYPE & C			FER SOUR		•
Community (	(4C)			er of Wells	
Non-transier	nt Non-community			Source <u>City</u>	
Non-Commu	unity	Emerg	ency Water	r Capacity 8" m	anual interconnect
PWS STATUS		AUXILIAR	Y POWER	SOURCE	
	stem with approval number & date			Not Req	uired
	dated 5/7/59, Serial #3330C 12/21/61			iesel generator	
	E 2/29/68, WC59-2001 12/16/76, WC59	Capacity o	of Standby (	kW)	125
	78 clrd 8/11/98, WC59-2001B 8/6/80	Switchove	r: 🖾 Autor	natic 🔲 Man	ual
Unapproved			lan: 🛛 Ye		
				_oad	*4 hrs/mo.
	A CHARACTERISTICS			s it operate?	
Single family he	ome subdivisions and business	🛛 Well	pumps #	1	
offices		🛛 High	Service Pu	ımps <u>1&amp;2</u>	
Food Service:	🗌 Yes 🔲 No 🖾 N/A	🖾 Trea	tment Equi	oment_all	
		Satisfy 1/2	max-day d	lemand? 🛛 Ye	s 🗌 No 🗌 Unk
		Comments	s		
Certified Operat	tor: Yes No Not required				
	ertification Class-Number	<u> </u>			
	7806, Terry Sillitoe B-12749				_
Alexander Lore				ESSES IN USI	
	Yes No Not required	Disinfecti	ion-hypochlo	orination; Aerati	on
	ion Frequency iredActual				<u> </u>
Douglask: Requi	uiredActual				
Non concouti	ive Days? Yes No XN/A			nent is needed	17
MOPa submitta	d regularly? 🖾 Yes 🗋 No 🛄 N/A		his time		
Data missing fro	om MORs? $\square$ No $\boxtimes$ Yes $\square$ N/A		l of what de	ficiencies?	
	tified operator information.	N/A			
	& max flows sometimes incorrect.	DISTRIBU	TION SYS	TEM	
	n capacity reported on MORs.		suring Devic		Meter
	ice Connections 1206 (MOR)			" Water Specialti	
	red 4221 Basis 3.5/svc. cx.			Devices: XY	
Average Day (fr				None observed	
	MORs) 0.582 MGD 08/05			tion Control Pr	ogram: *Yes
	Capacity0.864 MGD			an: 🛛 Yes 🗌	
• •			, ,		• • • • • • • • • • • •
		<u></u>			

#### **GROUND WATER SOURCE**

Weil Number         1         2           Year Drilled         1958         1976           Depth Drilled         412'         500'           Drilling Method         Cable tool         Cable tool           Type of Grout         Neat cement         Unknown           Static Water Level         37'(1958)/35'(1987)         42'           Pumping Water Level         Unknown         52'           Design Well Yield         Unknown         1600 gpm           Test Yield         Unknown         1600 gpm           Actual Yield (r different than rated capeoly)         Unknown         Open hole           Length (outside casing)         105'/220'         174' 8''           Diameter (outside casing)         12''/8''         12''           Material (outside casing)         12''/8''         12''           Material (outside casing)         Steel         Black steel           Well Contamination History         None         Noe           6' X & 4'' Concrete Pad         Yes         Yes           SET         Reuse Water         N/A         >200'           Other Sanitary Hazard         *         *         *           PUMP         Model Number         Unknown         100' <t< th=""><th></th><th>WATER SOURCE</th><th>1</th><th>^</th><th>1</th><th></th></t<>		WATER SOURCE	1	^	1	
Depth Drilled         412'         500'           Drilling Method         Cable tool         Cable tool           Type of Grout         Neat cement         Unknown           Static Water Level         37'(1958)35' (1987)         42'           Pumping Water Level         Unknown         52'           Design Well Yield         Unknown         1000 gpm           Test Yield         Unknown         1600 gpm           Actual Yield (if different than rated capacity)         Unknown         Open hole           Length (outside casing)         105'/220'         174' 8''           Diameter (outside casing)         105'/220'         174' 8''           Diameter (outside casing)         105'/220'         174' 8''           Diameter (outside casing)         12''/8''         12''           Material (outside casing)         12''/8''         12''           Material (outside casing)         Steel         Black steel           Vell Contamination History         None         None           Is inundation of well possible?         No         No           6' X 6' X 4'' Concrete Pad         Yes         Yes           Septic Tank         N/A         N/A           PUMP         Manufacturer Name         Deming <td></td> <td></td> <td>1</td> <td>2</td> <td></td> <td></td>			1	2		
Drilling Method     Cable tool     Cable tool       Type of Grout     Neat cement     Unknown       Static Water Level     37'(1958)35'(1987)     42'       Pumping Water Level     Unknown     52'       Design Well Yield     Unknown     1000 gpm       Test Yield     Unknown     1600 gpm       Actual Yield (if different than rated capacity)     Unknown     Unknown       Strainer     Unknown     Open hole       Length (outside casing)     105'/220'     174' 8"       Diameter (outside casing)     12"/8"     12"       Material (outside casing)     Steel     Black steel       Well Contamination History     None     None       Is inundation of well possible?     No     No       6' X 6' X 4" Concrete Pad     Yes     Yes       Septic Tank     N/A     >200'       SET     Reuse Water     N/A       PUMP     Model Number     Unknown       Model Number     Unknown     17628-12CS       Rated Capacity (gpm)     550     1000       Motor Horsepower     15     40       Well Casing Sanitary Seal     See Comments     Yes       Well Casing Sanitary Seal     See Comments     Yes       Well Casing Sanitary Seal     See Comments     Yes </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
Type of GroutNeat cementUnknownStatic Water Level37'(1958)/35' (1987)42'Pumping Water LevelUnknown52'Design Well YieldUnknown1000 gpmTest YieldUnknown1600 gpmActual Yield (if different than rated capacity)UnknownUnknownStrainerUnknownOpen holeLength (outside casing)105'/220'174' 8"Diameter (outside casing)105'/220'174' 8"Diameter (outside casing)SteelBlack steelWell Contamination HistoryNoneNoneIs inundation of well possible?NoNo6' X 6' X 4" Concrete PadYesYesSETReuse WaterN/ANAN/A>200'Other Sanitary Hazard***Murfacturer NameDemingJohnston17628-12CSRated Capacity (gpm)550Model NumberUnknownMotor Horsepower15Well Casing Sanitary SealSee CommentsYesYesYesWell Casing Sanitary SealSee CommentsRaw Water Sampling Tap**Yes<	Depth Drilled					
Static Water Level37'(1958)/35'(1987)42'Pumping Water LevelUnknown52'Design Well YieldUnknown1000 gpmTest YieldUnknown1600 gpmActual Yield (if different than rated capacity)UnknownUnknownStrainerUnknownOpen holeLength (outside casing)105'/220'174' 8''Diameter (outside casing)105'/220'174' 8''Diameter (outside casing)SteelBlack steelWell Contamination HistoryNoneNoneIs inundation of well possible?NoNo6' X 6' X 4'' Concrete PadYesYesSETReuse WaterN/AN/ABACKSWW Plumbingw/in 100' (homes)>100'Other Sanitary Hazard**TypeSubmersibleVertical turbineModel NumberUnknown17628-12CSReuse Qacity (gpm)5501000Motor Horsepower1540Well Casing 12'' above grade?YesYesYesYesYesRaw Water Sampling Tap**YesYesFence/HousingYesYesFence/HousingYesYesYesYesYes	Drilling Me	thod	Cable tool			
Pumping Water LevelUnknown52'Design Well YieldUnknown1000 gpmTest YieldUnknown1600 gpmActual Yield (if different than rated capacity)UnknownUnknownStrainerUnknownOpen holeLength (outside casing)105'/220'174' 8"Diameter (outside casing)12"/8"12"Material (outside casing)SteelBlack steelWell Contamination HistoryNoneNoneIs inundation of well possible?NoNo6' X 6' X 4" Concrete PadYesYesSETReuse WaterN/ABACKSWW Plumbingw/in 100' (homes)Other Sanitary Hazard**PUMPModel NumberUnknownModel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well Casing Sanitary SealSee CommentsRaw Water Sampling Tap**YesYesYesYesYesFence/HousingYesYesFence/HousingYesYesFence/HousingYesYesFence/HousingYesYesFence/HousingYesYesYesYesYes	Type of Gr	rout		Unknown		
Design Well YieldUnknown1000 gpmTest YieldUnknown1600 gpmActual Yield (if different than rated capacity)UnknownUnknownStrainerUnknownOpen holeLength (outside casing)105'/220'174' 8"Diameter (outside casing)105'/220'174' 8"Diameter (outside casing)SteelBlack steelWell Contamination HistoryNoneNoneIs inundation of well possible?NoNo6' X 6' X 4" Concrete PadYesYesSETReuse WaterN/ABACKSWW Plumbingw/in 100' (homes)Other Sanitary Hazard**PUMPModel NumberUnknownModel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well casing 12" above grade?YesWell Casing Sanitary SealSee CommentsRaw Water Sampling Tap**YesAbove Ground Check ValveYesYesYesFence/HousingYesYesYesFence/HousingYes <td>Static Wat</td> <td>er Level</td> <td>37'(1958)/35' (1987)</td> <td>42'</td> <td></td> <td></td>	Static Wat	er Level	37'(1958)/35' (1987)	42'		
Test YieldUnknown1600 gpmActual Yield (if different than rated capacity)UnknownUnknownStrainerUnknownOpen holeLength (outside casing)105'/220'174' 8"Diameter (outside casing)12''/8"12"Material (outside casing)SteelBlack steelWell Contamination HistoryNoneNoneIs inundation of well possible?NoNo6' X 6' X 4" Concrete PadYesYesSETTReuse WaterN/ABACKSWW Plumbingw/in 100' (homes)VUMP Pumbingw/in 100' (homes)Other Sanitary Hazard*YpeSubmersibleVertical turbineManufacturer NameDemingModel NumberUnknownModel Number15Well casing 12" above grade?YesWell casing 12" above grade?YesWell Casing Sanitary SealSee CommentsRaw Water Sampling Tap**YesAbove Ground Check ValveYesYesYesFence/HousingYesYesYesFence/HousingYesYesYes	Pumping V	Vater Level	Unknown	52'		
Actual Yield (if different than rated capacity)       Unknown       Unknown         Strainer       Unknown       Open hole         Length (outside casing)       105'/220'       174' 8''         Diameter (outside casing)       12"/8"       12"         Material (outside casing)       Steel       Black steel         Well Contamination History       None       None         Is inundation of well possible?       No       No         6' X 6' X 4" Concrete Pad       Yes       Yes         SET       Reuse Water       N/A       >200'         SET       Reuse Water       N/A       >200'         Other Sanitary Hazard       *       *         Ype       Submersible       Vertical turbine         Manufacturer Name       Deming       Johnston         PUMP       Model Number       Unknown       17628-12CS         Rated Capacity (gpm)       550       1000       1000         Motor Horsepower       15       40       40         Well casing 12" above grade?       Yes       Yes       Yes         Raw Water Sampling Tap       **Yes       Yes       Above Ground Check Valve       Yes       Yes         Above Ground Check Valve       Yes	Design We	ell Yield	Unknown	1000 gpm		
StrainerUnknownOpen holeLength (outside casing)105'/220'174' 8''Diameter (outside casing)12"/%"12"'Material (outside casing)SteelBlack steelWell Contamination HistoryNoneNoneIs inundation of well possible?NoNo6' X 6' X 4" Concrete PadYesYesSETReuse WaterN/AN/ABACKSWW Plumbingw/in 100' (homes)>100'Other Sanitary Hazard**PUMPModel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well Casing 12" above grade?YesYesWell Casing Sanitary SealSee CommentsYesRaw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesFence/HousingYesYesYesYesYes	Test Yield		Unknown	1600 gpm		
Length (outside casing)105'/20'174' 8''Diameter (outside casing)12''/8''12''Material (outside casing)SteelBlack steelWell Contamination HistoryNoneNoneIs inundation of well possible?NoNo6' X 6' X 4" Concrete PadYesYesSETSeptic TankN/ABACKSWW Plumbingw/in 100' (homes)0ther Sanitary Hazard**PUMPModel NumberUnknownModel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well Casing 12" above grade?YesWell Casing Sanitary SealSee CommentsRaw Water Sampling Tap*YesYesYesYesYesYesYesFence/HousingYesYesYesYesYes	Actual Yiel	d (if different than rated capacity)	Unknown	Unknown		
Diameter (outside casing)12"/8"12"Material (outside casing)SteelBlack steelWell Contamination HistoryNoneNoneIs inundation of well possible?NoNo6' X 6' X 4" Concrete PadYesYesSeptic TankN/A>200'SETReuse WaterN/ABACKSWW Plumbingw/in 100' (homes)Other Sanitary Hazard**TypeSubmersibleVertical turbineManufacturer NameDemingJohnstonMoter Horsepower1540Well casing 12" above grade?YesYesWell Casing Sanitary SealSee CommentsYesRaw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesYesYesYesFence/HousingYesYes	Strainer		Unknown	Open hole		
Material (outside casing)SteelBlack steelWell Contamination HistoryNoneNoneIs inundation of well possible?NoNo6' X 6' X 4" Concrete PadYesYesSeptic TankN/A>200'SETReuse WaterN/ABACKSWW Plumbingw/in 100' (homes)Other Sanitary Hazard**TypeSubmersibleVertical turbineManufacturer NameDemingJohnstonModel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well casing 12" above grade?YesYesRaw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesYesYesYesFence/HousingYesYesYesYesYes	Length (ou	itside casing)	105'/220'	174' 8"		
Well Contamination HistoryNoneNoneIs inundation of well possible?NoNo6' X 6' X 4" Concrete PadYesYesSeptic TankN/A>200'SETReuse WaterN/ABACKSWW Plumbingw/in 100' (homes)Other Sanitary Hazard**TypeSubmersibleVertical turbineManufacturer NameDemingJohnstonMotel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well casing 12" above grade?YesYesRaw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesYesYesYes	Diameter (	outside casing)	12"/8"	12"		
Is inundation of well possible?NoNo6' X 6' X 4" Concrete PadYesYesSeptic TankN/A>200'SETReuse WaterN/ABACKSWW Plumbingw/in 100' (homes)Other Sanitary Hazard**TypeSubmersibleVertical turbineManufacturer NameDemingJohnstonModel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well casing 12" above grade?YesYesRaw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesFence/HousingYesYesYesYesYes	Material (o	outside casing)	Steel	Black steel		
6' X 6' X 4" Concrete PadYesYesSeptic TankN/A>200'SETReuse WaterN/ABACKSWW Plumbingw/in 100' (homes)Other Sanitary Hazard*TypeSubmersibleVUMPManufacturer NameModel NumberUnknownI7628-12CSRated Capacity (gpm)550Motor Horsepower1540Well casing 12" above grade?YesYesYesRaw Water Sampling Tap**YesAbove Ground Check ValveYes </td <td colspan="2">Well Contamination History</td> <td>None</td> <td>None</td> <td></td> <td></td>	Well Contamination History		None	None		
SET BACKSSeptic TankN/A>200'BACKSReuse WaterN/AN/AWW Plumbingw/in 100' (homes)>100'Other Sanitary Hazard**TypeSubmersibleVertical turbineManufacturer NameDemingJohnstonModel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well casing 12" above grade?YesYesWell Casing Sanitary SealSee CommentsYesRaw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesYesYesYes	Is inundation of well possible?		No	No		
SET BACKSReuse WaterN/AN/ABACKSWW Plumbingw/in 100' (homes)>100'Other Sanitary Hazard**TypeSubmersibleVertical turbineManufacturer NameDemingJohnstonModel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well casing 12" above grade?YesYesWell Casing Sanitary SealSee CommentsYesRaw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesYesYesYesFence/HousingYesYes	6' X 6' X 4" Concrete Pad		Yes	Yes		
BACKSWW Plumbingw/in 100' (homes)>100'Other Sanitary Hazard**TypeSubmersibleVertical turbineManufacturer NameDemingJohnstonModel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well casing 12" above grade?YesYesWell Casing Sanitary SealSee CommentsYesRaw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesFence/HousingYesYesYesYesYes		Septic Tank	N/A	>200'		
Other Sanitary Hazard**Other Sanitary Hazard**TypeSubmersibleVertical turbineManufacturer NameDemingJohnstonModel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well casing 12" above grade?YesWell Casing Sanitary SealSee CommentsRaw Water Sampling Tap**YesAbove Ground Check ValveYesYesYesYesYesYesYesYesYesYesYesYesYes	SET	Reuse Water	N/A	N/A		
PUMPTypeSubmersibleVertical turbineManufacturer NameDemingJohnstonModel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well casing 12" above grade?YesYesYesRaw Water Sampling Tap**YesAbove Ground Check ValveYesYesYesYesYesYesYesYesYesYesYesYesYes	BACKS	WW Plumbing	w/in 100' (homes)	>100'		
PUMPManufacturer NameDemingJohnstonModel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well casing 12" above grade?YesYesYesWell Casing Sanitary SealSee CommentsRaw Water Sampling Tap**YesAbove Ground Check ValveYesYesYesFence/HousingYesYesYes		Other Sanitary Hazard	*	*		
PUMPModel NumberUnknown17628-12CSRated Capacity (gpm)5501000Motor Horsepower1540Well casing 12" above grade?YesYesWell Casing Sanitary SealSee CommentsYesRaw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesFence/HousingYesYes		Туре	Submersible	Vertical turbine		
Rated Capacity (gpm)5501000Motor Horsepower1540Well casing 12" above grade?YesYesWell Casing Sanitary SealSee CommentsYesRaw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesFence/HousingYesYes		Manufacturer Name	Deming	Johnston	· ·	
Motor Horsepower1540Well casing 12" above grade?YesYesWell Casing Sanitary SealSee CommentsYesRaw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesFence/HousingYesYes	PUMP	Model Number	Unknown	17628-12CS		
Well casing 12" above grade?YesYesWell Casing Sanitary SealSee CommentsYesRaw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesFence/HousingYesYes		Rated Capacity (gpm)	550	1000		
Well Casing Sanitary SealSee CommentsYesRaw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesFence/HousingYesYes		Motor Horsepower	15	40		
Raw Water Sampling Tap**YesYesAbove Ground Check ValveYesYesFence/HousingYesYes	Well casing 12" above grade?		Yes	Yes		
Above Ground Check Valve     Yes     Yes       Fence/Housing     Yes     Yes			See Comments	Yes		
Fence/Housing Yes Yes	Raw Water Sampling Tap		**Yes	Yes		
5	Above Gro	und Check Valve	Yes	Yes		
Well Vent Protection Yes N/A	Fence/Hou	using	Yes	Yes		
	Well Vent I	Protection	Yes	N/A		

**COMMENTS** \*Previously accepted by the Department. \*Vehicles stored on private property w/in 100'. \*\*Raw water sampling tap is down stream of check valve, but prior to aeration & chlorination - previously accepted by the Department. Inspect and repair the well seal. Note: wells alternate automatically. Well 1 AAH2581, Well 2 AAH2582

PWS ID #	3591451
Date	10/27/05

CHLORINATION (Disinfection)
Type: 🔲 Gas 🛛 Hypo
Make <u>Stenner</u> Capacity <u>85x2 gpd</u>
Chlorine Feed Rate 7.5
Avg. Amount of Cl <sub>2</sub> gas usedN/A
Chlorine Residuals: Plant <u>1.5</u> Remote <u>1.2</u>
Remote tap location516 Northwestern
DPD Test Kit: 🔲 On-site 🛛 With operator
🗌 None 📃 Not Used Daily
Injection Points Into aerator basin
Booster Pump Info N/A
Comments Bleach tank outflow line partially
submerged in the secondary containment vessel.
Have chlorine ORP meter also.

Chlorine Gas Use Requirements	YES	NO	Comments
Dual System			
Auto-switchover			
Alarms: Loss of Cl <sub>2</sub> capability Loss of Cl <sub>2</sub> residual Cl <sub>2</sub> leak detection			
Scale			
Chained Cylinders	$\Box$		
Reserve Supply	Q		
Adequate Air-pak			
Sign of Leaks		$\nabla$	
Fresh Ammonia		Ď	
Ventilation			
Room Lighting			
Warning Signs			
Repair Kits			
Fitted Wrench			
Housing/Protection			

AERATION (Gases, Fe, & Mn Removal)					
Type <u>Cascade</u> Capacity <u>1500 gpm</u>					
Aerator Condition Unknown					
Bloodworm Presence Unknown					
Visible Algae Growth Yes					
Protective Screen Condition <u>Good</u>					
Comments Per operator, inspected weekly & cleaned					
2x/month.					

### STORAGE FACILITIES

<ul><li>(G) Ground (H) Hydropneumatic (E) Elevated</li><li>(B) Bladder (C) Clearwell</li></ul>						
Tank Type/Number	G	Н				
Capacity (gal)	100,000	10,000				
Material	Steel	Steel				
Gravity Drain	Yes	Yes				
By-pass Piping	Yes	Yes				
Pressure Gauge	N/A	Yes	、			
Sight Glass or Level Indicator	Yes	Yes				
Fittings for Sight Glass	N/A	N/A				
Protected Openings	Yes	Yes				
PRV/ARV	N/A	PRV				
On/Off Pressure		65/75				
Access Padlocked	Yes	Yes				
Height to Bottom of Elevated Tank						
Height to Max. Water Level		****				
Comments <u>GST level alarm malfunctioning. Replace.</u>						

Exterior of H tank is turbercular. Sand and paint.

### HIGH SERVICE PUMPS

THOM SERVICE			
Pump Number	1	. 2	
Туре	Centrifugal	Centrifugal	
Make	Pacific	Peerless	
Model	H30M-KPG	AOP-3	
Capacity (gpm)	500	700	
Motor HP	40	30	
Date Installed	1961	1968	
Maintenance	Weekly	Weekly	
		0.11 J. D	

Comments <u>HSP#2 check valve failed. Replace.</u> Unused gasoline powered HSP should be removed.

PWS ID #	3591451	_
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. The Interconnect was found to be full of stagnant and discolored water. Please provide an Interconnect flushing schedule.
- 4. The well seal on well number 1 must be inspected and replaced.
- 5. The bleach tank outflow line is partially submerged in the secondary containment vessel.
- 6. The level alarm on the ground storage tank is malfunctioning and must be repaired/replaced.
- 7. The exterior of the hydropneumatic tank is turburcular in spots and should be scraped, sanded, and painted.
- 8. The unused, auxiliary gasoline high service pump should be removed form the plant.
- 9. The check valve on high service pump number two is not holding and must be replaced.

# **MONITORING AND REPORTING:**

- Bacteriologicals due monthly
- Nitrate/Nitrite due 2006
- Primary Inorganics due 2008
- Lead and Copper Tap Sampling due 06/2008-09/2008
- SOCs (Two quarters) due 2008
- Radiologicals due 2008
- VOCs due 2008
- Secondaries due 2008
- 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.

PWS ID # _	3591061
Date	10/27/05

### MONITORING AND REPORTING (Continued...)

**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.

Audio-Visual Alarm System for Standby Power - At each site where standby power is required an audiovisual 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

# RESPONSE:

# Please indicate changes to the following:

PWS ID Number: <u>3591451</u>	Business Name:		
PWS Name: Weathersfield	Owner(s) Name:		
Attn: Patrick Flynn, Utilities, Inc. of Florida			
Mailing Address:	Mailing Address:		
 Date:	Phone Number(s):		
Florida Department of Environmental Protection Drinking Water Compliance/Enforcement Program 3319 Maguire Boulevard, Suite 232 Orlando, Florida 32803 Attention: Reggie Phillips, Environmental Specialist			
In response to the Department's <b>Sanitary Survey Report</b> the following actions were done to correct the listed deficie		i <u>October 27, 2005</u> ,	
Deficiency Item No. Corrective Action	on Done	Date Done	
		·····	
(Attach additional sheet if necessary)			
I hereby certify to the correctness of the above information	:		
PWS Owner/Representative Signature:			
Name of PWS Owner/Representative:	(Please Type or Print)		

#### UTILITIES, INC. OF FLORIDA AN AFFILIATE OF UTILITIES, NC. 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	PWS ID No. 3591061		
	Crystal Lake	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 abovereferenced 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,

S Cl. tal

Kathy Sillitoe Area Manager

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



Page 1 of 1 Document1

# **RESPONSE**:

#### Please indicate changes to the following:

PWS ID Number: <u>3591451</u>	Business Name: <u>Utilities, Inc. of Florida</u>
PWS Name: Weathersfield	Owner(s) Name: Utilities, Inc. of Florida
Attn: Patrick Flynn, Utilities, Inc. of Florida	
Mailing Address: 200 Weathersfield Avenue	Mailing Address: 200 Weathersfield Avenue
Altamonte Springs, FL 32714	Altamonte Springs, FL 32714
Date:December 13, 2005	Phone Number(s): 407-869-1919

#### Florida Department of Environmental Protection Drinking Water Compliance/Enforcement Program 3319 Maguire Boulevard, Suite 232 Orlando, Florida 32803

Attention: Reggie Phillips, Environmental Specialist

In response to the Department's **Sanitary Survey Report** for the subject public water system dated <u>October 27, 2005</u>, the following actions were done to correct the listed deficiencies:

Deficient Item No.	cy <u>Corrective Action Done</u>	Date Done
	The monthly operations report contained corrections for the month of November	December 2005
	2005. All future MORs will be legible and completed accurately.	
_2	Unable to locate any additional information for the spaces marked "unknown."	
	The interconnect with the City of Altamonte Springs was added to a bi-weekly flushing rotation.	
4	The well #1 casing was inspected and sealed on December 1, 2005.	December 1, 2005
5	The chlorine tank will be inspected on a daily basis and secondary containment to be drained	•
	as necessary to maintain the level of rain water below the outfall pipe.	
6	Our electrician is diagnosing the problem so corrections can be made.	
_7	A tank inspection is scheduled for the first quarter of 2006. This will be helpful in identifying	·
	tank integrity and any necessary interior and exterior maintenance needed.	
	****Continued on next page****	
(Attach add	litional sheet if necessary)	
	rtify to the correctness of the above information:	

PWS Owner/Representative Signature:

Pagional Director

Name of PWS Owner/Representative: Patrick C. Flynn, Regional Director

(Please Type or Print)

2**3** 

Weathersfield PWS #3591451

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<u>Deficiency</u> <u>Item No.</u>	<b>Corrective Action Done</b>	Date Done
8	The auxiliary gasoline motor was removed from site on November 2, 2005.	November 2, 2005
9	The check valve on High Service Pump #2 was replaced on November 2, 2005.	November 2, 2005

# Weathersfield

Docket No. 060253-WS

Seminole County

25.30.440 (6) Permits

Test Year Ended December 31, 2005



		John H. V	venie, Assistant Executive Director
POST OFFICE	TELEPHONE 904-329-4	500 SUNCOM 904-860	
FAX (Executive) 329-41	TDD 904-329-4 25 (Legal) 329-4485 SERVICE	(Permitting) 329-43	Actinist (Finance) 329-4508
618 E. South Street Orlando, Florida 32801 407-897-4300 TDD 407-897-5960	7775 Baymeadows Way Suite 102 Jacksonville, Florida 32256 904-730-6270 TDD 904-448-7900	PERMITTING: 305 East Drive Melbourne, Florida 32904 407-984-4940 TDD 407-722-5368	OPERATIONS: 9433 N. Wickham Road Melbourne: Florida 32935-8109 407-752-3100 TDD 407-752-3102
	TO	D0	-UIF
		ĸ	11)

November 22, 2000

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

SUBJECT: Consumptive Use Permit Number 8346 Weathersfield 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 22, 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 Lewis, Director (V Permit Data Services Division

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

cc: District Permit File

FEI

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

	/illiam Kerr, <sub>Chairman</sub> Melbourne beach	ONG, VICE CHAIRMAN J	eff K. Jennings, SECRET. MAITLAND		Htenstroer, treasurer switzerland
Dan Roach	William M. MAITLAN	Otis Masor st. Augustin		Clay Albright	Reid Hughes Daytona beach

#### A PERMIT AUTHORIZING:

District authorizes, as limited by the attached permit conditions, the use of 135.18 million gallons per year of ground water from the Floridan aquifer for public supply for an estimated population of 2237 in 5 years

#### LOCATION:

Site: Weathersfield Seminole County Section(s): 15

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 22, 2000

AUTHORIZED BY: St. Johns River Water Management District Department of Resource Management By:

> Dwight T Jenkins Division Director

### "EXHIBIT A" CONDITIONS FOR ISSUANCE OF PERMIT NUMBER 8346 UTILITIES INC OF FLORIDA DATED NOVEMBER 22, 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.

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- 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.

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- 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.

12. All submittals made to demonstrate compliance with this permit must include the

permit number 8346 plainly labeled on the submittlals.

- 13. This permit will expire on November 22, 2005.
- 14. Maximum annual ground water withdrawals must not exceed 135.18 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 are metered.
- 17. The permittee must implement the Water Conservation Plan submitted to the District on August 18, 2000, in accordance with the schedule contained therein.
- 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.

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#### **Notice Of Rights**

- 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.
- 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 54 December

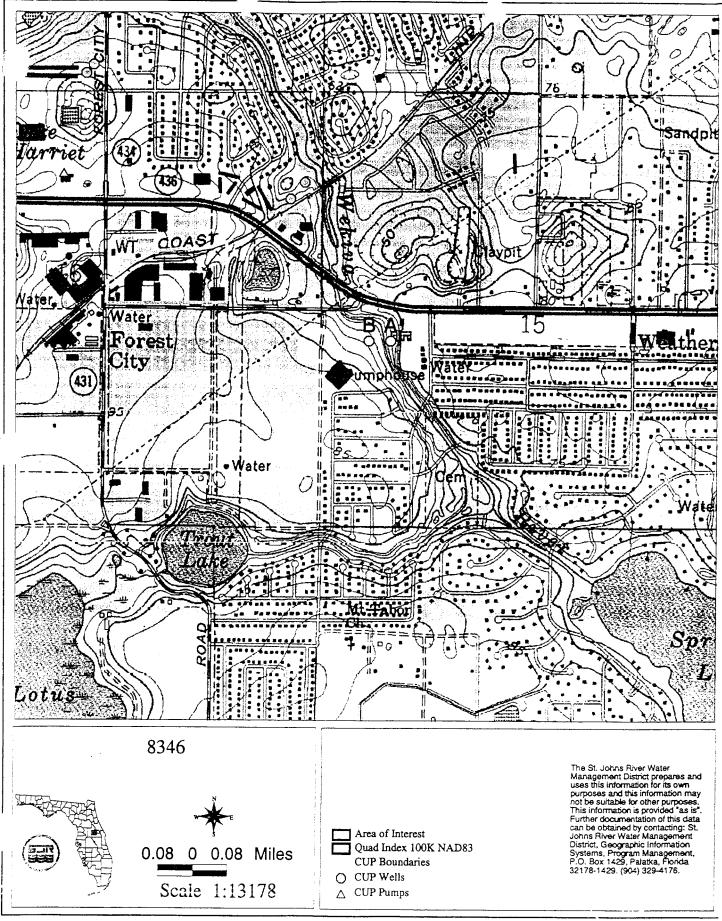
at 4:00 p.m. this East day of November, 2000.

Division of Pérmit Data Services Gloria Lewis, Director

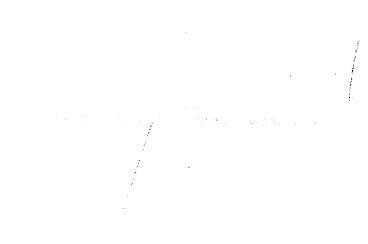
St. Johns River Water Management District Post Office Box 1429 Palatka, FL 32178-1429 (904) 329-4152

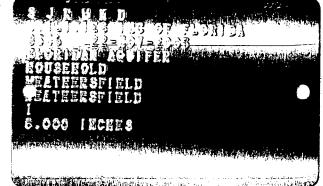
Permit Number: 8346

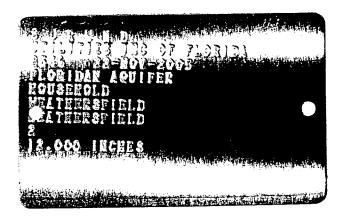
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#### FLOW METER WATER CALIBRATION RECORD - EN51

#### ST. JOHNS RIVER WATER MANAGEMENT DISTRICT Post Office Box 1429 Palatka, Florida 32178-1429

Consumptive Use Permit Number: 8346 - WEATHING FIELD		
Permittee Name: Utilities Inc of Florida		
Date of Permit Issuance: November 22, 2000 Station Name: 1		
Pump Capacity: 550 GPM		
Serial Number on Meter:		
Meter Model:		
Discharge Pipe Diameter:		
Date of Last Meter Calibration://		
Date of This Calibration://		
Name of Person Performing Calibration:		
M 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:		
\ddress:		
State/Zip:		
aytime 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: 8346 - WinterFiteD Permittee Name: Utilities Inc of Florida Date of Permit Issuance: November 22, 2000 Station Name: 2 Pump Capacity: 1000 GPM Serial Number on Meter:
Meter Model:
Discharge Pipe Diameter:
Date of Last Meter Calibration://
Date of This Calibration:
Name of Person Performing Calibration:
M 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: 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:
C State/Zip:
Daytime Telephone: ()
Please Retain a Copy for Your Records

36204		St. Johns River Water Manageme P. O. Box 142§ Palatka, Florida 32178-142	
	WATER USE RECORE	FORM EN - 50	
CUP# 8346		PERMIT ISSUE DATE 22-nov-2000	
STRICT ID		OWNERS ID	
RMITTEE Utilitie	s Inc of Florida	PROJECT Weathersfield	
ELL NAME		PUMP NAME	
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36204	THE REPORT OF THE PARTY OF THE	St. Johns River Water Management Distric P. O. Box 142§ Palatka, Florida 32178-142
	WATER USE RECORE	FORM EN - 50
CUP# 8346		PERMIT ISSUE DATE 22-nov-2000
DISTRICT ID		OWNERS ID
PERMITTEE Utilitie	es Inc of Florida	PROJECT Weathersfield
WELL NAME 2		PUMP NAME
COMPLETE	THE FORM BY PRINTING EACH "N	UMBER" WITHOUT TOUCHING THE SIDES OF THE BOX
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	• NO USE THIS PER	
tep 2. REPO		
Step 2. REPO	ORT MONTHLY WATE	R USE BELOW. RECORD EITHER OR GALLONS USED (NOT BOTH). OR METER READINGS
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JAN     01     [       FEB     01     [       MAR     01     [	ORT MONTHLY WATE	R USE BELOW. RECORD EITHER OR GALLONS USED (NOT BOTH).
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FLOW         JAN       01         FEB       01         MAR       01         MAR       01         MAY       01         JUN       01         Step 3.       CON	ORT MONTHLY WATE	R USE BELOW. RECORD EITHER OR GALLONS USED (NOT BOTH). OR METER READING:

36204	St. Johns River Water Management Distric P. O. Box 1425 Palatka, Florida 32178-1425	
	WATER USE RECORE FORM EN - 50	
CUP# 8346	PERMIT ISSUE DATE 22-nov-2000	
RICT ID	OWNERS ID	
MITTEE Utilities	s Inc of Florida PROJECT Weathersfield	
LL NAME	PUMP NAME	
COMPLETE TH	HE FORM BY PRINTING EACH "NUMBER" WITHOUT TOUCHING THE SIDES OF THE BOX	
	0123456789	
step 1. M	O NO USE THIS PERIOD O WELL CAPPED	
	○ WELL ABANDONED (40C-3, FAC) ○ PROPERTY SOLD	
	O COMMENTS: (PI FASE PRINT):	
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Seminole County

25.30.440 (7) Notices

# **NOTICES**

None

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Seminole County

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.
- 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.

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Seminole County

### 25.30.440 (9) Vehicles

#### FL Vehicles as of 5-5-06

Veh. # Yr/Make/Model VIN 9934 99 DODGE DAKOTA 9932 99 DODGE DAKOTA 636 06 CHEV COLORADO 221 02 CHEVY S-10 19 00 CHEV CS10803 610 06 CHEV C15 V-8 311 03 CHEV C15 FULL 308 03 CHEV C15 FULL 431 04 CHEV C25 24.00 CHEV S-10 638 D6 CHEV C15 8691 86 INTERNATIONAL 223 02 CHEVY S-10 608 06 CHEV C15 V-8 16 00 CHEV CS10803 9808 98 DODGE DAKOTA 427 04 CHEV C15 FULL 508 05 CHEV C25 4X4 103 01 CHEV S10 9833 98 CHEV S-10 111 01 CHEV 1500 461 04 CHEV C15 9928 99 DODGE DAKOTA 426 04 CHEV C15 FULL 9935 99 DODGE DAKOTA 9933 99 DODGE DAKOTA 9931 99 DODGE DAKOTA 9927 99 DODGE DAKOTA 9602 96 FORD RANGER REGULAR 516 05 CHEV COLORADO 101 01 CHEV S10 220 02 CHEVY S-10 14 00 CHEV CS10803 102 01 CHEV S10 9835 98 CHEV S-10 9834 98 CHEV S-10 110 01 CHEV 1500 109 01 CHEV 1500 217 02 CHEVY C15 FULL 18 00 CHEV 1500 108 01 CHEV 1500 113 01 CHEV 1500 107 01 CHEV 1500 112 01 CHV 1500 312 03 CHEV C15 FULL 305 03 CHEV C15 FULL 433 04 FORD F-750 304 03 CHEV C15 FULL 8926 89 FORD F-350 9765 97 PONTIAC GRAND AM 35 00 CHEV C25 BOOM 503 05 CHEV COLORADO 612 06 CHEV COLORADO 637 06 CHEV C15 222 02 CHEVY C15 FULL 424 03 CHEV C15 FULL 436 04 CHEV C15 FULL 301 03 CHEV C15 FULL 422 04 CHEV C15 EXT CAB 509 05 CHEV C15 4X4 EXT 639 06 CHEV C15 4X4 EXT 428 04 CHEV S10 TRAILBLAZER 512 05 CHEV TAHOE 650 06 CHEV TAHOE 4X4 9250 92 DODGE 242 02 CHEVY IMPALA 9925 99 CHEV LUMINA 453 04 CHEV C15 EXT CAB 609 06 CHEV C25 129 01 CHEV FULL 1500 4WD 33 00 DODGE DAKOTA

Driver Assigned 1B7FL26X6XS261957 1B7FL26XXXS277898 1GCCS146568234592 1GCCS14W428209130 1GCCS14W9YK196208 1GCEC14V86Z103857 1GCEC14X23Z114639 1GCEC14X83Z115665 1GCHK24U04E296751 1GCCS14W9YK229577 1GCEC14V86E197990 1HTLDTVN2GHA45725 1GCCS14W628209453 1GCEC14V26Z102011 1GCCS14W2YK195806 1B7FL26X6WS604943 1GCEC14X94Z275720 1GBHK24UX5E233792 VARIOUS 1GCCS14W01K129325 1GCCS14X2WK245013 1GCEC14W81Z185977 SPARE 1GCEC14X24Z336714 1B7FL26X4XS261955 1GCEC14X44Z274751 1B7FL26X1XS277899 1B7EL26X4XS277900 1B7FL26X6XS261956 1B7FL26XXXS261958 1FTCR10X1TUB67972 SPARE 1GCCS146358238591 1GCCS14W01K129261 1GCCS14W128209201 1GCCS14W1YK195845 1GCCS14W71K129239 1GCCS14X0WK247116 SPARE 1GCCS14X6WK246309 1GCEC14V11E249162 1GCEC14V31E249471 1GCEC14V32Z313941 1GCEC14V6YE249071 1GCEC14V91E265755 1GCEC14W21Z187837 1GCEC14W71Z185310 1GCEC14W81Z183727 1GCEC14X03Z114378 1GCEC14X63Z115177 3FRXF75424V600407 1GCEC14X23Z115810 1FDKF37G5KNA56982 1G2WP5216WF270000 1GBGK24R5YF484662 1GCCS146658179178 1GCCS146768129150 1GCEC14V96E197609 1GCEC14W12Z314210 1GCEC14X04Z274231 1GCEC14X24Z201474 1GCEC14X63Z115146 1GCEC19\/X47270758 1GCEK19T35E230984 1GCEK19Z26Z225726 1GNDT13S442340667 1GNEC13T85R199267 1GNEK13TX6R148941 JOHN HOY 2B7GB11X5NK163811 2G1WF55E329381533 2G1WL52M1X9177423 2GCEC19T341374628 2GCEC19VX61115736 2GCEK19T111381348 1B7GG22X7YS753556

CORY SUDOL NO DRIVER YET JEROME HAMPTON ROGER GRAY CARL ZUBEK MICHAEL OVERTON EDWARD ROBERTS SCOTT LEARNED DON TAYLOR ALVIN BISHOP ALVIN BISHOP VACUUM TRUCK WILLIAM NEAL DAVID SHOFFSTALL HARRY HOFF JAMES ESKEW SHANTAVIOUS RAINEY MATTHEW GUNTHER STEVEN SZCZEPKOWSKI ROBERT BUONO LENNY GODWIN MIKE MONAT HAROLD EBERT NO DRIVER YET RAY HOGUE JIM SWEGHEIMER DOUG GOODWIN ROBERTO REMIGIO ROY MERICLE ALEXANDER LORENZO ELISA STEGER THOMAS KEYS KEVIN COOPER JEFF PINDER DALE WHITE THOMAS ABENDROTH MATTHEW MORRELL JIMMIE HOLI ISTER JAMES PENDARVIS SHAWN FBERT MICK SHUE FRED QUINLAN SANLANDO DUMP TRUCK JERRY HAHN DUMP TRUCK NO DRIVER YET CENTRAL FL BOOM TRUCK CHRIS PHILLIPS CHRIS ALDAY JEFF FINEHIRSH CHARLES SCHWADES ALLEN FINCH JACK ADKINS STEVE HABERY RICHARD RETZ JOHN MARINELLI BILL COATES BRYAN GONGRE PATRICK FLYNN SEWER VIDEO EQUIP VAN SCOTTY HAWS KATHY SILLITOE TONY WIERZBICK SCOTT STEWART WILLIAM NEAL SPARE

Cost **Company Name** \$15,678.58 Alafaya Utilities, Inc. \$15,467.19 Alafaya Utilities, Inc. \$16,622.26 Alafaya Utilities, Inc. \$13,356.21 Alafaya Utilities, Inc. \$15,363.17 Alafaya Utilities, Inc. \$18,681.44 Alafaya Utilities, Inc. \$19,053.10 Alafaya Utilities, Inc. \$19,053.10 Alafaya Utilities, Inc. \$25,036.88 Alafava Utilities. Inc. \$15,099 10 Bayside Utility Services Inc. \$18,923.65 Bayside Utility Services, Inc. \$11,026.85 Bayside Utility Services, Inc. \$13,356.21 Cypress Lakes, Utilities, Inc. \$18,681.44 Cypress Lakes, Utilities, Inc. \$15,363.17 Eastlake Water Service, Inc. \$15,312.81 Labrador Utilities, Inc. \$17,763.05 Labrador Utilities, Inc. \$24,607.70 Mid-County \$15.053.85 Mid-County \$16,047.78 Mid-County \$16,965.92 Mid-County \$16,588.04 Mid-County \$15,493,25 Sandalhaven \$17,763.05 Sandalhaven \$16.056.16 Sanlando Utilities, Inc. \$15,659,79 Sanlando Utilities, Inc. \$15,493,25 Sanlando Utilities, Inc. \$15,792.00 Sanlando Utilities, Inc. \$16,085,99 Sanlando Utilities, Inc. \$18,484.14 Sanlando Utilities, Inc. \$15,053.85 Sanlando Utilities, Inc. \$13,356.21 Sanlando Utilities, Inc. \$15,363.17 Sanlando Utilities, Inc. \$15,516.86 Sanlando Utilities, Inc. \$16,290.61 Sanlando Utilities, Inc. \$16,143.89 Sanlando Utilities, Inc. \$18,690.29 Sanlando Utilities, Inc. \$19,066.93 Sanlando Utilities, Inc. \$17,238.08 Sanlando Utilities, Inc. \$19.049.81 Sanlando Utilities, Inc. \$18,735.55 Sanlando Utilities, Inc. \$17,472.60 Sanlando Utilities, Inc. \$17,227,78 Sanlando Utilities, Inc. \$16,965.92 Sanlando Utilities, Inc. \$19,053.10 Sanlando Utilities, Inc. \$22,478.87 Sanlando Utilities, Inc. \$63,896.30 Sanlando Utilities, Inc. \$19,372.92 Tierre Verde \$31,061.22 Utilities, Inc, of Florida \$15,000.00 Utilities, Inc, of Florida \$35,922.85 Utilities, Inc. of Florida \$16,750,47 Utilities, Inc. of Florida \$16,471.74 Utilities, Inc, of Florida \$18,923.65 Utilities, Inc. of Florida \$16,461.98 Utilities, Inc, of Florida \$17,763.05 Utilities, Inc. of Florida \$17,503,53 Utilities, Inc. of Florida \$19,053.10 Utilities, Inc, of Florida \$21,654,48 Utilities, Inc. of Florida \$28,037,52 Utilities, Inc. of Florida \$24,891.62 Utilities, Inc. of Florida \$27,109,73 Utilities, Inc, of Florida \$37,478.51 Utilities, Inc, of Florida \$32,505.83 Utilities, Inc. of Florida \$0.00 Utilities, Inc, of Florida \$19,351.00 Utilities, Inc, of Florida \$17,132.82 Utilities, Inc, of Florida \$22,987.16 Utilities, Inc, of Florida \$22,387.19 Utilities, Inc, of Florida \$24,967.07 Utilities, Inc, of Florida \$20,427.35 Utilities, Inc. of Pennbrooke

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 JAMES YINGLING

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 STEVEN PFOUTS

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 DAN ANDERSON

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

Docket No. 060253-WS

Seminole County

25.30.440 (10) Customer Complaints

## CUSTOMER COMPLAINTS

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