

Arredondo Estates

Docket No. 060368-WS

Application to Increase Rates and Charges For a "Class A" Utility CMP In COM ____ Florida CTR **VOLUME 6** ECR _ GCL Book 7 OPC Set 2 of 57 RCA _____ SCR ____ Containing Additional Engineering Requirements SGA ____ SEC Monthly Operating Reports OTH ____

Aqua Utilities Florida, Inc.

000 MENT NUMBER-DATE
00832 JAN 26 &

FPSC-COMMISSION CLERK

Aqua Utilities Florida, Inc. Monthly Operating Reports

Arredondo Estates

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Year: 2005				
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See page 4 for instructions I. General Information for the Month/Year of: January-04 A. Public Water System (PWS) Information PWS Name: Arredondo Estates PWS Identification Number: 2010041 PWS Type: X Community Non-Transient Non-Community Transient Non-Community Consecutive Number of Service Connections at End of Month: 247 Total Population Served at End of Month: 519 PWS Owner: AquaSource Utility, Inc. Contact Person: Michael Fitzgerald Contact Person's Title: Area Manager - Florida Contact Person's Mailing Address: 1343 NE 17th Road City: Ocala State: FL. Zip Code: 34470 Contact Person's Telephone Number: (352) 369-4881 Contact Person Person's Fax Number: (352) 732 - 3213Contact Person's E-Mail Address: mvfitzgerald@suburbanwater.com B. Water Treatment Plant Information Plant Name: Plant Telephone Number: (352) 369-4881 Arredondo Estates Zip Code: 32608 Plant Address: 5517 S.W. Archer Road City: Gainesville State: FLType of Water Treated by Plant: X Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: Plant Class (per subsection 62-699.310(4), F.A.C.): Plant Category (per subsection 62-699.310(4), F.A.C.): Day(s)/Shift(s) Worked Licensed Operators License Class License Number Name Lead/Chief Operator: \mathbf{C} 8287 6 Days per week Mark March 6 Days per week 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. I certify that all drinking water treatment chemicals used at thisplant 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. Futhermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

	Mark March	C8287
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						Estates	Arredondo	Plant Name:		7010041		on Mumber	entificati	PI SMd

Maximum 96,000 96,000 ** Refer to the instructions for this report to determine which plants must provide this information.



See page 4 for instructions

I. General Information f	or the Month/Year of: February-04			
A. Public Water System	(PWS) Information			
PWS Name:	Arredondo Estates		PWS Identific	cation Number: 2010041
PWS Type:	X Community Non-Transient Non-Comm	nunity	Transient Non-Community	Consecutive
Number of Service Con	nections at End of Month: 247		Total Population Served at	End of Month: 519
PWS Owner:	AquaSource Utility, Inc.			
	Michael Fitzgerald		Contact Person's Title:	Area Manager - Florida
Contact Person's Mailing			City: Ocala	State: FL Zip Code: 34470
Contact Person's Teleph			Contact Person Person's F	ax Number: (352) 732-3213
Contact Person's E-Mail				
B. Water Treatment Plan	nt Information	· · · · · · · · · · · · · · · · · · ·	·	
	Arredondo Estates		Plant Telepho	
	5517 S.W. Archer Road		1	State: FL Zip Code: 32608
Type of Water Treated	7	chased Finished Wate	r	
	ay Operating Capacity of Plant, gallons per day:			
	section 62-699.310(4), F.A.C.):	1	Plant Class (per subsection	
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	6 Days per week
Other Operators:				6 Days per week
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II. Certification by Lead	l/Chief Operator			
	treatment plant operator licensed in Florida, am the lead	/ahiaf aparatar of th	a water treatment plant i	dentified in Part Lof this report. I certify that the
t, the undersigned water	treatment plant operator needsed in Florida, and the lead	terner operator or un	te water treatment plant r	et abamicala usad at this plant conform to NSE
information provided in	this report is true and accurate to the best of my knowled	ige. I certify that at	orniking water treatmen	c. 11
International Standard 6	0 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	a day that a licensed operator staffed or visited this plant	during the month in	idicated above: (1) record	ds of amounts of chemicals used and chemical feed
rates; and (2) if applicab	le, appropriate treatment process performance records. I	Futhermore, I agree	to provide these addition	al operations records to the PWS owner so the PWS
owner can retain them, to	ogether with copies of this report, at a convenient location	on for at least ten ye	ars.	
	Mark March			C8287
Signature and Date	Printed or Typed Nam	e		License Number
DEP Form 62-555.900(3)Alternate		Page 1		•

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Maximum 96,000 96,000 ** Refer to the instructions for this information.



See page 4 for instructions I. General Information for the Month/Year of: March-04 A. Public Water System (PWS) Information PWS Name: Arredondo Estates PWS Identification Number: 2010041 PWS Type: X Community Non-Transient Non-Community Transient Non-Community Consecutive Number of Service Connections at End of Month: 247 Total Population Served at End of Month: 519 PWS Owner: AquaSource Utility, Inc. Contact Person: Michael Fitzgerald Contact Person's Title: Area Manager - Florida Contact Person's Mailing Address: 1343 NE 17th Road City: Ocala State: Zip Code: 34470 FL Contact Person's Telephone Number: (352) 369-4881 Contact Person Person's Fax Number: (352) 732-3213 Contact Person's E-Mail Address: mvfitzgerald@suburbanwater.com B. Water Treatment Plant Information Plant Name: Arredondo Estates Plant Telephone Number: (352) 369-4881 Plant Address: SW 52nd Ave City: FL Zip Code: Gainesville State: 32608 X Raw Ground Water Type of Water Treated by Plant: Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 68.494 Plant Category (per subsection 62-699.310(4), F.A.C.): Plant Class (per subsection 62-699.310(4), F.A.C.): Licensed Operators License Class License Number Day(s)/Shift(s) Worked Name Lead/Chief Operator: 8287 6 Days per week Mark March \mathbf{C} Other Operators: 6 Days per week 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. I certify that all drinking water treatment chemicals used at thisplant 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. Futhermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Mark March

Printed or Typed Name

C8287

License Number

Signature and Date

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



N. Public Water System (PWS) Information PWS Name: Arredondo Estates PWS Identification Number: 2010041	- F-g-					
PWS Name						
PWS type:	A. Public Water System	n (PWS) Information				
Number of Service Connections at End of Month: 519	PWS Name:	Arredondo Estates		PWS I	dentification Number:	2010041
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Contact Person's Michael Fitzgerald Contact Person's Mailing Address: 1343 NE 17th Road Contact Person's Telephone Number: (352) 369-4881 Contact Person's E Mail Address: myftzgerald@aquaamerica.com Contact Person's E Mail Address: myftzgerald@aquaamerica.com Water Treatment Plant Information Plant Name: Arredondo Estates Plant Telephone Number: (352) 369-4881 Plant Address: SW 52nd Ave City: Gainesville State: FL Zip Code: 32608 Plant Address: SW 52nd Ave City: Gainesville State: FL Zip Code: 32608 Plant Address: SW 52nd Ave City: Gainesville State: FL Zip Code: 32608 Plant Class (per subsection 62-699.310(4), F.A.C.): Plant Class (per subsection	Number of Service Con	nections at End of Month: 247		Total Population Se	rved at End of Month:	519
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3. Water Treatment Plant Information				City: Ocala	State: FL	
Plant Name: Arredondo Estates Plant Telephore State FL Zip Code: 32608	Contact Person's Teleph			Contact Person Pers	son's Fax Number:	(352) 732-3213
Plant Name: Arredondo Estates Plant Address: SW 52nd Ave City: Gainesville State: FL Zip Code: 32608 Type of Water Treated by Plant: X] Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 68,494 Plant Claescy (per subsection 62-699 310(4), F.A.C.): Plant Class (per subsection 62-699 310(4), F.A.C.): Licensed Operators Name License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operator: Mark March C 8287 6 Days per week Deep Company Standard Standard Standard Standard Go or other applicable standards referenced in subsection 62-695, 320(3), F.A.C. the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment chemicals used at thisplant conform to NSF notemational 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 loant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed ates; and (2) if applicable, appropriate treatment process performance records. Futhermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.	Contact Person's E-Mai	l Address: mvfitzgerald@aquaamerica.com	-			
Plant Address: SW 52nd Ave	B. Water Treatment Pla	nt Information				
Type of Water Treated by Plant: X Raw Ground Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 68,494 Plant Class (per subsection 62-699.310(4), F.A.C.): Licensed Operators Name License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operators: C 8287 6 Days per week Other Operators: C 6 Days per week Other Operators: C 6 Days per week Other Operators: C 6 Days per week Other Operators: C 7 Certification by Lead/Chief Operator The undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge. I certify that all drinking water treatment chemicals used at thisplant 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 ates; and (2) if applicable, appropriate treatment process performance records. Futhermore, I agree to provide these additional operations records to the PWS owner so the PWS owner an retain them, together with copies of this report, at a convenient location for at least ten years.	Plant Name:	Arredondo Estates		Plant T	elephone Number:	(352) 369-4881
Permitted Maximum Day Operating Capacity of Plant, gallons per day: Plant Category (per subsection 62-699.310(4), F.A.C.): Licensed Operators Name: License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operator: Mark March C 8287 6 Days per week 6 Days per week 6 Days per week 1. Certification by Lead/Chief Operator: the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge. I certify that all drinking water treatment chemicals used at thisplant conform to NSF intermational 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 olant 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 steed ates; and (2) if applicable, appropriate treatment process performance records. Futhermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.	Plant Address:	SW 52nd Ave		City: Gaines	ville State: FL	Zip Code: 32608
Plant Category (per subsection 62-699.310(4), F.A.C.): Licensed Operators Lead/Chief Operator: Lead/Chief Operators: Lead/Chief Opera			chased Finished Wate	er		
Licensed Operators License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operator: Mark March C 8287 6 Days per week 6 Days per week C Days per week 1. Certification by Lead/Chief Operator In 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. I certify that all drinking water treatment chemicals used at thisplant 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 olant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed ates; and (2) if applicable, appropriate treatment process performance records. Futhermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.	Permitted Maximum D	ay Operating Capacity of Plant, gallons per day:	68,494			
Lead/Chief Operators: Mark March C 8287 6 Days per week	Plant Category (per sub	osection 62-699.310(4), F.A.C.):		Plant Class (per sub		
Diter Operators: 6 Days per week 6 Day	Licensed Operators	Name	License Class	License Numb	er I	Day(s)/Shift(s) Worked
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owner can retain them, together with copies of this report, at a convenient location for at least ten years.		•	-			
	, , , , , , , , , , , , , , , , , , , ,			•	iditional operations rec	olds to the r w s owner so the r w s
Mark March C8287	owner can retain them, t	ogether with copies of this report, at a convenient location	n ior at least ten ye	ars.		
		Mark March			C8287	
	Signature and Date		e			

PWS Ic	WS Identification Number: 2010041 Plant Name: Arredondo Estates													
III Dai	v Data f	or the Mon	th/Year of		April-04							····		
			Log Virus Inacti	viation/Rem			Free (Chlorine	, 11	Chlorine I	Dioxide		Ozone	Combined Chlorine (Chloramines)
		et Radiation			Other (Describe	e):		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ا لــا	Cinorino E	10/1140	L `		,
			ual Maintained i	in Distributio		-)-			Free Chl	orine	Co	mbined C	hlorine (Chlor	amines) Chlorine Dioxide
i ype o	Bishine	C. C. C. C. C. C. C. C. C. C. C. C. C. C				or UV Dose, to I	Demonstrate I	our-Log						
	Days	1.500	cated and the		who both to	CT Calcu					UVI	Dose		
	Plant		Control (1990)			177	Lowest CT			1.00 male 1.00 m		1000	Lowest	
	Staffed				Lowest Residual	Disinfectant	Provided		Prince No.	70 g (200		10.00	Residual	
lice The season	or*				Disinfectant	Contact Time	Before or	1000	1. Z. Erronand				Disinfectant	
	Visited				Concentration	(T) at C	at First	17773			Lowest	Minimum	Concentration	
	by	•	Net Quanity		(C) Before or at	Measurement	Customer	Temp.	_17 C	Minimum	Operating	UV Dose	at Remote	Emergency or Abnormal Operating Conditions;
Day of	Operator (Place	Hours Plant in	of Finished Water	Peak Flow	First Customer During Peak	Point During Peak Flow,	During Peak Flow,	Water.	pH of Water, if	CT Required.	UV Dose, mW-	Required, mW	Point in Distribution	Repair or Maintenance Work that Involves Taking
the Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	C .	Applicable	mg-min/L	sec/cm2	sec/cm2	System, mg/L	Water System Components Out of Operation
17011	X	24 hrs	61,000	, SI	, ,						10.00		1.2	
2	X	24 hrs	66,000										1.3	
:3	X	24 hrs	78,500										1.3	
4		24 hrs	78,500									<u> </u>		
5	X	24 hrs	70,000									ļ	1.2	
6	X	24 hrs	62,000	<u> </u>						 		ļ	1.2	
7	X	24 hrs	56,000					!					1.3	
8	X	24 hrs	56,000 72,000	 				 	ļ				1.3	
9 10	X	24 hrs 24 hrs	47,500										1.1	
11	^_	24 hrs	47,500	 								<u> </u>		
12	Х	24 hrs	51,000					 			 		1.2	
13	X	24 hrs	40,000										1.3	
14	Х	24 hrs	49,000										1.2	1
15	X	24 hrs	50,000										1.6	
16	X	24 hrs	59,000					<u> </u>			<u> </u>		1.4	
17		24 hrs	59,000	ļ	<u> </u>			ļ			-		1.2	
18	X	24 hrs	53,000			 			ļ	ļ			1.3	
19 20	X	24 hrs 24 hrs	62,000 63,000	 		 		 		 	 		1.3	
21	X	24 hrs	60,000	 	 	 	 	 		 	 	 	1.2	
22	X	24 hrs	57,000	 			 					1	1.2	
23	X	24 hrs	69,000	 	 								0.8	
24	X	24 hrs	65,000										1.4	
25		24 hrs	65,000											
26	X	24 hrs	54,000							<u> </u>	<u> </u>		1.4	
27	X	24 hrs	51,000				<u> </u>	ļ		 	<u> </u>	ļ	1.3	
28	X	24 hrs	42,000		<u> </u>	ļ		<u> </u>		 	 		1.3	
29	X	24 hrs	61,000					 	 	ļ <u>.</u>	 	 	1.3	
30	X	24 hrs	52,000	 	 	<u> </u>	 	 	 	 		 	1.2	
31 Total		24 hrs	1,757,000		<u> </u>	L		L			<u> </u>		J	
Average		on The set of the set of	58,567	1										

78,500

Maximum

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



I. General Information f	for the Month/Year of: May-04				
A. Public Water System					
	Arredondo Estates		DWC	Identification Num	ber: 2010041
	X Community	nunity	Transient Non-Co		Consecutive
	nections at End of Month: 247	idility		served at End of Mo	
	AquaSource Utility, Inc.		Total Topulation L	ici ved at End of Me	Mut. 319
	Michael Fitzgerald		Contact Person's 7	itle: Area Mana	ager - Florida
Contact Person's Mailin			City: Ocala		FL Zip Code: 34470
Contact Person's Teleph				rson's Fax Number:	
Contact Person's E-Mail	Address: mvfitzgerald@aquaamerica.com				
B. Water Treatment Plan	nt Information				
Plant Name:	Arredondo Estates		Plant	Telephone Number	: (352) 369-4881
Plant Address:	SW 52nd Ave			sville State:	FL Zip Code: 32608
Type of Water Treated	by Plant: X Raw Ground Water Pure	chased Finished Water			
	ay Operating Capacity of Plant, gallons per day:	68,494			
	section 62-699.310(4), F.A.C.):		Plant Class (per su	bsection 62-699.31	0(4), F.A.C.):
Licensed Operators	Name	License Class	License Num	ber	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Mark March	С	8287		6 Days per week
Other Operators:					6 Days per week
II. Comification by I and	/Chiaf Oncurren				
II. Certification by Lead					
I, the undersigned water	treatment plant operator licensed in Florida, am the lead/	chief operator of the	e water treatment	plant identified in	n Part I of this report. I certify that the
information provided in	this report is true and accurate to the best of my knowled	ge. I certify that all	drinking water to	reatment chemical	ls used at thisplant conform to NSF
International Standard 66	or other applicable standards referenced in subsection 6	52-555.320(3), F.A.(C. I also certify t	hat the following	additional operations records for this
	a day that a licensed operator staffed or visited this plant				
	le, appropriate treatment process performance records. F				
	ogether with copies of this report, at a convenient location			damonar operatio	subjected to the target so the target
oor can retain them, to	250 de la convenient focation	ii ioi ut ioast toii yea	45.		
	Mark March			C8287	
Signature and Date	Printed or Typed Name	9		License Nu	umber
organical e uno Dute	Trinted of Typed Name			LICCISC IV	anioci

											185,46	11.18 LV - 1	10-11-5	Average
											2,000,000			Total
	I										145,000	24 hrs	X	31
											000'99	24 hrs		30
	1.1										000,88	24 hrs	X	67
	£.1										000,89	24 hrs	X	87
	1.2										000,07	24 hrs	X	72
	1.3										000°LL	24 hrs	X	97
	£.1										000,28	24 hrs	X	57
	1.2								I		000,59	24 hrs	X	74
											002,50	24 hrs		52
]										005,50	24 hrs	X	75
	1.2										000'99	24 hrs	X	17
	£.1										000'65	24 hrs	X	70
	£. I						1			LAMBLE	000,59	24 hrs	X	61
	4.1										000,42	S.t p.Z	X	81
	7.1										000,42	24 hrs	X	41
											000,88	24 hrs	 	91
	£.1										000,89	24 hrs	X	SI
	1.2										000,29	24 hrs	$\frac{x}{x}$	ÞΙ
	1.3										000,85	24 hrs	X	£1
	1.2					1					000,88	24 hrs	X	15
	£.1										000'95	24 hrs	$\frac{x}{x}$	
	1.2						<u> </u>				000,13	24 hrs	X	10
							 				008,62	24 hrs	 -^- 	6
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	E.1										009'65	24 hrs	X	L
	p.I										000,62	24 hrs	X	9
	1.3										000,22	24 hrs	X	S
	p. I						 				000'95	24 hrs	X	.
	7.1										000,92	24 hrs	X	.
							· · · · · · ·				005,62	24 hrs	<u> </u>	7
	4.1										005'95	24 hrs	X	i ba y i wa
Water System Components Out of Operation	System, mg/L	sec/cm2.	sectem2	J/mm-8m	oldsoilddA.	31.	- 1/mm-gm	รอาทยาน	Flow, mg/L	Rate, gpd	Produced, gal	Ореганоп	("X"	Month
Repair or Maintenance Work that Involves Taking	Distribution	Wm	-Wm	Required,	Water, if	Water,	Peak Flow,	Peak Flow,	During Peak	Peak Flow	TalaW	ni inslq	(Place	ath the
Emergency or Abnormal Operating Conditions;	ni mio4	Reduired,	UV Dose,	LO	jo Hd	Jo -	gunua	Point During	First Customer		bədzini To	SinoH	A Country of the Coun	Day of
	at Remote	UV Dose	Sprinting O	muminiM	10000	Temp		Measurement	(C) Before or at		Net Quanty	Section 4	pλ	3
	Concentration	muminiM	rowest .		100		de Pirst	O 18 (T)	Concentration				Visited	
	Disinfectant						Before or	Contact Time	Disinfectant				10	
	Residual					653723	Provided	Disinfectant	Lowest Residual			And the second second	Staffed	
	Lowest	A CONTRACTOR OF	4 4 4 4 4 4 4				Lowest CT						Plant	
		980(I AN D			0.000	384.6. 284.29	CT Calcul				- MORE 4 - 210 mm	Days	
				iddA ii ,noise	AILUS IDBCITA	Sort-Ino	r signification in	or UV Dose, to I	'Suchianous'	SPERSON DER GESTELLE. Beginnt 1980er Britished		Called and the second	Notice the	Andreas
Servines) Chlorine Dioxide	hlorine (Chlora	Damon			Free Chlo	48.50***37.782**		3 (3 0 111		MDOLDSIG U	I DOMINIUM IN	基本基础的基础的	4. Yough	d (-
CPT CPT CPT CPT CPT CPT CPT CPT CPT CPT		O Fee: 4-c	<u> </u>		140 0014				n greens.	SitudintsiQ n	i bənintained is			
(communication) and communication	Г	. 🗀						:(:	Other (Describe			noitsibaR t		
Combined Chlorine (Chloramines))Sone)	abixoiG	Chlorine D		Shlorine	O earq				ritaenl suriV go.	1-ruo4 gniv	of Achie	Means
									May-04		h/Year of:	or the Mont	ly Data f	III. Da
						Estate:	Аrredondo	Plant Name:		2010041		ion Number	dentificat	PWS I

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



See page 4 for instructions								
I. General Information i	for the Month/Year of:	June-04						
A. Public Water System								
PWS Name:	Arredondo Estates			·	PWS Identific	cation Numb	er: 2010041	
PWS Type:	X Community N	Ion-Transient Non-Comn	nunity	Transie	nt Non-Communit	у	Consecutive	
Number of Service Con	nections at End of Month:	247		Total P	opulation Served a	t End of Mor	nth: 519	
PWS Owner:	AquaSource Utility, Inc.							
	Michael Fitzgerald			Contact	Person's Title:	Area Manag		
Contact Person's Mailin				City:	Ocala	State:	FL Zip Code:	
Contact Person's Teleph				Contact	Person Person's F	ax Number:	(352) 732-	-3213
Contact Person's E-Mai	l Address: <u>mvfitzgera</u>	ald@aquaamerica.com						
B. Water Treatment Pla	nt Information							
Plant Name:	Arredondo Estates				Plant Telepho			
	SW 52nd Ave			City:	Gainesville	State:	FL Zip Code:	32608
Type of Water Treated			chased Finished Wat	er				
	ay Operating Capacity of Plant, gallor	ns per day:	68,494					
	section 62-699.310(4), F.A.C.):	anne (1778) al de la Carlo de la Carlo de la Carlo de la Carlo de la Carlo de la Carlo de la Carlo de la Carlo	7 S 7 W (1 and 1 d annual day 2 - 1 d 2 d annual		lass (per subsection	n 62-699.310		
Licensed Operators	Name		License Class	1.10	cense Number		Day(s)/Shift(s) Wo	
Lead/Chief Operator:	Mark March	1	С		8287		6 Days per wee	
Other Operators:					:K			
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		<u> </u>				 		
		<u></u>		+		 		
			L			<u> </u>		
II. Certification by Lead	d/Chief Operator							
		in Dismide and the lead	/abief emergator of t	ha vrotan	traatmant plant i	identified in	Port I of this report	Logratify that the
I, the undersigned water	treatment plant operator licensed	in Florida, am the lead	cnier operator of t	ne water	treatment plant i		rant i or uns report.	form to NCE
information provided in	this report is true and accurate to	the best of my knowled	ige. I certify that a	ili drinkii	ng water treatme	nt chemical	s used at unispiant cor	HOUR TO INSE
International Standard 6	60 or other applicable standards ref	erenced in subsection	62-555.320(3), F.A	.C. I als	so certify that the	tollowing a	additional operations	records for this
plant were prepared each	h day that a licensed operator staff	fed or visited this plant	during the month	indicated	l above: (1) recor	ds of amou	nts of chemicals used	and chemical feed
	ole, appropriate treatment process				ide these additior	nal operation	ns records to the PWS	owner so the PWS
owner can retain them, t	together with copies of this report,	at a convenient location	on for at least ten y	ears.				
		Mark March				C8287		
Signature and Date		Printed or Typed Nam	ie			License Nu	ımber	

										i	757,84			Average
											1,463,000			Total
		I			<u> </u>	ſ						24 hrs	T	1.6
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	1.2										000,84	24 hrs	X	87
											000'19	24 hrs		LZ
	7.1					<u> </u>				****	000,15	24 hrs	X	97
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	I I	 	<u> </u>]				36,000	24 hrs	X	SI
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	I'I										0\$L'\$ħ	s.ių ₽7	X	ε
	9.0										44,000	24 hrs	X	7
	8.0										000'09	24 hrs	X	I
Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	Lowest Residual Dismiectant Concentration A Remote Point in Distribution	Minimum NV Dose Required, Wm:	Lowest, Operating UV Dose, mW- sec/cm2	Minimum CT Required, Required,	pH of Water, if Applicable	C Ot Water,	Lowest CT Provided Before or at First Customer Ouring	Disinfectant Contact Time (I) at C Measurement Point During Peak Flow, minutes	Lowest Residual Disinfectant Concentration (C) Before or at First Customet First Customet First Customet	Peak Flow Raie, gpd	Met Quanity of Finished Water Produced, gal	eauoH Plant in Plant on	Days Plant Staffed or Visited by Operator (Place "X")	Day of the the Month
		9806	OAD	uddyr ii tuossa	ALIXANII CWY	Son to		CT Calcula	'cuotorgomo, 10					
	<u> </u>	1				90.1-3110	4 stertanoma(or UV Dose, to D		Ounging :	- SAULPHUNI	DICON NEW	l l	10.04(:
Chlorine Dioxide	rlorine (Chlors	(2) banidm	io)	aring	Free Chlo					oitudintaiQ n	ii bənistnisM İsi			
Combined Chlorine (Chloramines)	əuoz(0 🗆	əbixoid	Chlorine D	П	hlorine	O aar4	:(]	oval: * Other (Describe	om∍A\noitsi√ []	vitosani suriV go	ving Four-L t Radiation		
						 			1սոе-04			or the Mont		
					1	Estates	Arredondo	Plant Name:		2010041	:	ion Number	dentificati	PI SMd

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



I. General Information f	for the Month/Year of: July-04				
A. Public Water System					
	Arredondo Estates		PWS Identifi	cation Number:	2010041
PWS Type:	X Community	nunity	Transient Non-Communit		nsecutive
	nections at End of Month: 247		Total Population Served a		519
	Aqua Utilities Florida				
	Michael Fitzgerald		Contact Person's Title:	Area Manager - Florie	da
Contact Person's Mailin			City: Ocala	State: FL	Zip Code: 34470
Contact Person's Teleph			Contact Person Person's F	ax Number:	(352) 732-3213
Contact Person's E-Mail					
B. Water Treatment Plan	nt Information				
Plant Name:	Arredondo Estates		Plant Telepho	one Number:	(352) 369-4881
	SW 52nd Ave		City: Gainesville	State: FL	Zip Code: 32608
Type of Water Treated		chased Finished Water			
	ay Operating Capacity of Plant, gallons per day:	68,494			
	section 62-699.310(4), F.A.C.):		Plant Class (per subsection		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	6	Days per week
Other Operators:				6	Days per week
Part Part Part Part Part Part Part Part					
7 10 10 10 10 10 10 10 10 10 10 10 10 10					
				ļ	
II. Certification by Lead	//Chief Operator				
	treatment plant operator licensed in Florida, am the lead				
	this report is true and accurate to the best of my knowled				
International Standard 66	0 or other applicable standards referenced in subsection 6	52-555.320(3), F.A.0	C. I also certify that the	following additional	operations records for this
plant were prepared each	a day that a licensed operator staffed or visited this plant	during the month in	dicated above: (1) record	ds of amounts of che	micals used and chemical feed
rates; and (2) if applicab	le, appropriate treatment process performance records. F	outhermore, I agree t	o provide these addition	al operations records	s to the PWS owner so the PWS
	ogether with copies of this report, at a convenient locatio			•	
	,				
	Mark March			C8287	
Signature and Date	Printed or Typed Name	e		License Number	

PWS Id	entificat	ion Number	r:	2010041		Plant Name:	Arredondo	Estate	S					
III Dai	v Data_f	or the Mont	th/Year of:		July-04						***			
			og Virus Inacti				Free (Chlorine		Chlorine I	Dioxide		Ozone	Combined Chlorine (Chloramines)
		et Radiation		Viation/ICIII	Other (Describe	o).		Monne		Ciliornic	JIOXIGE	□ `	Szone	Comomica Cino in (Sino annies)
			ual Maintained i						Free Chl	orina	Co	mbined C	hlorine (Chlor	ramines) Chlorine Dioxide
Type of	Distille	Ciam Reside	uai iviannamicu i	ii Distributio		or UV Dose, to I	Varancia atraka 1	iove I od				inomed C	mornie (Chioi	arinics) Chiornic Broxide
					C1 Calculations	CT Calcu		our-nog	VIIUS IIIacuv	анов, и трр	UVI	Doce		
0.56 \$0.5	Days			1-1		Of Calcu	Lowest CT			and the second		1	Lowest	A. B. B. G. G. G. G. G. G. G. G. G. G. G. G. G.
Control (A)	Plant Staffed		14.00 Sept. 19.		Lowest Residual	Disinfectant	Provided			671			Residual	
10.000	or				Disinfectant	Contact Time	Before or					100	Disinfectant	
	Visited				Concentration	(T) at C	at First				Lowest	Minimum	Concentration	
	by by		Net Quanity		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating	UV Dose	at Remote	1.00
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of	CT	UV Dose,	Required,	Point in	Emergency or Abnormal Operating Conditions;
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	Required,	mW-	mW	Distribution	Repair or Maintenance Work that Involves Taking
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	С	Applicable	mg-min/L	sec/cm2	sec/cm2	System, mg/L	Water System Components Out of Operation
2	X X	24 hrs 24 hrs	68,000 56,300	 	<u> </u>		 			 		 -	0.6	
3	X	24 nrs 24 hrs	63,800		-		 		<u> </u>		<u> </u>	 	0.6	
4		24 hrs	63,700	 	 	 	 	 		 	 	 	 -	
5	X	24 hrs	68,500	<u> </u>			 	-					0.8	
6	X	24 hrs	65,800	-				1					0.4	
7	X	24 hrs	63,200	<u> </u>				1					0.3	
- 8	X	24 hrs	64,700										0.3	
9	X	24 hrs	52,000										1.6	
10	X	24 hrs	60,000			<u> </u>				L		ļ	1.4	
11		24 hrs	61,000					ļ						
12	X	24 hrs	68,000	<u> </u>	ļ	<u> </u>	ļ	 	 		ļ	<u> </u>	1.6	
13	X	24 hrs	74,000		 	 	<u> </u>	 	 	 	 	ļ	1.4	
14	X	24 hrs 24 hrs	40,000 66,000	 	 	 	 	├		 		 	1.3	
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17	X	24 hrs	57,000	 		-		1		 	·	 	1.3	
18		24 hrs	57,000	 			 							
19	X	24 hrs	60,000	†	· · · · · · · · · · · · · · · · · · ·	†	<u> </u>	<u> </u>	<u> </u>				0.8	
20	X	24 hrs	61,000	1									1.2	
21	X	24 hrs	48,000										1.2	
22	Х	24 hrs	45,000									<u> </u>	1.2	
23	X	24 hrs	35,000				 	<u> </u>	<u> </u>		ļ	<u> </u>	1.3	
24	X	24 hrs	49,500		ļ	_	ļ	↓	ļ	 	<u> </u>	 	1.4	
25		24 hrs	49,500							<u> </u>	_	<u> </u>	1.4	
26	X	24 hrs	47,000	ļ	<u> </u>	1	 	 	 -	 		 	1.4	
27	X	24 hrs	50,000			 	 	 	 	 	 	1	1.3	
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31	$\frac{\lambda}{X}$	24 hrs	47,000	 	 		 	 	<u> </u>	 	 	 	1.2	
Total		1. 271113	1,721,000	 	J	1				1	<u> </u>		*	
Average	No see		55,516	1										

74,000

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



I. General Information f	or the Month/Year of: August-04							
A. Public Water System	(PWS) Information							
PWS Name:	Arredondo Estates		PWS Identifi	cation Number: 2010	0041			
PWS Type:		nunity	Transient Non-Communit	y Consecutiv	re			
	nections at End of Month: 247		Total Population Served a	t End of Month: 519				
	Aqua Utilities Florida							
	Michael Fitzgerald		Contact Person's Title:	Area Manager - Florida				
Contact Person's Mailing			City: Ocala	State: FL Zip	Code: 34470			
Contact Person's Teleph			Contact Person Person's I	Fax Number: (352	2) 732-3213			
Contact Person's E-Mail								
B. Water Treatment Plan	nt Information							
Plant Name:	Arredondo Estates		Plant Teleph	one Number: (352	2) 369-4881			
Plant Address:	SW 52nd Ave		City: Gainesville	State: FL Zip	Code: 32608			
Type of Water Treated		chased Finished Wate						
Permitted Maximum Da	ay Operating Capacity of Plant, gallons per day:	68,494						
	section 62-699.310(4), F.A.C.): V		Plant Class (per subsection		C			
Licensed Operators	Name	License Class	License Number	Day(s)/Shift	(s) Worked			
Lead/Chief Operator:	Mark March	С	8287	6 Days p	er week			
Other Operators:				6 Days per week				
The second secon								
The second secon								
			<u> </u>					
	Watt Co							
II. Certification by Lead	/Chief Operator							
I, the undersigned water	treatment plant operator licensed in Florida, am the lead	chief operator of th	e water treatment plant	identified in Part I of this re	port. I certify that the			
information provided in	this report is true and accurate to the best of my knowled	lge. I certify that all	l drinking water treatme	nt chemicals used at thispla	nt conform to NSF			
	0 or other applicable standards referenced in subsection (
	day that a licensed operator staffed or visited this plant							
	le, appropriate treatment process performance records. F							
				ial operations records to the	rws owner so the rws			
owner can retain them, to	ogether with copies of this report, at a convenient location	on for at least ten year	ars.					
				CO				
	Mark March			<u>C8287</u>				
Signature and Date	Printed or Typed Nam	e		License Number				

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	Þ.I										20,000	24 hrs	X	30
	£, ſ				+						005,62	24 hrs	55	58
						-+		 +			005,62	24 hrs	X	87
	1.2										54,000	24 hrs	X	7.7
	₽. I						-				000,12	24 hrs	X	56
	1.3										000,12	24 hrs	X	52
	2.1										45,000	24 hrs	X	74
	2.1										000'91	24 hrs	X	23
	₽. I										000'65	24 hrs	8	77
											000,82	24 hrs	X	12
	1.3										000'15	24 hrs	X	07
	1.3										30,000	24 hrs	X	6l
	£.1										000,44	24 hrs	Х	81
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											000,82	24 hrs	X	14
	I.I										39,000	24 hrs	X	εl
	1.2										40,000	24 hrs	Х	15
	1.2										000,12	24 hrs	X	¥.11
	1										000,68	24 hrs	X	10
	1.1										45,000	24 hrs	X	6
	I										72,000	24 hrs		8
											72,000	24 hrs	X	1.
	I.I										33,000	24 hrs	Х	9
	1.2										000,42	24 hrs	X	\$
	1.1										43,000	24 hrs	X	_ b
	1.1										000,22	24 hrs	X	3
	p. [38,000	24 hrs	X	7
	9.1										000,07	24 hrs		TOTAL STORY
							J'aim-gm	รอากบาเม	Ном, тв/С	Rate, gpd	Produced, gal	Operation	("X	Month
Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	Lowest Residual Dismifectant Concentration at Remote Point in Distribution System, mg/L	Minimum UV Dose Required, mW sec/cm2	Lowest Operating UV Dose, "Wm	Minimum Reduced, CT Minimum	pH of Water, if Applicable	Temp. Of Water,	Lowest CT Provided Before or at First Customer During Peak Flow,	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow,	Lowest Residual Disinfectant Concentration (C) Before or at First Customet First Customet	Peak Flow	Net Quanty of Finished Water	Rund Tuning	Days Plant Staffed or Visited by Operator	Day of
		980	NAD	100			snoite	CT Calcul	William Street					
		100	cable*	ilqqA ii ,noiii	Virus Inactive	go-l-no	ч этвтигоста	or UV Dose, to D	CT Calculations,			saul south	DATING C	10 3461
County	nlorine (Chlora	i Damon			Free Chlo				n System:	ortudirtsiQ i	al Maintained in	ubiso H trist	offinisid.	to anyT
77		12 begida					2 221.	:(1	Other (Describe)	nation/Reme	vitasnī suniV go	/ing Four-L t Radiation	zoidoA 10 Istoiveutl	Means o
Combined Chlorine (Chloramines)	Sonc	0	əbixoi	Chlorine D		hlorine) aard	1	+0-isuguA		ilv Year of:	or the Month	y Data fo	III. Dail
										1+00103	7	оп Митрег:	entificati	PLSM
						Estates	Arredondo	Plant Name:	<u> </u>	5010041	, , , , , , , , , , , , , , , , , , ,			

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

000,88

Average



See page 4 for instructions

. General Information for the Month/Year of:		
A. Public Water System (PWS) Information		
PWS Name: Arredondo Estates	PWS Identification Number: 2010041	
PWS Type: X Community Ono-Transient Non-Community	Transient Non-Community Consecutive	
Service Conr	Total Population Served at End of Month: 519	
PWS Owner: Aqua Utilities Florida		
Contact Person: Michael Fitzgerald	Manager - Florida	
Contact Person's Mailing Address: 1343 NE 17th Road	City: Ocala State: FL Zip Code:	34470
Contact Person's Telephone Number: (352) 369-4881	Contact Person Person's Fax Number: (352) 732-3213	13
Contact Person's E-Mail Address: mvfitzgerald@aquaamerica.com		
B. Water Treatment Plant Information		
Plant Name: Arredondo Estatos	4[81
Plant Address: SW 52nd Ave	City: Gainesville State: FL Zip Code:	32608
Treated 1		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 68,494		
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.) C	
Licensed Operators License Class	License Number Day(s)/Shift(s) Worked	pa
Lead/Chief Operator: C	8287 6 Days per week	
Other Operators:		
· · · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·		

Certification by Lead/Chief Operator

rates; and (2) if applicable, appropriate treatment process performance records. Futhermore, I agree to provide these additional operations records to the PWS owner so the PWS 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 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 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. I certify that all drinking water treatment chemicals used at thisplant conform to NSF owner can retain them, together with copies of this report, at a convenient location for at least ten years.

C8287 Name License Number	Page 1
Mark March te Printed or Typed	
Signature and Date	OED Form 69 FEE 00000MVCD00

Daily Date for the Month Year of September 04 Free Chlorine Chlorine Doox Combined Chlorine (Chloramines) Chlorine Doox PWS Id	WS Identification Number: 2010041 Plant Name: Arredondo Estates														
Means of Achieving Four-Log Virtue Inactivation Cheroboxis Chromosomic Chicago Cheroboxis Chromosomic Chicago Chromosomic Chicago Chromosomic Chicago Chromosomic Chicago III. Dai	ly Data f	or the Mont	th/Year of:		September-04		 -								
Universide Radiation								Free C	hloring		Chlorine f	Dioxide)zone	Combined Chlorine (Chloramines)
Type of Disordectant Residual Maintained in Distribution System: Free Chicre Combined Chloramines Chlorate Distribution Display Combined Chloramines Chlorate Distribution Chlorate Di							·)·			ــا		-1011100	Ш,		
Dept					n Dietributie		· <u>···</u>			Free Chl	orina	Co	mbined C	hlorina (Chlor	amines) Chlorine Diovide
Day Plans	Type of	Distille	Ctarit Residi	uai iviailitailieu i	ii Distributio	on System.	swIPV Described	· · · · · · · · · · · · · · · · · · ·	-1100 r				momea C	morme (Cmor	annies) Chiorne Bloxide
Paint Safet Concent					C1 Calculations			our-rog	virus macmy	аион, и Аррі		Noce			
Saffed Core Content Provided Service Content Provided Service Content Provided Service Content Provided Service Content Cont	Ciproca (40)	20,00000-10000-10000-10000-10000-10000-10000-10000-10000-10000-10000-10000-10000-10000-10000-10000-10000-10000	Till de la company	Aller State of the			e i cuicu					, , , , , , , , , , , , , , , , , , ,	703C		
Possible Possible	45.04					Lowest Posidual	Disinfastont					200			
Number N		HISTORY PROPERTY				Control of the Contro								\$100 PM NOT TO PRODUCE SHOWN SO SHOW	
Day of Operation Hours H		THE SHOP OF PROPERTY OF				Control of the contro		15-41 to 00000000000000000000000000000000000				Lowest	Minimum	\$10.00 STALLEY STREET, \$10.00 STALLEY	the first the second of the second
Day of Depart Hours Flare Fl		Service 1885 St. 1586-00-2	100	Net Ouanity			Control of the state of the sta	7 4 5 5 mm 2 400 pc 1 12 1 30 1	Temp.		Minimum			resident and the Control of the Cont	
Proc. Place Plac	Day of	1980001 - 5,0000056	Hours							pH of			100 TO 100 TO 100 PORTS		Emergency or Abnormal Operating Conditions,
1.5	the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	Required,	mW-		Distribution	
1.5	Month		Operation		Rate, gpd	Flow, mg/L	minutes	mg-min/L	-c	Applicable	mg-min/L	sec/cm2	sec/cm2	System, mg/L	Water System Components Out of Operation
3	0.024 C T0000 DO								L						
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			Add Table Society	344,000	1										

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



I. General Information f	for the Month/Year of: October-04							
A. Public Water System	(PWS) Information							
PWS Name:	Arredondo Estates		PWS Identifi	cation Number:	2010041			
	X Community Non-Transient Non-Comm	nunity	Transient Non-Communi		ecutive			
	nections at End of Month: 247		Total Population Served a	t End of Month:	519			
PWS Owner:	Aqua Utilities Florida							
	Michael Fitzgerald		Contact Person's Title:	Area Manager - Florida				
Contact Person's Mailin	<u> </u>		City: Ocala	State: FL	Zip Code: 34470			
Contact Person's Teleph			Contact Person Person's F	ax Number:	(352) 732-3213			
Contact Person's E-Mail								
B. Water Treatment Pla	nt Information							
Plant Name:	Arredondo Estates		Plant Teleph	one Number:	(352) 369-4881			
Plant Address:	SW 52nd Ave		City: Gainesville	State: FL	Zip Code: 32608			
Type of Water Treated		chased Finished Wate	r					
	ay Operating Capacity of Plant, gallons per day:	68,494						
	section 62-699.310(4), F.A.C.): V		Plant Class (per subsection					
Licensed Operators	Name	License Class	License Number	Day(s)	/Shift(s) Worked			
Lead/Chief Operator:	Mark March	C	8287	6 D	ays per week			
Other Operators:	Barry Cohen	C	8253	6 Days per week				
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				<u> </u>				
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				<u> </u>				
		<u> </u>	<u> </u>	<u> </u>				
II. Certification by Lead	d/Chief Operator							
		/-1 ·- C		identified in Deat Left	is we set I sortify that the			
_	treatment plant operator licensed in Florida, am the lead	-	_		_			
	this report is true and accurate to the best of my knowled							
	0 or other applicable standards referenced in subsection ϵ							
	h day that a licensed operator staffed or visited this plant							
rates; and (2) if applicab	le, appropriate treatment process performance records. F	uthermore, I agree	to provide these addition	nal operations records t	to the PWS owner so the PWS			
owner can retain them, t	ogether with copies of this report, at a convenient locatio	n for at least ten yea	ars.					
	-							
	Mark March	-		C8287				
Signature and Date	Printed or Typed Name	•		License Number				
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EPORT FOR PWSS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

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Emergency or Abnormal Operating Conditions,	ni mio4	Required,	UV Dose,	CL	jo Hd	30	gainuG	Point During	First Customer		bədzini 10	STUOH	Оретасог	Day of
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Maximum 82,000 82,000 *** Refer to the instructions for this information. 845,15 000,28

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See page 4 for instructions I. General Information for the Month/Year of: November-04 A. Public Water System (PWS) Information PWS Name: 2010041 PWS Identification Number: Arredondo Estates X Community Non-Transient Non-Community Transient Non-Community Consecutive PWS Type: Number of Service Connections at End of Month: 247 Total Population Served at End of Month: 519 PWS Owner: Aqua Utilities Florida Contact Person's Title: Area Manager - Florida Contact Person: Brian Heath State: Zip Code: 34470 Contact Person's Mailing Address: 1343 NE 17th Road City: Ocala FL(352) 732-3213 (352) 732-6027 Contact Person Person's Fax Number: Contact Person's Telephone Number: Contact Person's E-Mail Address: beheath@aguaamerica.com B. Water Treatment Plant Information (352) 732-6027 Plant Telephone Number: Plant Name: Arredondo Estates Zip Code: 32608 Gainesville State: SW 52nd Ave City: FL Plant Address: X Raw Ground Water Purchased Finished Water Type of Water Treated by Plant: Permitted Maximum Day Operating Capacity of Plant, gallons per day: 68,494 Plant Class (per subsection 62-699.310(4), F.A.C.) Plant Category (per subsection 62-699.310(4), F.A.C.): Day(s)/Shift(s) Worked Licensed Operators Name License Class License Number 6 Days per weck C 8287 Lead/Chief Operator: Mark March $\bar{\mathbf{C}}$ 8253 6 Days per week Other Operators: Barry Cohen 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. 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. Futhermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years. C8287 Mark March

License Number

Printed or Typed Name

Signature and Date

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Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	Lowest Residual Disinfectant Concentiation at Remote Point in Distribution System, mg/L	Minimum UV Dose Required, Mm	UV D Lowest Lowest Operating UV Dose, UW Dose, Second	Medinided, Medinided, Medinimum CT Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medinimum Medinided, Medi	Virus Inactive PH of Water, if Applicable	our-Log Of Water, C	Access to the second second		CT Calculations, Lowest Residual Concentration (C) Before or at hirst Customer During Peak Flow, mg/L	Peak Flow Rate, gpd	Met Quanity Of Finished Water Produced, gal	Plant in Pla	Days Plant Staffed or Visited by Operator (Place	Day of the Month
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	1 1121					Estates	ориорэшА	Plant Name:	1	1400107	:	ou Number	entificati	PLSMA

Maximum 73,000 T3,000 Actermine which plants must provide this information.



I. General Information f	or the Month/Year of:	December-04										
A. Public Water System	(PWS) Information											
	Arredondo Estates					PWS Identifi	cation Num	ber:	2010041			
	X Community	Non-Transient Non-Comm	unity		Transien	t Non-Communit	у	Con	nsecutive			
Number of Service Con	nections at End of Month:	247			Total Po	oulation Served a	t End of Mo	onth:	519			
PWS Owner:	Aqua Utilities Florida											
Contact Person:	Brian Heath				Contact	Person's Title:	Area Mana	iger - Florid				
Contact Person's Mailin					City:	Ocala	State:	FL	Zip Code: 34470			
Contact Person's Teleph		32-6027			Contact	Person Person's F	ax Number:		(352) 732-3213			
Contact Person's E-Mail		h@aquaamerica.com										
B. Water Treatment Plant Information												
	Arredondo Estates					Plant Telepho			(352) 732-6027			
	SW 52nd Ave				City:	Gainesville	State:	FL	Zip Code: 32608			
Type of Water Treated			chased Finished	Wate	er							
	ay Operating Capacity of Plant, ga	llons per day:	68,494		·							
	section 62-699.310(4), F.A.C.):	V	August Lines in Harris 147 Sept.	Company of the Compan		iss (per subsection						
Licensed Operators	Page 1		License Cla	ISS	Lice	nse Number			s)/Shift(s) Worked			
Lead/Chief Operator:	Mark Ma		C			8287			Days per week			
Other Operators:	Barry Co	hen	C		ļ	8253		6.	Days per week			
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II. Certification by Lead	/Chief Operator											
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						e these addition	ial operatio	ons records	s to the PWS owner so the PWS			
owner can retain them, t	ogether with copies of this repo	ort, at a convenient location	n for at least to	en ye	ears.							
		Mark March					C8287					
Signature and Date		Printed or Typed Name	2				License N	umber				

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	Residual				3.5 × 4.5 × 1.0		Provided	Disinfectant	Lowest Residual	eren A. Statio			baffield	
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amines) Chlorine Dioxide	Jold'D) aginolo	D benider	<u> </u>	- adiac	TERRO CIPI						i bənistnisM İsı			
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Combined Chlorine (Chloramines)	ouoz(0	əbixoid	Chlorine D	:	hlorine:) Sorff	<u> </u>		maA\noitsiv	itaenI suriV go.			
									December-04		:10 твэ Y\d	or the Mont	of sta C	III. Dai
						CSISICS	орцораны	Plant Name:		1700107	•	ou Mumber	пезинны	LACIC
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	LIJCHUN'	ועות	אובעי	AA CIRLA	/ 12451 AA	$\sigma_{\mathbf{A}}$	3 P. (1) 177 - 1		שוועו בווע		$\Delta M = 4(1)$			

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



L. General Information !	or the Month Year of: January-05			
A. Public Water System				
	Arredondo Estates		Inwe H	cation Number: 2010041
		munit.		
	X Community	munity	Transient Non-Commun	· · · · · · · · · · · · · · · · · · ·
	Agua Utilities Florida		Total Population Served a	at End of Month: 519
	Brian Heath		C + + P + 1 T'11	
Contact Person's Mailin		···	Contact Person's Title: City: Leesburg	Area Manager - Florida State: FL Zip Code: 34749
Contact Person's Teleph			City: Leesburg Contact Person Person's F	
Contact Person's E-Mai			Contact Person Person's F	ax Number: (332) 787-0333
B. Water Treatment Plan				
	Arredondo Estates		Plant Telepho	one Number: (352) 787-0980
	SW 52nd Ave		City: Gainesville	
Type of Water Treated		rchased Finished Wa		State. PL Zip Code. 32008
	lay Operating Capacity of Plant, gallons per day:	68,494	itoi	
	osection 62-699.310(4), F.A.C.): V	00,171	Plant Class (ner subsection	on 62-699.310(4), F.A.C.): C
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Mark March	С	8287	6 Days per week
Other Operators:	TACK THEOT		0207	o bays per week
and self-region of the self-regi				
S. See W. J.			· · · · · · · · · · · · · · · · · · ·	
and the second of the second o				
II. Certification by Lead	l Chief Operator			
I the undersioned water	treatment plant operator licensed in Florida, am the lead/	chief operator of th	e water treatment nlant i	dentified in Part I of this report. I certify that the
	• •	-	_	
	this report is true and accurate to the best of my knowled			
	0 or other applicable standards referenced in subsection 6			
	that a licensed operator staffed or visited this plant during			
and (2) if applicable, app	propriate treatment process performance records. Futhern	nore, I agree to pro	vide these additional ope	rations records to the PWS owner so the PWS owner
can retain them, together	with copies of this report, at a convenient location for at	least ten years.		
	- · · · · · · · · · · · · · · · · · · ·	•		
	Mark March			C8287
Signature and Date	Printed or Typed Name	е		License Number

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											002,88	24 hrs		30
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	8.0								Ī		000,02	24 hrs	X	LZ
	8.0								I		42,000	24 hrs	X	97
	L'0								I		000,02	24 hrs	X	72
	8.0	T.							I.		000,84	24 hrs	X	74
											52,000	24 hrs		73
	7.1								1.2		000,18	24 hrs	X	77
	2.1								9.1		48,000	24 hrs	X	71
1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	7.1								7.1		000,72	24 hrs	X	70
	7.1								9.1		48,000	24 hrs	X	61
	I								1		000,62	24 hrs	X	81
	t'I								8. I		000,£9	54 pts	X	LI
											34,000	24 hrs		91
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	č .0								7.0		42,000	24 hrs	X	I
Erricegency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	Lowest Readural Posinfectant Obsinfectantium at Remote Point in Point in Statement on System, mg/L	muminiM cood VU Kequired, Wm Ymobes	Lowest Lowest Operating UV Dose -Wm		PH of West, i Applicable		Lowest CT. Provided Before or at First Customer During Peak Flow,	CT Calcul Disinfectant Contact Time (I) at C Measurement Point During Peak Flow, minutes	Lowest Residual Distinfectant Concentration (C) Before or at First Chatomer First Chatomer First Chatomer Flow, mg/L	woff Jes Yate, Bpg	Met Quanity of Finished Water Produced, gal	ernoH ni insi¶ noitsraqO	Days Plant Operator Visited by Visited Thy (Place	Dayof da Monda
		1.2	capje			20-I-mo		or UV Dose, to D						
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Combined Chlorine (Chloramines)	əuoz	0 🗍	əbixoi	Chlorine D		ounold.	O sorif	:(]			vitosanl suriiV go		vəidəA 10	Means
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Maximum 66,500 66,500 8 Refer to the instructions for this report to determine which plants must provide this information.



See page 4 for instructions					
I. General Information f	or the Month Year of: February-05				
A. Public Water System	(PWS) Information	·			
PWS Name:	Arredondo Estates		PWS Identif	ication Number:	2010041
	X Community Non-Transient Non-Comm	nunity	Transient Non-Commu		onsecutive
Number of Service Con-	nections at End of Month: 246		Total Population Served	at End of Month:	738
PWS Owner:	Aqua Utilities Florida				
	Brian Heath		Contact Person's Title:	Area Manager - Florida	
Contact Person's Mailin			City: Leesburg	State: FL	Zip Code: 34749
Contact Person's Teleph			Contact Person Person's	Fax Number:	(352) 787-6333
Contact Person's E-Mail					
B. Water Treatment Plan	nt Information				
Plant Name:	Arredondo Estates		Plant Teleph	one Number:	(352) 787-0980
Plant Address:	SW 52nd Ave		City: Gainesville	State: FL	Zip Code: 32608
Type of Water Treated	by Plant: X Raw Ground Water Pu	rchased Finished Wa	ter		
Permitted Maximum D	ay Operating Capacity of Plant, gallons per day:	68,494			
Plant Category (per sub	osection 62-699.310(4), F.A.C.): V		Plant Class (per subsection		
Licensed Operators	Name	License Class	License Number		/Shift(s) Worked
Lead/Chief Operator:	Mark March	С	8287	6 D	lays per week
Other Operators:					
	1741 177				
II. Certification by Lead					
I, the undersigned water	treatment plant operator licensed in Florida, am the lead/	chief operator of th	e water treatment plant	identified in Part I of th	is report. I certify that the
information provided in	this report is true and accurate to the best of my knowled	ge. I certify that all	I drinking water treatmen	nt chemicals used at thi	splant conform to NSF
International Standard 60	0 or other applicable standards referenced in subsection 6	2-555.320(3), F.A.	C. I also certify that the	following additional o	perations records for this plant
were prepared each day (that a licensed operator staffed or visited this plant during	the month indicate	ed above: (1) records of	amounts of chemicals	used and chemical feed rates;
and (2) if annliable and	propriate treatment process performance records. Futhern	nore. Lagree to pro	vide these additional op	erations records to the l	PWS owner so the PWS owner
	with copies of this report, at a convenient location for at		vide those additional op		
can retain them, together	with copies of this report, at a convenient location for at	least ten years.			
	Ma_1, Mat-			C8287	
Cia	Mark March Printed or Typed Name	Α		License Number	
Signature and Date	rimed or Typed Name	C		Diodiso Hamou	

						Estates	Arredondo	Plant Name:		100107	:	ou _M umper	itsoftinə	PI SM
Combined Chlorine (Chloramines)	sone	<u> </u>	əhixoi	Chlorine D	<u>' </u>	eninold	Э ээт Т		February-05		17 car of: og Virus Inactiv	inol/ off) re J-mo3 gniv		
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mines) Chlorine Dioxide	lorine (Chlora	nbined Ch			Free Chlo				n System:	oitudirteiQ	al Maintained in			
		950(iloga i i noii 	Virus Inactiva	20-I-mo		or UV Dose, to D CT Calcula	CT Calculations,				eu	
	Powest	950	a An				Lowest CT	CT Calcula					Days	
	Residual Justolnizid						Provided to store	Disinfectant Contact Time	Lowest Residual Disinfectant				baffigi2 10	
	Concentration	muminiM	IsawoJ				at Pirst	O 18 (T)	Солсспияноп				botiziV	
Emergency or Abnormal Operating Conditions;	at Remote Point in	UV Dose Required,	Operating: UV Dose,	Minimum TD		Temp.	Customer During	Measurement Point During	(C) Before or at First Customer		Net Quanity of Finished	smoH	Operator	To yeal
Repair or Maintenance Work that Involves Taking	noindineiQ	Wm	-Wm	Required,	Total To Hq	Water,	Peak Flow,	Peak Flow,	Jacq BaimG	Peak Flow	Water	ni malq	malq)	ञ्या
Water System Components Out of Operation	System, mg/L 0.5	zwo/oes	Sec/cm2	7/11/11/25/20	if Applicable	3	J/nim-gm	səmum	Лут, wo гд	Rate, gpd	Produced, gal 58,000	Operation 24 hrs	C.X.	Month
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	Þ. I					L			9.1		900,02	24 hrs	X	ε
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Page 2

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I. General Information f	for the Month Year of: March-05			
A. Public Water System	(PWS) Information			
PWS Name:	Arredondo Estates		PWS Identificati	ion Number: 2010041
	X Community	munity	Transient Non-Community	Consecutive
Number of Service Con	nections at End of Month: 246		Total Population Served at E	nd of Month: 738
PWS Owner:	Aqua Utilities Florida			
Contact Person:	Brian Heath			rea Manager - Florida
Contact Person's Mailir				ate: FL Zip Code: 34749
Contact Person's Teleph			Contact Person Person's Fax	Number: (352) 787-6333
Contact Person's E-Mai				
B. Water Treatment Pla	nt Information			
Plant Name:	Arredondo Estates		Plant Telephone	
Plant Address:	SW 52nd Ave			ate: FL Zip Code: 32608
Type of Water Treated	· · · · · · · · · · · · · · · · · · ·	rchased Finished Wa	ater	
	Day Operating Capacity of Plant, gallons per day:	68,494		
	bsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 6	
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Mark March	С	8287	6 Days per week
Other Operators:				
·				
II. Charle and a ball on				
II. Certification by Lead				
I, the undersigned water	treatment plant operator licensed in Florida, am the lead/	chief operator of the	he water treatment plant ider	ntified in Part I of this report. I certify that the
information provided in	this report is true and accurate to the best of my knowled	lge. I certify that al	ll drinking water treatment c	hemicals used at thisplant conform to NSF
International Standard 6	0 or other applicable standards referenced in subsection 6	52-555.320(3), F.A	.C. I also certify that the fol	lowing additional operations records for this plant
were prepared each day	that a licensed operator staffed or visited this plant during	g the month indicat	ed above: (1) records of amo	ounts of chemicals used and chemical feed rates;
and (2) if annihable and	propriate treatment process performance records. Futherr	more I saree to pro	wide these additional operat	ions records to the PWS owner so the PWS owner
and (2) if applicable, ap	propriate treatment process performance records. Futurent	t least ten voore	vide these additional operat	ions records to the 1 w b owner so that a w = 1
can retain them, togethe	r with copies of this report, at a convenient location for at	i least ten years.		
	M. 1.24			28287
G: LD	Mark March Printed or Typed Nam			icense Number
Signature and Date	rinied or Typed Nam	IC.	L	recipe frames

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Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	Lowest Disinfectant Disinfectant Concentration at Kennote Point in Point in	Minimum UV Dose Required, mW sec/cm2	Lowest Operating UV Dose mW- accom2	Minimum CT Required, Required, min-gm	pH of Water,		Lowest CT Provided Before or at First Customer During Peek Flow,	Diainfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest Residual Disinfectant Concentration (C) Before or at First Customer. During Peak How, mg/L	Peak Flow Rate, 8pd	Met Quantity of Finished Water Produced, gal	emoH ni inslq noitsriotO	Plant Staffed or Visited by Operator (Place	Day of the Month
						go.l-nuo	znoi)s	or UV Dose, to D CT Calcul					Days	
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Chlorine (Chloramines)	ouoz	o <u> </u>	əbixoi	O əninoldə		hlorine	O sər4):	March-05 val: * Other (Describe		1 Year of: og Virus Inactiv	mol/ other ing Four-L roitation	vəidəA to	Means
						Estates	Arredondo	Plant Name:		1400102		ои Митрег	itsoftitna	PI SMd

Maximum 73,000 This report to determine which plants must provide this information. * Refer to the instructions for this report to determine which plants must provide this information.



See i	page 4	1 for	instructions
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I. General Information f	or the Month Year of: April-05			
A. Public Water System	(PWS) Information			
PWS Name:	Arredondo Estates			cation Number: 2010041
	X Community	munity 🔲	Transient Non-Commun	
Number of Service Con	nections at End of Month: 246		Total Population Served a	t End of Month: 738
	Aqua Utilities Florida	·		
	Brian Heath		Contact Person's Title:	Area Manager - Florida
Contact Person's Mailin			City: Leesburg	State: FL Zip Code: 34749
Contact Person's Teleph			Contact Person Person's F	ax Number: (352) 787-6333
Contact Person's E-Mail	· · · · · · · · · · · · · · · · · · ·			
B. Water Treatment Plan	nt Information			
	Arredondo Estates		Plant Telepho	
	SW 52nd Ave		City: Gainesville	State: FL Zip Code: 32608
Type of Water Treated	· · · · · · · · · · · · · · · · · · ·	rchased Finished Wa	ater	
		68,494		
	section 62-699.310(4), F.A.C.): V		Plant Class (per subsectio	
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	6 Days per week
Other Operators:	Bob Maxon	C	2810	6 Days per week
		,		
	(4) 1 . (4)			
II. Certification by Lead				
I, the undersigned water	treatment plant operator licensed in Florida, am the lead/	chief operator of th	ne water treatment plant ic	dentified in Part I of this report. I certify that the
information provided in	this report is true and accurate to the best of my knowled	ge. I certify that al	l drinking water treatmen	t chemicals used at thisplant conform to NSF
International Standard 60	0 or other applicable standards referenced in subsection 6	52-555.320(3). F.A.	C. I also certify that the	following additional operations records for this plant
were prepared each day t	that a licensed operator staffed or visited this plant during	the month indicat	ed above: (1) records of a	mounts of chemicals used and chemical feed rates:
were prepared each day t	propriate treatment process performance records. Futhern	mara I agrae to pro	wide these additional one	rations records to the PWS owner so the PWS owner
and (2) if applicable, app	ropriate treatment process performance records. Futuern	nore, ragice to pro	vide diese additional ope	rations records to the 1 w 5 owner so the 1 w 5 owner
can retain them, together	with copies of this report, at a convenient location for at	least ten years.		
				C9297
	Mark March			C8287 License Number
Signature and Date	Printed or Typed Name	e		License Numoer

											086,48			Average
											1,648,500			IntoT
	I											24 hrs		16
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	7.1								9.1		000'79	S4 hrs	X	52
											000,22	24 hrs	L	54
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	9.0								I I		000,02	24 hrs	X	33
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	7.1								9.1		000,82	SJU 77	X	SI
	8.1								7.1		000,74	SJU 77	X	#1
	1.2								b ,1		000'65	24 hrs	X	EI
	†. I								9'1		000,22	St hrs	X	71
	2.1				L				t I		000,42	SJU 57	X	11
	Ļ								0.1		000,88	24 hrs	V	01
	1.2								9.1		000,82	24 hrs	X	6
	4.1								9.1		000,84	24 hrs	X	8
	7.1								9'1		000,74	SH 17	X	L
	4.1								8.1		000'95	SJU 77	X	9
	₱ ¹ l			ļ		ļ			9.1		25,000	SJU 77	X	S
	2.1					ļ			8.1		90,000	24 hrs	X	7
				·					1.1		000,82	24 hrs	V	£ 7
	2.1			<u> </u>					4.1				X	7
	9.0		- Prince and		menomendals s se			OAAN PROTECTION	8.0	Rate, gpd	Produced, gal	Operation 24 hrs	X	I
Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that lavolves Taking Water System Components Out of Operation	Lowest Residual Distributation Concentration at Remote Point in Distribution System, mg/L	Minimum VV Dose Required, Wm	Lowest Operating UV Dose, Wm		pH of Water, if Applicable		Lowest CT Provided Before or at First Customer During Peak Flow, Peak Flow,	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest Residual Disinfectant Concentration (C) Before or at First Customer First Customer Flow, mg/L	Peak Flow	Met Quantly both Tinished both Tinished Tinished	Hours ni melq	planted to the control of the contro	Day of the Month
				·*··		20.1-110		of UV Dose, to D CT Calcul					Days	10
epixoid Chlorine Dioxide	lorine (Chlora	1) bənidm	ω) []	ənine	Free Chlo					ioitudintaiQ	ni bənistnisM ls			
Combined Chlorine (Chloramines)	Sone	0 🗍	əbixoi	Chlorine D		hlorine	ЭэтЧ 🗌	:(April-05 val: * Other (Describe		vitaenl euri V go	rthe Mont ing Four-L Radiation	zəidəA 10	Means
						Estates	Arredondo	Plant Name:		1400102	:	on Mumber	entificati	PI SMd

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

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See	nage (1 for	inetro	ctions
OCC	Daye	+ 101	IIISU U	CHOILS

I. General Information f	or the Month Year of: May-05			
A. Public Water System	(PWS) Information			
PWS Name:	Arredondo Estates		PWS Identific	cation Number: 2010041
PWS Type:	X Community	nunity	Transient Non-Communi	
	nections at End of Month: 246		Total Population Served at	End of Month: 738
	Aqua Utilities Florida			
	Brian Heath			Area Manager - Florida
Contact Person's Mailin				State: FL Zip Code: 34749
Contact Person's Teleph			Contact Person Person's Fa	ax Number: (352) 787-6333
Contact Person's E-Mai				
B. Water Treatment Plan	nt Information			
	Arredondo Estates		Plant Telepho	
	SW 52nd Ave		City: Gainesville	State: FL Zip Code: 32608
Type of Water Treated		rchased Finished Wa	iter	
		68,494		
	section 62-699.310(4), F.A.C.): V		Plant Class (per subsection	n 62-699.310(4), F.A.C.): C
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Mark March	С	8287	6 Days per week
Other Operators:	Bob Maxon	С	2810	6 Days per week
	Paul Thompson	A	7251	6 Days per week
			ļ	
+ (, ,) ()				
H. Certification by Lead	Chief Operator			
I, the undersigned water	treatment plant operator licensed in Florida, am the lead/o	chief operator of the	ne water treatment plant ic	dentified 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	ge. I certify that al	l drinking water treatment	t chemicals used at thisplant conform to NSF
International Standard 6	0 or other applicable standards referenced in subsection 6	2-555.320(3), F.A.	C. I also certify that the f	following additional operations records for this plant
were prepared each day	that a licensed operator staffed or visited this plant during	the month indicate	ed above: (1) records of a	mounts of chemicals used and chemical feed rates;
and (2) if applicable app	propriate treatment process performance records. Futhern	nore. I agree to pro	vide these additional oper	rations records to the PWS owner so the PWS owner
can retain them together	with copies of this report, at a convenient location for at	least ten vears.	•	
can retain them, together	with copies of this report, at a convenient foculton for at	toust tour y turns		
	Mark March			C8287
Signature and Date	Printed or Typed Name	· · · · · · · · · · · · · · · · · · ·		License Number
Signature and Date	Trinca of Typea Name	•		

PWS Ic	entificat	ion Number	:	2010041		Plant Name:	Arredondo	Estate						
III. Dai	ly Data I	or the Mont	h Year of:		May-05	v			-					
			og Virus Inacti	viation/Remo			X Free C	hlorin	e 🗌	Chlorine I	Dioxide		Ozone	Combined Chlorine (Chloramines)
		et Radiation			Other (Describe	e):			<u></u>					
Type of	Disinfe	ctant Residu	ıal Maintained i	n Distributio	n System:			IX	Free Chlo	orine	Co	mbined C	hlorine (Chlor	amines) Chlorine Dioxide
						or UV Dose, to	Demonstrate I							
	Days		***			CT Calcu			er aller en aller en aller La grand en aller en aller		UV	Dose		
	Plant						Lowest CT						Lowest	[발발생품값이 많이 "미리스(함께 함께 입었다.
	Staffed				Lowest Residual	Disinfectant	Provided						Residual	
	or	\$177.			Disinfectant	Contact Time	Before or						Disinfectant	
	Visited		en i filosofii Karanteen jagaan		Concentration	(T) at C	at First				Lowest	Minimum	Concentration	
_	by		Net Quanity		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating	UV Dose	at Remote	
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of		CT	UV Dose,	Required,	Point in	Emergency or Abnormal Operating Conditions;
the Month	(Place "X")	Plant in Operation	Water Produced, gal	Peak Flow Rate, gpd	During Peak Flow, mg/L	Peak Flow, minutes	Peak Flow, mg-min/L		pH of Water, if Applicable		mW- sec/cm2	mW sec/cm2	Distribution System, mg/L	Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1		24 hrs	62,500	Kate, gpt	riow, mgr.	minues	ing-mints	C	II Applicatio	. mg-mar.	SCC-CIII 2	SCOULZ	System, mg/L	Water System Components out of Operation
2	Х	24 hrs	63,000		1.6								1.4	
3	X	24 hrs	55,000		1.8								1.4	
4	X	24 hrs	52,000		1.4								1.2	
5	X	24 hrs	57,000		1.6								1.2	_
6	X	24 hrs	60,000		1.6			ļ					1.4	
7		24 hrs	60,000											
8	X	24 hrs	75,000		1.8								1.4	
9	X	24 hrs	63,000 69,000		1.6						 		1.2	
11	X X	24 hrs 24 hrs	71,000	 	1.6		 	-			 	-	1.4	
12	X	24 hrs	78,000		1.6				 		-		1.2	
13	X	24 hrs	82,000	<u> </u>	1.6	···································							1.4	
14	X	24 hrs	75,000		1.4			 					1	
15		24 hrs	75,000			•				·				
16	Х	24 hrs	71,000		1,4								1.2	
17	X	24 hrs	87,000	l	1.6								1.2	
18	X	24 hrs	96,000		1.6								1.4	
19	Х	24 hrs	97,000		1.4								1.2	
20	X	24 hrs	87,000	ļ	1.4		<u> </u>						1	
21	X	24 hrs	95,000		1.2				<u> </u>				1	
22		24 hrs	96,000		1.4			+				 	1.2	
23 24	X	24 hrs 24 hrs	89,000 66,000	 	1.4			 	-			 	1.2	<u> </u>
25	X	24 hrs	88,000	 	1.4		 	 					i	
26	X	24 hrs	71,000	 	1			<u> </u>	 		†	 	1	
27	X	24 hrs	68,000	 	1.2		 	† —			1		0.9	
28	X	24 hrs	75,000		1.2								1	
29		24 hrs	75,000											
30	Х	24 hrs	94,000		1								0.6	
31	X	24 hrs	67,000		1						<u> </u>	<u> </u>	0.5	
Total			2,319,500											
Average			74 823											

97,000

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



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See	nage	4	tor	inetr	uctions

I. General Information f	or the Month Year of: June-05			
A. Public Water System	(PWS) Information			
PWS Name:	Arredondo Estates		PWS Identific	cation Number: 2010041
	X Community Non-Transient Non-Comm	nunity	Transient Non-Commun	ty Consecutive
Number of Service Con	nections at End of Month: 246		Total Population Served at	End of Month: 738
PWS Owner:	Aqua Utilities Florida			
	Brian Heath			Area Manager - Florida
Contact Person's Mailin			1	State: FL Zip Code: 34749
Contact Person's Teleph			Contact Person Person's Fa	ax Number: (352) 787-6333
Contact Person's E-Mai	l Address: <u>beheath@aquaamerica.com</u>			
B. Water Treatment Plan	nt Information			
Plant Name:	Arredondo Estates		Plant Telepho	ne Number: (352) 787-0980
	SW 52nd Ave		1 - 2	State: FL Zip Code: 32608
Type of Water Treated	by Plant: X Raw Ground Water Pur	rchased Finished Wa	ter	
		68,494		
	osection 62-699.310(4), F.A.C.): V		Plant Class (per subsection	
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	6 Days per week
Other Operators:	Bob Maxon	C	2810	6 Days per week
	Paul Thompson	A	7251	6 Days per week
II. Certification by Lead				
I, the undersigned water	treatment plant operator licensed in Florida, am the lead/o	chief operator of th	e water treatment plant ic	lentified 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	e. I certify that al	l drinking water treatment	t chemicals used at thisplant conform to NSF
International Standard 6	0 or other applicable standards referenced in subsection 6.	2-555 320(3) F.A.	C. I also certify that the f	following additional operations records for this plant
Ware prepared each days	that a licensed operator staffed or visited this plant during	the month indicate	ed above: (1) records of a	mounts of chemicals used and chemical feed rates:
and (2) if amplicable and	propriate treatment process performance records. Futhern	ora I saree to pro	vide these additional one:	rations records to the PWS owner so the PWS owner
			vide mese additional oper	ations records to the 1 w3 owner so the 1 w3 owner
can retain them, together	with copies of this report, at a convenient location for at	least ten years.		
				C0207
	Mark March			C8287
Signature and Date	Printed or Typed Name			License Number

PWS Id	lentificat	ion Number	•	2010041		Plant Name:	Arredondo	Estate	:s					
III. Daily Data for the Month Year of: June-05														
Means	of Achie		og Virus Inactiv	viation/Remo	oval: * Other (Describe	·)·	X Free C	Chlorin	e	Chlorine I	Dioxide		Ozone	Combined Chlorine (Chloramines)
			al Maintained in	n Distributio		.,,.		Ιx	Free Chle	orine	Co	mbined Cl	hlorine (Chlor	amines) Chlorine Dioxide
Турсо	Distille	Ctain regide	ar manamed n	T Distributio	CT Calculations,	or HV Dose to	Demonstrate F							
	Days					CT Calcu					UV	Dose		
	Plant			ti. (ej . j. de			Lowest CT		P Workers	3143			Lowest	
Day of the	Staffed or Visited by Operator (Place	Hours Plant in	Net Quanity 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,	Provided Before or at First Customer During Peak Flow,	Temp, of Water,			Lowest Operating UV Dose, mW-	Minimum UV Dose Required, mW	Residual Disinfectant Concentration at Remote Point in Distribution	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Takin
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	С	if Applicable	mg-min/L	sec/cm2	sec/cm2	System, mg/L	Water System Components Out of Operation
1	X	24 hrs	72,000		1.4			<u> </u>	<u> </u>		<u></u>	ļ	1	
2	X	24 hrs	69,000		1		<u> </u>	l	ļ				1.6	
3	X	24 hrs	53,000		1,6								0.4	
4	X	24 hrs	69,000		0.9		ļ		ļ		 -		0.4	
5		24 hrs	69,000	ļ					 				 -	
6	X	24 hrs	69,000		1.2		 						1.2	
7	X	24 hrs	66,000		1.4		ļ		 		 		1.2	
8	X	24 hrs	76,000	ļ	1.4		 	<u> </u>	<u> </u>		 		1	
9	X	24 hrs	69,000		1.2		 		 		 		1.2	
10	X	24 hrs	66,000		1.4		 	<u> </u>	 			ļ	1.2	
11	X	24 hrs 24 hrs	66,000 76,000		1.4		1		 	 	 		1.2	
13	X	24 hrs	56,000		1.6		 	-	 -	 	 		1.2	
14	X	24 hrs	65,000		1.4		 		 				1.2	
15	$\frac{\hat{x}}{x}$	24 hrs	68,000		1.4		 		 				i	
16	$\frac{\hat{x}}{x}$	24 hrs	76,000		1.4		 	 	 		 	· · · · · ·	1.8	
17	X	24 hrs	59,000		1.4			-	<u> </u>		 		ı	
18		24 hrs	60,000		1.7		 							
19	X	24 hrs	46,000	 	1.2		<u> </u>							
20	X	24 hrs	41,000	 	1.4				<u> </u>				1.2	
21	X	24 hrs	45,000		1,4		1	<u> </u>					1	
22	$\frac{x}{x}$	24 hrs	60,000	 	1.6	<u> </u>							1.2	
23	$\frac{x}{x}$	24 hrs	70,000		1.4	l				<u> </u>			1.2	
24	$\frac{1}{X}$	24 hrs	56,000		1.6		T]		1.2	
25	X	24 hrs	68,500	<u> </u>	1								0.6	
26		24 hrs	68,500											
27	X	24 hrs	46,000		1.2								11	
28	X	24 hrs	42,000	1	1.4								1.2	
29	X	24 hrs	50,000		1.4								11	
30	X	24 hrs	56,000		1.6								1.2	
31		24 hrs										L		
Total	V		1,853,000											
Average			61,767											

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



see page 4 for instructions				
I. General Information f	· · · · · · · · · · · · · · · · · · ·			
A. Public Water System	(PWS) Information			
	Arredondo Estates		PWS Identific	cation Number: 2010041
	Community Non-Transient Non-Comm	munity	Transient Non-Commun	
	nections at End of Month: 246		Total Population Served a	t End of Month: 738
	Aqua Utilities Florida			
	Brian Heath		Contact Person's Title:	Area Manager - Florida
Contact Person's Mailin	 		+	State: FL Zip Code: 34749
Contact Person's Teleph			Contact Person Person's F	ax Number: (352) 787-6333
Contact Person's E-Mai				
B. Water Treatment Plan	nt Information			
Plant Name:	Arredondo Estates		Plant Telepho	
	SW 52nd Ave		City: Gainesville	State: FL Zip Code: 32608
Type of Water Treated		rchased Finished Wa	ater	· · · · · · · · · · · · · · · · · · ·
		68,494		
	osection 62-699.310(4), F.A.C.): V		Plant Class (per subsection	
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	6 Days per week
Other Operators:	Gary Kissick	С	7846	6 Days per week
	Paul Thompson		7251	6 Days per week
			<u> </u>	
			<u></u>	<u></u>
II. Certification by Lead				
I, the undersigned water	treatment plant operator licensed in Florida, am the lead/	chief operator of the	ne water treatment plant ic	dentified in Part I of this report. I certify that the
information provided in	this report is true and accurate to the best of my knowled	ge. I certify that al	l drinking water treatmen	t chemicals used at thisplant conform to NSF
International Standard 6	0 or other applicable standards referenced in subsection 6	62-555.320(3), F.A	.C. I also certify that the	following additional operations records for this plan
ware proposed and days	that a licensed operator staffed or visited this plant during	the month indicat	ed above: (1) records of a	amounts of chemicals used and chemical feed rates:
were prepared each day	propriate treatment process performance records. Futhern	mara Lagras to pro	wide these additional one	rations records to the PWS owner so the PWS owner
and (2) if applicable, app	propriate treatment process performance records. Futneth	hore, i agree to pre	vide these additional ope	factoris records to the 1 w 5 owner so the 1 w 5 own
can retain them, together	r with copies of this report, at a convenient location for at	least ten years.		
	Mark March			C8287
Signature and Date	Printed or Typed Name	e		License Number

PWS Id	PWS Identification Number: 2010041 Plant Name: Arredondo Estates													
III. Daily Data for the Month Year of: July-05														
Means	of Achie		og Virus Inactiv	viation/Remo		·)·	X Free (Chlorin	e	Chlorine I	Dioxide		Ozone	Combined Chlorine (Chloramines)
			ual Maintained in	n Distributio		.).	· · · · · · · · · · · · · · · · · · ·	Ιx	Free Chlo	orine	T Co	mbined C	hlorine (Chlor	ramines) Chlorine Dioxide
7.			19 Avidades			, or UV Dose, to	Demonstrate I					anomea e		
	Days				Treat Brigadistry	CT Calcu					ו עט	Dosc		
	Plant			Than a w	a company		Lowest CT	14.	Page 1			249 AT U	Lowest	
	Staffed				Lowest Residual	Disinfectant	Provided					with the	Residual	
	or				Disinfectant	Contact Time	Before or						Disinfectant	
	Visited				Concentration	(T) at C	at First	5 × 5			Lowest	Minimum	Concentration	
	by		Net Quanity		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating	UV Dose	at Remote	
Day of	Operator (Place	Hours Plant in	of Finished Water	Peak Flow	First Customer During Peak	Point During Peak Flow,	During Peak Flow,	of	pH of Water,	CT Required,	UV Dose, mW-	Required, mW	Point in Distribution	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L		if Applicable		sec/cm2	sec/cm2	System, mg/L	Water System Components Out of Operation
1	X	24 hrs	51,000		1.4		ing mass		ттрричале			2000000	1.2	Mater System Components out of Spendion
2	X	24 hrs	66,000	1	1.2								1	
3		24 hrs	66,000											
4	X	24 hrs	26,000		1								0.8	
5	X	24 hrs	44,000		1								0.6	
6	X	24 hrs	61,000		1								0.8	
7	X	24 hrs	53,000		1.2			ļ	-				1	
8	X	24 hrs	60,000		1.2				ļ		ļ <u></u>		0.8	
10	X	24 hrs 24 hrs	40,000 41,000		1			ļ			ļ <u>.</u>		<u> </u>	
11	х	24 hrs	47,000		1.6				-			 	1.2	
12	X	24 hrs	68,000		1.4		 	 	 				1.2	
13	X	24 hrs	41,000		1.2	<u> </u>		1					1	
14	Х	24 hrs	53,000		1.4								1.2	
15	Х	24 hrs	54,000		1.2								1	
16	X	24 hrs	48,000		1.4								1.2	
17		24 hrs	48,000						ļ					
18	X	24 hrs	44,000		1.2								1	
19	X	24 hrs	48,000		1		ļ <u>.</u>					 	0.6	
20 21	X	24 hrs	53,000 49,000	 	1.6		 	├	 	ļ			1.2	
22	X	24 hrs 24 hrs	42,000		1.6				-		 	 	1.4	
23	X	24 hrs	60,000	 	1.9	 	 				<u> </u>		1.4	
24		24 hrs	61,000				 	†	†			<u> </u>		
25	Х	24 hrs	55,000	 	1.8		1	1					1.2	
26	Х	24 hrs	55,000		1.6								1.4	
27	X	24 hrs	66,000		1.6								1.2	
28	X	24 hrs	77,000		1.6			<u> </u>	<u> </u>				1.4	
29	X	24 hrs	52,000	ļ <u></u>	1.8	ļ	<u> </u>	<u> </u>	 			<u> </u>	1.4	
30	X	24 hrs	58,000		1.4			ļ	<u> </u>			ļ	1.2	
31		24 hrs	58,000		<u> </u>	I	<u> </u>	<u> </u>	<u> </u>	l		<u> </u>	<u>. </u>	
Total	**	 	1,645,000	-										
Average	١,		53,065	1										

77,000

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



I. General Information !	or the Month Year of: August-05							
A. Public Water System	(PWS) Information							
PWS Name:	Arredondo Estates		PWS Identific	cation Number:	2010041			
	X Community Non-Transient Non-Comr	nunity	Transient Non-Community Consecutive					
	nections at End of Month: 246		Total Population Served a	t End of Month:	738			
	Aqua Utilities Florida							
	Brian Heath		Contact Person's Title:	Area Manager				
Contact Person's Mailin				State: FL	Zip Code: 34749			
Contact Person's Teleph			Contact Person Person's F	ax Number:	(352) 787-6333			
Contact Person's E-Mai				·				
B. Water Treatment Pla								
	Arredondo Estates		Plant Telepho		(352) 787-0980			
	SW 52nd Ave			State: FL	Zip Code: 32608			
Type of Water Treated		rchased Finished Wa	nter					
		68,494						
	section 62-699.310(4), F.A.C.): V		Plant Class (per subsection					
Licensed Operators	Name	License Class	License Number		/Shift(s) Worked			
Lead/Chief Operator:	Paul Thompson	A	7251	6 Days per week				
Other Operators:	Mark March	С	8287		Days per week			
	Gary Kissick	С	7846	6 E	Days per week			
	· · · · · · · · · · · · · · · · · · ·							
<u> </u>			<u>. </u>	<u></u>				
II. Certification by Lead	Chief Operator							
·								
I, the undersigned water	treatment plant operator licensed in Florida, am the lead/o	chief operator of the	ne water treatment plant ic	lentified in Part I of th	is report. I certify that the			
information provided in	this report is true and accurate to the best of my knowledg	ge. I certify that al	l drinking water treatmen	t chemicals used at thi	splant conform to NSF			
International Standard 69	0 or other applicable standards referenced in subsection 6	2-555.320(3), F.A.	 C. I also certify that the f 	following additional o	perations records for this plant			
were prepared each day	that a licensed operator staffed or visited this plant during	the month indicat	ed above: (1) records of a	mounts of chemicals t	used and chemical feed rates;			
and (2) if applicable, app	propriate treatment process performance records. Futhern	nore, I agree to pro	vide these additional oper	rations records to the l	PWS owner so the PWS owner			
	with copies of this report, at a convenient location for at		-					
, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,	•						
	Paul Thompson			A7251				
Signature and Date	Printed or Typed Name	2		License Number				
J					4			

PWS Id	entificat	ion Number	T:	2010041		Plant Name:	Arredondo	Estate	S					
III. Daily Data for the Month Year of: August-05														
Means	of Achie	ving Four-L	og Virus Inactiv	viation/Remo			X Free C	hlorin	е	Chlorine I	Dioxide)zone	Combined Chlorine (Chloramines)
		et Radiation	ual Maintained in	n Dietributie	Other (Describe	:):		TV	Free Chlo				Linder (Chies	amines) Chlorine Dioxide
Type of	Dismie	ciani Residi	iai iviaintained i	ที่ เปรียบเดินแด		or UV Dose, to						mbinea C	hlorine (Chlor	amines) Chlorine Dioxide
					C1 Carculations	CT Calcu		our-rog	Virus Inactive	шоп, и Аррі	UV)	No.		
	Days Plant					N. T. S.	Lowest CT		and the second	er en en en en en en en en en en en en en	er to the same	Juse		
Dayof	Staffed or Visited by Operator	Hours	Net Quanity of Finished		Lowest Residual Disinfectant Concentration (C) Before or at First Customer	Disinfectant Contact Time (T) at C Measurement	Provided Before or at First Customer	Temp.		Minimum CT	Lowest Operating UV Dose,	Minimum UV Dose	Lowest Residual Distinfectant Concentration at Remote	
the	(Place	Plant in	Water	Peak Flow	During Peak	Point During Peak Flow,	During Peak Flow,	Of Water	pH of Water,	15. Sept. Strong St. 2016, 1987, 48	mW-	Required, mW	Point in Distribution	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking
Month	`"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L		if Applicable		sec/cm2	sec/cm2	System, mg/L	Water System Components Out of Operation
1	Х	24 hrs	55,000		1.6								1.2	
2	X	24 hrs	42,000		1.8								1.4	
3	X	24 hrs	51,000		1.6								1.2	
4	X	24 hrs	58,000		1.6								1.4	
5	X	24 hrs	51,000	ļ	1.5								1.4	
6		24 hrs	51,000	ļ										
7	X	24 hrs	44,000		1.8						ļ		1	
8	X	24 hrs	54,000		1.6		ļ	 			 	 	1.4	
9	X	24 hrs	58,000	<u> </u>	1.8	ļ		 				 	1.4	
10	X	24 hrs 24 hrs	41,000 42,000	<u> </u>	1.6		ļ	 			<u> </u>	 	1.3	
12	X	24 hrs	51,000		1.6			 	 				1.2	
13	X	24 hrs	53,000	 	1.4	<u> </u>	 	 	1			 	1.2	
14		24 hrs	54,000		1.1		<u> </u>	t	1		 	<u> </u>		
15	X	24 hrs	60,000		1.6			t —	 				1.4	
16	X	24 hrs	85,000		1.4								1	
17	X	24 hrs	36,000		1.6								1.2	
18	X	24 hrs	56,000		1.6								0.5	
19	X	24 hrs	60,000		1.2								11	
20		24 hrs	60,000								ļ	ļ		
21	X	24 hrs	70,000		1		ļ	 	<u> </u>		<u> </u>	ļ	0.8	
22	X	24 hrs	63,000		1.2		<u> </u>				ļ	ļ	0.8	
23	X	24 hrs	60,000	 	1	ļ	ļ		 		 	 	0.8	
24	X	24 hrs	50,000	 	1.4	 	ļ	 	 		 	<u> </u>	1.2	
25	X	24 hrs	80,000 55,000	 	1.4	 		 	 		1	 	1.2	
26 27	X	24 hrs 24 hrs	63,000	 	0.6			<u> </u>	 				0.6	<u> </u>
28	<u> </u>	24 hrs	64,000	 		 		├──	 		 	 		
29	х	24 hrs	37,000	 	0.8		 	 				<u> </u>	0.8	
30	X	24 hrs	52,000	 	1		†						0.8	
31	X	24 hrs	46,000		0.6	<u> </u>							0.4	
Total			1,702,000											
Average			54,903											

85,000

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



I. General Information 1	or the Month Year of: September-05									
A. Public Water System										
	Arredondo Estates	·	DWC Identific	cation Number: 2010041						
PWS Type:	X Community Non-Transient Non-Comm	munity [7]	Transient Non-Commun							
	nections at End of Month: 246	iluinty []	Total Population Served a							
	Aqua Utilities Florida		Total ropulation served a	t End of Month. 736						
Contact Person:	Brian Heath	· · · · · · · · · · · · · · · · · · ·	Contact Person's Title:	Area Manager						
Contact Person's Mailin				State: FL Zip Code: 34749						
Contact Person's Teleph			Contact Person Person's F							
Contact Person's E-Mail Address: beheath@aguaamerica.com										
B. Water Treatment Pla										
Plant Name:	Arredondo Estates		Plant Telepho	one Number: (352) 787-0980						
Plant Address: SW 52nd Ave City: Gainesville State: FL Zip Code: 32608										
Type of Water Treated	by Plant: X Raw Ground Water Pu	rchased Finished Wa								
Permitted Maximum D	Day Operating Capacity of Plant, gallons per day:	68,494								
Plant Category (per sul	osection 62-699.310(4), F.A.C.): V		Plant Class (per subsection							
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked						
Lead/Chief Operator:	Paul Thompson	Α	7251	6 Days per week						
Other Operators:	Mark March	С	8287	6 Days per week						
	Gary Kissick	С	7846	6 Days per week						
Para terminan										
The second second second										
			<u> </u>							
II. Certification by Lead	1 Chief Operator									
·										
	treatment plant operator licensed in Florida, am the lead/o									
information provided in	this report is true and accurate to the best of my knowledge	ge. I certify that al	l drinking water treatment	t chemicals used at thisplant conform to NSF						
International Standard 6	0 or other applicable standards referenced in subsection 6	2-555.320(3), F.A.	C. I also certify that the f	following additional operations records for this pla						
were prepared each day	that a licensed operator staffed or visited this plant during	the month indicate	ed above: (1) records of a	mounts of chemicals used and chemical feed rates.						
and (2) if applicable, app	propriate treatment process performance records. Futhern	nore, I agree to pro	vide these additional oper	rations records to the PWS owner so the PWS own						
	r with copies of this report, at a convenient location for at									
, 0	•	·								
	Paul Thompson			A7251						
Signature and Date	Printed or Typed Name			License Number						
-	21									

											001,72	<u> </u>		Average
											1,713,000			IntoT
												S.t p.c		31
	t'l								9.1		52,000	24 hrs	X	30
	I								t'I		000,12	24 hrs	X	56
	2.1								9.1		000,77	24 hrs	X	82
	7.1								₽ .I		44,000	24 hrs	X	LT
	2.1								9.1		000,88	24 hrs	X	97
	1								þ.l		000,18	24 hrs	X	57
,					ļ						000'99	24 hrs		74
	2.1								1 , I		000,88	24 hrs	X	23
	p .1								9.1		000,22	S4 pts	X	77
	1 , I			1					8.1		44,000	24 hrs	X	71
	7.1			<u> </u>					9.1		000,42	54 pt.s	X	70
	Ī			 					1.1		000,40	24 hrs	X	61
				<u> </u>							000,62	54 pts		81
	4.1								9.1		000,62	24 hrs	X	ΔI
	2.1								4 , I		000,13	24 hrs	X	91
	71								9.1		000,87	54 pt.s	X	\$1
	7.1								9.1		000,88	S4 pr.s	X	ÞΙ
	ħ.I.	-							9.1		000,82	54 pts	X	ΕI
	8.1			†					7		000,52	S₄ pts	X	15
	9.1			<u> </u>	1				7		50,000	24 hrs	X	II
											000'+9	24 hrs		01
	9.1								7.4		000,£8	24 hrs	X	6
	8.1								7.7		000,52	24 hrs	X	8
	2.1								9.2		42,000	24 hrs	X	L
	2.1				-				9.2		000,84	24 hrs	X	9
	2.1			1					2.1		000,59	SJŲ þZ	X	ç
				•							000,02	S14 hrs		7
	9.1								8.2		000,18	24 hrs	X	ε
	2.0								8.0		000,64	SJŲ þZ	X	7
	9.0				 				8.0		44,000	24 hrs	X	Ī
Emergency or Abnormal Operating Conditions; Repair of Maintenance Work that Involves Taking Water System Components Out of Operation	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Minimum UV Dose Required, m.w.	Lowest Operating UV Dose, n.W sco'om2	The term of the contract of th	PH of Water,	A 10 10 10 10 10 10 10 10 10 10 10 10 10	Lowest CT Provided Before or at Pirst	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest Residual Disinfectant Concentration (C) Belore or at First Customer First Customer	Peak Flow Rate, gpd	Met Quanity of Finished Water Produced, gal	emost in the state of the state	50glq) ("X"	Day of the Month
mines) Chlorine Dioxide	stoldD) ənitolo	e (1) 1.			Free Chlo			or UV Dose, to I CT Calcul		onnausia i	ni bənistnisM lsı	nnisəvi ilipi		o adk i
akinaid animalah 🔲 (anima		10 F : 4 ···	-5		ן בייי עווי	^		•/	Other (Describe	Citridiate in a	-: barietaieM le			
Combined Chlorine (Chloramines)	əuoz	0 🔲	əbixoi	Chlorine D		ninold.	O eer X		* :lsv	oməЯ∖noitsi □	vitan Inactiv		of Achiev	Means
									September-05		floring Ca	molZ odrac	il mnCl (l	ind .III
						Estates	Arredondo	Plant Name:		7010041	:	ou Number	lentificati	ol SW4

78,000

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



See page 4 for instruction					
I. General Information					
A. Public Water System	m (PWS) Information				
PWS Name:	Arredondo Estates		PWS Identifi	cation Number: 2010041	
PWS Type:	X Community Non-Transient Non-Comm	munity 🔲	Transient Non-Commur		
	onnections at End of Month: 246		Total Population Served a	at End of Month: 738	
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath		Contact Person's Title:	Area Manager	
Contact Person's Mail			City: Leesburg	State: FL Zip Code: 34749	
Contact Person's Telep			Contact Person Person's F	Fax Number: (352) 787-6333	
Contact Person's E-Ma	ail Address: <u>beheath@aquaamerica.com</u>				
B. Water Treatment Pl	ant Information				
Plant Name:	Arredondo Estates		Plant Teleph		
Plant Address:	SW 52nd Ave			State: FL Zip Code: 32608	
Type of Water Treate		rchased Finished Wa	nter		
Permitted Maximum	Day Operating Capacity of Plant, gallons per day:	68,494			
	ubsection 62-699.310(4), F.A.C.): V			on 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked	. i. i. i. j.
Lead/Chief Operator:	Paul Thompson	Α	7251	6 Days per week	
Other Operators:	Mark March	С	8287	6 Days per week	
	Gary Kissick	С	7846	6 Days per week	
	12				
ા પ્રાપ્ત કર્યા છે. જે જે જે જે જે જે જે જે જે જે જે જે જે		<u></u>			
II. Certification by Lea	nd Chief Operator				
I the undersigned water	er treatment plant operator licensed in Florida, am the lead/o	chief operator of th	ne water treatment plant i	dentified in Part I of this report. I certify that	the
information provided in	n this report is true and accurate to the best of my knowledge	oe I certify that al	l drinking water treatmer	nt chemicals used at thisplant conform to NSF	
International Standard	60 or other applicable standards referenced in subsection 6	62-555 320(3) F A	C Lalso certify that the	following additional operations records for th	is plant
international Standard	that a licensed operator staffed or visited this plant during	: -555.520(5), 1 .A.	ed above: (1) records of	amounts of chemicals used and chemical feed	rates:
were prepared each day	that a licensed operator statted or visited this plant during	g the month malcat	ed above. (1) records or a	emotions records to the PWS owner so the PWS	l owner
	oppropriate treatment process performance records. Futhern		vide these additional ope	erations records to the 1 w 3 owner so the 1 w 3	owner
can retain them, togeth	er with copies of this report, at a convenient location for at	least ten years.			
	Paul Thompson			A7251	
Signature and Date	Printed or Typed Name	e		License Number	

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Proceedings Processing Pr		71	 			ļ <u> </u>	├			2.3				X	
Means of Achieving Four-Log Virus Inscription/Removal: ** Type of Distriction Four-Log Virus Inscription/Removal: ** Type of Distriction Four-Log Virus Inscription System (Chilosmines) Type of Distriction Four-Log Virus Inscription System (Chilosmines) Type of Distriction Four-Log Virus Inscription System (Chilosmines) Type of Distriction Four-Log Virus Inscription System (Chilosmines) Type of Distriction Four-Log Virus Inscription System (Chilosmines) Type of Distriction System (Chilosmines) Type of Distriction Four-Log Virus Inscription System (Chilosmines) Type of Distriction System (Type of Distriction System (Type of Distriction System (Type of Distriction System (Type of District			ļ			ļ	ļ			C:7				1	
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Means of Achieving Four-Log Virus Inacivitation/Removal: * Type of Dismicciant Residual Maintained in Distribution System: Continued Chlorine Chlorine Dioxide Chlorine Dioxide Chlorine Dioxide Chlorine Dioxide Chlorine Dioxide Chlorine Chloramines Continued Chloramines Chlorine Chloramines Chlorine Chloramines Chlorine Chloramines Chlorine Chloramines Chlorine Chloramines Chlorine Chloramines Chlorine Chloramines Chlorine Chloramines Chl			 												
Type of Distriction Residual Maintained in Distribution System Colone-165 Parts		90													
Means of Achieving Four-Log Virus Inactiviation/Removal: * Ultraviolet Radiation		7:1	 		 	-					· · · · · · · · · · · · · · · · · · ·			_	
Means of Achieving Four-Log Virus Inactivation/Removal: * District Distriction of Concentration of Concen			 	 			 								
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Means of Achteving Four-Log Virus Inactivisiton/Removal: * Tree Chlorine Dioxide Ozone Ozo			 							4.1				V	
Means of Achieving Four-Log Virus Inactiviation Means of Achieving Four-Log Virus Inactiviation Means of Achieving Four-Log Virus Inactiviation Means of Planing and Planing and Planing Means of Planing and Means of Plan		7:1	 												
Means of Achieving Four-Log Virus Inactivistion/Removal: * Means of Achieving Four-Log Virus Inactivistion/Removal: * Ultraviolet Radiation						 	 								
Means of Achieving Four-Log Virus Inactivisition/Removal: * Ultraviolet Radiation Days Prec Chlorine Combined Chlorine (Chlorine (Chlorine (Chlorine (Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine (Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine Chlorine (Chlorine Chlorine		 													
Means of Achieving Four-Log Virus Inactiviation/Removal: * Ultraviolet Radiation Ultraviolet Radiation Ultraviolet Radiation Uppe of Disinfectant Residual Maintained in Distribution System: Days Plant Wet Charles of Porsurer Wet Plant Wet System Hours Of Relation Office (Chloramines) Type of Disinfectant Residual Maintained in Distribution System Concentration United Procession Type of Disinfectant Residual Maintained in Distribution System Concentration Concentration Concentration Concentration Concentration Concentration Concentration Concentration Concentration Concentration Concentration Concentration Concentration Concentration Concentration Concentration Consecutive Power (Chloramines) Concentration Concentr			<u> </u>												
Means of Achieving Four-Log Virus Inactivisition/Removal: * Ultraviolet Radiation			 						-						
Means of Achieving Four-Log Virus Inactivisition/Removal: * Means of Achieving Four-Log Virus Inactivisition/Removal: * Ultravioler Radiation Creamines Other (Describe): Creamines Other (Describe): Creamines Other (Describe): Creamines Other (Other or of Districtions of Districtions of Other (Other or of Districtions of Other Other or of Other Other or of Other Other or of Other														<u> </u>	
Means of Achieving Four-Log Virus Inactivisition/Removal: * Ultraviolet Radiation Caroner		2.1					-			4.1				Y	1
Means of Achieving Four-Log Virus Inactiviation/Removal: * Detober-05 Achieving Four-Log Virus Inactiviation/Removal: * Ultraviolet Radiation Other (Describe): A Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide Combined Chlorine (Chloramines) Chlorine Dioxide Combined Chlorine (Chloramines) Chlorine Dioxide Combined Chlorine (Chloramines) Chlorine Dioxide Combined Chlorine (Chloramines) Chlorine Dioxide Combined Chlorine (Chloramines) Chlorine Dioxide Chlorine (Chloramines) Chlorine Dioxide Chlorine (Chloramines) Chlorine Dioxide Chlorine (Chloramines) Chlorine Dioxide Chlorine (Chloramines) Chlorine Dioxide Chlorine (Chloramines) Chlorine Chlorine (Chloramines) Chlorine Chlorine (Chloramines) Chlorine Dioxide Chlorine Chlorine (Chloramines) Chlorine Chlorine Chlorine (Chloramines) Chlorine Chlorine Chlorine Chlorine (Chloramines) Chlorine Chlori	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking	Residual Diainfectant Concentration at Remote at Remote point in The Print in	Sequined, Win	Operating UV Dose, -Wm	CT Roquired		TO Yelet,	Provided Before or at First Customer Customer Puring	Contact Time (T) at C Measurement Point During Peak Flow,	Disinfectant Concentration (C) Before or at First Customer First Peak		badainid to Water Produced, gal	ni inal4	Staffed or or Visited by Dycestor Operator (Place "X")	əq)
1. Dails Data for the Month Year of: October-05 2. Dails Data for the Month Year of: October-05 3. Data for the Month Year of: October-05 4. Data for the Month Year of: October-05 Juraviolet Radiation Other (Describe):				*slds:				gnoile	or UV Dose, to I CT Calcul					Days	
1. Daily Data for the Month Year of: 2. Daily Data for the Month Year of: 3. Data for the Month Year of: 4. Daily Data for the Month Year of: 5. Data for the Month Year of: 5. Data for the Month Year of: 6. Data for the Month Year of: 7. Data for the Month Year of: 8. Data for the Month Year of: 8. Data for the Month Year of: 8. Data for the Month Year of: 9. Data for t	abiyoid aninold) (Sanime	aninoli	12 banidm	υ <u>υ</u>	əuji	Free Chlo	X			n System:	oitudintsiQ n	i bənistnisM ls	tant Residu	Disinfec	Type of
PWS Identification Number: 2010041 Plant Name: Arredondo Estates	Combined Chlorine (Chloramines)	Sone	0 🗆	əbixoi	Chlorine D		oninold	O oord X):	* :lsve			√l-ποσ gniγ	vəidəA 10	Means
						5	Estates	ориорэш А	Plant Name:		1400102	:	on Number	епинеай	PLSMa

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



I. General Information f	or the Month Year of: November-05			
A. Public Water System	(PWS) Information			
PWS Name:	Arredondo Estates		PWS Identific	ation Number: 2010041
	☐ Non-Transient Non-Comm	nunity	Transient Non-Communi	ty Consecutive
	nections at End of Month: 246		Total Population Served at	End of Month: 738
PWS Owner:	Aqua Utilities Florida			
Contact Person:	Brian Heath		Contact Person's Title:	Area Manager
Contact Person's Mailin			City: Leesburg	State: FL Zip Code: 34749
Contact Person's Teleph			Contact Person Person's Fa	ax Number: (352) 787-6333
Contact Person's E-Mai				
B. Water Treatment Pla	nt Information			
Plant Name:	Arredondo Estates		Plant Telepho	
Plant Address:	SW 52nd Ave		City: Gainesville	State: FL Zip Code: 32608
Type of Water Treated		chased Finished Wa	ter	
		68,494		
	section 62-699.310(4), F.A.C.): V		Plant Class (per subsection	
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	6 Days per week
Other Operators:	Mark March	С	8287	6 Days per week
	Gary Kissick	С	7846	6 Days per week
			<u> </u>	
A Secretaria de Carlos				
grade (Jazob Lijob Liberaci)				
II. Certification by Leac	Chief Operator			
· · · · · · · · · · · · · · · · · · ·				
I, the undersigned water	treatment plant operator licensed in Florida, am the lead/c	thief operator of th	e water treatment plant id	lentified in Part I of this report. I certify that the
information provided in	this report is true and accurate to the best of my knowledg	ge. I certify that all	l drinking water treatment	t chemicals used at thisplant conform to NSF
International Standard 6	0 or other applicable standards referenced in subsection 62	2-555.320(3), F.A.	C. I also certify that the f	following additional operations records for this plant
were prepared each day	that a licensed operator staffed or visited this plant during	the month indicate	ed above: (1) records of a	mounts of chemicals used and chemical feed rates;
and (2) if applicable and	propriate treatment process performance records. Futherm	ore. I agree to pro	vide these additional oper	rations records to the PWS owner so the PWS owner
	r with copies of this report, at a convenient location for at			
can retain them, together	with copies of this report, at a convenient location for at	icust ton yours.		
	Paul Thompson			A7251
Signature and Date	Printed or Typed Name			License Number
Signature and Date	rinica or Typea Name	•		Election (amount

Ultraviolet Radiation Other (Describe): Type of Disinfectant Residual Maintained in Distribution System: Days Plant Staffed or Visited by Net Quanity Net Quanity Day of Operator the (Place Plant in Water Peak Flow During Peak Peak Flow During Peak Peak Flow During Peak Flow Visited Peak Flow During Peak Flow Peak Flow Peak Flow Water, pH of Water, Required, In W- Water Peak Flow Water Peak Flow Distribution System: X Free Chlorine Combined Chloramines) Chlorine Distribution, if Applicable* Lowest CI Provided Residual Disinfectant Provided Provided Provided Residual Disinfectant Contact Time Peak Flow Peak Flow Peak Flow Peak Flow Water, pH of Water, Required, In W- Minimum Distribution Repair or Maintenance Work that Involved The Water Peak Flow Peak	WS Ide	entificat	ion Number	•••	2010041		Plant Name:	Arredondo	Estate	S					
Means of Achieving Four-Log Virus Inactiviation/Removal: * X Free Chlorine Chlorine Dioxide	II. <u>Dail</u>	y D <u>ata f</u>	or the Mont	h Year of:		November-05					-				***
Type of Disinfectant Residual Maintained in Distribution System: CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* Lowest Residual Disinfectant Contact Time Before or Visited or Visited by Net Quanity Of Finished the Quantity Of Finished (Place Plant in Water Peak Flow During Peak Peak Flow, mg/L minutes mg-min/L C if Applicable mg-min/L soc/cm2 sec/cm2 System, mg/L Water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L C if Applicable mg-min/L soc/cm2 sec/cm2 System, mg/L Water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L C if Applicable mg-min/L soc/cm2 sec/cm2 System, mg/L Water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L c if Applicable mg-min/L soc/cm2 sec/cm2 System, mg/L Water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L c if Applicable mg-min/L soc/cm2 sec/cm2 System, mg/L Water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L c if Applicable mg-min/L soc/cm2 sec/cm2 System, mg/L Water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L c if Applicable mg-min/L soc/cm2 sec/cm2 System, mg/L Water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L c if Applicable mg-min/L soc/cm2 sec/cm2 System, mg/L water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L c if Applicable mg-min/L soc/cm2 sec/cm2 System, mg/L water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L water System Components Out of Operation Produced, gal Rate, gpd Flow, mg/L wa	Means o	of Achie	ving Four-L	og Virus Inacti	viation/Remo		٠)٠	X Free C	hlorin	е	Chlorine E	Dioxide		Dzone	Combined Chlorine (Chloramines)
Days Plant Staffed or Visited Visited Visited Poperator Hours of Finished Days Operator Hours (Place Plant in Water Peak Flow Month "X") Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L C if Applicable mg-min/L sec/cm2 sec/cm					n Distributio		<u>=)</u>		Īχ	Free Chlo	orine	T Co	mbined C	hlorine (Chlor	amines) Chlorine Dioxide
Days Plant Staffed or Visited Visited Visited Peak Flow Peak Flow Peak Flow Peak Flow, Peak Flow, Peak Flow, Peak Flow, Month TXT) Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L C if Applicable mg-min/L sec/cm2 sec/	Jpc or	Dismite	Ctaint Reside	ar wantanica i	ii Distributio		or HV Dose to	Demonstrate I					monica C	morme (emor	
Plant Staffed or Visited or Visited by Net Quanity Operator Hours of Finished (Place Plant in Water Peak Flow Month TX") Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L C if Applicable mg-min/L sec/cm2 System, mg/L Lowest Residual Disinfectant Concentration (T) at C at First Concentration (T) at C at Fi															
Staffed or Visited Oncentration Visited Operator Hours Operator Hours Operation Water Peak Flow Month XT Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L C if Applicable mg-min/L sec/cm2 System, mg/L Water System Components Out of Operator Op							11.46.21/458.3		. N. 17. 17.			Section 2	e e e e e	I owest	
Visited by Net Quanity by Net Quanity Operator Hours Operator the (Place Plant in Water Peak Flow Month "X") Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L C if Applicable mg-min/L see/cm2 System, mg/L Water System Components Out of Operator Operation (C) Before or at Measurement, Customer Temp. Minimum Operating Operating UV Dose, Required, Point in Emergency or Abnormal Operating Concentration (C) Before or at Measurement, Customer Temp. Of CT UV Dose, Required, Point in Emergency or Abnormal Operating Concentration (C) Before or at Measurement, Customer Temp. Of CT UV Dose, Required, Point in Emergency or Abnormal Operating Concentration (C) Before or at Remote (C) UV Dose, Required, Maintenance Work that Involve (Place Plant in Water Peak Flow, Month "X") Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L C if Applicable mg-min/L see/cm2 System, mg/L Water System Components Out of Operating Concentration (C) Before or at Remote (C) UV Dose, Required, mW Distribution (C) Dose, Required, mW Dist	- 1	化工作性 衛 门路				Lowest Residual	Disinfectant							NAMES OF THE PARTY	
by Operator Hours (Place Plant in Month "X") Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L C if Applicable mg-min/L see/cm2 see/cm2 System, mg/L Water System Components Out of Operator Operating Construction of Produced and Part of Components Out of Operator (Place Plant in Water Peak Flow, mg/L minutes mg-min/L c if Applicable mg-min/L see/cm2 see/cm2 System, mg/L Water System Components Out of Operator (Place Plant in Water Peak Flow, mg/L minutes mg-min/L see/cm2 see/cm2 System, mg/L Water System Components Out of Operator (Place Plant in Water Peak Flow, mg/L minutes mg-min/L see/cm2 see/cm2 System, mg/L Water System Components Out of Operator (Place Plant in Water System Components Out of Operator (Place Plant in Water System Components Out of Operator (Place Plant in Water System Components Out of Operator (Place Plant in Water System Components Out of Operator (Place Plant in Water System Components Out of Operator (Place Plant in Water System Components Out of Operator (Place Plant in Water System Components Out of Operator (Place Plant in Water System Components Out of Operator (Place Plant in Water System Components Out of Operator (Place Plant in Water System Components Out of Operator (Plant in Water Plant in		or				and the second s	Contact Time	Before or						Disinfectant	
Day of Operator Hours of Finished the (Place Plant in Water Peak Flow Month "X") Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L C if Applicable mg-min/L sec/cm2 System, mg/L Water System Components Out of Operating Condition Repair or Maintenance Work that Involved the Involv		and was the state of					The state of the s	通过的一种中国的现在分词	4.33			A STATE OF THE STA			
the (Place Plant in Water Peak Flow Month "X") Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L C if Applicable mg-min/L sec/cm2 sec/cm2 System, mg/L Water System Components Out of Operation 1 X 24 hrs 54,000 1.4		A track of the control of													
Month "X" Operation Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L C if Applicable mg-min/L sec/cm2 System, mg/L Water System Components Out of Operation 1 X 24 hrs 54,000 1.4 1.2 1.2	4.5		4 1		Back Close	[4] C. C. J. S. C. M. C. P. C. B. K. P. A. P. S. C.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	nH of Water	A ANTALIA TWINING CO.				
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3 X 24 hrs 50,000 1.2 1	3	X	24 hrs	50,000		1.2									
4 X 24 hrs 54,000 1.2 1.2		X				1.2								1.2	
5 24 hrs 54,000												<u> </u>			
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8 X 24 hrs 50,000 1 0.8						<u> </u>	1	 				ļ		0.8	
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11 X 24 hrs 32,000 1.2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							 	i		-		 		1	
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14 X 24 hrs 50,000 1 0.8					 	1						1		0.8	
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17 X 24 hrs 62,000 1.2 0.8						1.2				L		ļ			
18 X 24 hrs 37,000 1 0.6					ļ			ļ						0.6	
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24 hrs 59,000					ļ	1		 		 		 	 	1.8	
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25 X 24 brs 49,000 3					T										
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27 24 hrs 61,000			24 hrs										ļ	ļ	
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29 X 24 hrs 51,000 2.4 1.8		·	+		ļ		ļ	ļ	<u> </u>	L		ļ	ļ		
30 X 24 hrs 48,000 2.4 1.6		X	+	48,000	<u> </u>	2.4	<u> </u>	 		 		 	 	1.0	
31 24 hrs	41.		24 hrs	,	1	ı	1	1	1	1	1	1	1	I	
Total 1,544,000 Average 51,467		5.44 (1.644.000					<u> </u>	<u> </u>		·	.L	<u> </u>	

104,000

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



See page 4 for instructions											
I. General Information I	· · · · · · · · · · · · · · · · · · ·										
A. Public Water System											
	Arredondo Estates			eation Number: 2010041							
		nunity	Transient Non-Communi								
	nections at End of Month: 246		Total Population Served at	End of Month: 738							
PWS Owner:	Aqua Utilities Florida										
Contact Person:	Brian Heath			Area Manager							
Contact Person's Mailir				State: FL Zip Code: 3474	9						
Contact Person's Teleph			Contact Person Person's Fa	ax Number: (352) 787-6333							
Contact Person's E-Mai											
B. Water Treatment Pla	nt Information										
Plant Name: Arredondo Estates Plant Telephone Number: (352) 787-0980											
	SW 52nd Ave	City: Gainesville	State: FL Zip Code: 3260	8							
Type of Water Treated	by Plant: X Raw Ground Water Pur	chased Finished Wa	ater								
Permitted Maximum D	ay Operating Capacity of Plant, gallons per day:	68,494									
Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): C											
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked							
Lead/Chief Operator:	Paul Thompson	Α	7251	6 Days per week							
Other Operators:	Mark March	С	8287	6 Days per week							
	Gary Kissick	С	7846	6 Days per week							
					[
II. Certification by Lead	l Chief Operator										
I the undersigned water	treatment plant operator licensed in Florida, am the lead/o	hief operator of th	ne water treatment plant id	lentified in Part I of this report. I certify	that the						
information massided in	this report is true and accurate to the best of my knowledge	ve Logetify that al	I drinking water treatment	t chemicals used at thisplant conform to	NSF						
information provided in	tims report is true and accurate to the best of my knowledge	36. I certify that a	C. I also contifue that the	following additional operations records	for this plant						
International Standard 6	0 or other applicable standards referenced in subsection 6.	2-333.320(3), F.A	.C. Taiso certify that the I	offowing additional operations records	food motor:						
were prepared each day	that a licensed operator staffed or visited this plant during	the month indicat	ed above: (1) records of a	mounts of chemicals used and chemical	DWG						
	propriate treatment process performance records. Futhern		vide these additional oper	rations records to the PWS owner so the	PWS owner						
can retain them, togethe	r with copies of this report, at a convenient location for at	least ten years.									
	Paul Thompson			A7251							
Signature and Date	Printed or Typed Name	·		License Number							
-	· ·				7						

PWS Identification Number: 2010041					Plant Name: Arredondo Estates									
III. Dai	y Data I	or the Mont	h Year of:		December-05									
		ving Four-Let Radiation	og Virus Inactiv	viation/Remo	oval: * Other (Describe):	X Free (Chlorin	e	Chlorine I	Dioxide		Dzone	Combined Chlorine (Chloramines)
			al Maintained i	n Distributio		'`		Х	Free Chle	orine	Co	mbined C	hlorine (Chlor	amines) Chlorine Dioxide
					CT Calculations	or UV Dose, to I	Demonstrate I					and the second second		
Days						CT Calculations					UV Dose			
	Plant						Lowest.CT	1341. Files 17 Files (19)				3546	Lowest	
	Staffed			hit sign	Lowest Residual	Disinfectant	Provided						Residual	
	or			and the second of	Disinfectant	Contact Time	Before or						Disinfectant	
	Visited				Concentration	(T) at C ∜	at First				Lowest	Minimum	Concentration	
	by		Net Quanity		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating	UV Dose	at Remote	
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of		ੁ' ਵਜ	UV Dose,	Required,	Point in	Emergency or Abnormal Operating Conditions;
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow, minutes	Peak Flow, mg-min/L		pH of Water, if Applicable	Required,	mW- sec/cm2	mW sec/cm2	Distribution System, mg/L	Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
Month	X	Operation 24 hrs	Produced, gal 49,000	Rate, gpd	Flow, mg/L 1.8	uimuica	mR-mm/	C	III Applicable	mR-mmr-	BOCKINE	Secremz	1.6	water System Components Out of Operation
2	$\frac{x}{x}$	24 hrs	52,000		1.8		 						1.4	
3		24 hrs	52,000		1.0_	***************************************								
4	Х	24 hrs	65,000		1.6								1.2	
5	Х	24 hrs	52,000	<u> </u>	1.4								1.2	
6	X	24 hrs	49,000		1.8								1.4	
7 -	X	24 hrs	38,000		1.8								1.6	
8	X	24 hrs	46,000		1.8								1.4	
9	X	24 hrs	52,000		1.6			<u> </u>					1.4	
10		24 hrs	52,000	ļ		l 								
11	X	24 hrs	54,000		1.4								1.4	
12	X	24 hrs	55,000		1.6			ļ			ļ	ļ	1.4	
13 14	X	24 hrs 24 hrs	50,000 46,000	 	1.8		├				 	 	1.6	
15	$\frac{\lambda}{X}$	24 hrs	45,000		1.6		 	 	 				1.4	
16	X	24 hrs	56,000		1.8	<u> </u>	 					 	1,4	
17		24 hrs	56,000	 	1.0_		 	i			-			
18	X	24 hrs	46,000	 	1.6			-					1.2	
19	X	24 hrs	48,000		1.4]				1.2	
20	X	24 hrs	46,000		1.4								<u> </u>	
21	X	24 hrs	41,000		1.6								1.4	
22	X	24 hrs	52,000		1.4								1.2	
23	X	24 hrs	55,000		1.6		<u> </u>	 			ļ		1.4	
24	X	24 hrs	41,000	.	1.6		ļ		ļ		<u> </u>	ļ	1.4	
25		24 hrs	41,000	ļ <u> </u>			ļ	 	 		 	 	1.2	
26	X	24 hrs	49,000		1.6		 		 	 	 	 	1.2	
27 28	X	24 hrs 24 hrs	50,000 43,000	 	1.4		 	 			 	 	1.2	
29	X	24 hrs	41,000		1.6		 	 	 		\vdash	 	1.4	
30	X	24 hrs	40,000	 	1.8	·	 	 	 	l	<u> </u>	<u> </u>	1.4	
31		24 hrs	40,000	-	 				† · · · · ·	<u> </u>			l	
Total		, <u> </u>	1,502,000	<u> </u>	1			4						
Average	245		48,452	7										

65,000

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